



Queensland Independent
Disability Advocacy Network

QIDAN Submission to the Consultation on a new Commonwealth individual disability advocacy program

16 January 2026

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About QIDAN

The Queensland Independent Disability Advocacy Network (QIDAN) is a statewide network of independent disability advocacy organisations supporting Queenslanders with disability.¹ QIDAN's member organisations include Aged and Disability Advocacy; AMPARO Advocacy Inc; Capricorn Citizen Advocacy; Mackay Advocacy Inc; People with Disability Australia; Queensland Advocacy for Inclusion; Rights in Action; Speaking Up For You; TASC; and Yarn2Action run by Aged and Disability Advocacy.

Collectively, QIDAN members provide advocacy support to more than **6,000**

Queenslanders with disability each year to assist with **over 9,000 complex advocacy issues** that promote safety, access, participation and inclusion across the state.

QIDAN has three core aims:

- **Systemic advocacy:** coordinated action to identify and address systemic issues experienced by people with disability
- **Member support:** a collaborative space for the exchange of information, resources and issues affecting disability advocacy organisations
- **Sector advocacy:** promoting the importance and value of independent disability advocacy at local, state, and national levels

QIDAN members deliver a broad range of independent advocacy services, including general disability advocacy, specialised individual advocacy (including National Disability Insurance Scheme appeals), citizen advocacy and systemic advocacy. The Disability Pathways Hub also provides information and referrals to people with disability, their families and supporters.²

All QIDAN member organisations are funded through the Queensland Disability Advocacy Program (QDAP), with additional funding received through a range of Commonwealth and state programs, including the National Disability Advocacy Program, NDIS Appeals Advocacy, Information, Linkages and Capacity Building, Community Legal Centre funding

¹ <https://qidan.org.au/>

² <https://disabilitypathways.org.au/>

through the Department of Justice and Attorney General, and other Queensland Government Departments, project funding, community grants and donations.

QIDAN's perspectives and recommendations are grounded in the collective, lived experiences of independent disability advocates working across metropolitan, regional, rural and remote Queensland.³

Our submission is supported by Queenslanders with Disability Network (QDN) as per Appendix A.

Recommendations

1. Explicitly recognise advocacy as a form of safeguarding, early intervention and prevention of violence, abuse, neglect and exploitation in the IDAP policy framework.
2. Strengthen independent requirements by preventing advocacy functions from being delivered by organisations with NDIS service provision or commercial interests.
3. Fund targeted culturally competent, responsive and trauma informed advocacy for Queenslanders with disability who are Aboriginal and Torres Strait Islander, from culturally and linguistically diverse backgrounds, LGBTQIA+SB, and young people.
4. Provide funding to enable systemic advocacy and community education as core reportable IDAP activities without restriction.
5. Add to the existing program objects section to include 'a more accessible, inclusive community that is free from discrimination'.
6. Ensure all IDAP funding is provided through long-term (minimum six year), secure, increased with indexation and predictable contracts.
7. Avoid models that fragment advocacy or disadvantage smaller, place-based organisations, including by removing the section "working together as a network" section from the policy framework.

³ A note on language: language is a powerful tool for building inclusion. We use person-first language by using the term 'people with disability' but recognise that many people with disability prefer identity first language (i.e. a disabled person).

8. Require all funding streams, including the National Helpline and sector-strengthening streams to be subject to the same capability, quality and independence requirements as other IDAP-funded advocacy organisations.
9. Embed in the IDAP policy framework human rights-based principles including alignment with the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), disability led practice, self-determination, cultural safety, integrity and accountability.

1. Advocacy as safeguarding, early intervention and prevention

QIDAN welcomes the Australian Government's commitment to developing a new Individual Disability Advocacy Program (**IDAP**) as part of its implementation of the Disability Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (**the DRC**). This submission is in response to the consultation 'A new Commonwealth individual disability advocacy program'⁴, and provides feedback on the Program policy framework⁵.

A strengthened advocacy sector is critical to ensuring Queenslanders with disability have timely access to independent, disability-led advocacy as a core safeguarding mechanism. Individual disability advocacy extends beyond supporting people with disability to exercise will and preference. It plays a vital role in preventing, identifying and responding to violence, abuse, neglect and exploitation. Every day, disability advocates support people to elevate their voices, navigate complex systems, and challenge decisions and practices that cause disadvantage.

This includes people with complex communication and decision-making needs, First Nations people with disability, people from culturally and linguistically diverse communities, children and young people with disability, people living in regional, rural and

⁴ https://consultations.health.gov.au/disability-and-carers-group/individual-disability-advocacy-reform/?utm_source=brev&utm_campaign=20251219%20QIDAN%20Round%20Up&utm_medium=email

⁵ https://consultations.health.gov.au/disability-and-carers-group/individual-disability-advocacy-reform/user_uploads/policy-framework-paper---a-new-commonwealth-individual-disability-advocacy-program-5.pdf

remote areas, and those residing in closed or congregate settings such as boarding houses and institutions. The DRC and the NDIS Review⁶ both recognise that these groups experience heightened risk, compounded discrimination and significant barriers to accessing justice, safety and support.

Queensland's state and nationally funded disability advocacy organisations support individuals to navigate local, state and Commonwealth systems, including the NDIS, Centrelink, health, housing, justice and safeguarding pathways. In 2024–25, more than 40 per cent of all Queensland state funded individual advocacy issues related to the NDIS, alongside significant demand across income support, restrictive practices, housing insecurity and reporting mechanisms for abuse and neglect. These issues are rarely discrete; they are complex, overlapping and require sustained, skilled advocacy to resolve. Effective advocacy must be independent from service provision, disability-led, embedded in local communities and adequately resourced to deliver face-to-face support. In many cases, advocates are the first, and sometimes only, safeguard to identify neglect or abuse, particularly in regional, rural and remote communities where isolation is heightened and virtual models are insufficient. Face-to-face advocacy is also essential for people from culturally and linguistically diverse backgrounds, where interpreters and culturally safe practice are required, and for people with complex communication needs who cannot engage meaningfully through online or time-limited models. IDAP must explicitly recognise and resource face-to-face advocacy as a core safeguarding function.

While the proposed IDAP design appropriately prioritises people at serious and immediate risk of harm, advocacy must also be recognised as a form of early intervention and prevention. Timely access to advocacy enables risks to be identified, addressed and mitigated before they escalate into crisis, statutory intervention or acute system involvement. This preventative function directly supports government safeguarding obligations and delivers long-term value for money by reducing reliance on emergency responses and tertiary service systems.

⁶ <https://www.ndisreview.gov.au/resources/reports/working-together-deliver-ndis/>

To deliver on the intent of the DRC recommendations, the Queensland advocacy sector requires adequate workforce capacity, sustainable funding and flexibility to respond to demand. Under-investment in independent advocacy undermines its protective role, resulting in long waitlists, increased strain on emergency and statutory systems, referral loops, and negative experiences for people seeking help. A strengthened IDAP must therefore support time-intensive advocacy, workforce development, systemic escalation and meaningful participation in policy reform to ensure people with disability can live safely and with dignity in their communities.

Carol's* experience – the critical role of local, face-to-face advocacy

Advocates from Mackay Advocacy Incorporated were contacted by Carol and her support worker seeking assistance to change NDIS Support Coordinators after her NDIS funding was exhausted. Carol lived in a regional town, and because advocates were undertaking outreach in the region that same week, they were able to meet with her face to face.

During the in-person visit, advocates identified a range of serious and compounding risks that had not been evident through phone contact alone. Carol was bedbound and living alone in unsafe conditions, with inadequate supports following a fall that resulted in a broken ankle and hip. Her NDIS funding had been exhausted, and remaining supports were insufficient to meet her needs. Advocates also identified domestic and financial abuse, with Carol's former partner living in the home, controlling her finances and belongings, despite Carol reporting ownership of the property prior to the relationship. The home itself was unsafe and inaccessible, with a broken toilet, mould, water leaks, broken doors without locks and no air-conditioning.

Further, although Carol had an enduring power of attorney in place for financial matters, the appointed family members were unwilling to act, leaving her without access to her own finances.

With Carol's consent, advocates escalated an urgent NDIS review and engaged a Complex Case Manager, supported the appointment of a new Support Coordinator, and secured medium-term accommodation in a standalone Specialist Disability Accommodation with

24/7 supports. Advocates also supported Carol to remove the former partner as Centrelink nominee, initiated a fraud report regarding misuse of her pension and carer payments, and connected her with specialist services including legal advice, counselling, and women's support services.

**Name changed for confidentiality purposes*

QIDAN recommends:

1. Explicitly recognise advocacy as a form of safeguarding, early intervention and prevention of violence, abuse, neglect and exploitation in the IDAP policy framework.

2. Values based, independent advocacy

Independent disability advocacy must be clearly defined and strengthened within the IDAP framework. QIDAN describes independent disability advocacy as working alongside people facing disadvantage to promote, protect, and defend human rights, interests, and wellbeing. Independent advocates do this by:

- Supporting will and preference
- Being partisan, remaining loyal and accountable
- Being professional, culturally safe, and vigorous in pursuit of fundamental needs, and
- Avoiding conflicts of interest.

This requires advocacy to be delivered separately from other supports and services to avoid conflicts of interest and to ensure accountability to the person being supported. It must also be responsive to intersectional barriers experienced by Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse backgrounds, LGBTQIA+SB people with disability⁷, people in rural and remote communities, young people, and people in closed environments, and people experiencing domestic and family violence. Advocacy must actively support self-determination, agency and accountability.

⁷ <https://qai.org.au/lgbtiqasb-pilot-project-report/>

As highlighted by the DRC, funding for targeted culturally competent, responsive and trauma informed advocacy for Queenslanders with disability who are Aboriginal and Torres Strait Islander, from culturally and linguistically diverse backgrounds, LGBTQIA+SB, and young people is essential in ensuring access to advocacy.

QIDAN recommends:

2. Strengthen independent requirements by preventing advocacy functions from being delivered by organisations with NDIS service provision or commercial interests.
3. Fund targeted culturally competent, responsive and trauma informed advocacy for Queenslanders with disability who are Aboriginal and Torres Strait Islander, from culturally and linguistically diverse backgrounds, LGBTQIA+SB, and young people.

3. Systemic advocacy as a driver of long-term safety and inclusion

Systemic advocacy is most successful when working one to one within an individual advocacy model, especially from a peer led, lived experience perspective centred within the framework of disabled people's organisations (DPOs). Systemic advocacy identifies common issues experienced at the individual level and can then bring a collective response to address systemic issues at their root cause, leading to improved laws, policies and service systems accompanied by best practices in promoting access, safety and inclusion. In doing this, systemic advocacy reduces the need for repeated individual and self-advocacy and contributes to more efficient, sustainable government responses.

Effective systemic advocacy often occurs at a local level and is always directly informed by individual advocacy practice. An example of this recently occurred in Townsville, when local advocates identified that people with disability were trying to access local beaches and community but were unable to comfortably use the beach and access the local shops and restaurants due to a lack of accessible bathroom facilities. This barrier significantly reduced community participation and inclusion.

Advocates raised this issue with the local council, resulting in the installation of temporary accessible bathroom facilities while permanent accessible infrastructure is planned and constructed. This outcome illustrates how individual advocates, embedded in their

communities, can best identify systemic barriers and work collaboratively with local decision-makers to achieve practical, preventative solutions that improve access, safety and inclusion on a systemic level.

Effective systemic advocacy can also occur at a statewide level and is directly informed by individual advocacy practice. AMPARO Advocacy identified a recurring issue through its work with migrants and refugees with disability, where people from non-English speaking backgrounds were unable to effectively access government and service systems due to the lack of funded interpreter support. This barrier resulted in exclusion, miscommunication and increased risk of harm.

AMPARO raised this issue through appropriate state and Commonwealth policy channels, successfully advocating for the Queensland Government to fund interpreter access for state-funded NGOs and for the NDIS to change policy and practice to guarantee interpreter access when engaging with NDIS-registered services. These changes removed the need for ongoing individual advocacy to secure interpreters on a case-by-case basis and have had a lasting, positive impact for Queenslanders from culturally and linguistically diverse backgrounds with disability and their families.

AMPARO continues to elevate lived experience and systemic barriers through its role on the NDIS CALD Strategy External Advisory Group, demonstrating how funding trusted, community-embedded advocacy organisations to provide individual advocacy and escalate systemic issues leads to safer, more accessible and inclusive service systems.

This type of community-based systems advocacy cannot be achieved through centralised models. It relies on trusted relationships, local and community knowledge and the ability of individual advocates to escalate issues in real time. IDAP must support and enable systemic advocacy for independent disability advocacy organisations if it is to meaningfully reduce barriers to inclusion and prevent harm.

As recognised by the DRC, systemic advocacy led by people with disability and advocates is instrumental to exposing violence, abuse, neglect and exploitation and driving reform.

Without this, opportunities for long-term prevention and structural reform will be lost.

QIDAN recommends:

4. Provide funding to enable systemic advocacy and community education as core reportable IDAP activities without restriction.
5. Add to the existing program objects section to include 'a more accessible, inclusive community that is free from discrimination'.

4. Embedded, placed-based advocacy strengthens outcomes

QIDAN opposes a rigid, centrally mandated model of network development as suggested in the IDAP policy framework. Community relationships and local knowledge are not merely beneficial to effective advocacy — they are critical. Place-based advocacy enables trusted relationships, deepens understanding of local systemic barriers, strengthens referral pathways, and supports targeted community education and capacity-building. Queensland's existing advocacy organisations have spent decades developing trusted relationships with communities, service systems and decision-makers. QIDAN was established to support collaboration, shared learning and coordinated action across the disability advocacy sector. QIDAN provides a proven, flexible model for networked advocacy. It comprises independently funded, community and place-based organisations that are resourced to come together for collective activities such as systemic advocacy, shared learning and coordinated responses, without undermining organisational independence or local responsiveness. Networks such as QIDAN play an important role in building capability, escalating systemic issues and strengthening practice. However, the proposed IDAP network model is not reflective of this approach and risks adding unnecessary cost and complexity without improving outcomes for people with disability. A one-size-fits-all network model risks fragmenting expertise, disadvantaging smaller regional organisations, and diverting scarce resources away from direct advocacy and safeguarding activities.

Establishing new formal networks carries significant administrative and financial costs, including governance, coordination, reporting and workforce demands. In a sector where approximately 80 per cent of funding is already directed to frontline service delivery,

diverting resources into duplicative structures would reduce advocacy capacity at the point where it is most needed. Investment should instead prioritise strengthening existing, effective networks such as the National Centre for Disability Advocacy (NCDA), the NDIS Appeals Community of Practice, and localised or issue-specific networks that emerge organically in response to community and advocate needs.

These risks are particularly acute in regional, rural and remote communities, where workforce recruitment and retention are already challenging. Advocacy relies on highly skilled practitioners with specialised knowledge, yet wages in the advocacy sector are often non-competitive compared to other fields. Shorter funding contracts further exacerbate workforce instability, making it difficult to attract and retain experienced staff in areas where skilled workers are scarce.

QIDAN is therefore concerned that the proposed network model, combined with shorter contracts, would unintentionally disadvantage smaller, place-based organisations and undermine equitable access to advocacy across Queensland. Long-term, secure and predictable funding is essential to sustain community-embedded advocacy and maintain a skilled workforce. QIDAN recommends that all IDAP funding be provided through minimum six-year funding agreements.

QIDAN recommends:

6. Ensure all IDAP funding is provided through long-term (minimum six year), secure, increased with indexation and predictable contracts.
7. Avoid models that fragment advocacy or disadvantage smaller, place-based organisations, including by removing the section “working together as a network” section from the policy framework.

5. A model that is fit for purpose

Advocacy is not a one size fits all model; it should be responsive to the needs and circumstances of the community it is supporting. For people with disability, the funding source of advocacy support is irrelevant; what matters is seamless access to the right



advocacy at the right time, without gaps created by program boundaries between Commonwealth, state or appeals advocacy streams.

To be effective, all IDAP funding streams, including the National Helpline and sector strengthening components, must meet the core capabilities required of disability advocacy organisations.

The model must reduce administrative and reporting burden and allow flexibility (including alternatives to waitlisting) in delivery. IDAP outcomes and performance measures should reflect the preventative and safeguarding role of advocacy, including indicators such as reduced escalation to crisis services, improved access to systems, resolution of systemic barriers, and increased community participation, rather than narrow activity-based outputs alone.

QIDAN strongly believes that advocacy organisations should be disability led. However, it is crucial that this is not a tokenistic exercise, and IDAP must provide transition pathways for existing advocacy organisations that are not yet Disabled Persons Organisations (DPO). Alternative models of disability led advocacy, such as steering committees, could also be considered so that the existing organisations can continue to meet the nexus of local community needs.

Funding for IDAP must be flexible to meet community needs, including funding for community outreach, travel and accommodation, accessible infrastructure, equipment, alternative formats and communication, specialist reports, crisis and/or generalist financial supports, vehicles, IT systems, advocacy and issues-based training, co-design and systemic advocacy activities. Individual advocacy frequently involves high-risk safeguarding matters, including violence, abuse and neglect. IDAP must support workforce sustainability through adequate funding for supervision, training, cultural capability, peer networks and safe workloads to ensure advocates can deliver high-quality, culturally responsive and trauma-informed practice over the long term. Without these elements, the program risk prioritising administrative compliance over meaningful advocacy outcomes.

Any transition to a new IDAP model must prioritise continuity of advocacy support for people currently engaged with organisations, with clear transition arrangements that avoid service gaps, loss of trusted relationships or withdrawal of support during implementation.

QIDAN recommends:

8. Require all funding streams, including the National Helpline and sector-strengthening streams to be subject to the same capability, quality and independence requirements as other IDAP-funded advocacy organisations.
9. Embed in the IDAP policy framework human rights based principles including alignment with the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), disability led practice, self-determination, cultural safety, integrity and accountability.

Conclusion

QIDAN supports the intent of the IDAP to strengthen safeguarding and improve outcomes for people with disability. To achieve these objectives, the program must recognise advocacy as both a crisis response and a preventive mechanism, value systemic advocacy as essential to long-term reform, and invest in independent, community-embedded organisations with the capability to respond to diverse local needs.

Without these elements, IDAP risks addressing harm only once it has occurred, rather than preventing it. With them, the program has the potential to deliver safer communities, stronger systems and better value for public investment.

QIDAN's views align with, and broadly support, the recommendations outlined in Disability Advocacy Network Australia's (DANA) consultation summary on the new IDAP.⁸ QIDAN is thankful for the opportunity to contribute to this consultation. We welcome the opportunity to provide further information or clarification.

⁸ <https://dana.org.au/resource/final-summary-report-consultation-on-a-new-commonwealth-individual-disability-advocacy-program/>

Appendix – QDN letter of support



16 January 2026

Dear Department of Health, Disability and Ageing,

Queenslanders with Disability Network (QDN) is a state-wide, not-for-profit organisation led by and for people with diverse disability and we are focused on advancing disability rights, inclusion and systemic advocacy in Queensland. QDN operates a state-wide network of over 3,500 members and supporters all over Queensland.

QDN supports Queensland Independent Disability Advocacy Network's (QIDAN) submission to the consultation on a new Commonwealth individual disability advocacy program and recognises the work they have undertaken on behalf of Queenslanders with disability. The importance of avenues for individual disability advocacy cannot be overstated and the introduction of a Commonwealth program to assist people with disability, and organisations like the members of QIDAN, to deliver advocacy services has great potential to improve advocacy for people with disability.

QDN supports the recommendations by QIDAN for a Commonwealth based individual disability advocacy program that stem from QIDAN's experience in helping people with disability across Queensland. QDN strongly encourages the Department to consider these recommendations and incorporate them into the final proposed model for the Government's individual disability advocacy program.

If required, QDN is happy to discuss this endorsement further. Senior Policy Lead, Nicholas Mukherjee is best placed to receive any correspondence on this matter and can be reached at nmukherjee@qdn.org.au.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'mb', is positioned above the printed name of the signatory.

Michelle Moss
Chief Executive Officer
QDN