

CAPACITY BUILDING

Capacity building takes place over time requiring a multitude of strategies and activities at the individual, organisational and systemic levels to be sustainable. It will be most potent when multiple level strategies address the complexity of barriers in people's lives.

Individual capacity building is critical for people with disability, their families and support networks because it enhances their knowledge and skill potential to bring about personal change and contribute to change at a broader level.

Health and wellbeing, empowerment and the sustainability of the NDIS are proposed as three inter-related goals that should be the focus of capacity building. While capacity building for a good life and citizenship are individually focussed, the sustainability of the NDIS in part depends on people with disability becoming as independent as possible, experiencing the best possible health and wellbeing and becoming citizens who are engaged in social, economic and civic life.

Another related purpose of capacity building for people with disability is empowerment. Statistics from multiple sources describe the real powerlessness experienced by people with disability resulting from economic inequities that lead to poverty, from social isolation, from unresponsive services and systems and from abuse and neglect. These environmental factors are objective phenomena that mean that people with little or no economic power lack the means to gain control and resources over their lives.

The implementation of the UNCRPD through the National Disability Strategy and the NDIS provides impetus for a process of change, enabling people to gain information about themselves and their environment and be willing to identify and work with others for change. Capacity building is an essential ingredient in supporting people through the process of change.

Another purpose of capacity building is to assist people with disability, their families and support networks move from dependent users of services, to people who are active citizens, exercising choice and control and engaging in social, economic and civic life.

Capacity building is fundamental to the sustainability of the NDIS because it assists people to build ordinary lives strengthened by relationships, not just services. Capacity building helps people understand that paid support contributes to positive lives but that an excess of paid support can drive out freely given relationships which are central to a meaningful life. In addition, capacity building strengthens people's resilience and people with greater resilience develop support solutions that are more enduring and cost effective.



Where specialist disability services provide capacity building support, a conflict of interest arises in which the disability service provider may derive organisational benefit by building trust with participants and channelling them into their direct services. Even where 'Chinese walls' have been constructed and the capacity building arm of the organisation is separated from the service delivery arm, a situation that looks like a conflict of interest may be enough to undermine public confidence even if in fact there is no conflict of interest.

Whilst most participants will access capacity building through the ILC framework, it is essential that provision of capacity building opportunities remain as part of reasonable and necessary support when an individual is moving to a transition point or seeking to gain a new skill that leads to greater independence, self management or genuine community inclusion and belonging.

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- Combining a number of capacity building strategies over time in any one community
- Strengthening opportunities for participants in capacity building to be in a helping role, strengthening their self perception as persons who make a contribution
- Providing opportunities for people to 'learn as they do', to take initiative and have a small budget over which they have control
- The use of empirically based best practices with a focus on the quality of relationships as well as training, support and supervision of staff and volunteers
- Funding action research evaluations to build the evidence based of capacity building for people with disability and families.

The NDIS will fund decision support, safeguard supports and capacity building for participants, including support to approach and interact with disability supports and access mainstream services. The NDIS has an important role to play in providing decision-making supports and building individual capacity for people to advocate for themselves.

It will also support peer support, where people with disability or their carers share their lived experiences with others on similar journeys. This is an important means of capacity building that acknowledges and respects the lived experience of disability. There is an opportunity through ILC for the NDIS to support people with disability to lead peer support



and promote self-advocacy amongst peers, to support individuals in their capacity to effectively exercise choice and control.

People with disability, their families and carers, like all community members, access and interact with mainstream and universal systems and supports. An NDIS objective is to ensure people with disability connect with and access mainstream supports.

Mainstream services are considered to be government funded services (for example, education, health care, public housing, transport and employment services), and services/supports provided by the community or private sector (for example, a swimming pool, neighbourhood houses and men's sheds, gym or theatre).

The NDIS will fund supports to enhance social and economic participation for people with disability. Therefore, it has a role and interest in supporting a proactive effort in improving accessibility and inclusion of people with disability.

However, the introduction of NDIS does not shift the responsibilities of mainstream and universal services in ensuring greater accessibility and inclusion, nor is the NDIS a funding source for mainstream services. As such, the NDIS can identify and inform areas where governments, in implementing the National Disability Strategy 2010-2020, should focus effort to ensure accessible mainstream supports, programs and community infrastructure.

Importantly, the NDIS will also be able to identify areas for improvement at the local level and work with key partners to achieve these goals, some examples of which may include:

- building the capacity of mainstream and universal providers in meeting their
- responsibilities
- making them more inclusive of people with disability, for example in areas such as employment, education and health services
- providing organisations with information on how to improve accessibility, for example by improving wheelchair access to buildings and infrastructure, signage, website and communication accessibility; and
- enhancing 'best practice' in service delivery, for example through support to develop tools and resources that support practitioners across mainstream services to provide services to people with disability.

Individual capacity building has the potential to benefit a range of people with disability, and their families and carers, who are eligible for an IFP or who are just outside of the access criteria for the scheme and would otherwise need to test their eligibility (and therefore support the insurance principles of the NDIS). The supports under this stream are often one- off, low intensity or episodic and are better delivered and managed through funding arrangements outside of IFPs.

Examples of individual capacity building supports may include:



- diagnosis-specific capacity building (for example, orientation training for people with vision impairment where this is low cost and short term);
- programs for carers and counselling for people who are caring for someone with disability (including psychosocial disability).
- parent breaks and programs to provide parents with skills and information about
- disability
- professional development for example for parents and education providers
- decision making supports and supports for self-advocacy, helping people with disability, their families, carers and communities to work together with and for people with disability; and
- diagnosis specific peer support groups

These can be effective in supporting an individual with planning, establishing linkages with mainstream and other supports, facilitating peer support networks and understanding the most effective support options appropriate to the person's needs.