

19 August 2011

Senate Standing Committees on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600
Australia

Dear Committee

ACON welcomes the inquiry by the Senate Standing Committees on Community Affairs' Inquiry into the Social Security and Other Legislation Amendment Bill 2011 Schedule 3 (Disability Support Pension Impairment Tables). As Australia's largest HIV/AIDS community based organisation, we strongly support a fair and sustainable social security system. ACON is, however, concerned that the abolition of the former tables 20 (Miscellaneous) and 21 (Intermittent Conditions) may have unintended negative consequence for people with HIV.

HIV in Australia, with the wide availability of highly active anti-retroviral therapies, is no longer a terminal illness. Most people with HIV live healthy, productive and independent lives. However this does not mean that HIV will not have an impact on peoples' lives. For some people with HIV, disability can be chronic and severe. For other people with HIV, their experience can be episodic or fluctuating. The effects of long term chronic illness combined with the effect of long term use of anti-retroviral drugs also increases the early onset of what are usually seen as ageing related illnesses, such as dementia.

A number of people with HIV who are currently in receipt of the Disability Support Pension have been so for some time. This group has generally been out of the workforce for some time and the health and related levels of impairment of these people is often highly variable, but generally poor. The impacts of sustained work could have a significant impact on their health. At various times their health could be assessed in a way that suggested that they would be capable of work, though a thorough assessment of their health history would show that this is not the case. ACON argues that this history must be taken into consideration through the assessment process.

Among people who are recently diagnosed, a significant number are diagnosed because they are experiencing HIV related illness. The indeterminate nature of a person's response to treatment and the nature of their illness/disability for those

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with a late diagnosis also require appropriate flexibility being built into the impairment tables.

ACON supports the call by the Australian Federation of AIDS Organisations (AFAO) and the National Association of People Living HIV/AIDS (NAPWA) for an additional two tables, equivalent to the former tables 20 and 21. This will minimise negative impacts that these changes would otherwise have on people with chronic and episodic conditions such as HIV.

ACON is happy to provide more information on this matter to the Committee if required. The best person to contact to further discuss matters raised in this letter is Alan Brotherton, Director, Policy, Strategy and Research on 02 9206 2048 or email abrotherton@acon.org.au.

Yours sincerely

Nicolas Parkhill
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