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The Right Honourable Sir Ninian Stephen, KG., AK., GCMG., GCVO., KBE.

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HAEMOPHILIA FOUNDATION AUSTRALIA

Executive Director: Sharon Caris

Secretary

Senate Employment, Workplace Relations and Education Committee

Department of the Senate

Parliament House

Canberra ACT 2600

Australia

18 November 2005

Dear Sir,

Please accept this late submission regarding the impact of changes in eligibility for mobility allowance and pass it on to the Committee.

Haemophilia Foundation Australia represents approximately 2,000 Australians with haemophilia and related bleeding disorders. Recurrent severe bleeding into joints, muscles and organs can be life threatening and most patients require replacement clotting factor treatments for life. It is an expensive condition to treat and results in severe arthritis and physical disability, a potentially reduced quality of life and complex psychosocial issues. Many of these people also live with HIV and Hepatitis C through the use of unsafe blood products before blood screening and treatment product manufacturing processes and plasma processing were adequate to protect them.

We estimate that approximately 200 people with bleeding disorders will be receiving Disability Support Pension (DSP) and approximately 120 qualify for Mobility Allowance due to arthrodesed knee, hip and/or ankle joints. This physical disability prevents them from using public transport. Not all of those on Mobility Allowance receive DSP. We estimate that 42% of those who qualify for Mobility Allowance will be working, 17% will be students and the remainder are retired but undergoing rehabilitation (eg hydrotherapy), or voluntary work.

We note the proposed changes to Centrelink eligibility and Employment Assistance Programs to come into effect from 1 July 2006 and the impact these will have on the bleeding disorders' community.

Haemophilia Foundation Australia welcomes several initiatives in the packages, such as:

- An expansion of specialist employment assistance places
- Liberalised rules related to eligibility for the Pensioner Concession Card and other allowances and the retention of DSP when recipients undertake up to two years of employment
- Engagement with employers to encourage a more open approach to employment of people with disability
- Streamlining the assessment and referral system
- Some exemptions from the income support changes, including the existing DSP population, people who require more than two years of ongoing support to work part-time, and people whose disability prevents them from working at a productivity level that attracts award wages.
- Increased allocations for workplace modifications and wage subsidies.

However we are concerned about a proposed two-tiered rate of Mobility Allowance, with increases only available to those searching for employment.

Given the huge increases in the price of petrol and taxi fares, it is appropriate for the proposed Mobility Allowance increase from \$69.70 per fortnight to \$100 per fortnight in the Welfare to Work Package to be applied to all currently eligible categories. They all bear the increased costs of transport. They all engage in worthwhile activities consistent with other government policies that encourage people with disabilities. They undertake study, utilise appropriate therapy and rehabilitation to avoid deterioration in their condition, and work as volunteers in community activities to maintain their skills, improve their sense of wellbeing and avoid depression. It is essential that all government policies are framed so that people optimise their capacity to contribute positively and as fully as possible.

Mobility Allowance is just one of a range of established incentives to help counter the economic costs of participation. It needs to be increased in line with recent increased transport costs to **all** groups whether or not they are undertaking voluntary work, rehabilitation or work. It is unfair to have a two tiered system. The lesser rate has not kept pace with increased costs, and the idea that a higher rate would provide a significant incentive is erroneous.

We are well aware from our experience of the circumstances of the bleeding disorders' community that where it is physically possible for our members to work, they do so. The opportunity to earn a wage, interact meaningfully in a work environment and contribute to the community is a great incentive in itself. Sometimes service providers and health workers have to strongly encourage these people to rest, so they have a better chance of recovery from bleeds. But they are anxious to make their contribution to society. For them, a two-tiered system to bolster incentives to move into work is not necessary.

All groups are entitled to appropriate compensation for the costs involved in participation where they are unable to walk beyond a few metres or less, and cannot use public transport.

I request that you reconsider the proposed changes to Mobility Allowance eligibility criteria urgently to prevent our members of the bleeding disorders' community from severe disadvantage and further discrimination and hurt.

Yours sincerely,



Gavin Finkelstein
President