

Advocacy Tasmania

Advocacy Tasmania is in its twenty-first year of providing independent support and representation to Tasmanian consumers within the residential aged care, aged community care, dementia services, disability services, alcohol tobacco and other drug services and mental health services sectors. Our motto “working to protect your rights” is a pledge to our consumers that our role is to work with and for them to protect their rights and interests.

We are funded by four separate DHHS business units and two Australian Government departments (DoHA and FaHCSIA). In addition to our advocacy work, we are increasingly working with service providing organisations across these service systems to improve their consumer engagement practices. No other Australian advocacy organisation matches the breadth of work that occupies our advocates. Our advocates work from offices in Hobart, Launceston and Devonport.

The ‘program logic’ of our service is straightforward. A significant number of actual and prospective consumers of health and human services have capacity constraints in relation to their ability to acquire and process information, to take decisions, and to communicate their needs and wants. Of those consumers, many have family, friends and other informal supports to augment their capacities. A large and growing number of Tasmanians, however, lack both capacity and informal support. To successfully negotiate service systems – all service systems – those individuals will need formal support and sometimes representation. Independent advocacy services such as ATI provide that support. We are funded by service systems because system managers recognise that without advocacy support their services will fail to successfully target those most in need, or to hear their concerns when issues arise. Without advocacy support their systems will lack the crucially important feedback loops that are essential for quality assurance and improvement purposes.

The past decade has witnessed an important transition within ATI from essentially *reactive* or complaint-based modes of operation to *proactive* or preventative ones. In practice, this means supporting consumer decision-making processes at all points of the consumer trajectory – from initial assessment and care planning processes, through the negotiation of service delivery outcomes, and on to more remedial approaches when the type, quality or quantum of service delivery is not meeting the consumer’s needs or expectations.

In addition to our individual advocacy services, ATI has a strong track record in systemic advocacy and is frequently invited to contribute to system reviews and associated reform processes. Our work across the above service sectors provides us with valued insights into the different (and shared) experiences faced by consumers and carers. The ATI governing Board of Directors is comprised predominantly of consumers and carers from these service sectors.

In particular, this has involved a continuation of ATI’s advocacy of individualised funding approaches, such as those flagged by the Productivity Commission’s current inquiries into Australia’s disability and aged care systems. ATI is confident that all service systems – including the mental health sector – will move to adopt these self-directed funding approaches. We are also active in current legislative reviews (e.g., Mental Health Act, Disabilities Services Act, Alcohol & Drug Dependency Act), seeking to ensure that the rights of consumers are promoted and expanded.

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