The *Interim Report of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability* was released on October 30, 2020.

At a lengthy 530 pages, the document is based on the Royal Commission’s work from 5 April 2019 to 31 July 2020. Unfortunately, we will have to wait until the Royal Commission’s next *Progress Report* to read about findings from Hearing 6 (September 21, 2020 *Psychotropic medication, behaviour support and behaviours of concern*). In the meantime, check out [VMIAC’s daily summaries](https://www.vmiac.org.au/disability-royal-commission-public-hearing-6-the-use-of-psychotropic-medication-behaviour-support-and-behaviours-of-concern-day-1-summary/) from this hearing.

The *Interim Report* neglects to make any recommendations at this stage, meaning we will have to wait until April 2022 when the final report is released to find out what is in store for Australians living with disability. This will most probably be pushed back even further as a formal request has been made for a 17-month extension of time to present the **Royal Commission's final report** to September 29, 2023.

# VMIAC’s recommendations

For the Disability Royal Commission to:

1. **maintain a human rights lens and approach**, and for this to be synthesised into effective final recommendations which uphold rights as set out in the United Nation’s *Convention on the Rights of People with Disability* (CRPD).

- to end the inappropriate use of psychotropic medication, and to eliminate all restrictive practices in all settings.

From the outset of the *Interim Report,* the Royal Commission purports to adopt a human-rights informed approach, as set out by the United Nations *Convention on the Rights of Persons with Disabilities* (*CRPD*) to which Australia is a signatory. While this remains to be seen in the stark absence of any recommendations that commit to this approach, it is hoped that any and all future recommendations from this will translate the human rights recognised in the *CRPD* into policies and practices that actively promote the right of people with disability to live free from violence, abuse, neglect and exploitation. See [VMIAC’s Position Statement on Preventing and Responding to Violence, Abuse and Neglect](https://www.vmiac.org.au/wp-content/uploads/Position-Statement-on-Violence-Abuse-and-Neglect.pdf).

VMIAC joins the CRPD Committee in urging Australia to create a legislative and administrative framework that protects people with disability from the inappropriate use of psychotropic medication, and to eliminate all restrictive practices in all settings.

1. **extend a trauma-informed approach** to carry through and be applied to all recommendations in its final report.

Additionally, the Royal Commission is committed to adopting a **trauma-informed approach** to all aspects of their work. A trauma-informed approach requires an organisation to ensure its staff understand the impacts of trauma and put in place strategies that minimise, as far as possible, the risk that people may be re-traumatised. VMIAC expects that a trauma-informed approach will be carried through and applied to the recommendations of the final report.

1. **establish a rigorous complaints process** with an effective oversight mechanism in place.

The Royal Commission acknowledges that often **complaints made by people with disability, particularly those with psychosocial or intellectual disabilities, are not always taken seriously or are dismissed as unimportant.** VMIAC is aware and concerned to hear that reporting and investigation processes are often insufficiently independent and are inaccessible or re-traumatising for the complainant.

Nationally, the NDIS Quality and Safeguards Commission is responsible for the regulation and oversight of services and supports provided for people with disability under the NDIS.

VMIAC is aware of NDIS participants’ difficulties in reporting and complaining in a range of contexts, and that incidents are sometimes minimised, ignored or go unreported. VMIAC is deeply concerned that the *Interim Report* finds people receiving NDIS support have been punished for making complaints and fear retribution when not being able to access confidential complaints procedures.

1. **end the use of seclusion and restraints** to control the ‘behaviour’ of people with disability.

The *Interim Report* finds that people with cognitive or psychosocial disability are disproportionately subject to indefinite detention orders, which can mean they are held for a longer period than if they had been convicted. VMIAC understands through this report that repeated incarceration and indefinite detention are linked to inadequate support for people with complex needs when they are outside custodial settings. VMIAC will be keen to find out what the recommendation on this critical issue will be.

VMIAC already has well-established concerns about people with psychosocial disability being held against their will in psychiatric centres ([please refer to our Position Statement on Compulsory Treatment](https://www.vmiac.org.au/wp-content/uploads/Compulsory-Treatment-VMIAC-Position-Paper.pdf)), and continues to support the call for an end to the use of seclusion and restraints to control the ‘behaviour’ of people with disability. Please refer to our [Position Statement on Seclusion and Restraint](https://www.vmiac.org.au/wp-content/uploads/Position-Statement-3-Seclusion-and-Restraint-FINAL-2.pdf) and our [#2 Seclusion Report 2020](https://www.vmiac.org.au/wp-content/uploads/Seclusion-Report-2-2020-1.pdf).

1. **actively promote the human rights of people with psychosocial disability** to live free from violence, abuse, neglect and exploitation.

Alarmingly, around 42 per cent of submissions were from or about a person with psychosocial disability - people with intellectual disability and/or psychosocial disability experience violence at higher rates than others in the community. Furthermore, the Royal Commission’s findings show that adults aged 18–64 with intellectual or psychosocial disability experience higher rates of all types of violence than adults in that age group with other disability types.

The Royal Commission has found that one-half of women aged 18–64 with psychosocial (50 per cent) or cognitive (46 per cent) disability have experienced sexual violence in their lifetime. That is 334,000 women in total.

Compared with men with other disability types, men aged 18–64 with psychosocial disability experience higher rates of emotional abuse and intimate partner violence. One-third of men in this age group with psychosocial disability experience emotional abuse in their lifetime, and one‑quarter experience partner violence.

Those who gave submissions, participated in forums and presented at hearings called for the following:

* The provision of a redress scheme for those subjected to violence, abuse, neglect and/or exploitation within the disability sector
* The Royal Commission to have the power to investigate and prosecute perpetrators of violence, abuse, neglect and exploitation, including the quality and safety of services provided by the NDIS under the NDIS Quality and Safeguarding Framework
* Improved data and research on violence and abuse towards people with disability to address knowledge and service gaps, and examining the adequacy of the NDIS Quality and Safeguards Commission’s data collection, monitoring and reporting systems for upholding the rights and promoting the health, safety and wellbeing of people with disability

See [VMIAC’s Position Statement on Preventing and Responding to Violence, Abuse and Neglect](https://www.vmiac.org.au/wp-content/uploads/Position-Statement-on-Violence-Abuse-and-Neglect.pdf).

1. **ensure that people living with psychosocial disability can have and maintain control over their own lives**

Overall, the strongest theme to come out of the *Interim Report* is the significant challenges people living with disability face in having and maintaining control over their own lives, and the deep feelings of disempowerment and discrimination associated with this effort.

Examples include:

* ‘restrictive practices’ (physical, mechanical, chemical, environmental and psychosocial restraints, and seclusion), their use and oversight
* labelling and criminalisation of behaviours that may be seen as aggressive or confrontational to authority figures such as police or security guards
* inappropriate prescription and overuse of drugs, including treating people against their will
1. **improve inclusivity of LGBTIQ+ and gender diverse people living with disability** in data collection and respond to these specific and unique experiences with sensitivity and acceptance that goes beyond ‘tolerance’.

**Conclusion:**

It is difficult to comment on an *Interim Report* that provides nothing in the form of real recommendations, and it is unclear as to what direction the Royal Commission will take between now and the final report due in 2022. VMIAC hopes that the *Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability* will honour its commitment to the human rights of people living with disability through the elimination of seclusion, restraint, inappropriate psychotropic drug use and through the bolstering of effective complaints procedures, accountability and oversight, and the upholding of the United Nations Convention on the Rights of People with Disability.

We are willing to be patient but please don’t make people wait for further disappointment.