

**A brief submission to the Family and Community Development
Committee of the Victorian Parliament**

I am sorry that I am only addressing one section in this submission. My name is Genevieve Tucker and I am the mother of a 31 year old man with autism and intellectual disability (ASD and ID), who lives at home with me and his father.

Due to time constraints I wish to address section 2(e).

2. (e) On the projected demand for services in Victoria:

As the NDIS is rolled out in Victoria I believe that we will see an increase in the demand for individualised support for people with ASD who have been either unable to access day services, or whose parents have decided to withdraw them and develop other options for their support.

It is currently estimated by the Victorian umbrella organisation AMAZE that those with severe and complex presentations of ASD comprise 25% of the total cohort.

It is not known how many of these people receive less individual support than they need. It is also not known how many people with milder presentations of ASD and ID are currently out of day services or otherwise dissatisfied with the services they attend.

As the NDIS rolls out the advocates for both these groups will almost certainly attempt to find more 1:1 support workers as they apply for and are allocated more funding for this purpose. I predict there will be a large gap between the need for these workers and the capacity to supply them.

I have been attempting to staff a home-based day program for my 31 year old son since late 2013.

It is not impossible to find young psychology students who are ideal casual workers for such programs, however there is only one agency in the Melbourne area consistently recruiting them. Excellent screeners and recruiters as they are, this agency's managers do seem to prioritise emergency respite work over 1:1 support programs as they seek to make the most of their limited specialised workforce. Also these students often pursue other career options when they finish their studies.

1:1 support of a person with ASD and ID in the community requires an understanding of intellectual disability, applied behavior science and speech pathology issues, just for starters, at a level that cannot be easily attained in a general Certificate IV in disability support. It would be so helpful if training in 1:1 autism support was developed into a six-month to one-year course at a moderate cost. The two units on behavior support and assisted communication currently on offer from AMAZE for \$1000 each appear to be a good start, however there is scope for these to be expanded.

Demand for such a course will increase as younger people with ASD and ID who have been exposed to applied behaviour interventions in their early years move into the adult cohort.

Support work would also become a more attractive option for the many psychology graduates who do not become clinical psychologists, if appropriate wages are paid and career paths are developed.

For example, eventually trained and experienced workers could undertake further studies, directed from an academic centre such as Latrobe (or Deakin, which is currently revitalising its graduate programs in disability and inclusion). Degree and postgraduate qualifications in autism and disability studies could equip a new generation of autism professionals to run their own agencies, become trainers themselves and develop other enterprises to support people in this cohort alongside others with ID.

The NDIS could see the entry into the autism marketplace of new providers who are less tied to the protective, often restrictive management systems and structures of current day services, and support workers' training will need to be developed to match their offerings as well as the expectations of people with ASDs and their carers.

I should probably also acknowledge that not everyone will want individual support. As traditional service providers move from more protective and restrictive models of support to more inclusive practices, well-qualified, specialised ASD and ID support workers will become valued professionals within these services as well.

I have received nothing but positive responses from the people I meet when I am out with my son and I would like to think that one day a well- paid, well- qualified professional who has a career in autism services with ongoing PD opportunities will be taking my place.

The will in the community to see people like my son out doing worthwhile things with their time, instead of being cooped up in a crowded and chronically under-resourced day service, is definitely there. It is not just parents and families who have this dream: the wider community also shares it.

And soon the money will be there to pay for some of it, but will we have workers who confidently use differential reinforcement, or augmented assisted communication? We need to find these people now, and we need to find ways to keep them working with us.

Thank you for reading my submission.

Genevieve Tucker

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