



EMERGENCY MANAGEMENT REFORM PROJECT - DISCUSSION PAPER 2022



Children With Additional Needs
Working Group

THE COLLABORATORS FOR THIS PROJECT WOULD LIKE TO ACKNOWLEDGE THE FIRST CUSTODIANS OF THE LAND WHICH WE LIVE AND WORK. WE PAY OUR DEEPEST RESPECTS TO ELDERS PAST, PRESENT AND EMERGING.

EXECUTIVE SUMMARY

This document provides recommendations from both community members and service providers. Consulting with the community and working with them to identify how they want to receive information and how services can be tailored to support them, will only increase the effectiveness of our work and enable community recovery into the future. The report will highlight how families who have children with additional needs were impacted in the 19/20 East Gippsland bushfires and future opportunities and key learnings.

The Bushfire Recovery and Resilience Project (BRRP) has three key outcomes including:

- 1) building the capacity of parents/carers of children with additional needs across East Gippsland;**
- 2) mapping and documenting pathways for children/families in ways that are easy to understand; and**
- 3) improve feedback from children and families to improve support services.**

This project has emerged from the issues identified through the Children with Additional Needs Working Group. This paper specifically discusses feedback received from families and service providers across East Gippsland and highlights the challenges and opportunities which presented during and after the Black Summer Fires.

As a result of the feedback from families, some smaller outputs (actions) have been implemented recently, including the distribution of a Social Script for Planned Burning undertaken in collaboration between the BRRP, the Department of Environment, Land, Water and Planning (DELWP) and Communicate Speech Therapy and a Social Script for COVID Vaccinations in East Gippsland.



As a result of the feedback from families in East Gippsland, key projects have now been identified as priorities to seek resourcing for to implement. These include:

- Preparedness Planning through Person-Centered Emergency Planning
- Capacity building for Emergency Responders through a working group
- Safer refuge/relief centres for families and carers of children with additional needs
- Pathways to recovery by establishing a strong community of practice with private service providers and looking at the way funding is granted
- Accommodation Project – seeking alternative accommodation arrangements and identifying a key lead
- Application of the Vulnerable Person’s Register through the East Gippsland Region during the Black Summer fires.

The stories from families and services require a genuine commitment and funding for everyone involved in emergency preparedness, response, and recovery. It should be noted that many of these experiences can and should be considered across all emergencies/hazards.

The impacts of the 2019-20 bushfires and COVID demands us to listen to communities and have a willingness to actively deliver on what we are being told by families and service providers. This is our opportunity to understand our obligation to follow through on the recommendations and actions for us to be prepared for future disasters, particularly for families with children with additional needs.



**Children With Additional Needs
Working Group**



BACKGROUND

The Bushfire Recovery and Resilience Project (BRRP) provides specific support services to families with children with additional needs, supporting the townships of Bairnsdale, Lakes Entrance, Orbost, Cann River, Buchan and Mallacoota. The BRRP builds the capacity of parents/carers of children with additional needs across East Gippsland; maps and documents pathways for children/families in ways that are easy to understand and improve feedback from children and families to improve support services. The aim of the project is to improve service access and how children with additional needs and their families are supported before, during and after emergencies.

The BRRP began May 2021 and is due to continue until 7 July 2022 (as per funding agreement). The project has been funded by Bushfire Recovery Victoria (under LER) and has been endorsed and supported by the Children with Additional Needs Working Group.



The Coordinator of the BRRP has been working with many East Gippsland communities to understand their needs, and where appropriate, offer and enable pathways for individuals, families, and communities to assist through bushfire recovery. It is important to note that 'recovery' has meant many things to many families and communities. It should also be noted that the COVID 19 Pandemic was announced barely six weeks after the Black Summer Fires. This has had a significant impact of families, service providers and communities to fully realise recovery. Moving into the third year since the Black Summer Fires were deemed 'under control', communities have struggled to connect (with each other and providers), hold community activities as recovery events and maintain contact and engagement with organisations/providers. Working with and hearing from families and service providers (private, not-for-profit and Departments) has meant that fire 'recovery' has worked closely with the effects and impacts of COVID 19. To this end, the collection of data (from stories and surveys) has focussed on a number of issues faced outside fire 'recovery'. All information has been captured, particularly from families, to address their ideas and thinking about what is helping them to 'recover' and what the blockages may be. Observations from service providers through fires and COVID has also been insightful and together, information collected has provided a good sense of what individuals, families and communities require.

A workshop in late 2021 with Children with Additional Needs Working Group members was held to present the data that has been collected. This included two tables – 1) themed insights collected from families and 2) themed insights collected from service providers. Also discussed at the workshop was achievements from the work undertaken to date. As a result of the workshop, further opportunities/actions were added from members of the Children with Additional Needs Working Group (CWANWG) with a priority activity being undertaken to identify future needs/directions from the information collected thus far. Please refer to Appendix 1 – Summary of the Bushfire Recovery and Resilience Building Project – Workshop with CWANWG which provides a summary and associated recommendations of from the day. All members of the CWANWG were invited (52 members including East Gippsland Shire Council, Gippsland Lakes Complete Health and other key stakeholders).

Key information to be read in association with this document includes:

Appendix 1 – Summary of the Bushfire Recovery and Resilience Building Project – Workshop with CWANWG

Appendix 2 – Family table with additions from CWANWG Workshop held on 16 December 2021

Appendix 3 – Service Provider table with additions from the CWANWG Workshop held on 16 December 2021

Appendix 4 – Key Achievements and highlights from BRRP to December 2021

The purpose of this data collection was to:

- 1) Identify the needs, challenges and opportunities of individuals, families and communities;
- 2) Identify the needs, challenges and opportunities of service providers operating in East Gippsland
- 3) Identify areas where there is a collective agreement between families and service providers and work to build families/carers capacity, map and document pathways for families and carers and to work towards a way to capture feedback from children/families for service providers to use.

Top two priorities from the Workshop identified include:

1. Continue funding Bushfire Recovery and Resilience Role (5 votes)
2. Actions and Emergency Response strategies to be implemented to support wellbeing during emergencies (combined with number 10 priority – Emergency Response Reform) (5 votes)



Focus

This paper will focus on Priority 2 – “Actions/Emergency Response strategies to be implemented to support wellbeing during emergencies” which has been informed by the collection of information from families and service providers and qualitative evidence from communities to highlight the challenges, needs and future actions/opportunities and presented to Emergency Management Organisations/Not-for-Profits/and levels of Government to:

- 1.Highlight the voices from families/service providers regarding emergency response (preparedness, response, recovery);
- 2.Promote the opportunities and identify relevant decision makers for their ongoing considerations in future planning; and
- 3.Share areas of work that has been undertaken by the BRRP to meet the needs of family/communities/providers.

Process

Ten families and 14 service providers across East Gippsland were approached during a six-month period to participate in surveys and sharing of stories with the aim to understand families/service provider experiences through and post fire recovery. Families were encouraged to discuss anything during my time with them as “recovery” means different things to different people. Information is kept de-identified. Contributors to the project were contacted to ensure any information collected from them directly was able to be shared as a part of the project.



WHAT WE HEARD FROM FAMILIES

Issue	Challenge	Options/Opportunities
<p>Fires</p>	<p>*Most families confirmed that no service providers reached out to them to see how the family/child were going and that service ceased through the period</p> <p>*All families had different experiences. Some chose to stay to keep family in routine, some evacuated.</p> <p>*At least one family who evacuated were advised their home burnt later to be told it hadn't</p> <p>*Some recovery activities were run but were not 'inclusive' events and required the parent to stay or have a support worker support the child. Some children missed opportunities to engage.</p> <p>*Many families reported a change in children's behaviours however pathways to specialist counselling were unavailable or not asked for.</p> <p>*Case workers assigned to families through recovery did not have a disability background and therefore the right supports were either unavailable or it was easier for the families to do it by themselves.</p>	<p>*Better communication by service providers (also picked up in service provider outcomes) Include things like website/social media/communication/resources</p> <p>*Work up case studies for those that stayed and those that chose to leave. What worked well? Access to Person-centered Emergency planning for parents/carers *Engage community services in emergency response</p> <p>*Better systems at place by emergency responders to keep families informed if they chose to evacuate</p> <p>*Ensuring all recovery programs are inclusive and are equipped with disability support workers to ensure inclusive practices for children with additional needs. Recovery centres and emergency responders to do training – is there a position to support?</p> <p>*Trauma and counselling to take into consideration children with additional needs including those who may be non-verbal. *Counselling to be offered as a family unit, not just individual *Easier pathways – how can existing provider be resourced to do this? Somewhere to move families to temp accommodation while receiving counselling</p> <p>*Case workers working with families/carers who have children with additional needs have experience in disability, including pathways to services and trauma counselling. When in attendance, have a Disability Support worker to help with the children while discussing issues with families/carers. Access to Disability Advocates at all times Gippsland Disability Advocate resourced before, during and after emergencies Improve intake to include information about needs Call local case managers to assist who have already been working with families</p>



	<p>Fire refuge areas and relief centres require better supports for families who have children with additional needs.</p> <p>I. Safety of children in large relief centres was a concern</p> <p>II. Messaging of emergency personnel located at fire refuge areas and relief centres caused panic</p> <p>III. Better access to advocates/qualified people</p> <p>IV. Access to appropriate accommodation for families with children with additional needs</p> <p>V. Access to social stories/sensory tools</p> <p>VI. Difficult to see emergency responders moving in and out of community with no options for families to leave</p> <p>VII. Some evacuation refuge areas were not appropriate for the need.</p>	<p>*Designated safe zones for children with additional needs if child/ren are required to stay because of the emergency</p> <p>*Spaces and tools to assist – what is there for children – sensory items to be supplied?</p> <p>*Ability to go to ‘safe’ relief centres If family have safety concerns with ex-partners as a result of domestic violence etc</p> <p>*Calmer conversations with those who are at evacuation points with local responders rather than those from out of town.</p> <p>*Training of staff including defence forces to manage self and others</p> <p>*Financial resources and entry given to advocates or people with better knowledge to work in relief centres</p> <p>*Funding for Gippsland Disability Advocacy group</p> <p>*Carers Victoria – Bring this organisation into the conversation as a partner of emergency management</p> <p>*Government to offset costs of accommodation if families must stay in motels due to their children’s additional needs.</p> <p>*Have funding available for evacuation for families who have children with additional needs</p> <p>*Creation of a suite of tools that can be used to help families/carers help their child/ren (planned burning and respite area specific)</p> <p>*Website to house location in communities where they can be accessed</p> <p>*Better communication with community about egress and access. Continue to engage with communities and manage perceptions</p> <p>*Relief centres/refuge areas to be purpose built and safe</p> <p>*Safe areas for children to be away from animals.</p> <p>*Safe spaces and more training</p>
--	--	---

	<p>VIII. Relief centres to have animals away from area. This can be seen as a blocker for some families as children have ultra focussed attention which may cause the child or the animal harm</p> <p>IX. Families with additional needs children felt disempowered when attending relief centres.</p> <p>*Supports by organisations appeared to be inconsistent. Perceptions that those on 'lists' were well looked after with grants/supports while others who may have missed having their names registered for opportunities may have received no supports</p> <p>*Some families experienced several calls and were unable to remember who they were so calling back was difficult when they were experiencing a real need.</p> <p>*Planned burning triggering for children with additional needs</p>	<p>*Relief centres to have the right supports (not necessarily well-meaning volunteers or staff who do not respond well to high pressured environments) available for families with additional needs children. A complete re-think of the way relief centres are run and are accessible is needed.</p> <p>*Having access to advocates at relief centres to help families in need</p> <p>*Pathways to supports are clear and transparent. Databases that are collecting information to be used once to tell a family story. Opting in or out to be done as a part of collecting initial information by service providers/organisations working with families Safe spaces and training. Service providers paid to support family and if possible, backups in place</p> <p>*Keep connection to families through recovery to one person. System designed with EGSC, families and other emergency providers</p> <p>*Social story created for families in collaboration with Emergency Services (underway). Seek more alerts to prepare community who are still triggered Website to house/share with schools and others</p>
	<p>*Funding for disability advocates to be consistent and for at least 2 years post fires to enable better pathways through emergency responses including fires</p> <p>*Confusion, particularly for parents/carers with a neurodiverse thinking pattern or intellectual disability could not understand some of the requests.</p>	<p>*Funding to be long term and access to relief centres mandated. Service providers as well GDA Support – through royal commission outcomes</p> <p>*Simplify messaging provided to community so families can make the right decisions. One stream of messages (rather than on social media and emergency Vic app). More inclusive opportunities for families at community meetings (and accessible) Carers Vic or others work on resources with emergency services to ensure accessibility</p> <p>*Community Recovery Committee to be more inclusive of hearing families' voices</p>

<p>*Having voices heard during and post fire</p> <p>*Families were left separated given the number of parents/carers volunteering or paid work in emergency response</p> <p>*Recovery has been slower in communities due to covid</p> <p>*Families were asked too soon about their needs. Money spent on things that organisations thought were the right things, but families said they were not relevant.</p>	<p>*Provision of more support for families who have immediate family members fighting with local emergency management agencies.</p> <p>*Support for families separated as a result of parent/children evacuating and the other caregiver remaining at the home to save their home.</p> <p>*Support service providers role in emergency support</p> <p>*Have a process where communities set priorities rather than organisations vying for funding for recovery, particularly on longer term recovery. Stagger funding opportunities as immediate/medium/long term</p>
---	--



WHAT WE HEARD FROM SERVICE PROVIDERS

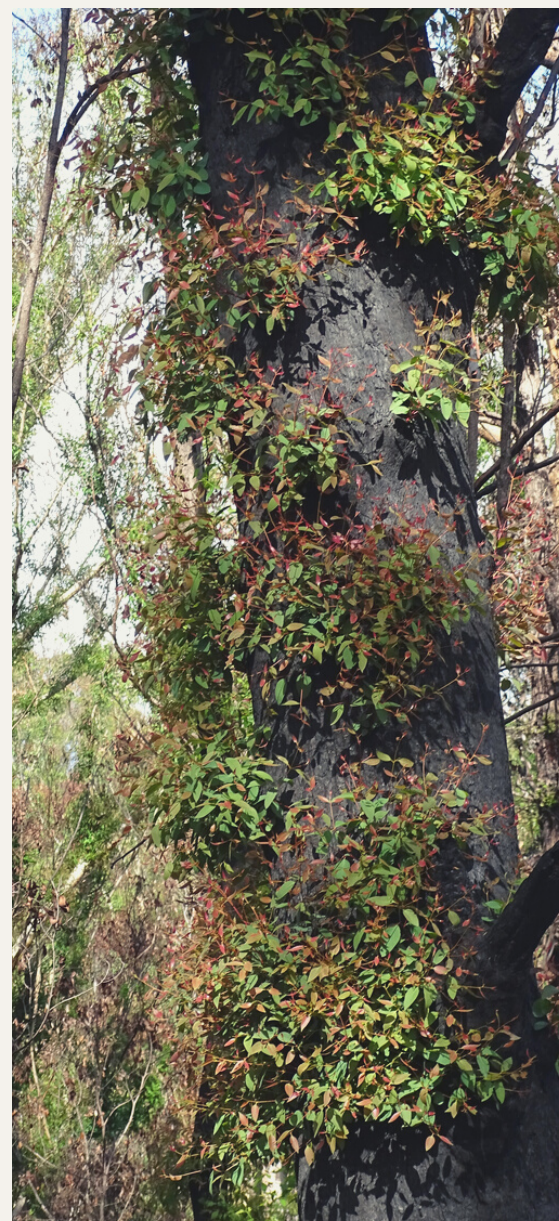
Issue	Challenge	Options/Opportunities
<p>Fires/Covid</p>	<ul style="list-style-type: none"> *Families disengaged *Business models disrupted *Service delivery disrupted *Some services grew *Families found it difficult to engage in an online platform *Staff loss because of the fires *Need staff on the ground immediately after fires to manage influx of referrals. 	<ul style="list-style-type: none"> *Activity packs delivered directly to participants and their families *Online telehealth *f2f where could *Phone calls *Use of existing contacts in the community to connect – but need community leaders to help *Worked with families on their needs over last 18 months *Worked at some relief centres where invited *Newsletters *Continue to promote the Person-centered Emergency Planning (PCEP) process to help families prepare for emergency responses *Relief centres are poorly equipped – we need to do more to help them cater for the minority *Have allied health staff act as “consultants” to assist emergency response. This shouldn’t be on a volunteer basis. *Produce ‘evacuation packs’ to help manage prepare families *Share resources across community – everyone should have the same information and use it. *Build capacity of emergency services to improve their language to be more inclusive. *Billeted accommodation is needed to help families/carers with additional needs children (there were people wanting to offer but there was no way to do so) *Everyone needs to understand the rights of the child and their diversity of needs *Creation of social stories, sensory resources in evacuation/relief/emergency centres (Birdie and the fire stories) *Stronger communication to help families know who to call if they need help. Often this is set up after a disaster and it’s too late. Need better advanced planning and it made public to members of the community *Mobilise government services to better support children with additional needs. Ensure the channelling of funding is commensurate with the need by organisations and not for profits. (Local community service organisations) *More funding to implement the PCEP model *Community websites/letters *Work with EGSC *More training *Talk to EGSC Recovery/Response Emergency Management Committee and BRV/IGEM about what can be put in place *EGSC membership for crisis response champions from sectors that support all aspects of family support

Issue	Challenge	Options/Opportunities
		<ul style="list-style-type: none"> *Vulnerable Persons Register relevance and importance (and up to date) *Evacuation Centres – include expertise from community service orgs (local ones) *Find a place to stay – how could local families/nearby be engaged to offer suitable accommodation Case management Response – use specialist knowledge that exists. Harness all local expertise available. Not bring in staff without local knowledge across local organisations *Better local community services expertise engaged with emergency response.
Communication	<ul style="list-style-type: none"> *Service Providers and families had to pivot to online platforms *Some families don't have equipment or knowledge to be online *Communication issues – internet availability in rural/remote areas *Acknowledgement that communication with families could have been done better, especially through fires *Some families increased engagement to keep connected *Being bound by confidentiality can be difficult to grow and share experiences 	<ul style="list-style-type: none"> *Step by step guidelines to manage online appointments for families *Wait until families are ready *Clarify any confusion on when f2f could resume *Newsletters *Better training more broadly for community for online appointments *Better connectivity in rural/remote areas *Stop fixing and ask community what would be most helpful *Prepare a 'recipe' book of how to work with each community – who are the leaders, how to gain entry, what to do/not to do. This will help community engagement. *We need to listen more – if we are not listening, what are we doing here? *Identify a support process for families – NDIS and non-NDIS participants. *Raise issues with local members and EGSC/IGEM *Families should not have to share story repeatedly to access funding. The back end should work better. *Infrastructure upgrade repairs? Done?
Continuity of service delivery	<ul style="list-style-type: none"> *Waiting for the right time to help. Some were not ready to be helped, and that's ok. Not one size fits all. *Business was directly impacted so service delivery was hard. *Some staff and managers struggled with trauma of events 	<ul style="list-style-type: none"> *Need to have better options for services outside region to swing in and help (Allied health) (but helped with local needs) *Need for organisations within the region to enable others from outside to help. No help available was to the detriment of families. Its ok to let others in *A community of practice (locally) established by Service Providers to identify the needs of families and organisations through emergency response *Better clarity of the rules through covid – some families missed out on therapies due to keeping children out because they thought they had to. *Better coordination between government and private operators. Many therapists have missed what communities may need. Better partnerships

Issue	Challenge	Options/Opportunities
		<p>(through availability in meetings or even distribution of minutes and agendas- and paid for therapists time, may take the pressure off organisations)</p> <ul style="list-style-type: none"> *Social media – wasn't a huge uptake on private business pages. Are there any other options? (it takes consistent effort by a bunch of people to increase social media presence) *Better training offered for small business to help business owners address their own trauma and further support for their staff *Education could be more open to having allied health therapists working with schools to help *Identify who can represent families in Emergency Management Planning for Response and Recovery
Grants	<ul style="list-style-type: none"> *Not representative of community need *No access to grants as a business which made operating difficult in COVID due to rigid rules 	<ul style="list-style-type: none"> *Need to work better together and not in silos for grant applications *Government to wait longer so the need for bigger projects (more money) is clearer *Organisations (particularly statewide based) to acknowledge advice from regional staff *Local feedback about who and how support is delivered
Advocacy	<ul style="list-style-type: none"> *Access is very limited and advice, particularly for those living with a disability or being cared for is under acknowledged. 	<ul style="list-style-type: none"> *Better access to relief and evacuation centres through emergency response *Better and more consistent funding for advocacy agencies through emergency relief and recovery
Donations	<ul style="list-style-type: none"> *Distribution was very difficult *Holding large volumes of donated goods. *Not consistent in approach for who needed what 	<ul style="list-style-type: none"> *Better coordination for distribution and storage
Other key observations	<ul style="list-style-type: none"> *Support at times was very disjointed and not collaborative by organisations *Not enough being done to support families through any system. *Bushfire Recovery and Resilience role has been a positive addition to the community *Not enough community engagement *Vulnerable Persons Register. What does it mean to this project and to us? 	<ul style="list-style-type: none"> *Continue funding Bushfire Recovery and Resilience Role to help continue to find pathways for local communities *Continue to do a reflection piece – what has worked well, what have we learned so we don't do the same thing during the next event. *More work to help understand Vulnerable Person's Register and strengthen communication about its use and need *Relief centres – need to identify more avenues for help (Accom, support/child friendly spaces). Needs to be flexible (AVO example) *2 families with additional needs had to move to different evacuation points

Issue	Challenge	Options/Opportunities
	<p>*Acknowledgement that there is a heightened state of children and families in the East Gippsland Region. It is a concern. The ongoing challenges of COVID has been huge on families – much greater than others from across Gippsland.</p>	<p>*Intake process needs improving (nothing about family needs or children. Can match staff knowledge/skills with needs of people in the community. *Case workers with some knowledge/background in disability is needed.</p> <p>One participant wrote: Both documents are detailed evidence based of systemic strengths and limitations. This information needs to be used to inform a case for systemic review of systemic responses to emergencies (eg – specific focus by Vic review? – Specific focus for NDIS review). Might be assisted if these documents were presented as an “independent community audit” of the bushfire response as an example of wider systemic failure and of experiences which will be repeated unless the failures are addressed.</p>

This work needs genuine engagement from agencies/services involved in emergency management. The impacts of the 2019-20 bushfires and COVID demands us to listen to communities and have a willingness to actively deliver on what we are being told by families and service providers. This is our opportunity to understand our obligation to follow through on the recommendations and actions for us to be prepared for future disasters, particularly for families with children with additional needs.



Proposed Emergency Management Reform Project Plan

(DEVELOPED AT A POINT IN TIME AND MAY CHANGE)

A number of key outputs have arisen as a part of the work undertaken in LER Round 1. Through the collection of evidence, a broader Emergency Management Reform Project has been identified as a critical follow up from LER Round 1. Information has been collected from families and Service Providers to inform this project.

Main Outputs (What)	Why	Outcome	Collaborators/Partners
Preparedness Planning with 15 families across East Gippsland. Sitting with individual families/carers of children with additional needs, a "Person-Centered Emergency Planning" (PCEP) workbook is used to assist families to identify their planning needs	Families told us that at times, they were unaware of where to go. Some families indicated they would have evacuated however with better planning; they would have been able to execute more confidently any plans. Some families reported that they were unable to seek accommodation at a relief centre as it was unsuitable for children with additional needs, or they had spouses with Intervention Orders and were unable to share the same space safely. Families reported that if they better understood preparedness, and understood their choices, it would have been safer.	At least 15 families in East Gippsland are more prepared for emergency response. Case studies are prepared to be shared with the Australian Disaster Resilience Institute to be shared nationally	GDAI/DELWP/CFA/Red Cross/Carers Victoria/Families/VALID
Capacity building for emergency management - Working with Emergency Managers to improve systemic issues including communication (preparedness, response, and recovery) through a working group which looks at family and service provider feedback collected during LER Round 1.	Families told us of the chaos and confusion of the way things were communicated as a part of the response effort. One example was an emergency responder telling a relief centre they were likely to die causing huge stress to families (Evidenced in the collection of a story from a family). This resulted in this family no longer trusting a relief centre which may put the family at future risk. Sharing of appropriate practice and stories of where things went well (reference planned burning)	Emergency Managers report having an improved understanding from an inclusion perspective and a commitment to change in practice is documented	FFMV/BRV/Regional Controller/EGSC
Safer Refuge/Relief Centres - working with EGSC to have a voice for children with additional needs to ensure they are in a place of safety through: -social stories at relief centres -access to sensory tools -access to more advocates and local help at place -Ensuring better communication with CRCs to ensure feedback and planning is incorporated	Families told us that there were many challenges being in a relief centre. Children's safety, the way families/carers were treated by staff and volunteers and having access to sensory tools/social stories would have encouraged a more positive experience for children with additional needs	Relief Centres support families/carers of children with additional needs	EGSC/Red Cross/CRC's

Main Outputs (What)	Why	Outcome	Collaborators/Partners
Pathways to recovery - better connection of resources so children do not fall through the gaps in recovery - Encouraging better collaboration between local organisations and private service providers - Investigate a community of practice within private service providers to help response outside normal funded organisations.	Families told us that recovery activities, trauma counselling, removal of services from outreach areas is having a prolonged impact on children with additional needs ability to recover. Also included are discussions regarding case management being able to work with families who have a disability and reasonable adjustments are made to ensure case workers are matched appropriately to families.	Organisations and Service providers work more proactively together to meet the needs of families/carers of children with additional needs	CWANWG membership
Accommodation project - Investigate arrangements between Carers Victoria (or another closely aligned organisation) and families/carers to access external accommodation away from emergency areas (opt in)	Many families indicated they had to pay at great cost motels to remove themselves from relief centres as they were deemed unsuitable. Some families reported using their life savings to accommodate their families to keep them safe.	Systemic change occurs to enable a safer pathway of accommodation for families/carers with additional needs	Carers Victoria/Red Cross/WCOSS
Application of Vulnerable Persons Register to East Gippsland - an independent paper will be developed which undertakes a look at the Black Saturday Fires, the Discussion Paper (in 2019) and the implementation of VPR in East Gippsland during the Black Summer Fires	Anecdotal evidence suggests that the VPR application across the East Gippsland Region requires further scrutiny. Conversations held across some communities raised enough questions to investigate further as the VPR was not necessarily triggered by the Incident Control Team (IMT), rather the communities themselves. Work to further explore this, seek to understand experiences and make recommendation in an independent way is required. This is important as many families had not even heard of the Vulnerable Persons Register or what it may have meant for them.	Recommendations from the research to highlight where systems improvement can be made to managing the vulnerable person's register for East Gippsland residents An increase of families are aware of the vulnerable person's register and that they can opt in for use	EGSC/IGEM

NEXT STEPS



1) Activate the search for funding grants to continue outputs of this project (as per Proposed Emergency Response Reform Project Plan)

2) Distribute this paper to key stakeholders and partners for action