Submission on the Inclusive Communities Fund Consultation

South West Autism Network

Executive Summary

SWAN opposes this method of funding the social and community participation of disabled people.

SWAN supports investment in inclusive communities. We do not support a design that reduces the choice and control held by individuals and gives it instead to organisations, which then decide what activities exist, where they are held, and who may attend.

The Inclusive Communities Fund is being introduced at the same time as reductions of 50% to NDIS Social, Civic and Community Participation budgets and 10% to Capacity Building Daily Living Skills (Therapy) budgets. Cuts to participant budgets occur over 12 months from 1 October 2026 (Department of Health, Disability and Ageing). Funding under the Inclusive Communities Fund is expected to start by June 2027 (consultation paper, p. 3). People lose supports up to eight months before any replacement activity is funded, and there is no guarantee that a replacement will be funded in their town.

The consultation paper states that community concern about cuts to the NDIS is not the focus of the consultation (p. 4). SWAN's members and the wider disability community experience the two changes as one policy. Funding, decision-making and choice and control are being moved from individuals to organisations.

Importantly, the amount allocated is not sufficient for the stated purpose. $200 million over three years is approximately $66.7 million a year nationally. That is:

- approximately 0.55%, or about one dollar for every $180, of the $12.21 billion the NDIA paid for Core Social, Community and Civic Participation supports in the 12 months to 30 June 2026 (NDIA Q4 2025-26 Quarterly Report Supplement)
- approximately half the annual value of the Information, Linkages and Capacity Building (ILC) program, budgeted at $398.3 million over the three years 2019-20 to 2021-22, and scheduled to be replaced by the Individual and Family Capacity Building grants from July 2027 (DSS ILC grant guidelines, p. 10; consultation paper, p. 3)

- approximately $3,181 per registered charity across three years, or $1,060 a year, if divided across the 62,867 charities on the ACNC register (ACNC, *Australian Charities Report*, 12th edition, p. 8)
- approximately $42 per disabled Australian outside the NDIS across three years, or $14 per year (ABS 2022 SDAC; NDIA)

At this level of funding the Inclusive Communities Fund will not build capability among community organisations to deliver inclusive and accessible services across Australia. The gap between the stated objective and the amount allocated is large, and it is larger again in regional, rural and remote areas where per-unit costs are higher.

The disability community lobbied for individualised funding so that support would no longer be allocated by diagnosis, by professional judgement and by what a block-funded provider happened to run that week. This model reverses that. SWAN believe that this is a retrogressive step for Australians with disability.

SWAN asks the Government to reverse the announced reductions, state publicly that the Inclusive Communities Fund does not replace individual funding and consult further on a model that funds people individually to take part in community life rather than funding organisations to hold activities for disabled people.

SWAN make 13 recommendations, set out in full in the Our Recommendations section. In summary:

1. Immediately reverse the planned 50% reduction to social, civic and community participation funding and the 10% reduction to therapy funding, and commence no reduction until an independent human rights and disability impact assessment has been published and considered.
2. Amend the legislative framework so individual NDIS funding cannot be reduced across the board by Ministerial determination.
3. Return community participation funding to individuals as a flexible allocation held by the person.

4. State publicly that the Inclusive Communities Fund is additional to individualised NDIS support and will never replace it.
5. Increase the funding substantially and fund it for ten years rather than three.
6. Pay for the supports, aids or equipment people need in order to participate, not just training for staff.
7. Do not pay organisations to run separate activities for disabled people. Pay them to open up the ones they already run, require compliance with the *Disability Discrimination Act 1992* as a condition of funding, and align the Inclusive Communities Fund with the positive duty recommended by the Disability Royal Commission.
8. Fund organisations run by disabled people, and their families, directly and on an ongoing basis.
9. Require every funded project to show that disabled people helped design it, lead it, are paid to deliver and evaluate it.
10. Set aside a minimum proportion of the Inclusive Communities Fund for regional, rural and remote communities, and apply a regional loading to grants outside the cities.
11. Ensure funding is available for culturally safe, First Nations-led, LGBTQIASB+, culturally and linguistically diverse, low-income, regional and rural community inclusion initiatives.
12. Publish where the money went, which towns got it, what it paid for, whether disabled people say it made a difference, and measure participation directly.
13. Extend the consultation to a minimum of 12 weeks and provide accessible materials from the start, including Easy Read, Auslan and community languages.

Acknowledgements

SWAN acknowledges the traditional owners of the land on which this submission was produced, the Wardandi Noongar people. We acknowledge their deep spiritual connection to this land and extend our respects to community members and Elders past and present.

About SWAN

South West Autism Network (SWAN) is a not-for-profit, charitable organisation that has been supporting autistic individuals and their families in the south-west region of Western Australia for the past 17 years. We are a Disabled Persons and Families Organisation (DPFO) with more than 2,000 members, and we provide free support to many more people with disability and their families.

Our primary role in the community is to provide information, peer support, advocacy, and connections to mainstream and disability services. We build the capacity of people with disability and their families to work with Government and non-Government systems to meet their needs and take part in their local communities.

We support people seeking diagnosis, post-diagnosis, and across their lifespan, and provide autistic-safe space group programs for autistic children, teens and young adults through our AutStars and YES Programs. We also deliver Youth Mental Health First Aid training to the wider community. All staff, volunteers and Board members either have a disability or are family members of someone with a disability.

Introduction

This submission responds to the *Inclusive Communities Fund Consultation Paper*, August 2026.

> **"There is a big difference between being taken somewhere and being included somewhere. One is a service. The other is belonging."**
>
> **- Fiona Bridger**

This is the problem *Shut Out* described in 2009, the consultation that led to the NDIS. It found that "once shut in, many people with disabilities now find themselves shut out", and that "people with disabilities may be present in our community, but too few are actually part of it" (Shut Out, p. 1). More than half the submissions to that consultation, 56%, raised exclusion and negative attitudes as the main problem in their lives (p. 3). People said they were treated as "passive recipients of charity who should demonstrate considerable gratitude for whatever meagre offerings they received" (p. 13). One person put the ask about as clearly as it can be put: "I do not expect to get access to the pyramids or Uluru but I do want to get into all of the library and all of the community centre" (p. 14). Another said "they do not want mountains to be moved. But they do want to be able to go to the library or the movies" (p. 14).

What has changed since then is the money, how it is distributed and how it is delivered. The NDIS gave people a budget of their own and the right to decide what to spend it on. A person could pay for the support worker who got them to the pool on Tuesday and the taxi that got them there. They did not have to wait for a local charity to win a grant to run a swimming program for disabled people. They picked the pool.

What has not changed is everything *Shut Out* said about attitudes and access. The report found that "very little progress has been made in challenging prevailing myths and stereotypes", that people with disability are still "more often than not... seen as recipients of services and a burden rather than equal members of the community", and that "exclusion is both systematic and systemic" (p. 12). In the seventeen years since,

SWAN's members have kept telling us the same things. The gym will not take them. The venue has a step. The staff talk to the support worker instead of the person. Nobody sent the information in a format they can read. Both the Disability Royal Commission and the NDIS Review made recommendations directed at these failings. Of the 222 Disability Royal Commission recommendations, the Commonwealth has sole or joint responsibility for 172, and accepted 13 in full, 117 in principle, with 36 under further consideration (Ministerial Statement, 12 August 2024). The NDIS Review made 26 recommendations with 139 supporting actions (NDIS Review final report). SWAN's view is that the recommendations dealing with mainstream access, community inclusion and disability-led design have been taken up significantly more slowly than the recommendations dealing with scheme cost, creating risk that people with disability fall through the widening gaps.

In the lead-up to the NDIS, individualised funding was requested based on best practice for people with disability, after years of work to assess what had worked and what had not. The submissions to the Productivity Commission's *Disability Care and Support* inquiry (submissions index) sent a clear message to Government that block funding to organisations had already been tried and it did not work. Under block funding the organisation decided what was on offer, when, where and for whom, and the person took what was available or missed out. *Shut Out* recorded people saying "it should not require such extraordinary effort to live an ordinary life" (p. 2). Individual funding was the answer to that, and it works because the disabled person has the choice and control to build supports around their own needs and goals.

A three-year competitive grant fund, paid to organisations, reverses that. It takes money that was held by disabled people and gives it to organisations to decide what disabled people can (and cannot) do. SWAN recognise the intent behind funding community organisations, and better training and better attitudes in mainstream services are genuinely needed. What is not acceptable is paying for them by cutting the individual support that lets a disabled person out the front door.

A three-year competitive grant round does not deliver inclusive outcomes. Individualised support does, assigned to a person through a person-centred plan that funds what each person needs to be who they are.

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The Central Problem

The consultation paper acknowledges that disabled people, families, carers and the disability sector have raised strong concerns about the changes to NDIS funding for Social, Civic and Community Participation and Capacity Building Daily Activity supports (p. 4). Those concerns are the reason the Inclusive Communities Fund exists, which puts them squarely within the scope of this consultation.

The reductions commence on 1 October 2026. The Inclusive Communities Fund is expected to commence by June 2027, after design, grant guidelines, an application round and assessment (consultation paper, p. 3). People will begin losing individual support up to eight months before the first grant is paid. There is no guarantee that an inclusive activity will exist where the person lives, that it will suit them, or that they will have the transport, support worker, communication support or therapy needed to get to it.

The Inclusive Communities Fund also runs for three years. Community access is not a three-year issue. Community organisations need stable, ongoing funding to build relationships, keep staff and hold on to what they learn. We note also that people with disability come to rely on a program, and when funding ceases, the inclusive relationships and connections built through the program are lost.

The support need does not disappear when NDIS funding is cut. The cost moves to families, unpaid carers, hospitals, schools, mental health services, aged care, homelessness services, crisis services, the justice system and community organisations. The cost is shifted to other budgets and to unpaid work, and none of those systems record it as an NDIS cost.

SWAN's national surveys on the NDIS Bill received 1,023 completed Plain English surveys and 63 completed Easy Read surveys in seven days. Of those respondents:

- 96.12% opposed the Minister being given power to reduce funding across groups of supports or participants

- 95.27% opposed the announced 50% reduction to social, civic and community participation and 10% reduction to capacity building supports, including therapy
- 94.08% said reduced social, community and capacity building funding would worsen mental health outcomes
- 93.08% said the reductions would increase pressure and stress on families and carers
- 92.99% said the reductions would result in less participation in community and social activities
- 92.62% said the reductions would result in more isolation
- 90.26% said the reductions would reduce skill-building and independence
- 84.24% said the reductions would increase reliance on unpaid support
- 79.05% said fewer disabled people and unpaid carers would be able to stay in paid employment

The entire disability community has been consistent in their opposition to these cuts. In every consultation on these changes we have told Government what the foreseeable harm is, and we have said not to do it.

Segregated Service Models

In September 2020, eight Disabled People's Organisations and Disability Representative Organisations published *Segregation of People with Disability is Discrimination and Must End*. The authoring organisations were the Australian Federation of Disability Organisations (AFDO), Children and Young People with Disability Australia (CYDA), Disability Advocacy Network Australia (DANA), First Peoples Disability Network (FPDN), Inclusion Australia, National Ethnic Disability Alliance (NEDA), People with Disability Australia (PWDA) and Women With Disabilities Australia (WWDA) (DPO Australia position paper, pp. 1-2). Forty-two disability rights and advocacy organisations later asked the Disability Royal Commission to recognise segregation as discrimination and a breach of human rights (DPO Australia).

The paper states:

> "It is imperative that the segregation of people with disability is recognised and conceptualised as discrimination and as not adhering to the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and other international human rights conventions to which Australia is a party." (p. 3)
>
> "Very often, people with disability are unable to choose any other options but 'special', segregated arrangements as there are no other choices, the choices are limited, or the choice is made for us by others." (p. 3)
>
> "Equality and non-discrimination in international human rights law incorporates the principle that segregation is inherently unequal and discriminatory." (p. 5)
>
> "Investment in segregation and segregated facilities is discrimination under the CRPD." (p. 6)
>
> "Full and effective participation and inclusion in society for people with disability is dependent on the end of segregation and upholding individual autonomy." (p. 10)

SWAN does not believe the proposed design is consistent with that second point. When an individual support budget is reduced by up to half and a grant of substantially less funding is given to an organisation to run an activity instead, the number of options available to a person goes down. In a regional town with one funded organisation and one funded activity, the number of options is one. The organisation and the grant assessor decide what that option is.

The finding that investment in segregation is discrimination under the UNCRPD applies directly. The Inclusive Communities Fund allocates public money to organisations on the basis that they will provide participation opportunities for disabled people. Grant-funded, group-based, disability-designated activity meets the description of a segregated program. Guideline wording about inclusion does not change what is delivered on the ground.

Segregation is not only institutional accommodation. It also happens when a person is effectively confined to home because they no longer have the support to leave it, when people are directed into group programs or hubs because individual support is no longer available, and when a person loses the ability to work, volunteer, study, see friends or take part in ordinary community life.

The consultation paper records that stakeholders raised this risk with the department: "The Fund should not return to old programs that separated people with disability from the wider community and did not give people choice and control" (p. 4). SWAN agrees with that advice. SWAN does not accept that the current design avoids the risk. The design gives money to organisations rather than people, excludes direct service delivery, and runs for only three years. It contains no stated mechanism to prevent segregated outcomes.

The Disability Royal Commission examined segregation in education, employment and housing and recommended a sustained national shift away from segregated settings. This proposal moves in the other direction. The next section sets out what the Commission found.

What the Disability Royal Commission Found About Segregation

The consultation paper states that the department considered findings and recommendations from the Disability Royal Commission (p. 2). Those findings are directly relevant to a fund that pays organisations to provide participation opportunities for disabled people, and they do not support the proposed design.

The Commission's own definition of segregation covers socialising and recreation, not only accommodation, education and work:

> "Segregation describes the circumstances where people with disability live, learn, work or socialise in environments designed specifically to cater for people with disability and separate from people without disability. Segregation occurs when people with disability are separated and excluded from the places where the community lives, works, socialises or learns because of the person's disability. Segregation does not occur in spaces where people with disability choose to come together, share culture and values, seek support for their individual needs, or are encouraged and supported to engage with the broader community. These are the same choices available to people without disability." (Final Report, Volume 7, p. 9)

The second half of that definition is why SWAN support peer-led and disability-led groups that disabled people set up and run for themselves. The first half is why SWAN oppose paying providers to run designated group activities for people whose individual funding has been cut.

The Chair and Commissioner Ryan set out a test for deciding whether a program is segregated. The relevant circumstances are:

> "whether participants are separated from other people for shorter or longer periods

> whether people with disability who live, learn, work or engage in leisure activities in those settings do so in the exercise of a free and informed choice (or, in the case of children, the free and informed choice of parents or guardians)
>
> whether the participants enjoy regular and significant interaction with their non-disabled peers and the wider community." (Volume 7, p. 49)

Applied to this proposal, the second and third of those circumstances are the problem. A person whose social and community participation funding has been halved is not exercising a free and informed choice when they attend the one grant-funded group activity available in their town. A disability-designated group activity does not deliver regular and significant interaction with people who do not have disability.

Commissioners Bennett, Galbally and McEwin examined day programs specifically. Day programs are the closest existing analogue to a provider-run group activity funded from a Government grant rather than from a person's own budget. Their findings were:

> "We three Commissioners have concluded that many or all of these elements of institutionalisation are present in Australia's special or segregated education settings, ADEs, group homes and day programs. As a consequence, we consider that these settings are failing to uphold fundamental human rights for people with disability." (Volume 7, p. 58)
>
> "We three Commissioners have come to the view that the segregated nature of special schools, ADEs, group homes and day programs heightens the risk of exposure to violence, abuse, neglect and exploitation, as well as being in violation of international human rights law. In other words, maintaining these segregated settings into the future means we are exposing those people with disability in them to the certainty of harm." (Volume 7, p. 64)

The Commission recorded evidence from Inclusion Australia that families describe day programs as "day custody" where, largely, people are not learning skills but "just sit around and do nothing" (Volume 7, p. 61). It also recorded that people with higher or more complex support needs "are often funnelled, coerced or forced into segregated

settings or programs as the only option for education, work, living or socialising", and that "decision-makers see segregated services as being the natural default services for people with disability" (Volume 7, p. 59). The Commission described a situation where barriers to mainstream settings leave a person with no viable alternative to a segregated one as "coercive" choice (Volume 7, p. 65). Reducing a person's individual participation funding by half, and funding an organisation to run a group activity instead, produces exactly that situation.

The Commission also recorded the effect of segregated settings on decision-making. NDIS outcomes data showed that only 23% of participants in segregated living were said to be making most of the decisions in their life, against 60% of participants in mainstream accommodation (Volume 7, p. 60).

Two of the Commission's conclusions bear on the stated purpose of this Fund. The first goes to recreation, which is what the Fund proposes to buy:

> "We three Commissioners hold the view that segregating people with disability for study, work, living and recreation should be systematically phased out entirely. This is necessary to achieve inclusive equality. We believe that it is unconscionable that segregation on the basis of impairment alone still remains a policy default in Australia in the 21st century." (Volume 7, p. 65)

The second goes to whether funding segregated activity helps or hinders the mainstream reform the Inclusive Communities Fund says it wants:

> "We consider that the continued presence of segregated settings is a significant barrier to the reform of mainstream settings as it reduces the imperative for, and affordability of, change. This constrains the improvement of mainstream systems and the commitment to developing alternative and innovative models that can deliver meaningful inclusion and choice for all people with disability." (Volume 7, p. 66)

The Commission's recommendations follow that direction of travel. Recommendation 7.14 recommends recognising that inclusive education under article 24 of the UNCRPD

"is not compatible with sustaining special/segregated education as a long-term feature of education systems in Australia", with no new segregated schools, classes or units from 2025 and no students remaining in segregated schools by the end of 2051. Recommendation 7.32 recommends ending segregated employment by 2034 (Volume 7, pp. 24 and 34).

Two limits on this evidence should be stated clearly. The Commissioners did not agree on phasing out segregated education, employment and housing settings, and the Final Report sets out alternative recommendations reflecting those different positions (Volume 7, pp. 9 and 47). All Commissioners did agree on the definition of segregation set out above, on the test for identifying it, and that voluntary spaces run by and for disabled people are not segregation. The Commission also made no recommendation for or against block funding or grant funding as a mechanism. Its findings concern the settings that funding arrangements produce, and a competitive grant paid to a provider to run a designated activity for disabled people produces a setting the Commission examined and criticised.

Individualised Funding

The disability community lobbied for individualised funding for a specific reason. Under block funding, a person's options were set by whatever activity/ies a provider was contracted to deliver. If the local service ran a weekly group activity, that was the option. Joining a sporting club, taking music lessons, volunteering or going to the football with friends was generally not funded, because those things were not classified as services. Support was allocated by diagnosis and by assessments of what suited a category of people. Clinicians and providers made the decisions.

The Productivity Commission's 2011 *Disability Care and Support* inquiry recommended a different arrangement: a scheme in which disabled people and their families "would wield the greatest control", with guaranteed entitlements to individually tailored supports (Productivity Commission, Overview). Social and community participation funding in an individual plan is how that recommendation works in practice. It funds a person to attend an activity of their own choosing, with the support they need, instead of attending a disability-specific activity because it is the only funded option.

The DPO Australia paper links inclusion to autonomy, stating that participation and inclusion "is dependent on the end of segregation and upholding individual autonomy" (p. 10). In a support system, autonomy requires that the person holds the funding. Moving funding from individuals to organisations for capability building reverses that. It puts the provider back in the decision-making seat, and the provider decides what is offered on the basis of what the funder will pay for rather than what the person wants.

SWAN considers this a significant step backwards for the human rights of Australians with disability.

Funding the Person, Not the Program

Australia would be moving against the direction other comparable countries have taken.

An example is Ontario, which funds community participation as an individual entitlement. The Passport Program pays disabled adults directly, to help them "be involved in their communities and live as independently as possible", covering "community participation, activities of daily living and person-directed planning" (Ontario Ministry of Children, Community and Social Services). The list of things a person can buy with it is close to what Australia is cut with the introduction of the NDIS Section 10 Rules for NDIS Supports: gym and recreation memberships, class and activity fees, sports leagues, museum admission, hobby classes, camps; and with the latest NDIS cuts: support worker hours, transport and technology. In the Ontario Passport Program, tickets to live music, theatre and sport are reimbursed up to $150 each, and the program pays for a second ticket so the person's support worker can go with them. Ontario has decided that a disabled person going to the football with a support worker is a legitimate use of public money. The person chooses what they attend and where, which delivers the same entitlement to someone in a country town as to someone in a capital city.

Ontario also shows that individual funding can be administered by disabled people. The Direct Funding Program is paid for by the Ontario Ministry of Health and administered by the Centre for Independent Living in Toronto, a disability-led organisation, working with the Ontario Network of Independent Living Centres. Participants "hire and manage" their own support workers and "control [their] own services". This is directly relevant to the Fund's design. If the department wants disability-led organisations involved, the useful role is administering and supporting individual funding, not competing for grants to run activities.

Scotland has put the duty in legislation. Section 4 of the *Social Care (Self-directed Support) (Scotland) Act 2013* requires councils to offer four options, the first being "the making of a direct payment by the local authority to the supported person for the provision of support" (legislation.gov.uk). The choice belongs to the person, not the council. England's statutory guidance goes further on what the money can be spent on,

telling councils that people should be free to choose "innovative forms of care and support" including "club membership", and that "lists of allowable purchases should be avoided" because the range of what a person might need is wider than any authority can list (Care and support statutory guidance, para 10.48). Australia has gone the other way, with a support list and now a proposal to hand the participation money to organisations.

SWAN note honestly that Scotland's delivery has fallen well short of its own law. Audit Scotland found "no evidence that authorities have yet made the transformation required", with only 11% of people taking the direct payment option and 75% still receiving a council-arranged service (Audit Scotland, 2017), and a Scottish Parliament committee found "extensive evidence to suggest that an implementation gap exists between the policy intent behind SDS legislation and what happens in reality" (post-legislative scrutiny, 2024). The lesson there is about implementation, not about the model. No review in any of these countries has recommended taking the budget off the person and giving it to organisations instead.

The research supports the model. A systematic review of individualised funding found "positive effects... with respect to quality of life, client satisfaction and safety", with every study measuring satisfaction favouring individualised funding over conventional services (Fleming et al., Campbell Systematic Reviews). The same review found no measurable difference on community participation, which is the point SWAN would make to the department: individual funding is what gives a person choice and control, and it needs an accessible community to spend it in. *Both are required*.

Funding Allocation

The consultation paper states that the Inclusive Communities Fund "will build capability among community organisations to deliver inclusive and accessible services" (p. 2). SWAN has compared that objective with the size of the community sector and the size of the allocation.

Amount per organisation

Denominator	Source	Across three years	Per year
62,867 charities on the ACNC register	ACNC, *Australian Charities Report*, 12th ed., p. 8	$3,181	$1,060
53,641 charities reporting in the latest ACNC analysis	ACNC, 12th ed., p. 11	$3,728	$1,243
Approximately 600,000 Australian not-for-profit organisations	Productivity Commission, *Contribution of the Not-for-Profit Sector*	$333	$111

The consultation paper lists eligible uses including seeking expert advice, staff training on disability inclusion and building lasting partnerships (p. 6). Those are consultancy and staffing costs. An access audit, an accessible website rebuild, a season of Auslan interpreting or part-time inclusion staffing each cost more than $1,060 a year.

The Fund will not be distributed evenly. It will be distributed through a competitive grant round. A small number of organisations will receive a workable amount and most of the sector will receive nothing. If the department funded 2,000 projects at $100,000 each, it would reach approximately 3.2% of registered charities and approximately 0.3% of the broader not-for-profit sector.

Competitive grant rounds favour organisations that already employ grant writers. In the south-west of Western Australia; as in most Australian communities; most sporting, arts and volunteer organisations are run by volunteers with no administrative staff. They are the organisations that most need capability support and the least likely to submit a competitive application.

Amount per disabled person

The consultation paper states that the Inclusive Communities Fund will benefit all disabled people, whether or not they are NDIS participants (p. 4). The figures below apply the allocation across that population.

The ABS 2022 Survey of Disability, Ageing and Carers estimated 5.5 million disabled Australians, or 21.4% of the population (ABS). There were 782,013 active NDIS participants at 30 June 2026 (NDIA Q4 2025-26 Supplement). On those figures, approximately 4.72 million disabled Australians, or 85.8%, are outside the NDIS.

Population	Across three years	Per year
All 5.5 million disabled Australians	$36.36	$12.12
The 4.72 million disabled Australians currently outside the NDIS	$42.39	$14.13
The approximately 4.6 million projected to be outside the NDIS in 2029-30	$43.48	$14.49

The 2029-30 figure applies the Commonwealth's projection of approximately 900,000 NDIS participants in 2029-30 (Commonwealth Impact Analysis, July 2026) against the 2022 ABS prevalence estimate. It is a scale calculation, not a population forecast. It is conservative, because it holds the disabled population constant. Disability prevalence rose from 17.7% in 2018 to 21.4% in 2022, and the population is growing and ageing (ABS). The actual amount per person by 2030 will be lower than $14.49 a year.

So the Fund provides about $14 a year for each disabled Australian outside the NDIS. That money goes to organisations, and under the current design it may only be spent on capability building, not on anything a person can actually attend.

Comparison with the funding being removed

- The NDIA paid $12.21 billion for Core Social, Community and Civic Participation supports in the 12 months to 30 June 2026, and $5.96 billion for Capacity Building Daily Activities (NDIA Q4 2025-26 Supplement, Tables E.65 and E.66). The Inclusive Communities Fund's $66.7 million a year is approximately 0.55% of the first figure, or about one dollar for every $180.
- The Government has stated that average participant budgets for social and community participation will be reset from approximately $31,000 to the 2023 average of approximately $26,000, with reductions of up to 50% in that category (UNSW analysis). At a $5,000 average reduction, the entire value of the Fund equals the amount removed from approximately 40,000 participants. There are 782,013 participants. We note that this analysis refers to mean budgets and reductions. The actual funding cuts will impact NDIS participants to varied degrees. Some will be minimally impacted, many will be significantly impacted.

The 2026-27 Budget package is expected to reduce NDIS payment growth by $37.8 billion over four years (Budget Paper No. 1 2026-27, Statement 1, p. 35). The Inclusive Communities Fund is approximately 0.5% of that amount.

Social and Community Participation

Social, civic and community participation funding is *not* funding to go to the movies. For many participants it is the support that enables them to:

- leave home safely
- go shopping, banking, medical appointments and therapy
- attend education, training, volunteering and employment
- build friendships and maintain family relationships
- take part in sport, arts, culture, recreation and local community life
- develop daily living, travel, communication and social skills
- manage emotional regulation and mental wellbeing
- access exercise, hydrotherapy and preventative health activity
- avoid crisis, isolation, family breakdown and unnecessary hospitalisation

For many people this category is also used to meet daily living and supervision needs, particularly where Daily Living funding is arbitrarily capped to six hours per day by NDIA policy,or where a participant has high support needs but no Home and Living funding. A blanket 50% reduction cuts more than outings. It cuts safety, supervision, help with daily life, attendance at appointments and the ability of carers to stay in paid work.

In SWAN's Easy Read survey, one respondent stated:

> "Disabled don't just have a right to not die, they have a human right to actually live their lives and find joy and meaning."

Another stated:

> "Having a disability should not mean being confined to the home. Support should help with economic and social participation, not limit it."

A parent explained that community participation funding is what allowed their two children, now young adults, to learn to use public transport on their own, get to work and spend time with friends. Without it, the alternative is lifelong dependence on family or on social security.

A wheelchair user who lives alone with no informal support explained that reducing community participation funding would mean they could not shop, attend family events, access hydrotherapy or leave home safely.

Therapy Funding

The 10% reduction to therapy funding will cause direct harm. Therapy and allied health supports maintain and build communication, mobility, daily living skills, emotional regulation, safety and independence.

For autistic people, therapy may support communication, sensory regulation, daily living skills, participation in school or work, anxiety management and reduced risk of crisis. For people with physical disability it may support mobility, pain management, safe transfers, pressure care and prevention of functional decline. For people with communication disability, therapy is often what allows them to express needs, make decisions and stay safe.

Cutting therapy funding reduces a person's ability to manage the impact of their disability, and it produces later costs through preventable deterioration, injury, hospitalisation, carer burnout and loss of employment.

The two reductions compound one another. One removes the support to get into the community. The other removes the support that builds and maintains the skills, health and capacity needed to be there.

Human Rights Obligations

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Article 19 of the UNCRPD recognises the equal right of disabled people to live in the community with choices equal to others, and requires access to a range of in-home, residential and other community support services, including personal assistance necessary to support living and inclusion in the community and to prevent isolation or segregation (United Nations). Article 9 requires accessibility. Article 26 requires habilitation and rehabilitation services that support independence and inclusion. Article 16 requires effective measures to protect disabled people from exploitation, violence and abuse.

Those obligations are not met by making a community organisation more welcoming on paper while removing the individual support a person needs to get there. A person does not have a genuine choice about community life if they cannot leave home safely, afford transport, communicate, regulate distress, access personal care or attend therapy.

The Disability Royal Commission heard extensive evidence that disabled people face greater risk of violence, abuse, neglect and exploitation when they are isolated, unsupported, disbelieved, excluded from community life or placed in restrictive and segregated arrangements. When people lose support workers, therapy and community contact, there is less independent oversight, more pressure on families, more exposure to unsafe relationships and more chance of being left unsupported in a crisis.

Australia's Disability Strategy

The consultation paper refers to Australia's Disability Strategy 2021-2031 once, stating that "building inclusive communities is a policy priority" for it (consultation paper, p. 2). It then states that the department considered findings and recommendations from the Disability Royal Commission and the Independent Review into the NDIS. The Strategy's own machinery is not mentioned.

The Strategy already treats community participation as an assigned objective with actions allocated to Governments. The Inclusive Homes and Communities Targeted Action Plan 2025-2027 sits under the Strategy outcome that "people with disability live in inclusive, accessible and well-designed homes and communities". Its first objective is that "people with disability are able to participate in social, recreational, sporting, religious and cultural life as equal members in the community", and it assigns three national actions to all Governments for 2025-2027: embedding accessibility standards for public funding of large-scale community events, requiring large-scale community events to have a disability inclusion and access plan in place in order to use public land or facilities or receive funding, and expanding accessible and portable infrastructure at community and public events (Inclusive Homes and Communities Targeted Action Plan 2025-2027).

Under the same objective, Western Australia has committed to "fund projects that build an inclusive thriving community for people with disability", measured by the number and value of grants made. Its other actions under that plan include the Play Anywhere Trail in national parks and a connected network of Changing Places facilities. New South Wales has committed to an emerging technologies forum. The Australian Government did not list an action of its own under that objective.

Three points follow. First, if the Commonwealth intends to fund community participation, the Strategy already provides the objective, the reporting mechanism and the outcomes framework, and the Inclusive Communities Fund should be delivered and reported against them rather than run separately. Second, some of what the Inclusive Communities Fund proposes to buy is already committed by State Governments under

the same plan, and grant funding should not be spent twice on the same activity. Third, the actions in the plan are directed at Governments and at the conditions attached to public land, facilities and event funding, not at asking community organisations to volunteer for training.

The portfolio question follows from the Inclusive Communities Fund's own scope. The paper states that the Fund will not provide funding to mainstream service systems "such as hospitals, schools, housing and transport services", or to businesses such as shopping centres, restaurants or cinemas, and that it "will not provide funding directly to individuals" (consultation paper, p. 5). The Easy Read version states that the Inclusive Communities Fund is not about helping people use healthcare, education or transport. Those systems are where the barriers sit. The paper itself names accessible transport and Auslan interpreters as the practical supports people need in order to take part.

A fund that excludes transport, health, education, housing and business, and excludes individuals, cannot remove the barriers it identifies. Where accessibility work is needed in transport, sport and recreation, education, local infrastructure or safety, it should be funded and delivered by the portfolio responsible for that system, under the relevant Strategy outcome area, with that portfolio accountable for the result. A grant program administered by the health portfolio can only fund the activities that sit inside it, which is why the design defaults to paying disability and community organisations to run activities.

Inclusion and Accessibility

Community organisations that provide goods, services or facilities are already covered by the *Disability Discrimination Act 1992*. Section 24 makes it unlawful for a person who provides goods or services, or makes facilities available, whether for payment or not, to discriminate against another person on the ground of disability by refusing to provide them, in the terms or conditions on which they are provided, or in the manner in which they are provided (Disability Discrimination Act 1992). Reasonable adjustments are part of that duty. Accessibility is not optional and it is not a service a club can be paid to consider.

In Western Australia, the *Disability Services Act 1993* requires State and local Government agencies to have a Disability Access and Inclusion Plan. The desired outcomes include that disabled people have the same opportunity to access "the services of, and any events we organise", the same opportunity to access buildings and facilities, and the same opportunity to receive information in a format they can access (Government of Western Australia). Local councils, libraries and community centres named in the consultation paper as likely grant recipients are already subject to those duties.

The law is also moving further in that direction. The Disability Royal Commission recommended that the Disability Discrimination Act be amended to introduce "a positive duty on all duty-holders under the Act to eliminate disability discrimination, harassment and victimisation", modelled on the December 2022 amendments to the *Sex Discrimination Act 1984*, requiring duty-holders to "take reasonable and proportionate measures to eliminate all forms of discrimination on the ground of disability" (recommendation 4.27) (Department of Health, Disability and Ageing). The Australian Government accepted in principle the 15 Disability Royal Commission recommendations relating to the Act on 31 July 2024, committed $6.9 million to reviewing and modernising it, and closed public consultation on that review on 14 November 2025 (Attorney-General's Department).

It is clear what should happen. Every organisation running sport, recreation, arts, library, cultural, youth or volunteering activities should be inclusive and accessible because it is required to be, and under a positive duty would be required to take active measures rather than wait for a complaint. Building a three-year competitive grant program on the premise that inclusion is a project to be funded, in the same period as the Act is being modernised, sends the opposite message. Grant conditions should require compliance with existing obligations as a minimum standard of eligibility, and the Inclusive Communities Fund should pay only for what sits above that floor, including the practical supports an individual needs in order to take part.

The ILC Program

The department proposes to build community capability through time-limited competitive grants while ending the program that used that method. The consultation paper confirms that ILC "will end when all current grants finish", between July 2027 and the end of 2028 (p. 3), to be replaced by the Individual and Family Capacity Building grants program, commencing July 2027, and the Inclusive Communities Fund.

ILC was budgeted at $131.4 million in 2019-20, $132.6 million in 2020-21 and $134.3 million in 2021-22, a three-year total of $398.3 million (DSS ILC grant guidelines, p. 10). The Inclusive Communities Fund is half that amount, applied to a broader target population.

The University of Melbourne's evaluation of ILC found that "evidence about the extent to which ILC is effective in achieving its goals, or in reducing demand for NDIS packages, is lacking". It also found that short grant periods caused activity to cease and expertise to be lost, and that projects commonly ended when the funding ended (*Tier 2 Tipping Point*, pp. 12, 55, 57 and 69). The Joint Standing Committee on the NDIS found support for ILC's objectives alongside criticism of its grant design, administration and level of investment (Joint Standing Committee).

SWAN's ILC funding was not renewed in 2024 and the organisation came close to closing, in a region with no other alternative. The consultation paper asks how the benefits of the Inclusive Communities Fund can continue after three years (p. 7). On the Australian evidence, three-year competitive project grants do not produce lasting capability. When the grant ends, trained staff leave, partnerships lapse and the activity stops, leaving people with disability once again excluded.

What the Fund Should Support

If a fund of this kind proceeds, it should support ordinary community activity that is open to everyone and designed *with* disabled people, including:

- sport, recreation and outdoor activities
- arts, music, theatre, libraries and cultural activities
- community gardens, environmental groups and volunteering
- youth groups, playgroups and after-school activities
- peer-led groups and disability-led social connection programs that disabled people control
- community education, local events and neighbourhood activities
- First Nations community activities and culturally safe local initiatives
- multicultural community organisations and activities for people from culturally and linguistically diverse communities

There is a difference between being allowed into a club and being welcomed, understood, included in decisions, able to form relationships and able to come back next week.

The Inclusive Communities Fund should reach people most often excluded from mainstream community life, including people with complex disability, intellectual disability, psychosocial disability and communication disability, Deaf and blind people, people with chronic and fluctuating conditions, autistic people, people with high support needs, older disabled people, people in regional, rural and remote areas, First Nations, CaLD and LGBTQIASB+ communities.

Practical Supports

The consultation paper states that the Inclusive Communities Fund is not expected to pay for direct service delivery (pp. 5-6). SWAN understands the intent is to create lasting organisational change. A strict exclusion of practical participation support will leave many people out.

The paper treats practical participation supports as possibly funded elsewhere (p. 4). In many cases they are not funded at all, and the Government has now reduced the individual funding streams people used to pay for them.

The Fund should be able to pay reasonable, participation-specific costs where they are not available from another source, including:

- accessible transport, particularly in regional, rural and remote areas
- Auslan interpreters, captioning, communication access and accessible information
- support for people who use augmentative and alternative communication
- sensory-friendly changes, quiet spaces and flexible participation options
- support for staff and volunteers to safely include people with complex support needs
- the cost of disability-led co-design, advice and training
- participation support where it is needed to establish access to a mainstream activity and is not otherwise funded

Disability-Led Partnerships

SWAN supports the consultation paper's recognition that community organisations should partner with disability-led organisations. That should be a requirement of the Fund, not an optional extra.

Disability-led organisations bring lived experience, trust, local knowledge and practical expertise. They identify barriers that are otherwise invisible, design accessible activities, write policies, train staff and volunteers, set up safe communication practices and respond when something goes wrong.

They cannot be expected to do it for free. Many small DPOs and DPFOs already do unfunded work that Government and mainstream organisations rely on. Funded partnerships must include fair payment for expertise, administration, co-design, evaluation and the ongoing relationship.

Projects should be required to show:

- how disabled people were involved from the beginning
- whether a disability-led organisation is a genuine and paid partner
- how disabled people will be employed, paid or otherwise meaningfully involved in delivery and governance
- how the project will respond to communication, sensory, cognitive, mobility, psychosocial and cultural access needs
- how the project will measure whether disabled people actually feel welcome, safe, connected and able to keep participating

Regional, Rural and Remote Inclusion

SWAN is based in regional Western Australia. Inclusion cannot be designed only for metropolitan areas.

In regional, rural and remote communities, disabled people commonly face:

- very limited or no accessible transport
- long distances between towns and services
- few local activities that are genuinely accessible
- a limited disability workforce and high staff turnover
- few allied health services and long waitlists
- limited access to Auslan interpreters, accessible venues and specialist equipment
- higher travel costs and greater reliance on family
- no real choice between providers, clubs or activities

The NDIS reductions will bite harder in regional areas because *there is nothing else*. If social and community participation funding is halved, people cannot simply pick another activity or provider. If therapy funding is cut, there is often no other therapist within reach.

A competitive national grant round will send money primarily to the major cities. No individual assessor has to be biased for this to happen. It is built into how grant rounds are scored. Funding is awarded to larger population bases and to organisations with perceived state-wide or national reach. We note, however, that it is extremely common for state-wide and nation-wide organisations to have no ‘boots on the ground’ in regional and remote communities, and often provide no outreach or engagement with these isolated communities.

Grant assessors compare applications against each other on value for money, which in practice means the number of people reached for the money spent. That measure rewards population density and penalises distance. An organisation in Perth or

Melbourne can put hundreds of participants in its application, hold activities in venues that already exist, pay staff who already live nearby, and spend nothing on travel. An organisation in Manjimup, Karratha or Broome is offering dozens of people across hundreds of kilometres, with travel time paid, accommodation for visiting workers, no accessible transport to bring people in, and a workforce it has to recruit from somewhere else. The Perth application will always look like better value on paper. It is being measured on the wrong thing.

The same organisations also hold the advantage in preparing the application. Large metropolitan organisations employ grant writers, keep evaluation data on file, and have finance staff who can produce the acquittals a Commonwealth grant requires. A small regional organisation run largely by disabled people and family members is doing that work after hours, unpaid, against a deadline, while running its actual services.

The towns with the fewest accessible activities, the least transport and the smallest workforce are the towns least likely to win a grant to fix any of it. Individual funding does not work that way. A person in Manjimup with participation funding in their plan has the same money as a person in Perth, and they spend it on what exists locally, or on the transport and support that gets them to what does not.

If the Inclusive Communities Fund proceeds as a grant program, it needs a defined regional, rural and remote allocation quarantined from national competition, assessment criteria that do not score on cost per person reached, simple applications for small local organisations, longer funding periods for regional projects, funded travel, outreach and local coordination, support for small organisations to partner with organisations run by disabled people and their families, and the flexibility to fund local solutions rather than a metropolitan model delivered at a distance.

Local Governments have a role, because they run libraries, community centres, sport and recreation facilities, parks, events and local information channels. They must be properly funded and held accountable for inclusion. They should not receive grant money to do things they are already legally required to do, including reasonable adjustments under the *Disability Discrimination Act 1992.*

Lasting Inclusion

A short training session or an accessibility checklist will not produce lasting inclusion. Lasting inclusion requires community organisations to build disability inclusion into governance, employment, budgets, communications, program design, procurement, volunteer training and everyday practice.

Funded projects should be required to show how inclusion will continue after the grant ends. That may include:

- disability inclusion action plans developed with disabled people
- disabled people on boards, committees and advisory groups
- inclusive recruitment and volunteer practices
- annual accessibility reviews
- accessible, trauma-informed and safe complaints processes
- ongoing training for new staff and volunteers
- accessible websites, forms, communications and booking systems
- flexible participation rules and support for different communication, sensory and access needs

The measure of success must be whether disabled people experience real belonging and participation. Counting organisations trained, policies written or ramps installed is not enough. Government should measure whether disabled people can join, stay involved, form relationships, take up leadership roles and feel safe.

Consultation Process

The consultation was open from 3 August 2026 to 31 August 2026, and the department acknowledges that the period "is shorter than we would like" (consultation paper, p. 6). Four weeks is not enough for regional and remote consultation, or for people with intellectual disability who need materials in accessible formats and time to consider them. SWAN raised the same issue about the draft NDIS support lists in 2024 and the transitional rules in 2025. Repeated short consultation periods do not meet the standard for co-design.

Our Recommendations

SWAN recommends that the Government:

Individual funding

1. **Immediately reverse the announced 50% reduction to NDIS social, civic and community participation funding and the 10% reduction to NDIS therapy funding.** No reduction should commence on 1 October 2026 or at a later date until an independent human rights and disability impact assessment has been published and considered. The Government's own Impact Analysis is not a substitute for one. It states that social, civic and community participation supports "are central to the objectives of the Scheme and remain critical to participant wellbeing and inclusion", and then asserts that "a shift away from individualised supports may also increase social and community outcomes" without citing evidence for that claim (Impact Analysis, 1 July 2026 update). It confirms the reductions will affect 393,401 participants, or 52% of all participants with this funding in their plans. The document was assessed by the Office of Impact Analysis and then amended twice after publication, on 9 June and 1 July 2026. One of those amendments corrected figures that had substantially understated how many people would be affected: the proportion of participants with acquired brain injury holding this funding was revised from 21% to 90%, cerebral palsy from 18% to 66%, and Down syndrome from 28% to 79% (estimates of co-occurring autism among people with Down syndrome vary widely, with 16 to 18% the most commonly cited figure and some studies reporting up to 39%, National Down Syndrome Society) (The Medical Republic). Autism was one of the categories changed. The original figure for autism has not been published, and the updated document puts it at 41%, covering 131,847 participants (Impact Analysis, 1 July 2026 update). The decision to cut this funding was announced before those figures were corrected. It should be remade using the corrected ones.

2. **Amend the legislative framework to prevent blanket reductions to individual NDIS funding by Ministerial determination,** including reductions of up to 99.9%.

3. **Return participation funding to individuals.** If the objective is community participation, the most direct mechanism is a funded, flexible allocation held by the person and usable to take part in mainstream community activities, consistent with the Productivity Commission's 2011 recommendation. The design should follow an assessment of what has worked and what has not in comparable schemes, including the Ontario Passport Program described earlier in this submission.

4. **State publicly that the Inclusive Communities Fund is additional to individualised NDIS support and will never replace it,** and reconcile the Inclusive Communities Fund's design with the measure appropriated in Budget Paper No. 2, which describes funding for group-based social and community participation activities and individual capacity building support for NDIS participants. Deliver and report the Fund against Australia's Disability Strategy 2021-2031 and the Inclusive Homes and Communities Targeted Action Plan 2025-2027, and fund accessibility work in transport, sport and recreation, education, local infrastructure and safety through the portfolios responsible for those systems rather than through a health grant program.

Amount and duration

5. **Increase the funding substantially and fund it for ten years rather than three.** $200 million over three years is not enough to create accessible and inclusive communities across metropolitan, regional, rural and remote Australia while billions of dollars in individual support are removed. Australian evidence indicates that three-year grants produce three-year projects. Any ongoing appropriation should be at minimum at the level of the ILC program component it replaces. A competitive grant round of this size will also disadvantage disabled people outside the cities. Grant assessors compare applications on cost per person reached, and the applications that look best on that measure come from organisations working in dense population centres. An organisation in Perth can show hundreds of people for

the same money an organisation in Manjimup can show dozens. Individual funding does not have that problem, because the money follows the person regardless of where they live.

What the Fund pays for

6. **Pay for the supports, aids or equipment people need in order to participate, not just training for staff.** Set aside a fixed share of the Fund for this, so it cannot be spent on anything else. That means transport, a support worker to go with someone, Auslan interpreters, captioning, information people can read and understand, help for people who use communication devices, quiet spaces and sensory changes, venues people can get into, and paying disabled people and their organisations to advise and train. A club can have the friendliest staff in the country, but if a person cannot get there, cannot communicate once they arrive, or has nobody with them, they are still at home.

7. **Do not pay organisations to run segregated activities for disabled people. Pay them to open up the ones they already run.** The grant should go towards making the existing club, library, choir, gym or football team work for disabled people alongside everyone else. Grant conditions should require organisations to meet the obligations they already hold under the *Disability Discrimination Act 1992* as a condition of eligibility, and the Fund should pay only for what sits above that legal minimum. The Inclusive Communities Fund's design should also be consistent with the positive duty to eliminate disability discrimination recommended by the Disability Royal Commission at recommendation 4.27, accepted in principle by the Australian Government and now under consideration in the review of the Act. Disability-only groups still have their place where disabled people chose them, set them up and run them, such as a peer support group or an autistic-led program. What must not happen is a person ending up (against their wishes) in a group activity run by a provider because their own funding was removed. This would return us to the days not just before the NDIS, but back to the 1980s, with segregated settings and poorer outcomes, including higher risks of violence, neglect and abuse.

Who delivers and who decides

8. **Fund organisations run by disabled people, and by disabled people and their families, directly and on an ongoing basis, and give them a real say in how the Inclusive Communities Fund is designed, assessed, delivered, governed and evaluated.** These organisations already hold the knowledge community organisations are being asked to buy. Telling a sporting club to partner with one, without paying for it, hands the work to the smallest organisations in the system for free. Pay them properly, and pay the individual disabled people who advise, train or help design a project.

9. **Require every funded project to show that disabled people helped design it, and that disabled people are in leadership, in paid jobs, delivering the work and evaluating it.**

Reach and equity

10. **Set aside a minimum proportion of the Fund for regional, rural and remote communities, and apply a regional loading to grants outside the cities.** Costs per person are higher outside the cities and the number of people reached is smaller, so any assessment based on cost per person will favour metropolitan applicants. A loading set against a recognised remoteness measure should be applied to the grant amount so that a smaller number of people in a country town is not treated as poorer value. Applications should be short and simple, volunteer-run organisations should be able to get help to apply, regional projects should be funded for longer, travel and local coordination costs should be paid for, and organisations should not have to contribute their own money to qualify.

11. **Ensure funding is available for culturally safe, First Nations-led, LGBTQIASB+, culturally and linguistically diverse, low-income, regional and rural community inclusion initiatives.**

Transparency

12. **Show the working, publicly.** Publish where the money went, which towns got it, what it paid for, whether the funded activities are accessible, and what disabled people say about whether any of it made a difference. Measure participation itself, not activity: how many disabled people took part, how often, in which activities, whether alongside people without disability or in a separate group, and whether they were still involved twelve months later. Report on whether the Inclusive Communities Fund is getting people into ordinary community life or parking them in segregated groups. Before the first grant is paid, publish the department's own reasoning on how $66.7 million a year is meant to work for 4.72 million disabled Australians outside the NDIS *and* the 782,013 inside it.

13. **Extend the consultation and provide accessible materials from the start,** including comprehensive Easy Read, Auslan and community-language versions, with a minimum of 12 weeks, and hold face-to-face consultations in regional and remote locations.

Conclusion

SWAN supports inclusive communities and has worked to build them in the south-west for 17 years, largely on short-term grant funding and volunteer input.

This proposal reduces the funding held by disabled people, gives a much smaller amount to organisations, and asks those organisations to build capability on limited funding. It provides approximately $14 a year for each disabled Australian outside the NDIS, paid to organisations rather than to people. It restores an arrangement where the organisation decides what is available and the disabled person takes what is offered or goes without. DPO Australia and 41 other organisations told the Disability Royal Commission that this arrangement is discrimination, and that investing in it is discrimination under the UNCRPD.

If the Government is serious about inclusion it has to do both things: fund community organisations to become genuinely accessible, and keep the individual supports that let disabled people get there and take part. Doing only the first will increase isolation, carer burnout, poverty, crisis and segregation.

SWAN asks the Government to reverse the announced reductions to individual participation and therapy funding, not proceed with this model, and consult further on a model that funds disabled people to take part in their own communities.

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