

**TO:**           **The Secretary**  
**Senate Community Affairs References Committee**  
**PO Box 6100, Parliament House, Canberra ACT 2600**  
**Email: community.affairs.sen@aph.gov.au**

**FROM:**       **Val Pawagi**

**RE:**           **Inquiry into the Funding and Operation of the CSTDA – Mobility Aids**

Under the present Commonwealth State Territory Disability Agreement (CSTDA), there is no program or service that deals specifically with the provision or maintenance of mobility aids used by people with disabilities. I believe however that there needs to be such a program.

Currently, the States administer equipment and aids schemes under their health portfolios. The aids and equipment provided is very broad ranging. These schemes also provide mobility aids at the cheaper end (e.g. crutches) and more expensive end (e.g. electric wheelchairs and scooters). Mobility splints are made and provided through the State hospital systems.

Mobility aids can also be hired through hospital and community-based pharmacies but this is money people with disabilities do not have. These mobility aids are often unsuitable or unreliable due to the age of the aid or faults. The extent to which community organisations such as the Cerebral Palsy League and Paraquad are funded by the government to make and provide mobility aids I do not know. I do know that the costs of mobility aids cannot be claimed through health insurance schemes.

The broad nature of State administered aid and equipment schemes means that the mobility needs of people with disabilities are caught up and lost in the broader State health agenda. Also, people reliant on the use of wheelchairs to get around generally have a long wait before they are provided with a replacement. A lack of funding for the more expensive mobility aids is seen as one factor contributing to these delays. Another possible factor is the lack of trained medical engineers and orthotists who are trained in the design and making of mobility aids. People wanting to become orthotists for instance are trained in Melbourne only and less than 20 people qualify each year.

I cannot stress enough the importance of mobility aids for people with disabilities to achieving increased independence in their own home, at school, at work and in the community. Research has shown that boys with muscular dystrophy live longer if they have access to the use of electric wheelchairs as opposed to manual wheelchairs only. Having access to the right mobility aids at the right time is therefore also critical to the self-esteem of people with disabilities. The current arrangements not only compromise the independence of people with disabilities but also their self-esteem.

For these reasons, greater priority needs to be given to the provision of mobility aids for people with disabilities, in particular that group of people who are totally reliant on wheelchairs and scooters to get around.

The best way to achieve this is through the establishment of a national mobility aids program. This would require a transfer of responsibility from State health portfolios to the Commonwealth under the CSTDA. The increased independence and self-esteem achieved from having access to suitable and reliable mobility aids in a timely manner is consistent with the Objects of the Commonwealth *Disability Services Act 1986*. I consider that a national mobility program is needed to ensure access, equity and consistency. At the very least, I would like to see the Commonwealth provide and maintain wheelchairs (manual and electric) and scooters for people with disabilities living in private dwellings.

Findings from the 2003 Australian Bureau of Statistics Disability, Ageing and Carers Survey show that 43,200 people living in private dwellings use a manual wheelchair and 10,000 people use an electric wheelchair. Another 11,800 people use scooters. In total, there are 65,000 people living in private dwellings who use a wheelchair or scooter.

*(Electronically signed)*

***Val Pawagi***

Friday 4 August 2006