Monday 1st June 2026

Dear Committee members,

Re: National Disability Insurance Scheme Amendment — Securing the NDIS for Future Generations Bill

About Us

Inclusive Rainbow Voices (IRV) is a community led, intersectional Disabled People's Organisation, by and for LGBTIQA+ people with disability. It is the only national advocacy organisation dedicated to representing LGBTIQA+ people with disability. IRV was founded in 2021 by a group of LGBTIQA+ people with disability to address the lack of representation and understanding of LGBTIQA+ people with disability. Its vision is equity and justice for all LGBTIQA+ people with disability.

IRV's work focuses on advocacy, peer support, education, research and movement building to achieve its goals. IRV provides a platform for lived experience leadership, supporting community members to shape decisions that affect their lives. The organisation delivers training, resources and advice to help services, governments and institutions better understand the intersections of culture, faith, and sexual orientation or gender, and how these shape people's health and wellbeing.

Through partnerships with advocacy and community organisations, and government, IRV promotes culturally responsive approaches to human rights, health and social inclusion, ensuring that all LGBTIQA+ people - regardless of background - can live with safety, dignity, and pride. We thank you for the opportunity to provide feedback to the Securing the NDIS for Future Generations Bill, and would welcome further consultation on all aspects of the proposed reforms.

Recommendations

The proposed changes associated with this amendment fundamentally undermine the core intent and design of the National Disability Insurance Scheme (NDIS), and as such require far more thorough consideration than is possible within such time limits.

1. **Scrap the proposed Securing the NDIS for the Future Generations Bill, which risks reducing Parliamentary oversight of governmental and Ministerial decision-making that impacts the NDIS and the human rights of LGBTIQA+ people with disability**
2. **Develop a plan to reduce costs while prioritizing the human rights of people with disability, based on an analysis of all prior inquiries and consultations on the NDIS.**
3. **Ensure that all public comment by the government regarding the NDIS respects and values the lives and voices of people with disability, and calls out ableism, discrimination and the devaluing of disabled people.**
4. **Scrap eligibility restrictions and the reconsideration of current NDIS participants.**

5. **Ensure that functional capacity is not considered without exploring the impact of intersectional marginalization on LGBTIQA+ people with disability.**
6. **Maintain individualized Early Intervention packages to maximise the benefits of early intervention in reducing life-long disability supports costs.**
7. **Scrap plans to blanket reduce social, civic and community participation funding, and ensure that any reductions in this funding explicitly and individually consider the impacts on the human rights of the participant.**
8. **Ensure the Inclusive Communities Funding package explicitly addresses LGBTIQA+ people with disability and their needs to access community.**

Overview

The National Disability Insurance Scheme is an extraordinary and transformative reform. Built specifically to realise the human rights of people with disability in Australia, and in alignment with the Convention of the Rights of Persons with Disabilities (which Australia has ratified), and the National Disability Strategy, it was beginning to deliver some remarkable outcomes across the country.

Even if patchy and uneven in practice, it is resetting the expectation around people with disability: in place of service provision models deciding the limitations of 'inclusion' and 'autonomy' in Australia, people with disability were increasingly in charge of their own lives, and NDIS supports was increasingly enabling their participation in the broader community. For some LGBTIQA+ people with disability who have successfully joined the scheme and received appropriate plans, this has been transformative. The NDIS, in other words, though still requiring work, is also achieving its intended outcomes.

Make no mistake. The proposed changes to the NDIS Act can and will undermine every benefit of these hard-fought-for wins. The Minister has claimed that he is protecting the NDIS from 'the other side,' but with friends like these, disabled people don't need enemies. The changes proposed by the reforms not only undermine the structure, philosophy, intent and legal framework of the scheme. They also put far too much power in the hands of politicians to slowly, over time and without oversight or accountability, modify the heart of the NDIS.

Much has been made of the 'social license' for the NDIS being undermined by its increasing costs; yet the responsibility for this 'social license' lies not with people with disability but with the Minister. The government has routinely undermined the 'social license,' demonstrated in the Redbridge strategy and the ongoing leaning into the ableism of Australia society to justify cutting funds to disability support.

The dismantling of the 'social license' in order to justify cutting eligibility and the nature of supports is appalling, especially given the NDIS already has powers to limit its spending, and has endlessly consulted with people with disability about how to reduce costs for the entire duration the NDIS has been in place. The solutions that need to be implemented have been provided to government over and over again. They simply need the political will to stand up to the vested interests. Unless the government works out how to regulate the private market it has created around disability support, people with disability will be shortchanged, and the cost of the NDIS will continue to grow. The proposed amendments do not address this need.

The proposed reforms would undermine the realization of the human rights of people with disability in Australia. This is a failure of the government's commitment under the CRPD, under

the National Disability Strategy, and the very commitments baked into the NDIS Act. It also fails to recognize the importance of the social model of disability, and signals a shift back to holding people with disability responsible for the inaccessibility of the Australian community, including services, the built environment and social attitudes. We encourage the government to rethink its approach to amendments to the NDIS, and centre people with disability and their human rights as they do.

Ministerial powers

The dramatic increase in ministerial powers under these reforms is alarming and should be rethought. It draws matters such as setting prices or blanket changes to participant plans into the realm of politics rather than in response to evidence.

It places people with disability, especially LGBTIQA+ people with disability, at risk of having their lives upended and undermined without recourse, and certainly without the oversight of Parliament.

The changes give the Minister the capacity to claim that plans recognize the support needs of people with disability while denying them the funding that would allow them to fulfil those needs. They give the Minister the capacity to change support funding to directly reflect budgetary constraints, making it one of the first strategies the government can use to reduce the cost of the scheme instead of looking at the impacts on human rights. These changes give whoever is in government the capacity to gut the NDIS without ever being accountable for doing so, to Parliament or to anyone else.

That this is the approach that the government is taking, rather than listening to what people with disability have been saying about how to reduce the costs associated with the NDIS, speaks volumes about how valued the voices of people with disability are by this government.

Before undertaking this kind of reform, the government should look at every government inquiry and investigation into the NDIS undertaken over the past decade, and examine whether these recommendations have been put into action before turning to reducing supports and tightening eligibility requirements.

An array of different options have been suggested over time, including:

- Reduce the use of expensive consultancies for the delivery of especially services internal to the NDIA.
- Require that organization charge the NDIS the same amount for services as they do on the open market, possibly with a standardized, additional % for administration *if required*.
- Ensure that approved costings for any given service are evidence-based, and not solely developed based on providers' own lobbying.
- Stop spending money (both the government's and individual participants') taking participants to the AAT, and focus instead on mediation.
- Leverage relationships with the States and Territories to ensure that universal services they provide are accessible, and provide support to anti-discirmination cases to support the transformation.

The defining element of all changes, however, should be that the realization of the human rights of LGBTIQA+ people with disability ought not to be on the negotiation table. It is, after all, meant

to be the aim of the NDIS. The NDIS is a core funder of one of the lowest carbon cost elements of the economy, with a demonstrated 2.25 return on investment, and this should be a priority for this government.[1]

It is a *choice* to undermine the hard-won success of the NDIS, which brings considerable economic and social benefit to Australia in order to maintain, for example, subsidizing fossil fuels, refusing to tax gas exports, or to maintaining the AUKUS. Changing any one of these or making use of an array of other ways to increase the revenue and decrease the costs of this government remains within the government's purview.

LGBTIQA+ people with disability need the government to demonstrate leadership, and to hold a vision of the future in which they are fully valued as members of the Australian community, and in which the realization of their human rights is non-negotiable.

Valuing LGBTIQA+ people with disability

IRV expects that, in accordance with the CRPD Article 4 and article 8, the government should ensure that the voices and experiences of LGBTIQA+ people with disability are heard and respected, especially in relation to changes that impact us so severely.

Yet we are seeing these massive proposed changes matched by a remarkably short timeframe for consultation. Those most impacted are likely to be those already struggling due to a lack of support (whether because they have not succeeded in accessing the NDIS or if their plan does not respond to their needs) and their voices are effectively excluded. Those who require additional support in order to participate in consultation processes like this are unlikely to have been able to source it on this timeline. It has been an extraordinary indictment of the government's engagement with people with disability to observe the disability community having to source additional supports and capacity from within its own stretched, strained and underresourced community.

The ableist rhetoric the government has used around these reforms has demonstrated an alarming lack of regard for the wellbeing of the disabled community. In recent years, wherever there have been significant reforms proposed in relation to other margianlised communities – the LGBTIQA+ community around the postal ballot, the Aboriginal and Torres Strait Islander communities around the Voice referendum – the government has specifically addressed these impacts.

Yet when it comes to reforms that will dismantle disability support, it is the government itself leading in the way in using harmful rhetoric. The community IRV represents – the community of LGBTIQA+ people with disability – has experienced repeated instances of hateful public discourse over the past ten years. We are already a community who experiences higher rates of discrimination, injustice, mental illness and suicidality, and we are deeply concerned about the impacts of both the reforms and the rhetoric used to justify them will have on our communities.

[1] Per Capita, 2021, False economy: The economic benefits of the National Disability Insurance Scheme and the consequences of government cost-cutting. Accessible at: Per_Capita_Report_teamworks.pdf

Eligibility changes

The proposal to revise eligibility arrangements in order to deliberately exclude almost 300,000 people with disability is an extraordinary betrayal of the disability community and should be reconsidered.

That the number of people with disability within the population may be greater than had been estimated, or the costs associated with providing them with adequate support are greater than expected originally does not alter the commitments the government has made to the human rights of those with disability. Nor does it change the role that the NDIS is designed to play in ensuring these human rights are realized. Human rights are a baseline expectation.

The risk of tightening eligibility criteria and making accessing the NDIS more difficult is that this will not impact those who carry other kinds of privilege. It will, however, significantly impact LGBTIQA+ people with disability and others who are already experiencing intersectional social disadvantage and marginalization.

LGBTIQA+ people with disability are less likely to have the kinds of community support and social capital that heterosexual members of the community have. LGBTIQA+ young people are more likely to experience the loss of their family of origin due to family breakdown, homophobia, transphobia and/or violence and abuse. Not only does this mean that this cohort are less likely to have access to the 'informal supports' of family, they are also less likely to have the support of parents to help them navigate large bureaucracies like the NDIS and the relevant systems in place to support diagnosis, assessment and eligibility processes.

For those who experience additional intersectional marginalisations, such as being LGBTIQA+ as well as being First Nations or coming from a diverse cultural and linguistic background or living in regional, rural or remote areas, the impediments posed by the increased limitations on eligibility are likely to have even more significant impacts.

Neurodivergence

IRV is also concerned about the targeting of neurodivergent people through the changes to eligibility criteria. Neurodivergent individuals, including those with Autism (of any level), are more likely than the rest of the population to experience same-sex attraction, gender diversity or to be trans, and so experience the intersecting and compounding discrimination and injustice of ableism, homophobia, transphobia, and so on. Autism is a disability, and so **this cohort are entitled to the supports required to fully realise their human rights.**

The expansion in Autism diagnoses reflects the developing understanding of Autism (especially the increasing recognition of the gendered history of diagnostic criteria which has severely disadvantaged women and gender diverse individuals), and an improvement in understanding what additional supports can benefit Autistic people and enable their participation in all aspects of community life: education, workplaces, families and the broader community. Without these supports and increased accessibility, to which Autistic people are entitled, this cohort are likely to experience additional negative impacts on their health, wellbeing and inclusion in their communities.

Accessibility of 'treatment options'

The modification to the 'treatment options' element of eligibility displays an alarming carelessness about the impact of intersectional disadvantage on people with disability and should be removed.

Removing the limitations regarding reasonable access, and specifically excluding reasonable geographic access and reasonable financial access will result in LGBTIQA+ people with disability being less likely to be able to access the NDIS. Many LGBTIQA+ people experience financial disadvantage of various kinds, and there are many who live outside major cities. To have thin markets when it comes to healthcare make a 'remedy' to a disability inaccessible either due to cost or geographic limitations, and then to have the NDIS refuse to fund any supports as a result is a remarkable injustice.

There are live concerns that the expectation that all 'treatment options' are attempted will result in the expectation that particular treatments must be attempted even when there is significant evidence and testimony that such treatments may be damaging. This applies particularly to 'restrictive practices' and treatments such as Applied Behavioural Analysis for Autistic children which many Autistic adults have testified has resulted in PTSD. These are not treatments that ought to be required by the NDIS as a condition for accessing supports.

It will also result in additional as well as shifted costs as more people are denied access to the NDIS and the weight of support then falls onto existing Medicare-funded health services, and/or onto other community services such as homelessness services.

Functional capacity

It is difficult to provide adequate feedback on the concept of functional capacity, as it remains unclear exactly how this will be explored or assessed. However, it is vital that functional capacity take account of intersectional experiences of marginalization and disadvantage. A failure to do so is likely to ensure that a) functional capacity is derived solely from disability-related limitations to capacity, and so effectively presumes everyone has the same advantages and privilege; b) that the significant impact of intersectional marginalization on functional capacity is not factored in; c) that any assessment of functional capacity will miss the actual support needs of an LGBTIQA+ person with disability.

Disability always intersects with other aspects of a person's identity, privilege, marginalization and positionality within society. For example, a white cis gay person with disability living in a rural area may be less likely to have informal supports to draw upon than a white, cis, gay person with disability living in a metropolitan area. As a wheelchair user, he may also struggle to leave the house because there are limited footpaths in his home town, and so may require additional supports to access the community, such as a support worker with a car. An Aboriginal lesbian with disability living at a distance from her mob may face limitations in accessing culturally appropriate informal supports, and therefore need additional paid supports.

It is key that any assessment of functional capacity takes account of the context within which an LGBTIQA+ person with disability exists. The assessment as a result should not rely solely on the expertise of medical professionals, but also on those with expertise in social and cultural inclusion, such as social workers.

Early intervention

The plans under the reforms to end individualized early intervention is a grave error and should be rethought. Early intervention is *vital* to the success of the NDIS as a whole, including to reducing costs across the life course.

There has been some disingenuous messaging from the government about the Early Intervention element of the NDIS, implying that children accessing Early Intervention funding are using funds that were meant for people with 'serious and permanent disability.' One of the key aspects of the Productivity Commission's original report on Disability Services that informed the development of the NDIS was that early intervention was a) an important investment that is likely to reduce the ongoing costs of disability to the NDIS and to the community; b) that it needed to be individualized in order to meet the specific needs of children, which wasn't possible with a block funded model, and that c) a thorough, equitable process across the whole of Australia was vital to ensuring children were supported no matter where in Australia they happened to live.[2]

"Thriving Kids," is a much-touted but rather opaque program is meant to replace Early Intervention funding as part of the NDIS. Because it is block-funded, rather than individualized, it will not meet the needs of many children; indeed, many of the critiques that led the Productivity Commission to proposed the NDIS will apply to it. Additionally, the positives of early intervention the Productivity Commission factored into its planning, which include reduced costs over an individual's lifetime, will no longer be available.

Early Intervention remains a key element in ensuring the affordability of the NDIS over the long term. Removing it from the NDIS will not reduce the need of these children, or their ongoing need for disability support as they grow up. It will mean that those supports are both more expensive and more difficult to access, putting additional pressure on families, and shifting the costs to other parts of the service system, especially the health system, child protection, homelessness services, family violence services and so on. One of the most tragic and unjust elements of the previous, block-funded system was parents who were forced to relinquish their children into state care because they could not independently fund nor access adequate support services. We would encourage State governments to be cognizant of the impact of this change across their already-strained community services systems.

For LGBTIQA+ people with disability, the lack of availability of Early Intervention is likely to exacerbate the ongoing complexities that many LGBTIQA+ people experience in their families of origin. Transphobia and homophobia are already a major reason for family breakdown and youth homelessness. Putting additional pressures on families to provide disability supports as 'informal supports' is likely to exacerbate these pressures, and lead to further violence, abuse and neglect of children and young people with disability.

Social and community participation funds

The government's blanket reduction in social and community partiocipation funding lines across NDIS participant plans, without individualized exploration of the role this funding plays in different people's lives, is harmful and even potentially lethal.

[2] Productivity Commission 2011, Disability Care and Support, Report no. 54, Canberra.

For some people, a large percentage of their NDIS funds are allocated to this funding line, and it is expected that it will fulfil ordinary, everyday and *life-sustaining* activities like going shopping for groceries. Reducing these funds without individualized consideration could therefore put people with disability at serious risk.

The characterization of the use of these funds as excessive or frivolous is deeply problematic, and it is the role of government to address the perception that people with disability accessing the community is excessive or frivolous. This is a human rights issue.

For LGBTIQA+ people with disability, individualized social and community participation funding is vital. Many of us recall the time before the NDIS when block funding was the only way that any social or community outing occurred, and in many cases, it was to go bowling, usually in the middle of the day when no other community members were accessing the bowling alley. This model of block funded community participation maintained the segregation of people with disability from the rest of the community. It also gave LGBTIQA+ people with disability little opportunity, if any, to connect with their community and culture.

That portion of the community of LGBTIQA+ people with disability who have succeeded in becoming part of the NDIS and receiving social and community participation funding are likely to be effectively forced back into the closet by these changes to funding arrangements. They will most likely lose their access to the community that they are entitled to under the Convention on the Rights of Persons with Disabilities (article 19). This is even more likely for those participants who are located outside of major cities, for whom accessing, for example, Mardi Gras or Midsumma or even a queer night at local pub, is likely to be extremely costly in terms of support provision.

Informal supports

Ironically, the deprivation of social and community participation funding is also likely to impede the development of informal supports – i.e., of larger networks of people who are prepared to provide support to people with disability. For LGBTIQA+ people with disability, these informal supports are often even more vital, given the thin market across all disability service provision when it comes to queer-friendly services. However, it also can put these informal networks of support at greater risk of burnout, or relationships at risk of breaking down, because they are providing additional supports that should be built into the NDIS itself.

Additionally, LGBTIQA+ people with disability are less likely to have families of origin to draw on when it comes to drawing on informal supports. The impacts of homophobia and transphobia and queerphobia more broadly often deprive LGBTIQA+ people with disability of these informal supports.

However, even where these informal supports, as existing informal supports are expected to take more of the workload from the NDIS in order to avoid the costs associated with paying for support, the weight will fall squarely on the shoulder of women, gender diverse and feminized members of our community. This cohort already experience marginalization and reduce earning capacity because of the ongoing wage gap.

The NDIS was specifically designed to free these members of our community up to become employees and tax-payers. The multiplier effect of investment in the NDIS is an important and core part of the change foreseen by the Productivity Commission which will be undermined by

these changes. In a decarbonizing economy, the opportunity to invest with a conservatively estimated 2.25x multiplier should not be missed.

Inclusive Community Participation funding

In this context, it is concerning that the government is talking about 'rebuilding' an apparently lost capacity for inclusive communities. If the government does go ahead with the proposed Inclusive Community Participation funding, we recommend that funding be specifically designated for LGBTIQA+ and other intersectional communities, with the requirement that such funding prioritises enabling the access of those living in rural, regional and remote areas.

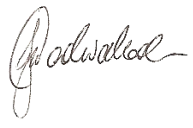
Conclusion

LGBTIQA+ people with disability are entitled to have their human rights recognized and fulfilled, as the Australian government has committed to. They deserve to be able to live their lives without having to worry about whether changes to an NDIS plan might mean they have to make radical changes to their lives, like moving cities to reduce costs, having to give up relationships and networks because they're no longer accessible without social and community support funding. They should not be forced back into the closet because the government refuses to prioritise the realization of their human rights.

They should not have their lives, choices, relationship and wellbeing made dependent on the vicissitudes of politics. They should be able to trust that their support needs will be met in such a way that their human rights are routinely realized, and where this is treated as an ordinary and expected part of what it means to be LGBTIQA+ and disabled in Australia.

LGBTIQA+ people with disability need the government to demonstrate leadership, and to hold a vision of the future in which they are fully valued as members of the Australian community, and in which the realization of their human rights is non-negotiable. Holding true to the vision of the NDIS – as fulfilling the human rights of people with disability – is vital to achieving this. We urge the Government to scrap the current reform plans and build a collaborative and consultative plan about the future of the NDIS.

Yours sincerely,



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