

## **Speech Pathology Australia's Submission to the**

### **Australian Human Rights Commission: Human Rights and Technology Issues Paper**

**2 October 2018**



Australian Human Rights Commission  
GPO Box 5218  
SYDNEY NSW 2001

Dear Mr Santow

**Re: Speech Pathology Australia's submission: Human Rights and Technology Issues Paper**

Thank you for the opportunity to provide feedback on the Commission's consultation regarding the Human Rights and Technology Issues Paper.

Speech Pathology Australia is the national peak body for speech pathologists in Australia, representing more than 8500 members. Speech pathologists are university trained allied health professionals with expertise in the assessment and treatment of communication and swallowing disabilities.

The Australian Bureau of Statistic's 2015 Survey of Disability, Ageing and Carers (SDAC), estimated that 1.2 million Australians had some level of communication disability, ranging from those who function without difficulty in communicating every day but who use a communication aid, to those who cannot understand or be understood at all.<sup>i</sup>

We note the issues paper makes a clear distinction between accessible and inclusive technology and 'assistive technology.' We acknowledge this distinction and therefore focus our feedback on areas relevant to speech pathology services and accessible and inclusive technology (not assistive technology) for people with communication disability. These areas include internet issues including the lack of adequate and reliable coverage in rural and remote Australia that affects daily interaction with essential services as well as acts as a barrier to service delivery models such as telepractice being used to its full potential. In addition, we advocate for the need for 'communication access' to be universally recognised as a vital prerequisite for community and government services to ensure people with communication disability can participate fully in community life.

Similar to mobility access (e.g. kerb cuts assist wheelchair users) communication access involves the provision of environmental supports for people with communication disability to access the community and mainstream services by being able to communicate effectively. This requires increased awareness of communication disability within the community, government and business environments to improve understanding of communication disability and for individuals to learn how to interact with a person with communication disability in a way where everyone 'can get their message across'.

We would be keen to participate in any further consultation opportunities and in particular your forthcoming roundtable meetings. In the meantime if Speech Pathology Australia can assist in any other way or provide additional information please contact [REDACTED]

Yours faithfully,

[REDACTED]

Gaenor Dixon,  
National President

# Speech Pathology Australia's Submission to the Australian Human Rights Commission: Human Rights and Technology Issues Paper

## About speech pathologists and Speech Pathology Australia

Speech pathologists are the university trained allied health professionals who specialise in diagnosing and treating speech, language, communication and swallowing problems. Speech pathologists work across the life span with infants, children, adolescents, adults and the elderly with communication and swallowing problems.

Speech pathologists provide services in the acute care (hospital), sub-acute care, rehabilitation and primary care sector (including community health, general practice and mental health services) as well as within other sectors such as disability, residential and community based aged care, education, juvenile justice, prisons and community settings.

Speech Pathology Australia is the national peak body for speech pathologists in Australia, representing more than 8500 members. Speech pathology is a self-regulated health profession through Certified Practising Speech Pathologist (CPSP) membership of Speech Pathology Australia. Speech pathologists are not required to also be registered through the National Registration and Accreditation Scheme. The CPSP credential is recognised as a requirement for approved provider status under a range of government funding programs including the NDIS.

## About communication disability

Some people have problems with their speech, language, communication and swallowing that are permanent and impact on their functioning in everyday life. Difficulties in speech, language, fluency, voice, social communication and swallowing can occur in isolation or the person may have difficulties in more than one area. Communication and swallowing difficulties can arise from a range of conditions that may be present from birth (e.g. Down Syndrome or Autism Spectrum Disorder), emerge during early childhood (e.g., stuttering, severe speech sound disorder), or during adult years (e.g., traumatic brain injury, stroke and head/neck cancers, neurodegenerative disorders such as motor neurone disease) or be present in the elderly (e.g., dementia, Alzheimer's disease, Parkinson's disease).

Communication disorders encompass difficulties with speech (producing spoken language), understanding or using language (including oral language, reading, spelling and written expression), voice, fluency (stuttering), and pragmatics (the social use of language), or a combination of areas. There is very strong international and Australian evidence<sup>ii</sup> that communication disorders negatively affect an individual's academic participation and achievement, employment opportunities, mental health, social participation, ability to develop relationships, and overall quality of life.

A communication disability can be mild, moderate or severe, and may be developmental in nature, acquired through disease or injury, or from an unknown origin. Often communication disabilities are invisible (*even silent*), especially to the untrained eye, as the person may have no obvious 'outward' signs of their disability. This results in poor understanding by the general community of the experiences of people with communication disability in Australia. This can significantly affect individuals' access and participation in the wider society, and have negative impacts on their social and emotional wellbeing, and quality of life outcomes.

The Australian Bureau of Statistic's 2015 Survey of Disability, Ageing and Carers (SDAC), estimated that 1.2 million Australians had some level of communication disability, ranging from those who function

without difficulty in communicating every day but who use a communication aid, to those who cannot understand or be understood at all.<sup>iii</sup>

## **Speech Pathology Australia's feedback to relevant sections of the Issues Paper**

We note that the Issues Paper makes a clear distinction between accessible and inclusive technology and 'assistive technology.' Assistive technology includes alternative or additional methods of communication, termed Augmentative and Alternative Communication (AAC), which many people with complex communication needs, benefit from using. We acknowledge this distinction however, and therefore provide feedback regarding accessible and inclusive technology that is relevant to speech pathology and people with communication disability.

### **Accessible technology for people with a disability**

#### **8. What opportunities and challenges currently exist for people with disability accessing technology?**

##### **Internet and software issues**

There are a number of challenges for people with communication disability accessing technology that relate directly to the internet. These include inadequate and unreliable internet coverage, software incompatibility and high computer literacy requirements. With the introduction of web based consumer portals, such as the My Health Record, My Aged Care and the NDIS, having access to, and being able to competently use the internet is becoming more and more essential.

Indeed, the lack of adequate and reliable internet access and coverage for many people, especially for those living in rural and remote Australia, is particularly problematic. For example, one of our members reports how a family in a rural area is only able to access the internet for a few hours in the morning, as the satellite dish they rely on overheats and shuts down after midday.

In addition, the many web based transactions/interactions with services that are considered essential to people with a communication disability e.g. the NDIS participant portal etc., are often difficult to navigate and lack Easy English versions. The Association has received reports that the MyPlace Participant Portal does not have options to make it more accessible and functional for participants who have a communication disability, or low levels of literacy. It lacks basic accessibility options such as alternative font sizes, and information in other languages, or easy English to allow participants with communication disabilities or from non-English speaking backgrounds to access it. Members have expressed concerns that these issues with accessibility mean that only well educated, English speaking participants with a high level of both written and computer literacy are able to self-manage their supports as the MyPlace portal is too complex for many participants. This could potentially affect many people with communication disability and impact upon their ability to manage their own NDIS funds and exercise choice and control.

There are also compatibility issues to consider, for example the complex websites that are accessed via the myGov platform, such as the NDIS, are not always compatible with older software, or accessible via smartphones, which may be the only device being used by many to access the internet. There are also compatibility and accessibility issues relating to specific Augmentative and Alternative Communication apps, such as the Picture Exchange Communication System (PECS) and Proloquo2Go app used by people with autism, Down syndrome and cerebral palsy, which can only be used with an iPad as they are not available in Android formats. This is also the case with some speech therapy apps such as Speech Therapy for Apraxia and Articulation Station.

Finally, there is a lack of government support to encourage internet based service delivery, such as telepractice, which is a delivery model that has the potential to improve access to speech pathology services and make care provision more efficient. There is very strong evidence regarding the clinical efficacy of speech pathology services provided through telepractice,<sup>iv</sup> however, this service delivery model requires individuals to not only have access to adequate and reliable internet services but also be internet literate. Another critical barrier to the use of telepractice is the current funding arrangements, such as the MBS item rebate restrictions and inconsistent NDIS individual plan funding.

## Communication access and participation as a human right

In addition to specific issues regarding the internet (access to, website navigability and individual computer literacy requirements) the major overarching issue that needs to be considered from a human rights perspective, is the need for 'communication access' to be recognised as a vital pre-requisite for community and government services to ensure people with communication disability can participate fully in community life.

Communication skills underpin the key indicators of successful involvement in modern day society, including positive social relationships, literacy and numeracy, educational attainment, employment, and civic participation. Participation, education, employment, access to public services and expression are all basic human rights. Without communication access, people with disability are denied an important component of their human rights, as recognised in the United Nations' Convention on the Rights of Persons with Disabilities.<sup>v</sup>

However, thousands of people in Australia may have these rights compromised on a daily basis because a foundational right - the opportunity to communicate - has not been met. This failure is mirrored in services and supports at both federal and state and territory level, and can be attributed to a lack of acknowledgment of the critical role of communication to participation and quality of life in Australia.

To access their communication rights, people with disability need a range of specific and additional supports to be implemented in the environments in which they interact. Similar to mobility access, communication access involves the provision of environmental supports for people with communication disability to access the community and mainstream services by being able to communicate effectively. This requires an increased awareness of communication disability within the community, government and business environments to improve understanding of communication disability and for individuals to learn how to interact with a person with communication disability in a way where everyone 'can get their message across'.

Communication access is as important as physical access to people with disability if they are to participate fully in social, economic, sporting and community life in line with the UN Convention on the Rights of Persons with Disabilities (CRPD): Article 9 - Accessibility, which, in addition to stating the need to address barriers in the built environment also highlights the need to take into account **all** aspects of accessibility. See in particular part two detailed in Figure 1 below (with emphasis added) from the Article. Indeed, the almost exclusive focus on improving physical access in the built and natural environments, at the expense of the consideration of communication access, undermines the intent of a number of other UN CRPD Articles, such as, living independently and participation (Articles 19, 29 and 30) and raising awareness (Article 8).

Just as adjustments to the built environment - such as kerb cuts - help remove physical barriers faced by people with disability, improving communication access, particularly to government services such as education, health and justice sectors helps remove the discriminatory barriers faced by individuals with a communication disability. Fortunately, Australia is the home of some of the world leading activities in the area of communication participation and access. One such initiative by Scope in Victoria is the

development and endorsement of a registered symbol to denote communication accessibility, similar to the familiar wheelchair accessible and Hearing Impairment accessible symbols.<sup>vi</sup>

Scope offers an accreditation program for organisations/businesses to be assessed as communication accessible. Notable public services who have achieved communication access under the Scope scheme include the Victorian regional public transport system (VLine<sup>vii</sup>) and the Bass Shire Community Information Centres.<sup>viii</sup>



Speech Pathology Australia has also successfully completed the Scope accreditation program assessment and achieved 'communication accessible site' status under the scheme. In addition, the speech pathology profession reaffirmed its commitment to advocating for communication accessible communities through the profession-wide landmark project Speech Pathology 2030. The project outcomes reaffirmed the vision of our profession that:

*"we will ensure through building communication accessibility that everyone is treated with dignity and respect; communication partners are skilled listeners and talkers (e.g. they provide extra thinking and talking time, they know not to finish off someone's sentences etc.) and other methods of communication (e.g. communication boards, speech-generating devices, switches and eye-tracking devices etc) will be understood, and if required, their use supported".<sup>ix</sup>*

Speech Pathology Australia is also working with a wide range of disability and consumer groups as part of the Communication Access Alliance, with one of the key aims being the development of National Standards for Communication Accessibility.

#### Figure 1: The UN Convention on the Rights of Persons with Disabilities Article 9 - Accessibility

1. To enable persons with disabilities to live independently and participate fully in all aspects of life, States Parties shall take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to, inter alia:

- (a) Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces;
- (b) Information, communications and other services, including electronic services and emergency services.

2. States Parties shall also take appropriate measures to:

- (a) Develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open or provided to the public;
- (b) Ensure that private entities that offer facilities and services which are open or provided to the public **take into account all aspects of accessibility for persons with disabilities;**
- (c) Provide training for stakeholders on accessibility issues facing persons with disabilities;
- (d) Provide in buildings and other facilities open to the public signage in Braille and **in easy to read and understand forms;**
- (e) Provide **forms of live assistance and intermediaries, including guides, readers and professional sign language interpreters, to facilitate accessibility to buildings and other facilities open to the public;**
- (f) Promote other appropriate forms of assistance and support to persons with disabilities to ensure their **access to information;**
- (g) Promote access for persons with disabilities to new information and communications technologies and systems, including the Internet;
- (h) Promote the design, development, production and distribution of accessible information and communications technologies and systems at an early stage, so that these technologies and systems become accessible at minimum cost.

## **9. What should be the Australian Government's strategy in promoting accessible technology for people with disability?**

Firstly, it is imperative that state and territory and federal governments recognise communication access as an essential prerequisite for community and government services to ensure individuals with communication disability can participate fully in community life. This can be done in a number of ways including: all state and territory and federal government explicitly acknowledging the importance of communication access in public policy documents; by undertaking a 'communication access audit' for all government programs and services, and finally, by working with Speech Pathology Australia (and other stakeholders) to develop information resources to assist public and private services to understand and become more communication accessible.

Secondly, it is essential that the state and territory and federal governments recognise the value of alternative service delivery models, such as telepractice, and ensure that those individuals who may benefit from this service are provided with the necessary supports including adequate and reliable internet access. In addition, the Government can ensure funding to promote the provision of speech pathology therapy provided via telepractice by addressing other barriers such as the MBS item rebate restrictions and inconsistent NDIS individual plan funding. Finally, websites, such as the NDIS website and participant portal, should be more user friendly, include Easy English versions, and be compatible with all devices, including smartphones, so that they can be accessed and used with ease.

## Recommendations

In summary, Speech Pathology Australia asks that the Commission consider the following recommendations:

- that communication access be acknowledged as a vital prerequisite for community and government services to ensure people with communication disability can participate fully in community life. We would argue that this is an essential contributing factor for the National Disability Strategy 2010-2020 to meet its aspirations for inclusive and accessible communities.
- that state and federal governments explicitly acknowledge the importance of communication access in all public policy documents.
- that state and federal government programs and services undergo a 'communication access audit/check' to identify changes that are needed to the systems of service delivery that would improve communication access. A focus could be made on the following services in the short term:
  - The NDIS
  - Centrelink processes
  - My Health Record
  - Complaints and Feedback mechanisms (particularly for health, disability and aged care systems)
- the Australian Government work with Speech Pathology Australia (and other stakeholders) to develop information resources to assist public and private services to understand and become more communication accessible. This would reflect a targeted public awareness campaign. The resources could be focused in the short term on the following sectors that are known to have significant communication barriers for people with disability:
  - Justice systems
  - Primary health services (including general practice)
  - Hospital systems
  - Aged care services (including residential aged care and community based aged care services)
  - Local government consumer-facing services (information centres etc.)
- recognise the value of alternative service delivery models, such as telepractice, and ensure that those individuals who may benefit from this service are provided with the necessary supports including adequate and reliable internet access.
- ensure funding to promote the provision of speech pathology therapy provided via telepractice delivery models by addressing current barriers such as MBS item rebate restrictions and inconsistent NDIS individual plan funding.

If Speech Pathology Australia can assist the Committee in any other way or provide additional information please contact [REDACTED] or contact by emailing [REDACTED]

## References

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<sup>i</sup> Australian Bureau of Statistics (2017) Australians living with communication disability, <http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/4430.0Main%20Features872015?opendocument&tabname=Summary&prodno=4430.0&issue=2015&num=&view>

<sup>ii</sup> See:

Clegg, J., Hollis, C., Mawhood, L., & Rutter, M. (2005). Developmental language disorders-a follow-up in later adult life: cognitive, language and psychosocial outcomes. *Journal of Child Psychiatry*, 46(2), 128-149. doi: 10.1111/j.1469-7610.2004.00342.x

Conti-Ramsden, G., Mok, P.L.H., Pickles, A., & Durkin, K. (2013). Adolescents with a history of specific language impairment (SLI): Strengths and difficulties in social, emotional and behavioral functioning. *Research into Developmental Disability*, 34(11), 4161–4169. doi: 10.1016/j.ridd.2013.08.043

Eadie, P., Conway, L., Hallenstein, B., Mensah, F., McKean, C., & Reilly, S. (2018). Quality of life in children with developmental language disorder. *International Journal of Language and Communication Disorders*. Early online version. doi: 10.1111/1460-6984.12385

Snowling, M., & Hulme, C. (2012). Annual Research Review: The nature and classification of reading disorders-a commentary on proposals for DSM-5. *Journal of Child Psychology and Psychiatry*, 53, 593–607. doi: 10.1111/j.1469-7610.2011.02495.x

<sup>iii</sup> Australian Bureau of Statistics (2017) Australians living with communication disability, <http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/4430.0Main%20Features872015?opendocument&tabname=Summary&prodno=4430.0&issue=2015&num=&view>

<sup>iv</sup> See:

Keck, C. S., Doarn, C. R. (2014). Telehealth technology applications in speech-language pathology. *Telemedicine Journal and e-Health*, 20, 653–659. doi:10.1089/tmj.2013.0295.

Hill AJ, Breslin HM. Refining an Asynchronous Telerehabilitation Platform for Speech-Language Pathology: Engaging End-Users in the Process. *Frontiers in Human Neuroscience*. 2016;10:640. doi:10.3389/fnhum.2016.00640.

Theodoros D.G.(2014) Improving access to speech pathology services via telehealth: Submission to the National Inquiry into the prevalence of different types of speech, language, and communication disorders and speech pathology services in Australia. Brisbane (AU): University of Queensland; 2014. (Submission 234).

<sup>v</sup> United Nations General Assembly, Convention on the Rights of Persons with Disabilities : resolution / adopted by the General Assembly, 24 January 2007, A/RES/61/106: <http://www.refworld.org/docid/45f973632.html>

<sup>vi</sup> <http://www.scopevic.org.au/service/communication-access/>

<sup>vii</sup> <https://www.vline.com.au/Fares-general-info/Additional-pages/Communications-Access>

<sup>viii</sup> <http://news.basscoast.vic.gov.au/communication-accessible-visitor-information-cent>

<sup>ix</sup> Speech Pathology Australia (2016) *Speech Pathology 2030 Making Futures Happen: A Landmark Project for the Profession*. Speech Pathology Australia. Melbourne.