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Department of Social Services autismpolicy@dss.gov.au

Municipal Association of Victoria submission on the draft National Autism Strategy

The Municipal Association of Victoria (MAV) welcomes the opportunity to provide our response to the draft *National Autism Strategy* (referred to as the Strategy). This submission succeeds the first <u>submission</u> from MAV in 2023, on the development of the National Autism Strategy.

The MAV is the peak representative and advocacy body for Victoria's 79 councils. The MAV was formed in 1879 and the Municipal Association Act 1907 appointed the MAV the official voice of local government in Victoria.

A key responsibility of Victorian councils is strategically planning for the health, wellbeing, safety and connection to culture, access, participation, and development of its residents. Councils take a whole-of-community, whole-of-system approach to building community strength to address the underlying causes of inequity and vulnerability.

Victorian councils are mandated by the Victorian Disability Act (2006) to have Disability Action Plans. Many councils engage regularly with Disability Advisory Committees. These committees usually represent the diversity of lived experience and intersectionality. This connection to the community for place-based planning and priority initiatives is a great strength of local government.

Consultation with council disability planners and previous engagement with maternal and child health and early years professionals has informed this submission. The consultation included the voices of people with Autism.

This submission focuses on the opportunities to align the National Autism Strategy with policy at the (Victorian) local government level and highlights the crucial functions Victorian councils undertake to support the outcome areas of *Diagnosis, services, and support*.



The Strategy is important as the Senate Select Committee on Autism in Australia (2019) found that *generic disability strategies have proven ineffective in improving life outcomes for people with Autism and* recommended a National Autism Strategy.

The prevalence of Autism in Australia is increasing. Recent figures from the Australian Bureau of Statistics (ABS) show that there were 205,200 Autistic people in Australia in 2018. Representing a 25.1% increase since 2015, this number is likely to be a large underestimation due to varied reasons including historical approaches to diagnosis, cost or wait times to receive a diagnosis, or people may feel that diagnosis is not the right path for them.

Governance

The Strategy is an initiative of the Australian Government and refers to the responsibilities of all levels of government. However, the expectations and accountabilities of local government under the new Strategy are not clear.

The governance alignment between the Strategy and the separate *National Roadmap to Improve the Health and Mental Health of Autistic People* is not clear. Oversight by separate Commonwealth Departments risks disjointed systems and stakeholder partnerships.

Implementing recommendations from the Royal Commission to introduce a new Minister for Disability Inclusion will change current governance structures for this Strategy and the *National Disability Strategy*. Separately, the Victorian Government released an exposure draft of a new Disability Inclusion Act in 2023, so change is also pending at the State level, which will have implications for local government.

Recommendations:

- That the governance framework for the Strategy supports strong accountability mechanisms for whole-of-government <u>and across the levels of government.</u>
- That local government peaks are engaged to inform governance frameworks that align the accountabilities across the levels of government, to support implementation and measurement of effectiveness of the Strategy across the levels of government.
- That any new accountabilities for local government can be embedded within existing policy frameworks, such as integrating into Disability Action Plans, or Municipal Public Health and Wellbeing Plans. Avoiding duplicated efforts without adequate resourcing.
- That an integrated Governance Framework is developed for both this Strategy and the National Roadmap to Improve the Health and Mental Health of Autistic People, to achieve a joined-up approach.

Local Government's role in diagnosis, services and supports

The MAV works in partnership with the Victorian Government on policy directions, funding, and continuous improvement for maternal and child health (MCH) services in conjunction with other early childhood services.

Current best sector practices include but are not limited to; MCH In-home visits for vulnerable families or those not able to travel, Enhanced Maternal Child Health support to facilitate access to early intervention, Pre School-Field Officer (PSFO) Educator capacity building, and PSFO local service navigation.

The limitations, fragmentation, and lack of coordination of programmatic outputs and funding in the early years, fails to recognise children and families need earlier support to have their needs assessed and addressed. For example, the limitation of the Kindergarten Inclusion Support funding only focuses on Autistic children that pose 'significant danger to self or others' – however the child and their families have great support needs to assist them with inclusion and meaningful participation in society. Educators are often not attempting the KIS (Kindergarten Inclusion Support) application process, due to feeling overwhelmed by the length and requirements of the application process, another barrier to diagnosis.

In our experience, the decisions families make about autism diagnosis and treatment are influenced by the family's understanding and expectations of child development. Some families may see delays in language/communication and social skills, as a normal process their child encounters as the child moves through developmental stages. As a result, they may not identify important but subtle cues for autism (lack of pointing, lack of imitation, lack of eye contact, and a lack of socially appropriate behaviour); instead, they may associate autism with repetitive language, ritualistic behaviour, and gross delays in motor skill development. This issue is often more complex in new and emerging and culturally diverse communities. To address this issue, the State Government under its 24/25 Budget has recently approved a 3-year continuation of the CALD Outreach initiative.

In 2018/19, the Victorian Government rolled out training for MCH nurses in the early identification of autism in children. The Monitoring of Social Attention and Communication (MoSAIC) in infants and toddlers' program.

This program has provided MCH nurses in local government with the skills to confidently identify the early signs of social communication delay in children during their routine 12-, 18- and 24-month Key Age and Stages health checks.

The MoSAIC training for MCH nurses also aims to address the issue of misdiagnosis and underdiagnosis in female infants and toddlers.

The Strategy is seeking to remedy systemic gaps in diagnosis, services and supports. This priority outcome area acknowledges that even with such efforts to improve early diagnosis, access to services and supports are delayed or not available due to shortages of allied health professionals and limited bulk billing options.

Recommendations:

- That the Strategy aspires for a funded, smooth, and consistent referral pathway, for Autism diagnosis, and supports access for all families
- That the MAV and Victorian local government sector are engaged with other stakeholders to inform a joined-up approach for diagnosis, services, and supports.

The MAV would like to see opportunities for Victorian Councils to contribute to and identify areas of reform that remove barriers for people with Autism to support their full participation in Australian society.

Should you require any further information, please contact Kim Howland, Manager of Community Wellbeing, at <u>khowland@mav.asn.au</u>

Yours sincerely

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