



Improving the Life Chances of Disabled People (January 2005)

Feedback from Action for Advocacy

Introduction

Action for Advocacy welcomes the 'Improving the Life Chances of Disabled People' strategy. In particular we are pleased that advocacy has been recognised as a vital service that can empower and support disabled people to access opportunities, make choices, and encourage inclusion in services and communities. We welcome this opportunity to give feedback on the advocacy recommendations contained within the strategy and to inform you of current developments that may be of interest. There currently exists a healthy and diverse advocacy sector in England. By working together we can hopefully increase access to quality advocacy services for all disabled people who need them.

About Action for Advocacy (A4A)

A4A is the central point of information on advocacy for advocacy providers, the wider voluntary and community sectors and members of the public needing advocacy support. We have built a reputation as one of the UK's leading authorities on the development of effective advocacy services for vulnerable and disempowered people and aim to advocate for advocacy at a strategic level as well as provide the advocacy sector with essential support and information services.

We are also co- chairs of 'The Advocacy Alliance', a coalition of national charities and the advocacy and user involvement sectors. This alliance is currently campaigning to ensure people with significant communication disabilities can have their voices heard and make choices about the services and support they need.

Addressing Gaps in Advocacy Provision

We are pleased that the strategy highlights the urgent need to increase the availability of advocacy services for disabled people.

Advocacy is an essential service to enable disabled people to have their voices heard. However, research undertaken by the advocacy alliance, and outlined in the report 'Advocating for Equality', highlights the fact that despite a growing interest and support for advocacy in relation to health and social care, service provision is currently patchy. Any improvements in service availability brought about from initiatives such as Valuing People, whilst welcomed by users and providers of independent advocacy have developed from such a low base of provision that there are still gaping holes and provision falls far short of what disabled people want to see and need.

We are especially concerned that without some joined up thinking around the development and provision of independent advocacy services and the setting of specific targets and indicators that will encourage local authorities to identify who needs advocacy and ensure funds are available for adequate provision locally, provision will remain patchy and the people who are most in need of support will not be able to access it. We strongly believe this strategy provides an opportunity to address this.

Specifically we would like to see a statutory requirement introduced and placed on local authorities to produce a local advocacy plan, which will outline a plan for the development and funding of advocacy services for those people who need advocacy support. This should be developed locally and involve advocacy schemes, users of advocacy, disabled people and disabled people's organisations. It should outline how advocacy provision will be developed in the area, how different groups will be served and how funding dedicated to advocacy will be spent.

This is in line with the recent recommendations of the Joint Committee on the Mental Health Act who stated in their report they '*recommend that local authorities and health authorities be placed under a statutory obligation to produce local advocacy plans for the development and funding of independent health advocacy services to meet the needs of all service users, including mental health service users.*'

Defining Key Advocacy Principles.

We are pleased that advocacy is recognized as a service that empowers disabled people. Key advocacy principles have developed over the past thirty years that clearly distinguish advocacy support from other form of support such as advice. This includes stressing the importance of remaining independent from service provision so as to minimize conflicting interests, supporting people to make informed choices, and supporting people to articulate their views, in a non-judgemental way.

We adopt the following definition of advocacy, taken from the Advocacy Charter.

"Advocacy is taking action to help people say what they want, secure their rights, represent their interests and obtain services they need. Advocates and advocacy schemes work in partnership with the people they support and take their side. Advocacy promotes social inclusion, equality and social justice."

Currently we estimate there are around 800 advocacy organizations in England, supporting many thousands of individuals to speak for themselves and have their voices heard. Most of these organizations are user led and have been established to provide dedicated advocacy services only, although some will provide advocacy services alongside more general information services. It is our understanding that, the majority of CIL's, local advice centres and direct payment support services do not at this time have dedicated advocacy workers. Although they may identify themselves as advocates for local people, these organisations would not normally be providing an advocacy service to individuals, in line with key advocacy principles identified in the Advocacy Charter and other advocacy standards highlighted on page 175 of the strategy.

Therefore whilst we welcome the recommendation (4.3) for user led organizations to be available in each locality, and for many of them to explore the potential for providing advocacy, we would question whether these organisations will always be best placed to provide local advocacy support. This is especially the case as they would also be expected to provide advice and guidance in relation to individual budgets and employing personal assistants, a role that an independent advocate would not normally undertake. We therefore hope that in recommending improvements to the availability of independent advocacy services, the differences between advocacy provision, general information and support services, and direct payment support services are clearly explored and clarified. In addition we would want the experience and value of existing advocacy providers to be recognized and play apart in the future delivery of advocacy provision.

Advocacy and the Quality Performance Mark

We were pleased to see the Advocacy Charter mentioned in the strategy. Over 75 organisations contributed to its development and over 3000 have been circulated throughout the UK. It is a document designed specifically to define and promote the key principles of

advocacy mentioned above. It has been signed up to by hundreds of organisations, including the Association of Directors of Social Services, MIND, Age Concern, CEMVO, SCOPE, RNIB, etc. A recent assessment of the impact of the Charter has shown that it is widely used and accepted as a tool for defining key advocacy principles in training, policy development and commissioning of services across the UK.

We recognize the need for Advocacy Services to be accountable and meet minimum standards. To this end, we are developing a quality standard framework for advocacy organizations based on the Charter and meeting the characteristics of effective standards outlined in the Strategy on page 175.

The 'Charter in Action' Quality Performance Mark will accredit organizations in respect of their organizational policies and procedures as well as advocacy practice and performance. The system is in the process of being developed and piloted in consultation with advocacy organisations. Due to be launched in October 2005, funding is currently being sought to enable us to support the full range of advocacy organizations across the country, to apply for and obtain accreditation. We envisage the Charter in Action programme will be important to drive up standards and support the continued development and commissioning of quality advocacy services to meet local need.

Action for Advocacy has many examples of good practice in the provision and development of advocacy across the country and is working with hundreds of organisations to ensure effective advocacy is available to people who need it. We would hope that the work of the advocacy sector is recognised and promoted in all attempts to improve advocacy service delivery for disabled people and would be pleased to work more closely with the government to clarify the role advocacy services have to play in implementing the strategy.

I enclose further information on advocacy and our services and would urge you to contact me to discuss any of the issues raised.

Yours faithfully

Karen Mellanby

Policy and Communications Manager
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