

Supporting Choice, Gender Equity, and a Whole-of-Person approach to NDIS Supports

Submission to the Department of Social Services' NDIS Supports Rules Consultation

25 JULY 2025



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Language Note

This submission is informed by and reflects the lived experiences of women and gender diverse people with disabilities. We acknowledge that while some concerns raised are shared across gender-marginalised communities, the experiences of gender diverse people warrant specific and direct exploration. Women with Disabilities Victoria (WDV) does not seek to speak for or replace the role of organisations led by and for LGBTIQA+ people with disabilities. Instead, we aim to work in coalition with them and amplify areas of shared concern.

This submission uses 'person first' language (women and gender diverse people with disabilities). We acknowledge that people describe their experience of disability in different ways, and that for many people, 'identity first' language is a source of pride and resistance.

Acknowledgment of Country

WDV respectfully acknowledges Aboriginal people as the Traditional Custodians of the lands and waters on which we work, rest, and continue to benefit from. We pay our respects to the Elders, past and present, of Aboriginal and Torres Strait Islander Communities across Victoria and acknowledge that their continued strength and resilience are built upon more than 60,000 years of history. The WDV community is committed to honouring the unique cultural and spiritual relationship Aboriginal and Torres Strait Islander peoples have with the land and waters, and their rich contribution to society.

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About the Authors

Women with Disabilities Victoria (WDV) is a not-for-profit Disabled People's Organisation (DPO) representing women and gender diverse people with disabilities in Victoria. The organisation is operated by and for women and gender diverse people

with varied disability experiences. WDV has a diverse membership of people from different backgrounds. Women and gender diverse people with disabilities face intersecting forms of structural gender and disability discrimination. WDV actively advocates for our rights to safety and respect, with particular emphasis on disability policy, health services, violence prevention, workforce and community development, and leadership. WDV envisions a world where all women and gender diverse people are respected and can fully experience life.

Key Contributors

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Significant input was also provided by WDV's Gender and Disability Experts by Experience, Youth Experts by Experience, and Community Leadership Hub Members. WDV also thanks our 77 members who provided valuable input via survey submission.

Signatories to this submission

The following organisations endorse this submission:

- Women With Disabilities Australia (WWDA)
- Women with Disabilities Victoria (WDV)

Executive Summary

This submission responds to the Department of Social Services' (the Department) consultation on the NDIS Supports rules. It is informed by three lived experience consultations conducted in early July 2025 with WDV's Gender and Disability Experts by Experience advocates, Youth Experts by Experience advocates, and Community Leadership Hub members (see Appendix 1). It also draws on a 10-question member survey (see Appendix 2), which received 77 submissions over a three-week period—an exceptionally strong response rate for a survey of this kind. This high level of engagement reflects the depth of concern and frustration felt within our community regarding the ongoing changes to the NDIS.

Our lived experience engagements sought to understand how the new NDIS Supports rules recognise and address the needs of women and gender diverse people with disabilities. As outlined throughout this submission, the overarching sentiment from

our members has been one of struggle, frustration, and misunderstanding. WDV recognises that women and gender diverse people with disabilities are disproportionately affected by the inflexibility and administrative burdens of the Supports rules. This includes rigid interpretations of what constitutes a "reasonable and necessary" support, the lack of recognition of gendered and caregiver experiences, and systemic gaps in regional, rural, and remote service access.

WDV's recommendations reflect the need for clearer, fairer, and more transparent and inclusive Supports rules that uphold the original intent of the NDIS—to give people with disabilities genuine choice and control over the supports they need to live a life of their choosing. It is already well recognised that the NDIS is failing to respond to the needs of women and gender diverse people. We urge the Government to adopt the following recommendations to ensure that the NDIS is gender-responsive and upholds the human rights of the disability community.

Key Recommendations

Recommendation 1: Recognise gendered disability experiences in determining what qualifies as an NDIS Support.

Recommendation 2: Acknowledge and fund the dual roles of participants as both people with disabilities and caregivers.

Piantedosi, Diana, Lena Molnar, Maya Panisset, and Raelene Wilding. "There Is Overwhelming Gender Bias in the NDIS – and the Review Doesn't Address It." The Conversation, January 30, 2024. https://theconversation.com/there-is-overwhelming-gender-bias-in-the-ndis-and-the-review-doesnt-address-it-220042; Piantedosi, Diana K, Raelene Wilding, Maya G Panisset, Léna I Molnar, Chloe Bryant, El Gibbs, and Anne-Maree Sawyer. "The Presence and Absence of Gender and Intersectionality in the 2023 NDIS Review: A Content Analysis." International Journal for Equity in Health 24, no. 1 (May 19, 2025). https://doi.org/10.1186/s12939-025-02441-2; Yates, Sophie, Gemma Carey, Jen Hargrave, Eleanor Malbon, and Celia Green. "Women's Experiences of Accessing Individualized Disability Supports: Gender Inequality and Australia's National Disability Insurance Scheme." International Journal for Equity in Health 20, no. 1 (November 8, 2021). https://doi.org/10.1186/s12939-021-01571-7; Yates, Sophie, Gemma Carey, Eleanor Malbon, and Jen Hargrave. "'Faceless Monster, Secret Society': Women's Experiences Navigating the Administrative Burden of Australia's National Disability Insurance Scheme." Health & Social Care in the Community 30, no. 5 (December 5, 2021). https://doi.org/10.111/hsc.13669.

Recommendation 3: Extend the transition period to rebuild trust and co-design a more accessible and flexible Supports rule

Recommendation 4: Expand access and flexibility of supports in rural and regional areas.

Terms of Reference Addressed

The submission draws on a member survey, which incorporated questions from the Department's consultation documents. The submission responds to the following questions:

- How well do participants understand the NDIS Support rule?
- What would help make the rule easier to understand?
- How have the lists of NDIS Supports helped participants to know what the NDIS can and cannot fund?
- What have participants found hard about using or understanding the lists for:
 - o Supports that are NDIS supports?
 - Supports that are not NDIS supports?
- What are some examples of things in the NDIS Supports lists that are not clear?
- Are there any areas of the NDIS Supports rule (or lists) that need to be changed?

Additional questions were added to the survey to provide a gendered lens to the consultation (see Appendix 2).

The submission also draws on three one-hour consultations with WDV lived experience experts and Community Hub members. To support meaningful and indepth discussions, the questions were reduced to focus on the benefits, limitations, and gendered impacts of the Supports rules.

This submission focuses on improving the NDIS Supports rules within the parameters set by the Department, which include retaining the current list-based approach. However, WDV continues to hold that a principles-based approach would be more effective and equitable. In line with the joint Disability Representative Organisations (DRO) submission, WDV strongly advocate for the adoption of a principles-based approach to better reflect the diverse and intersecting needs of participants.

Background

WDV welcomes the opportunity to provide feedback on the NDIS Supports rules. In May 2024, WDV contributed to a joint submission with Women with Disabilities Australia (WWDA) and Women with Disabilities ACT (WWDACT) on the Draft National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Bill 2024. In that submission, we raised serious concerns that the proposed NDIS Support lists would undermine Australia's obligations under the Convention on the Rights of Persons with Disabilities (CRPD), particularly regarding women and gender diverse people with disabilities. We also highlighted the risk that broad exclusions, such as the exclusion of standard household items, would disproportionately disadvantage our community.

In August 2024, we were signatories to WWDA and the Australian Women's Health Alliance's <u>Joint Submission</u> on the draft NDIS Supports lists. This submission highlighted significant issues relating to the rights of women and gender diverse people and the exclusion of menstrual products as "lifestyle-related." While the NDIS has partially corrected the latter issue, WDV remains concerned that the Supports rules fail to meet the needs and uphold the rights of women and gender diverse people with disabilities.

Since the transitional rules took effect on 3 October 2024, these concerns have become a reality. Consultation and survey data collected by WDV demonstrate that women and gender diverse people with disabilities are experiencing increased administrative burden, reduced flexibility, and inconsistent or unclear decision—making. Concerningly, of our 77 survey respondents, only one (1.43%) told us that they understood the NDIS supports rules and felt confident using them. Similarly, only two (2.9%) responded that the support lists helped them completely understand what could or could not be funded under their plans.

These issues are compounded by a lack of recognition of gendered needs and caregiving roles, creating barriers to choice, control, and full participation in everyday life. Eighteen (72%) survey respondents told us that they had difficulty getting disability-specific supports relating to their parenting or care responsibilities. Ten (42%) had difficulty accessing supports relating to their safety, seven (28%) relating to gender-based violence, eight (32%) relating to their sexual and reproductive health, and three (12%) relating to gender-affirming care. Respondents' requests for gender-specific disability supports reflected needs at the intersection of disability and gendered violence (e.g., access to women-only spaces or safe housing), parenting and care work, sexual and reproductive health and wellbeing, and holistic supports and therapies.

WDV Youth Expert by Experience Advocate Insight

"These NDIS support rules are just giving me the vibe that... women weren't consulted at all and weren't involved in the co-design."

As our previous submissions, and those of the other Women's Peaks, have emphasised, Australia is a signatory to the CRPD, and Article 6 recognises that women and girls with disabilities experience multiple and intersecting forms of discrimination. State Parties are required to take targeted measures to ensure our equal enjoyment of rights and freedoms. To meet these obligations, the Australian Government must embed gender-responsive, rights-based principles into the foundations of the NDIS Supports rules.

Providing Choice and Flexibility for Women and Gender Diverse People with Disabilities

Ensuring that the NDIS Support Rules are responsive to gendered disability needs, including those of parents and caregivers

The current NDIS Supports rules restrict access to many supports by narrowly defining what qualifies as a disability-related need. Rather than taking a holistic, person-centred view, the lists attempt to isolate disability from other aspects of people's lives, particularly their gendered realities and parenting or caregiving responsibilities. This approach is not only unrealistic, but it is also harmful; devaluing the feminised labour of caregiving by assuming that it is either unnecessary or such unskilled work that no support is or should be provided. Women and gender diverse people with disabilities have consistently reported that their disability support needs cannot be separated from their broader identities, including their roles as parents, carers, and people with reproductive and sexual health needs.

WDV Youth Expert by Experience Advocate Insight

"Disabilities and everyday challenges or biological [facts], such as periods, are not optional; they cannot be discontinued on command, and this needs to be considered and acknowledged."

Across our consultations, participants described the current system as inflexible, unclear, and deeply frustrating. Word frequency across the three one-hour consultations saw 'confusing' or its synonyms appear 21 times and [a lack of] 'flexibility' and its synonyms appear 24 times (Appendix 1). Many reported spending significant time and energy navigating supports, with inconsistent guidance from planners, price discrepancies between mainstream and disability-marketed products, and increased stress resulting from the fear of non-compliance. These concerns were particularly pronounced when participants tried to access supports that met everyday needs, such as bathers for hydrotherapy, period underwear, sexual wellbeing aids, or household appliances. These gendered supports were inseparable from their disability-related needs but were excluded due to being labelled "mainstream."

WDV Member Insight

"The lack of nuance within situations and disability... [is] not considered.

They are very prescriptive, and items that may not be on the lists at all may be life-changing for those with disabilities, or certain items that the NDIA or plan managers may see as being for one kind of disability may not be able to be purchased for those with other kinds of disability, despite their benefit."

For women and gender diverse people with disabilities, the cost of managing everyday tasks is often higher. For example, using period underwear to manage disability-related incontinence or menstruation can have higher upfront costs than using pads. However, the approach is both cheaper in the long term and can be more supportive of disability-related needs. Yet, the Support rules fail to account for this intersection of gender and disability support needs. Similarly, when providing care to others, participants noted that their disability does not disappear; yet supports that assist in their caregiving roles, such as energy-efficient appliances, parenting supports, or transport costs, were not available to them.

WDV Community Leadership Hub Member Insight

"I was speaking to a parent with a disability last week...They were frustrated because, while they had funding for meal preparation, this was only given for their meals. ...So, somehow, they were expected to magically be able to cook for their child, yet the NDIS recognised that they weren't able to stand for long enough to cook for themselves. How does this make sense?"

The narrow definition of disability-related support entrenches inequality and fails to uphold the rights guaranteed by the CRPD, especially Article 6 (mandating gender-responsive action) and Article 23 (respect for home and the family). The NDIS Support rules must recognise that people's disability-related needs cannot be separated from other facets of their lives. Further, it must be recognised that disability is often a barrier to financial security, which in turn limits the capacity of people with disabilities to pay for essential goods and services. This financial precarity is more pronounced for women with disabilities, who are more likely to be unemployed than people without disabilities or men with disabilities.² Ensuring that the basic support needs of people with disabilities are met requires that the Government provide payment for disability-related everyday supports. Failing this, the Government must increase the rate and security of the disability support pension and other disabilities' access to employment.

WDV recommends the following changes to better support the needs of women and gender diverse people with disabilities:

Recommendation 1: Recognise gendered disability experiences in determining what qualifies as an NDIS Support.

The Government must recognise that disability intersects with other aspects of identity. Supports should be tailored to meet the diverse needs of people with disabilities, including the needs of women and gender diverse people. This must include enabling participants to undertake the daily or required activities relating to childcare and managing sexual and reproductive health.

This should be achieved by:

- 1. Removing hard-line language related to "standard", "mainstream", and "everyday" items from the list of items not considered disability supports.
- Determining the inclusion or exclusion of supports based on whether an item or service provides a functional benefit and is being used as a genuine disability support.

Women with Disabilities Victoria

² Olney, Sue, and Sophie Yates. "The Costs of Living with Disability in Australia: Accounting for Variable Disability-Related Deprivation in Poverty Measures." *Australian Economic Review*, June 26, 2025. https://doi.org/10.1111/1467-8462.70017; Commission for Gender Equality in the Public Sector. "Chapter 3 – Gender and Employees with Disabilities". *Intersectionality at Work*. October 2023. https://www.genderequalitycommission.vic.gov.au/intersectionality-work/chapter-3-gender-and-employees-disabilities.

- 3. Providing supports for needs that are disability-related, rather than *solely* disability related.
- 4. Extending the transition period to allow sufficient time for co-design and collaboration with Women's Peaks to ensure that the Supports rules aligns with the NDIA's forthcoming Gender Strategy and the identified needs of women, girls, and gender diverse people with disabilities.

Recommendation 2: Acknowledge and fund the dual roles of participants as both people with disabilities and caregivers.

This will improve equity and uphold participants' rights to family life by ensuring disability supports do not exclude parenting or caring contexts, where the need remains disability related.

This should be achieved by:

- 1. Removing standard household items from the list of supports that are not NDIS Supports, where such items can be shown to support a person's disability and their parenting or care-related support needs.
- 2. Removing the following items from the list of supports that are not NDIS supports, where such items can be shown to relate to a person's disability and their parenting or care-related support needs:
 - a. Parenting programs
 - b. Babysitting or nannying services, au pairs
 - c. Meeting the early childhood education and care needs of a child.
- 3. Extend the inclusion of meal preparation as a support need for those with parenting and care responsibilities for others.

2. Recognising People with Disabilities as the Experts of their own Support Needs

2.a. Developing consistent principles-based Support rules and processes for requesting alternative supports

The Support rules allow day-to-day costs to be funded if they are "solely and directly related to a participant's disability". However, so far, this mechanism for replacement supports is being applied inconsistently and is difficult for participants to navigate. This problem has only been exacerbated by the limited staff training and rushed

implementation of the transitional lists. Without a more nuanced, gender-responsive and participant-led process, the current rules risk further undermining the original intentions of the Scheme.

Our members and lived experience experts expressed that the current Support rules and associated lists are rigid and confusing. Members reported significant difficulty in interpreting the rules, knowing what is claimable, or advocating for unlisted but necessary supports. When asked how well they understood the NDIS Support rules, seven (9.33%) had not heard of them, 14 (18.67%) did not understand them, and 28 (37.33%) understood them in part, but generally found them confusing. In contrast, 25 (33.33%) felt like they understood the rules but were not confident using them. One (1.43%) responded that they understood the rules and felt confident using them. Elements of the rules identified as being unclear or confusing included difficulties finding them online, the large number of categories, lack of detail and nuance, the need for interpretation, and how frequently the rules changed.

When asked if the rules ought to change, 66.67% (42) thought that the rules need to be changed or improved, while only 2 (3.17%) believed that the rules did not need to be changed or improved. The need for greater clarity, accessibility, and flexibility were the most common changes requested. Other comments requested the inclusion of specific supports (see Appendix 2, Question 4 for a full list of requested inclusions).

Members and experts were frustrated that the lists are inconsistently interpreted by planners and support coordinators who often did not seem to understand the rules themselves. Of the respondents to survey Question 5, 57.81% had experienced the rejection of a support that was important for their safety, health or daily life. Rejected items included hearing aids and exercise physiology. Requests were rejected despite significant evidence of need provided by medical professionals.

Concerningly, over a third of respondents (34.48%) felt that they had been misunderstood or dismissed by an NDIS planner or support coordinator because of their gender, identity, or safety needs. Respondents commented that they felt disrespected, dehumanised, and judged by planners and support coordinators. Respondents raised concerns relating to insufficient staff training, lack of neuro-affirming staff, understaffing and staff prioritising their own interests over the safety and preferences of participants. One respondent had been denied the right to choose who bathed them, with their planner selecting their own staff against the respondent's direct wishes.

WDV Community Hub Member Insight

"In general, [the lists] just make things harder. You're constantly having to do admin to figure out what is and isn't allowed... People end up spending half their time trying to work out what they're allowed to do or how to juggle their supports instead of just getting on with life. It creates additional stress. That's why some people just give up."

The current process for requesting non-listed supports through the "replacement supports" mechanism is too complicated and slow. Members reported that the process of fighting for necessary support was costly, frustrating, and often so complex that they gave up. Some members felt that this was by design; they were either being punished for the mistakes of others, or they were meant to become so exhausted that they would stop asking for what they needed. When participants are made to feel afraid of losing any benefit they have received from the NDIS, they will be less likely to challenge unjust and inconsistent decisions. This is adding to an already over-scrutinised and traumatised environment. This is not how participants should feel in response to a system intended to support their choice and control. There is an urgent need for a fairer, more flexible, transparent, and timely process.

Our lived experience engagements make it clear that, for the NDIS Support rules to be effective and responsive to the needs of the disability community, they must be simple, clear, written in Plain English, easy to navigate, and based on a holistic approach to needs assessment. In addition, any rollout of changes must acknowledge the community's loss of trust and the frustration caused by undertrained staff and irresponsible provider practices. To address this, the NDIA should extend the transition period to allow time for improved staff training, investigation of service provider conduct, and rebuilding community trust.

2.b. Supports for women and gender diverse people with disabilities in regional, rural, and remote areas

WDV Youth Expert by Experience Advocate Insight

"Living regionally should not be a punishment or barrier – NDIS participants have equal rights to access supports and services regardless of location."

The need for flexibility is particularly pertinent to women and gender diverse people with disabilities living in rural, regional, and remote areas, who often face significant barriers in accessing appropriate supports due to limited local service availability and a lack of provider choice. Our members and experts stressed the need for greater flexibility in how they use their funding to adapt to their geographic realities. For many, mainstream services or local options simply do not exist, and travel to access disability-specific services can be cost-prohibitive or logistically impossible. As one

Youth Expert by Experience advocate explained, "regional, rural, and remote areas are limited to providers, and travel allowances should bridge the gap between what people are entitled to and what they can or cannot access."

A rigid approach to what is considered a disability-related support can compound disadvantage. People with disabilities living in regional, rural, and remote areas face additional barriers to accessing support, including long waitlists, high staff turnover, and, when there are staff absences, supports are delayed or not provided. This reality needs to be taken into account when determining what constitutes "reasonable and necessary" support for participants in these locations. Participants need the freedom to pursue innovative or non-traditional supports that suit their circumstances. This should include the ability to use NDIS funds for transport, accommodation during travel for treatment, iPads to access online therapies not available locally, or accessing alternative therapies that are available locally. Greater flexibility within the Supports rules is essential to ensuring equitable outcomes for people with disabilities across all parts of Australia.

WDV urges the government to adopt the following recommendations to rebuild community trust and ensure that supports are accessible for all people with disabilities:

Recommendation 3: Extend the transition period to rebuild trust and co-design a more accessible and flexible Supports rule.

The NDIS Supports rule must be clear, flexible, and person-centred to meet the diverse and changing needs of people with disabilities.

This should be achieved by:

- Extending the transition period to allow sufficient time for co-design of the Supports rules and replacement supports process with people with disabilities, Disabled People's Organisations (DPOs), and representative bodies, with a focus on transparency and accountability in the co-design process.
 - a. The NDIA should publish timelines, decision-making criteria, and regular progress updates to ensure co-design reflects the views of participants and is not unduly delayed or diluted.
- 2. Using this transition period to rebuild community trust through:
 - a. Investment in staff training focused on rights-based, trauma-informed, neuro-affirming, and culturally safe practices.
 - b. Monitoring and addressing irresponsible provider conduct.

- c. Developing clear and accessible information for NDIS participants to support them in understanding and navigating upcoming changes.
- 3. Ensuring the revised Supports rules and replacement process are:
 - a. Simple,
 - b. Clear,
 - c. Written in Plain English and Easy Read,
 - d. Easy to access and navigate,
 - e. Holistic in their approach to needs assessment.

Recommendation 4: Expand access and flexibility of supports in rural, regional, and remote areas.

The NDIS Support rules must recognise that a participant's access needs are shaped not only by their disability but also by where they live. People with disabilities in rural, regional, and remote areas often face limited service options, requiring more flexible and creative approaches to meeting their support needs.

This should be achieved by:

- 1. Embedding location as a relevant consideration when determining whether a support is reasonable and necessary, recognising that some supports may not be accessible or appropriate in non-metropolitan areas.
- 2. Allowing greater flexibility of funding to accommodate locally appropriate alternatives, such as:
 - a. Travel costs for providers,
 - b. Technology or equipment to support remote service delivery,
 - c. Funded use of local, informal, or alternative supports where no formal services exist.
- 3. Ensuring that rural, regional, and remote participants are meaningfully involved in the co-design and evaluation of supports to ensure that policies reflect lived experience and geographic realities.

Appendix 1: Consultation Data

Purpose and Structure

This appendix supplements the submission made by WDV to the Department of Social Services' NDIS Supports rule consultation, presenting insights from WDV's Community Hub Members, Youth Experts by Experience, and Gender and Disability Experts by Experience.

Anonymised comments are presented to illustrate member and expert experiences and to share their suggestions for system improvement firsthand.

Methods

Consultations

The three online one-hour consultations occurred in the first week of July. This included consultations with WDV Community Hub Members and Liaison Officers (6), Youth Experts by Experience (6) and Gender and Disability Experts by Experience (8). One Youth Expert by Experience who was present in the consultation sent additional responses following the session, and one Gender and Disability Expert by Experience who was unable to attend the consultation responded in writing. The separate consultations have been summarised together and include the two written responses. All responses have been anonymised, with the following acronyms used to identify from which group the comment came:

- YEBE: Youth Expert by Experience
- GDEBE: Gender and Disability Expert by Experience
- CHM: Community Hub Member

The consultations began with an overview of the NDIS Supports rule, the Government's current inquiry into the Supports rule, and related advice that WDV had previously provided to the Government in the NDIS Act consultation. All participants were then asked the same four questions about the NDIS Supports rule. The Youth Experts by Experience had a speaking order, while the other groups used a raised hand system to determine speaking order. Community Hub Liaison Officers were present in Community Hub member consultations to provide support and share experiences from community members who were unable to attend the consultation.

Limitations

WDV recognises that speaking about the NDIS can be difficult and that some of our members have experienced trauma relating to the NDIS. This can make sharing their experiences in a group setting difficult. All groups participate in regular consultations and have established methods for managing potentially triggering topics, including stepping out of the consultation for as long as they need, joining with their camera off and names anonymised, providing comments in the chat rather than speaking, to avoid sharing experiences that may be triggering for others, or to provide their comments in writing rather than attending in person. These methods were in place during the NDIS Supports rules Consultations, providing a framework to reduce risks for participants. Given these safety precautions, the responses provided may not reflect the full experience of those present. Participants were invited to complete WDV's NDIS Supports rule survey, enabling them to share their insights in a more anonymous forum.

Member Insights

Question 1

Participants were asked whether they thought having a list of what the NDIS will or will not pay for was helpful.

Feedback from the consultations was mixed, with a small number of positive responses (5), a larger number of frustrated and negative responses (24), and several neutral responses (6). While some welcomed the increased clarity that supports lists could provide, the majority felt the lists were too restrictive, had increased confusion, limited their autonomy, added to their anxiety or administrative burden, and exacerbated inequalities (particularly for those in rural, regional, and remote areas). Some mentioned that they felt like they were being punished for others' mistakes and expressed a broader erosion of trust in the NDIS that extended beyond the lists themselves.

Positive comments:

- YEBE: A list of dos and don'ts is helpful regarding clarity of what is funded specific examples are helpful.
- **YEBE:** A list could assist in determining exactly how and if the NDIS would be helpful to an individual or their child.
- YEBE: Enables participants and their team to know what they need to fight for versus what is included.

- YEBE: Yes! A nice, clear list is helpful. [A list of funded supports] will help people to read through/search for particular [supports] to see if the support they're after is [available to them]. It will also give them a clear idea of what they can ask for/what is likely to be accepted and a clear idea of [supports that] won't be accepted, so they don't waste their time/the assessors' time.
- **GDEBE:** They can provide useful clarification for common misunderstandings, e.g., peers post in Facebook groups about things that are not supported by the NDIS, which actually are included on the list.

Negative comments:

- **YEBE:** The needs of participants are assumed and prescribed, which is not reflective of how disability is different for everyone.
- YEBE: In some areas, the list is very much open to interpretation something is a disability support until it is not obtained through a disability specific organisation.
- **YEBE:** The whole purpose of consumables was to buy every day, low-cost stuff, to buy as you see fit. And these didn't need to be mentioned in the plan.
- YEBE: [The lists are] gatekeeping, too restricted and confusing, especially as this is all about saving money and making things easier. Everyday products and services are often cheaper and easier than [an NDIS] support, so it's quite confusing that these are not the things that are funded, or that you have to jump through a lot of hoops to be able to get these things funded.
- **YEBE:** Many plan managers, support coordinators, and providers often do not understand the lists.
- **YEBE:** A very narrow focus is applied it is not appropriate to determine what items apply to specific disabilities.
- **YEBE:** Being too specific can be problematic because it is not possible to list literally everything someone might need for every disability.
- **GDEBE:** No! Costs listed as 'everyday household items' can be specific access needs for people with disabilities the classification doesn't reflect this.
- **GDEBE:** No! The directive from NDIA for NDIS participants who self-manage to run every spend past their Support Coordinator takes away choice and control.
- GDEBE: I can't really make sense of the lists when I look at them.
- **GDEBE:** They limit choice and control, in general.

- **GDEBE:** I think the lists have made me even more reluctant to spend my funding, because I feel like I might draw attention and then be penalised, like with reduced funding or removal of self-management.
- **GDEBE:** No! People don't know that the lists exist/ where to find them, and participants are not looking at them.
- **GDEBE:** Just because it's on the list, doesn't mean it will be approved as part of your individual plan this can be confusing.
- **GDEBE:** The lists are too restrictive/ prescriptive this takes away from the founding idea of the NDIA—that the NDIS provides individualised plans.
- GDEBE: It feels like all NDIS participants are being punished or having their spending restricted because a few were seen to be "misusing their funds".
- **GDEBE:** They've excluded things, e.g. music and arts therapy on the basis that they aren't "evidence-based" when evidence of the effectiveness of these therapies does exist.
- GDEBE: They are anxiety-inducing and don't provide any additional clarity, which is overwhelming.
- GDEBE: It has changed the way plan managers behave they're rejecting supports or asking for more evidence without being specific about the evidence they need.
- **GDEBE:** The issue is not the list but with the entire NDIS it's not fair and just. There seem to be different rules for different people. Some people get things approved that other people do not.
- **GDEBE:** The lists are just as confusing as the entire NDIS they don't make things any clearer or more confusing; it's already confusing!
- **GDEBE:** People with disabilities living in rural and remote areas often can't access approved services they aren't available where they live.
- **GDEBE:** [The lists are] also not helpful, because I have claimed for things not on the list and had them paid for until someone initiated a review and then denied permission to claim. I then successfully argued to the then AAT that all four things were reasonable and necessary. So, it's not clear-cut, but you need the energy and the ability to follow through on these things.
- **CHM:** Yeah, it's really confusing. Anyone with less brainpower than me would have so much trouble navigating the whole NDIS process. Even I struggle. They need to stick to one rule and keep it that way.

Other or neutral comments:

- YEBE: What is funded on the NDIS has gone from very flexible to extremely narrow, and having a list specifying what is funded with examples is very helpful in understanding what applies to the individual.
- YEBE: The list is useful, but we need to be mindful of what is on the list and
 what's useful for different types of disability, and working out when I need
 something special compared to someone else who has the same disability as
 me.
- **GDEBE:** [They are helpful] only to an extent, as it may give people some ideas of things they can claim. However, the lists can be limiting, as we are the experts in what we need.
- **CHM:** I think it's useful, but when we've looked at the lists before, it just seems to be an ever-changing feast.
- **CHM:** I like the list, but yeah—it's constantly changing. One day it's fine, the next day it's not. They need to just stick with it.
- CHM: Give us one answer—yes or no. Don't keep flipping and flopping about it.

Question 2

Participants were asked whether they thought anything about the lists should be changed and, if so, what changes they would want.

Participants, while frustrated with the new rules, offered a range of practical, values—driven suggestions to improve the fairness, flexibility, and clarity of the lists.

Participants called for clearer, better–structured lists that are easier to understand and use, with increased training for NDIS staff and plan managers/coordinators and better communication with NDIS participants to support understanding.

There was significant feedback that the current lists of items that are *not* disability supports are arbitrary and harmful, particularly where excluding certain supports added to costs and administrative burdens on both participants and the NDIA. Many felt like the lists ignore human rights and lived experience, challenging the values that were once foundational to the NDIS. Participants regularly called for the same items to be added to the supports lists; more types of therapy, supports for their sexual and reproductive health, items that enabled them to access their NDIS supports, e.g. swimwear to access hydrotherapy or transport and travel-related costs to get to support providers or have them do home visits. Travel costs were particularly important for those living in rural, regional, and remote areas who did not have access to public transportation or nearby support services.

Participants strongly supported a more individualised, flexible, and discretionary process, especially for items that are not on the supports list, again citing that the new rigidity conflicts with the original vision for the NDIS and feels like a way of punishing people with disabilities for the actions of others. Similarly, there was deep concern that the system creates a segregated market by excluding everyday items from the support lists. The approach reinforces inequality, lacks transparency, and enables price gouging.

Comments related to improving clarity:

- YEBE: Break the list down, relevant to its level of acceptability and possibility.
- YEBE: NDIS employees, participants, and providers need time and resources to understand the lists.
- YEBE: Descriptions of how to search for specific items in the list determining acceptability.
- YEBE: Support lists should acknowledge that pricing is a significant part of making supports a reality for participants and providers.

Comments related to the supports that should be added:

- YEBE: Many required supports are not included period underwear, sexual services.
- **YEBE:** People want more, and different types of therapy funded art and music therapy, sexual services.
- **YEBE:** Participants have human rights which ought not be restricted or impeded upon by someone else deciding how a disability can or should be managed.
- YEBE: There needs to be funding for participants to receive support away from their normal environment – transport, accommodation, meals, passport, visa, etc.
- YEBE: Medications and tools to manage disabilities should be covered as they are not everyday purchases; they allow disabilities to be more manageable.
- **YEBE:** Regional, rural, and remote areas are limited to providers and travel allowances should bridge the gap between what people are entitled to and what they can or cannot access.
- YEBE: Surrogacy, Menstrual products, IVF Recently, Victoria started offering free pads and tampons in most public places (which it should have done a long time ago). But I still think it should count as a support for NDIS/people with disabilities because menstruation is not something girls/women have a choice in it's biological... And people with disabilities might not be able to access

those public places when they need them – they might be far away, they might need a support worker to help them, etc. And it's only pads and tampons being offered for free in these public places – menstrual cups, period undies, etc, aren't being offered.

- YEBE: I have heard that IVF is super expensive. Especially if it doesn't work and you have to do it repeatedly. By not having it on the NDIS, I feel like it discriminates against people with disabilities who are unable to have kids. It just creates another barrier for them not to have kids.
- YEBE: Sex work and toys a while ago, we did a consult with [staff members] from WDV about sexual pleasure, and we spoke a lot about the negative stigma around women with disabilities not being able to have sex/not enjoying it/the stigma with sexual pleasure. Having sex work and toys on the unsupported list reiterates the negative stereotype that women with disabilities don't/can't/are unable to have sex.
- **CHM:** For example, I go to water exercises three times a week. Right now, I'm going through a new pair of bathers every two weeks. I can't afford the expensive chlorine-resistant ones or even the Speedo brand. So why isn't that considered a necessary support? Bathers are essential for my form of exercise. The fabric is lighter than normal clothes, and swimming helps me manage my disability. How is that not a part of my disability support?

Comments related to improving flexibility and transparency:

- **YEBE:** Flexibility, choice and control, and access to services and therapies, which make living with a disability easier.
- YEBE: Exceptions and considerations of what [supports] might be on the premise that all disabilities are different, including for people with the same diagnosis.
- **YEBE:** More clarity around home modifications and disability related temperature control.
- YEBE: You need to understand people as whole people to actually be able to make [supports lists] helpful.
- **GDEBE:** [There] needs [to be] flexibility for people to make a case for accessing supports that aren't on the list.
- **GDEBE:** Other income (e.g., [Disability Support Pensions]) will need to increase, or other sources of funding need to be made available for the supports that NDIS no longer approves.

- **GDEBE:** I actually don't know much about the lists.... I still go by "reasonable and necessary" and if I believe I could argue that point in a court of law. That's how I conduct myself. Perhaps if they are insistent on sticking to a list, there should be a way to apply for access to something not on a list to argue your case...not the long, drawn-out process that there is now. Like a quick application process for items such as the dishwasher, so you can quickly give your reasons.
- CHM: I used to really appreciate the price guide because it listed all the different line items. It was very detailed, and I relied on it religiously when I was a support coordinator. But the guides aren't always available, and to me, that feels like a lack of transparency. Why hide it?
- CHM: In general, [the lists] just make things harder. You're constantly having to do admin to figure out what is and isn't allowed, how you can use your supports, and how to argue for additional supports. Sometimes it's straightforward—something's either in or out—but a lot of the time you have to make a case. People end up spending half their time trying to work out what they're allowed to do or how to juggle their supports instead of just getting on with life. It creates additional stress. That's why some people just give up.
- CHM: We almost need a category called "discretionary." I'm thinking about someone who has a child with significant disabilities. She showed me a screenshot of adult wet wipes she needed—\$9 a packet through the NDIS portal, but only \$3 at Woolworths. The price difference is massive. The price gouging is real. She doesn't get support for herself and ends up just buying things out of pocket because it's too hard. That's where the anger comes in.
- **CHM:** Why do we have a completely separate market for people with disabilities? That's another form of segregation, isn't it?
- **CHM:** There was supposed to be a carve-out that said you could buy a commercially viable option with your NDIS money. Does that still exist, or has it disappeared? [CHM response: In the case of the wet wipes, I think you can get the cheaper option, but it involves extra steps.] And yet we're the ones accused of rorting the system.

Question 3

Participants were asked whether there are any supports that women and gender diverse people need that the NDIS doesn't pay for.

Participants highlighted critical gaps in the NDIS that fail to recognise the gendered experiences of women and gender diverse people with disabilities. Examples included how their disability support needs cannot be separated from their support needs as a

parent, woman, or gender diverse person with a disability. They expressed that the exclusion of everyday household items (including items relating to sexual and reproductive rights) disproportionately burdens women and gender-diverse people and that such items were important for their health and wellbeing.

Comments:

- YEBE: Mainstream period products and underwear.
- YEBE: Sexual services and accessible toys.
- YEBE: Specialised support surrounding pregnancy and being a parent.
- YEBE: TENS machines for chronic pain, which results from disability and menstruation and having female plumbing.
- YEBE: Menstruation products we don't choose whether we have a period or not, it's biological, so we should have all the support for it for free.
- YEBE: Sex work and toys not every woman with a disability is in a relationship, and so they'd want to use sex toys/might want to access sex services, or they want a job in sex work, and even if they are in a relationship, they still have the right to use sex toys.
- **GDEBE:** Accommodation and travel for support workers to accompany participants on holiday.
- **GDEBE:** "Everyday household items", e.g. a dishwasher, that are specific supports for some people with disabilities.
- CHM: I was speaking to a parent with a disability last week; they are on the NDIS, and so is their child. They were frustrated because while they had funding for meal preparation, this was only given for their meals. But as a parent, they obviously also had to cook for their child. Their child didn't have funding for meal preparation. So, somehow, they were expected to magically be able to cook for their child, yet the NDIS recognised that they weren't able to stand for long enough to cook for themselves. How does this make sense? The supports need to recognise us as whole people, our disabilities don't just start and end when it's convenient for the government.

Question 4

Participants were asked if there was anything else they wanted WDV to say to the Government about the NDIS Supports rule.

Participants spoke passionately about the need for systemic reform, calling for an NDIS Supports rule that emphasised gender equity, regional inclusion, lived experience, and transparency. Participants reiterated that the NDIS was intended to

provide choice, control, and individualised support and that they felt this vision had been lost.

Comments relating to living outside metropolitan areas:

- YEBE: Living regionally should not be a punishment or barrier NDIS
 participants have equal rights to access supports and services regardless of
 location.
- YEBE: For some participants, they're forced to go with one provider, because that's the only choice they have in a 100km radius of where they live. And, you know, if you've had a bad experience with one of them, what are you going to do? You've got nothing.
- **CHM:** One thing I'd highlight is the cost of travel and access to services, which increases the risk of isolation, especially for women with disability.

Comments relating to gender and disability:

- YEBE: Women and gender diverse people are diagnosed with chronic health conditions at a greater percentage than men.
- YEBE: There's obviously very often a gendered element of care when women care for their children, whether or not they are on the NDIS. Women with disabilities are a key group of primary carers in this country.
- YEBE: Disabilities and everyday challenges or biological [factors], such as periods, are not optional; they cannot be discontinued on command, and this needs to be considered and acknowledged.
- YEBE: Having a period is biological, and women don't choose whether we want it or not (no one would choose to have it if we actually got the choice). These NDIS support rules are just giving me the vibe that a group of men created them and that women weren't consulted at all and weren't involved in the codesign process. We should be able to access these products for free. Especially since if we don't use menstrual hygiene products, it can lead to infection and other health issues.
- YEBE: Women with disabilities are capable of sex/sexual pleasure.

Comments relating to the diversity of disability:

 YEBE: Disabilities are different for everyone, despite having the same diagnosis.

- YEBE: Everyone is different, every disability is different, and thus different supports are necessary for one to have the best quality of life and level of agency disability accommodations cannot be categorised or prescribed.
- YEBE: Useful tools and resources may not be disability specific a piece of equipment from Vision Australia might also benefit someone with chronic pain, which should be allowed and not restrict certain disabilities being applicable to certain products from a particular provider.

Other comments:

- YEBE: Indexation and price guides are not aligned or appropriate for participants or providers.
- YEBE: [NDIS Supports are] extremely important [but] supports and services are completely inaccessible or difficult to access.
- YEBE: The idea that participants can pre-empt what might be needed, what
 might happen, or their future exactly is ridiculous, unrealistic, and the NDIS
 needs to respect and honour this rather than expecting everything to be laid
 out and lives perfectly planned without deviation for the duration of their NDIS
 plan.
- **YEBE:** Partners, family, friends, and kids are not carers [nor should they be] expected to adopt that role thus, this idea should be obsolete.
- YEBE: People with disabilities are human people who can experience and enjoy sexual experiences, want to be seen as equal, not be disadvantaged by marriage inequality. It [should not] be assumed that informal supports negate the need or appropriateness of formal supports.
- GDEBE: People with disabilities are the experts on their own support needs –
 we should be the ones who determine what supports are included under the
 NDIS. We should be writing the lists!
- **GDEBE:** It's difficult to get hold of Plan Managers to get supports approved. The lists seem to be making more work for the NDIA, which it doesn't have the capacity to manage.
- **GDEBE:** The people making these decisions don't understand living with disability and don't have empathy for what it feels like to have supports taken away.
- **GDEBE:** Crack down on dodgy providers, that's where the money is going. I can give many examples.

- GDEBE: I think the price guide has created a false economy with inflated prices.
 For example, the cost of reports, OTs, and support workers has gone up significantly.
- **GDEBE:** Let us dictate what is reasonable and necessary, and let us retain choice and control, which was the original intention.
- GDEBE: I needed a solar-powered gate opener. I got an OT report, which cost \$1,500, and the request was approved. But after several months—during which I hadn't had time to purchase it—the approval was revoked. I appealed the decision to the NDIA, which required another OT report—another \$1,500—and it was denied again. Then I went to the AAT, where I had to get yet another OT report, again costing \$1,500. Finally, it was granted. The actual cost of the solar gate opener was \$3,495, even though the original quote from the same supplier had been \$1,200. So, the cost of the reports alone came to \$4,500—and that's not even including the cost of NDIA lawyers and AAT staff time. All of that far outweighed the cost of the item itself. It was ridiculous and offensive. But I had the education and knowledge to follow it through and get what I needed. A lot of people wouldn't be able to [do the same].
- **GDEBE:** The focus is wrong. Most of the rorting is done by the providers, whether they are registered or informal providers of some kind, these are the ones who can be despicable in their pricing and conduct.
- CHM: It's a human rights issue.
- **CHM:** The lack of transparency around the support lists creates a power imbalance. It contradicts the claim that people with disabilities are rorting the system.
- **CHM:** If the list isn't clear and transparent, people are going to keep making mistakes.
- **CHM:** There needs to be flexibility to buy cheaper products that are functionally the same but don't carry the "disability" label. I liked how [CHM] framed that—having separate markets. It's price gouging by providers and another form of segregation.
- **CHM:** They've set up a system where Coles and Woolworths are the cheaper options—but we're not even allowed to access that option! It's gouging on top of gouging. The double gouge.
- **CHM:** I've been without my scooter since October 23 last year. I'm paying for a rental, but the delay is ridiculous. They keep pushing it back, saying it'll take another month to order because I'm in the country. That's seven months since it should've been approved. Scooters are essential; you can't substitute them. They're wasting taxpayer money on a rental that isn't solving anything.

- **CHM:** I'm not even on the NDIS. I looked into it, but the hoops and paperwork were overwhelming. I don't have the time or energy, so I gave up. We're in a grey area with support services up here [in rural Victoria], and it's just too much hassle.
- **CHM:** We're in a rural area that crosses between regions. You call one service and they say, "No, that's another area." It's just really complicated.
- **CHM:** My sister is looking into the NDIS for her 16-year-old... She's had to go through in-house assessments and so much red tape. It's exhausting.
- CHM: I totally agree—they don't understand. I did a plan back in March, and my financial planner wants the other planner to provide a written list of what's approved. But isn't that what the plan is for? They want extra approval beyond the plan. It's confusing. Meanwhile, the support coordinator and financial planner don't know what's going on, but still charge you \$30 for an email or \$45 for a phone call just to say, "I don't know." We have to watch every dollar.
- CHM: I support a friend with her reviews when she's not up to it. I took a call from someone I thought was a planner, but they were actually there to assess for possible misuse of funds. That wasn't made clear to me. They fixated on meal prep. My friend is self-managed and uploads invoices in bulk. They saw that as dodgy spending and significantly cut her funding. They forced her to move from self-managed to plan-managed without a choice. They even cut her current plan short without warning, which meant she couldn't access services for a few weeks. It was appalling.
- CHM: If the NDIS is threatening Australia's status as a signatory to the UN
 Convention on the Rights of Persons with Disabilities, that's a big deal. The NDIS
 was designed within a human rights framework and was meant to improve on
 previous models. But in practice, it's become restrictive instead of empowering.
 Australia should be meeting those human rights standards, and failing to do so
 has serious national and international consequences.
- **CHM:** Regional participants are affected by changes to travel coverage. When physios or OTs visit your home, the reduced travel reimbursement limits access and increases isolation. At the same time, rates for allied health services have been cut—and many of those workers are women.

Appendix 2: Member Survey Data

Purpose and Structure

This appendix supplements the submission made by WDV to the Australian Government's NDIS Supports Rule consultation, presenting insights from members of our organisation based on their lived experience of the NDIS.

Comments and responses are presented to illustrate member experiences and to share their suggestions for system improvement firsthand.

Methods

Data Collection and Participant Recruitment

A short 10-question survey was developed, combining questions from the Government's open NDIS Supports rule survey with additional questions focused on the needs and experiences of women and gender diverse people with disabilities.

The survey was open for three weeks. Participants were recruited via the WDV newsletter and an email to the WDV Members' mailing list. An email was also sent to WDV staff, including our Youth and Gender and Disability Experts by Experience advocacy teams, requesting that staff who were also WDV Members complete the survey. Members were provided the option of completing a Standard or Plain English version of the survey. The Standard English survey received 72 submissions, and the Plain English survey received 5 submissions. Questions and responses have been merged for brevity and accessibility.

Limitations

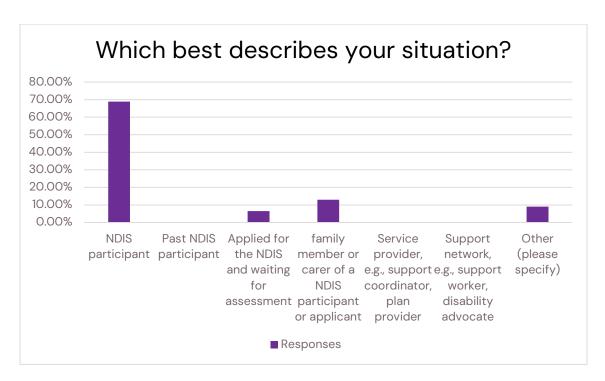
Due to short Government consultation timeframes and WDV staffing and funding constraints, an Easy Read survey was not able to be produced. As such, the data collected may not reflect the breadth of women and gender diverse people with disabilities' experiences of the NDIS Supports rule. In particular, the voices of women and gender diverse people with intellectual disabilities and others who may require Easy Read will not be fully reflected in this submission. Given the intersection of gender-based violence and intellectual disability, WDV strongly recommends that the Government commission further consultations on the impacts of the new NDIS Supports rule on women and gender diverse people with intellectual disabilities or acquired brain injuries who have experienced gendered violence.

Member Insights

Question 1

Respondents were asked to describe their interest or experience with the NDIS:

- NDIS Participant 53 (68.83%)
- Past NDIS Participant 0 (0.00%)
- Applied for the NDIS and waiting for assessment 5 (6.49%)
- family member or carer of a NDIS participant or applicant 10 (12.99%)
- Service provider, e.g., support coordinator, plan provider 0 (0.00%)
- Support network, e.g., support worker, disability advocate 0 (0.00%)
- Other (please specify) 7 (9.09%)



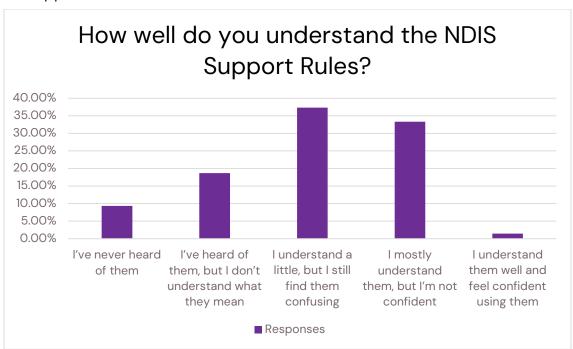
'Other (please specify)':

- Trying to apply for NDIS without support.
- Disabled person who has not yet explored if any support is available through NDIS and believes there are issues with support based on the experiences of family, friends and what is being discussed in the community.
- May need to apply for the NDIS one day.
- Applied for and refused NDIS. Need to reapply, but it's exhausting.
- Future NDIS participant.
- NDIS participant, parent of an NDIS participant and Provider.

Question 2

Respondents were asked how well they understood the NDIS Supports Rules.

- I've never heard of them 7 (9.33%)
- I've heard of them, but I don't understand what they mean 14 (18.67%)
- I understand a little, but I still find them confusing 28 (37.33%)
- I mostly understand them, but I'm not confident 25 (33.33%)
- I understand them well and feel confident using them 1 (1.43%)
- Skipped: 2



Respondents commented:

- Make it clearer exactly what each item covers.
- Having one main website to access with all *current* NDIS support rules and simple content lists – it takes too many clicks to reach relevant information for individuals, with exhaustive lists of changes to individual codes and legislation that can be exhausting to navigate for people with disability and especially cognitive disability.
- Plain language!
- First, where to find them? I did a quick Google to double-check how much I knew/thought I knew, and I can't find the support rules themselves in the first page of search results, although I found all the legislation which is too dense and confusing for a lay reader wanting to understand eligibility of support for

costs. There are AI summaries, but I'd prefer a direct link to the Support rules in plain language.

- Avoiding apparent inconsistencies and effectively double standards.
- The rules keep changing, and it is hard to keep on top of what is/isn't allowed. It can take a long time to ascertain if certain things are allowed, if they don't fall under your usual day-to-day supports.
- Someone to explain.
- Transparent, open, consistent and reliable information.
- Clearer examples of 'would we fund it?' guides.
- Very often, documents are far too long. I prefer dot points.
- Clear language, not changing definitions of words to suit them, a clear format that is not cluttered.
- That they don't create more confusion and complexity.
- Changing the name "NDIS Support Rules". I remember receiving NDIS email communications on these, but I had to Google the name to ensure they referred to these emails.
- Clear explanations and outlines of what they actually are. At this stage, it doesn't seem that even staff or decision makers know what they are and what they mean, and what they involve.

Repeated comments:

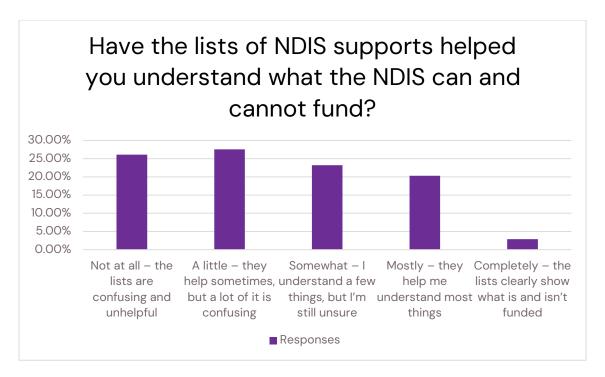
"Stop changing them" x2

Question 3

Respondents were asked whether the lists of NDIS Supports helped them understand what the NDIS can and cannot fund.

Of the respondents,

- 26.09% (18) responded, 'Not at all the lists are confusing and unhelpful'.
- 27.54% (19) responded, 'A little they help sometimes, but a lot of it is confusing'.
- 23.19% (16) responded, 'Somewhat I understand a few things, but I'm still unsure'.
- 20.29% (14) responded, 'Mostly they help me understand most things'.
- 2.90% (2) responded 'Completely the lists clearly show what is and isn't funded'.
- Skipped: 8



Respondents explained what they found hard or unclear about the lists:

- They continually change the rules about who they will and will not fund. They
 are often adding further parts, which means I don't get the support that I need.
- First up, finding them. Some of the recent changes are good, such as ensuring funding can support a full program, but there's still too much leeway for outrageous overcharging for services that cost significantly less if you're not receiving NDIS support.
- There are too many categories and too many exceptions, and instead of making it better for "participants" and our small/independent service providers, it's all set up for big organisations that waste huge amounts of our money but don't pay their staff properly. I can't understand why something that was lauded as being essential (like an iPad for remote therapy) is suddenly verboten at the same time as therapists have had their travel costs cut. I can't afford for my OT to visit me at home, but the iPad NDIS provided 5 years ago is no longer working, so I can't use that for remote appointments. And I want to do things that are interesting to me (and that my specialists advise), but these are also now cut. Do my providers "lie" and say they are providing a different service? Even if what they are actually doing is cheaper than the lie? So much for "choice and control".
- It would be too exhaustive a list to cover everything, and different disabilities
 have different requirements, so as your circumstances change, you have to
 keep checking to see what's allowed or ask when you are still not clear.
 Response times can take a while.

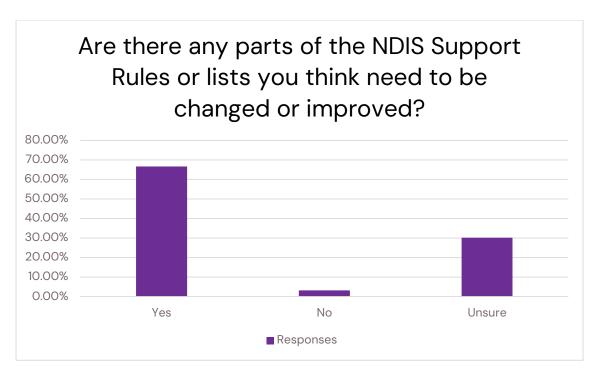
- Not everything is black and white; however, NDIS is trying to make it that way, with no real understanding of a particular client's disabilities.
- I'm still not clear about them.
- Get rid of unethical providers.
- The fact that they keep changing is the biggest problem.
- What I find clear, planners have disagreed with me about.
- Too many details Price lists are very hard to find.
- Overwhelming.
- The type of language used.
- Endless scrolling to find what you're looking for. They still require interpretation.
- I need to know more about it.
- Some of the rules appear to clearly conflict with "reasonable and necessary" or being related to disability, or conflict generally with the purpose of the NDIS and the values of the NDIA.
- badly written, mean-spirited, ableist.
- They leave out so much information.
- It would be good to be more specific about the kind of services provided. The "sex work" and "cruising" controversies have been highly mediatised, but would NDIS supports still include sexology appointments or attendance of community events, for example?
- The lack of nuance within situations and disability that are not considered. They
 are very prescriptive, and items that may not be on the lists at all may be lifechanging for those with disabilities, or certain items that the NDIA or plan
 managers may see as being for one kind of disability may not be able to be
 purchased for those with other kinds of disability, despite their benefit.

Question 4

Respondents were asked whether there were any parts of the NDIS Support Rules or lists they think need to be changed or improved.

Of the respondents,

- 66.67% (42) responded, 'yes'.
- 3.17% (2) responded, 'no'.
- 30.16% (19) responded 'unsure'.
- Skipped: 14



Respondents who answered 'yes' explained what they want changed or improved:

- What is actually covered under each item could be clearer and more detailed in easy-to-understand language.
- They need to make "Reasonable and Necessary" clearer.
- Personal grooming and help to feel "normal" have been taken away. So instead of feeling confident outside, I just don't go anywhere due to hair loss.
- I have a guide dog, and I believe that having a working dog means that my guide dog should be insured. If it were a pet dog, I would understand, but my guides are like my eyes.
- They need to be easier to understand. They are for disabled people, so they should be Easy Read.
- Locating the up-to-date Support Rules, and that those Rules are provided in lay language, community languages and various formats to ensure accessibility.
- We are meant to have 'flexible supports', but each plan gets less flexible and more stringent. I have therapies in my plan that I don't want or need for which dollars are specifically directed, but these things I need are not accessible anymore. And now this thing about what is Core and what is something else is even more confusing.
- Continence aids, especially low-support continence aids such as washable underwear from companies such as Modi Bodi and Poise.
- In your plan, you need to list all services explicitly and have a number of supporting documents with that. Such things as art mentorship, art therapy,

and myotherapy. They are taking longer and longer to review plans. They ask again and again for OT reports, which cost around \$2,000, and these providers don't know you, as per reports and evidence provided by GP's Psych, physio, and psychiatrists. It is almost a waste of money for such reports, which NDIS request every 2 years. The wait time for 'change of circumstances' and priority review meetings, from my experiences, takes around 6 months for the NDIS meeting and then months and months before the new NDIS plan is put in place. And then, as they are not medically trained, so many things are not incorporated into this new plan on the basis of rigorous medical evidence. For me, NDIS is a torturous experience, and every 2 years or so I have to keep providing evidence again about my permanent disability.

- Why expenses related to your disability are no longer covered (medical copayments, employment and caring costs).
- More support offered for different disabilities.
- I was asked to get specialists' reports to prove I still have a disability. I find this
 insulting.
- I think the support rules should have a little more flexibility.
- Need to explain more clearly, otherwise, to include holistic supports, as this is in line with the principles of recovery.
- More flexibility for neurodivergent participants. Standard supports are not always suited to their way of experiencing the world, and we find it difficult to see any benefit from them.
- Making sure they're immediately accessible and printable.
- I assume you are talking about changes being introduced, not the current rules? I don't like the restrictions being introduced.
- The waiting time for approval.
- It should be recipient-focused as intended, not driven by providers.
- Yes, regarding gym membership, which was recently cancelled. For some of us, and especially in the Winter, THIS IS THE ONLY SAFE EXERCISE I HAVE ACCESS TO.
- When everyday items can be used as assistive technology, i.e. a planner said I shouldn't have bought an automatic bin, but I have a letter of support from my OT related to my disability.
- Participants in rural regions face different barriers compared to metro participants.
- Needs to be simpler. It's too much information on a carer already struggling. I'm highly educated, yet even I spent weeks going through it all. No one warns you

- of the scam agencies trying to get your funding, or even how to advocate to a school for your child and what the red flags are.
- Everything needs to be explained more clearly, and the lists are unacceptable.
- Clarity around music therapy and art therapy. Changes for support workers and whether they will need to become NDIS registered.
- How do participants access this? Each participant should be sent info, or their support coordinator informed, so they can convey this to the participants.
- You kind of need to read all 3 individual lists (what is included, what is not included, replacements) to understand eligibility. It might be easier if they were organised into categories and then under that, what is included and examples of things that aren't included, the list of supports that aren't included (and why) and replacements. The 3 lists are all structured differently, so it makes it difficult to compare (and therefore better understand) what is included and excluded. It's difficult to understand why certain supports aren't included and how they can be accessed outside the NDIS. They've stuffed up the subheadings on the "not included" Word doc, so it reads as though supports "related to Health", for example, are not included because they're not evidence-based, but I don't think that's the case.
- Accommodation to attend or participate in work, study, music, theatre, cinema, sporting events or conferences. This includes any other social, business, private, public, formal or informal event. There are many times with physical disability where we cannot stay with family or friends and require accessible accommodation nearby-this should be included in a plan when needed.
- The rules and lists need to better align with the legislation. It seems like a lot of what is gone is not excluded by legislation.
- Make it accessible.
- All of it. they are rubbish, poorly worded, and mean-spirited.
- Things need to be more simply explained.
- They do not clarify when a support would be considered related to disability.
 For example, they say they cannot fund gardening, but my daughter is in a
 wheelchair because of her disability, which means she cannot do much of her
 gardening, as such gardening can be included in her plan. The current NDIS
 supports are clearly designed to make people err on the side of caution and not
 use supports when they rightly can use supports.
- Ability to request an exemption from any rule based on specific circumstances.
- I honestly can't remember the whole list of NDIS Support rules. A few practical examples would be useful to "make it stick".

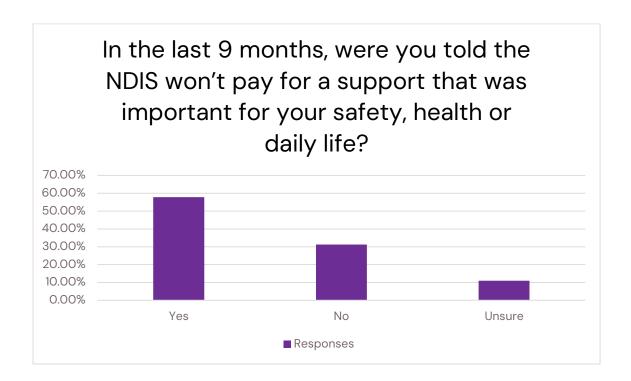
 The whole concept I find to be very confusing. Ideally, I feel they should be scrapped altogether, but if they are here to stay, have them meaningfully designed by people in the disability community and not be so clinical and prescriptive.

Question 5

Respondents were asked whether, in the last 9 months, they were told the NDIS won't pay for a support that was important for their safety, health or daily life.

Of the respondents,

- 57.81% (37) responded, 'yes'.
- 31.25% (20) responded, 'no'.
- 10.94% (7) responded 'unsure'.
- Skipped: 13

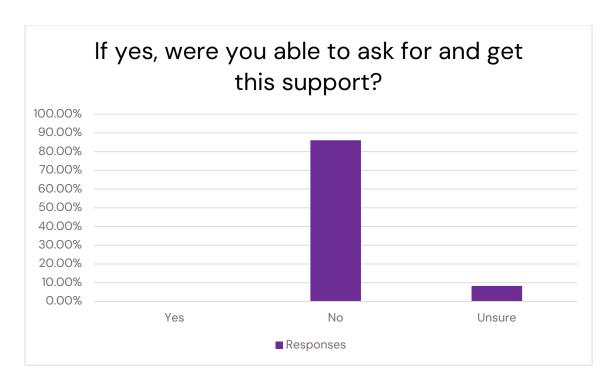


Question 6

Respondents who answered 'yes' to Question 5 were asked whether they were able to ask for and receive this support.

Of the respondents,

- 0.00% (0) responded, 'yes'.
- 86.11 (31) responded, 'no'.
- 8.33% (2) responded 'unsure'.



Respondents who did not receive the support via the NDIS explained what would have made the process easier:

- I considered it an out-of-pocket expense and had to find the money to pay for it myself because it was a need.
- It would have been much easier if the NDIA person had any idea what they were
 doing. Apart from their lack of ability to speak the English language, they had no
 idea the difference between different supports "you don't need exercise
 physiology, it's the same as physiotherapy, so you don't need both." The NDIA
 needs to do better with their training so their staff can do a better job
 supporting those who need the NDIS. It's as simple as that.
- The NDIS have added further need for justification for me to get hearing aids as a hearing-impaired person, and I have already provided an audiogram and 2 x letters of support. They keep changing what they will fund.
- Someone who has expertise in disability conditioning and reflects that the items are necessary because of the disability.
- All I asked to be reimbursed for was a \$49 WATER BOTTLE I spent three hours on the phone trying to get these RIDICULOUS "Plan Managers" to assist me. I did

not appoint them, have NO agreement or authority for them to manage my funding – but here we are!

- They would not include it in my new plan.
- The rules not changing, to be able to actually flexibly use my funding. I am
 happy to pass ideas across my Support coordinator and plan manager to see if
 they are reasonable, but for an admin worker who has no idea of living with
 disability to just put a red pen through my needs and then tell me that I haven't
 used my plan so it's going to be cut is an absolute disgrace.
- I have provided numerous evidence from physio, GP, psychologist and other therapists, along with Hospital admissions with X-rays and other reports. Still, NDIS then refuses to pay for these services as they are not written explicitly into the NDIS plan. NDIA just changed the rules, and thus, services 'just can't be funded' that are integral to one's health and wellbeing. The system is torture for me.
- A holistic person-centred approach to disability, understanding that each person's needs and barriers are unique.
- To not take away support hours. It has made my life incredibly difficult.
- Money.
- By getting to the item that requires action in a certain timeframe.

Question 7

Respondents were asked whether there are supports they thought women or gender diverse people with disabilities need, but that aren't currently funded under the NDIS Support Rules.

- Some women and gender diverse people with disabilities require support in sexuality and relationship education, and often they are told this was their parents' responsibility. As you can see, this limits their understanding and bodily autonomy, especially as they are women, have never had an education from their parents and can't get this support elsewhere. The whole area of "sexuality" is often crucial yet disregarded for women and gender diverse people.
- Yes, [you should be] able to have family members provide the support if you
 are uncomfortable with anyone other than family.

- Absolutely. I should not have to fight for everything that is happening to me including arguing about INCONTINENCE because the "receipt is blurry", but again, here we are, bullied by Plan Managers.
- I'm not sure, but more than likely.
- Psychology. I was told in my new plan that NDIS is no longer funding it and to use a mental health plan. I can't find anyone with disability experience who is willing to take a mental health plan. It is also limited to 10 sessions.
- Therapy around gender roles and sexuality. Information about support for ageing single disabled women, especially when we also still parent disabled adult children. Help with making end-of-life plans. Housing.
- Yes, disability support and mentorship groups, such as Neurodivergent
 Business Collective, were rejected because of the term "memberships", even
 though it's directly linked to my disability and my goal of maintaining
 employment.
- Women-specific services.
- Reproductive and ENT health issues, which are lifelong and impact a person's
 quality of life and which are not currently funded under other schemes.
- Holistic recovery supports such as acupuncture and osteopathy.
- Personal care items pedicures, manicures, facials. As someone with skin issues who regularly picks at my body, it is important to get these things done so that I can't harm my skin.
- I think the role of being a mother is often overlooked. Women with disabilities have a lot on their plates, looking after children as well as managing the limitations that a disability can cause. Often, this isn't considered. If women with disabilities also care for children with disabilities, they can be overwhelmed, trying to manage their limitations while also supporting their children with disabilities. Men generally don't have these issues, as they're not usually the main caregiver. This often isn't considered in their NDIS plans.
- Osteopathy would help me. Better access to informed support coordination when leaving violence.
- Art therapy.
- Accessible transportation can be a huge barrier when trying to access the community.

- Everything! It's all written on the websites as if it's there, but in reality, it's not
 practised, and then you get shut down they tell you it's not too bad get help
 from a trusted family member or a teenage child. No advocacy for women with
 disabilities taking care of a disabled child. "You are high functioning, so you
 should be able to work full time and understand the rules yourself".
- Safe, affordable housing.
- Respite care. This impacts women substantially as they are usually the main carers for people with disabilities and their children, and when you have a disability yourself, it leads to severe burnout.
- Sexual services (including surrogate therapy), (tailored) dating and relationship services, parenting supports, clinical mental health supports (although I'm still not sure exactly what this includes), support for substance abuse and other addictions.
- Yes.
- I don't have much experience with needing funding for supports specific to my gender, but I think choice and control of supports is key to meeting some needs relating to gender.
- Art therapy, music therapy, the choice to use NDIS money they have to buy things they need, e.g. art materials, musical instruments and Lego.
- An ability to access respite, as you can't access this if you live by yourself. Women-only gym membership. Art therapy for women.
- Way too complex to write an answer if you have a workshop I'll join.
- NDIS needs to have a better policy and response to family violence. NDIS needs to revert to old rules where people were able to demonstrate a link between risk, disability and request for supports.
- Massage and alternative therapies.
- I'm afraid the change to the NDIS Support Rules is going to favour people (in particular men as the research has shown that some invisible disabilities such as autism are better diagnosed for men compared to women) with visible disabilities, and be detrimental to people with invisible disabilities (in particular women who are more likely to having invisible disabilities such as chronic pain issues).

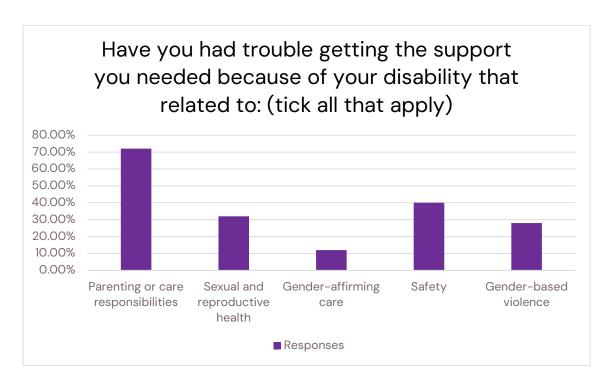
Repeated comments

- "Unsure" x7
- "No" x5

Question 8

Respondents were asked whether they had had trouble getting the support they needed because of their disability that related to: (tick all that apply)

- Parenting or care responsibilities (for example, in-home support for carerelated tasks) – 72.00% (18)
- Sexual and reproductive health (For example, support attending appointments, access to specific menstrual products) – 32.00% (8)
- Gender-affirming care (for example, support attending appointments) 12.00%
 (3)
- Safety (for example, support to exit unsafe housing) 42.00% (10)
- Gender-based violence (for example, support attending appointments, information being shared with perpetrators) – 28.00% (7)



- I personally am unable to get the hearing aids. I need to continue working in my
 role because the NDIS won't fund the assistive technology that I require. This
 has reduced my confidence and added exhaustion to my quality of life.
- Plan Managers DO NOT CARE about you. They are happy to be paid, though. Leeches.
- Timely and safe transport.
- It has been extremely hard to find support as a mum with a disability.

- Sorry too hard to deal with today.
- Or support to stay in housing.
- Mental Health.
- The real problems with NDIS have NOTHING TO DO WITH GENDER/QUEER
 WHATEVER (and I am queer) BUT TO DO WITH BASIC VERY F*****G BASIC LIFE SUPPORTS AND NEEDS. FULL STOP.
- Very little understanding of the implications of family violence and information sharing.
- Too traumatic to repeat.
- NDIS states I cannot get help for my daughter on my plan, as she has a
 disability; it should be from her plan. However, they don't fund it in her plan, so
 we are left completely without that support. Also, there is zero understanding
 and support for family violence against women and children. And perpetrators
 get away/get out/get off, and it is like the slate is clean, so now we are unsafe
 again, and all his rights trump ours.
- As my disability is invisible, I feel people do not notice and disrespect me.
- Legal support for civil and criminal matters.
- Yes.
- Neuro-affirming providers are hard to find.
- My psychosocial disability, listed with the NDIS, won't be supported.
- I am aware of others who have had difficulty with gender-based violence, safety and misidentification by police. NDIS should have a role in supporting women and gender diverse participants.
- As I have a relatively visible disability, I had an overall good experience getting the support I needed because of my disability.

Repeated comments:

No x 4

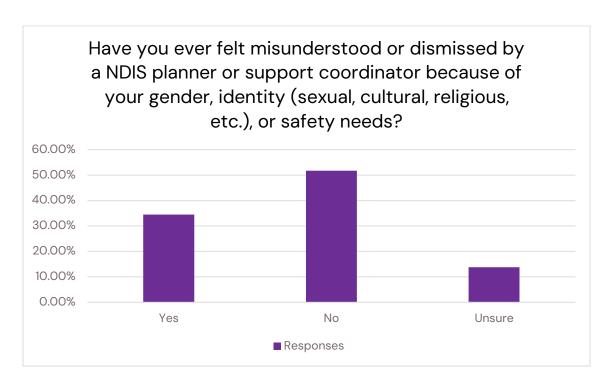
Question 9

Respondents were asked whether they had ever felt misunderstood or dismissed by a NDIS planner or support coordinator because of their gender, identity (sexual, cultural, religious, etc.), or safety needs.

Of the respondents,

- 34.48% (20) answered 'yes'.
- 51.72% (30) answered 'no'.

• 13.79% (8) answered 'unsure'.



- Working with the NDIS has reduced my confidence and brought me to tears because they are such a frustrating department to get the support you desperately need.
- Supposed "Support Coordinator" denied me the right to choose who I felt comfortable being bathed by (I'm an older lady); she just went ahead and picked her own team.
- I felt disrespected.
- When asking for respite from my parenting of 3 high needs children, I was told that they could each have respite, but that I didn't DESERVE A HOLIDAY.
- Lack of neuro-affirming workers, local area coordinator, and support coordinators don't understand how important it is.
- Planners have not heard me when I have requested support for my conditions, and am often underfunded.
- NDIS planners are not effectively trained in medical conditions and Disabilities.
 It is like they are policing to stop one from accessing services.
- They see a number, not a person.
- I'm just another older homeless female, but I don't do illegal drugs or alcohol, so I don't fit in any priority categories.

- NDIA employees can be judgmental, assuming our daughter is not cognitive due to speech issues. That is totally incorrect.
- I have never had access to an NDIS planner! My plan was negotiated with a local area coordinator, and I was not allowed to contact a planner.
- Yes, it is totally against what we agreed upon 10 years ago for this scheme, the
 rules the regulations they keep on changing, and I'm fed up with hearing
 excuses that we're understaffed, there's a massive backlog; stop feeding
 excuses, get on with it and give people the items they need in a timely manner.
- Sure, these things may be issues, BUT THE OVERWHELMING ISSUE IS THE LACK OF PROPER SUPPORTS FOR EVERYBODY BECAUSE OF THEIR IMPAIRMENTS. It's as BASIC AS THAT.
- I was changed to a plan managed and currently appealing.
- As a woman, I often feel that this is the basis of being dismissed.
- No.
- More understanding around burnout/self-harm as a coping mechanism and preventative care.
- I haven't got one.
- I think they make it their mission to make it difficult to understand your NDIS
 Plan, access services, and they are untrained in a number of health and specific
 disabilities. It is not person-centred around your specific needs. It is as though
 they want to make it difficult.
- I was mansplained to this week by a planner.
- The planner thought she knew best and wouldn't listen. That's why I got no funding for one disability, but I got funding to rent a bed that I don't rent!
- As I have a relatively visible disability, I had an overall good experience getting the support I needed because of my disability.
- I have had my request for certain supports dismissed by a planner, because they said Medicare should cover it, and they deemed it not reasonable and necessary, despite my having the support covered in my plan prior, when I had only one diagnosis. But it was when attempting to go through the process and add an additional diagnosis where I needed the support in question more than I did with my one diagnosis, due to the impact on me.

Question 10

Respondents were asked if there was anything else they wanted to share about the NDIS Support Rules and how they affect their life.

- The NDIA needs to do better to provide properly trained staff to support all
 recipients of the NDIS. They need to understand that not everyone is the same
 and not to try and fit people into pre-conceived boxes. It's all well and good to
 have a list of supports, but there needs to be some flexibility to meet
 everyone's needs.
- If there were another way, I would opt for using it! I am an intelligent woman who has a hearing impairment, and [the NDIS'] lack of support and constant stalling and reluctance to fund even basic, reasonable supports is frustrating, and I think they hope that people will just give up.
- Yes, change to having family as paid support workers.
- It really would be a better system if ANYONE would help in ANY WAY, and less
 of the harassment by "Plan Managers". It has been three months since I
 requested to go back to self-management. Heard NOTHING from the NDIS. I am
 under so much pressure from Pathways to Care, it's a joke, and I've literally felt
 suicidal over it.
- Why does my support coordinator have to be registered? She works by herself and is better than any agency support coordinator I have had. But the cost for her to register is higher than her income. She only works with a small number of participants, so she can give each of us as much support as we need, even if she can't bill for it all, but she will probably have to either stop supporting us or join an agency, which will mean more work and less pay for her. I am quite worried. I get more from her than from most of the other service providers.
- Include memberships for disability support groups.
- General stress and responsibility placed on people with disabilities around planning meetings, as well as going through the process of reading letters that reflect us in our worst condition, as that is what the system wants to hear, so we get the support we need.
- I only request minimum supports to survive the day-to-day. Trying to get anything less straightforward involves a lot of paperwork and can be very stressful, and I try to avoid anything stressful.
- The NDIS system is deteriorating, and thus my access to essential services has
 decreased and hence my capacity to live life is drastically reduced. The system
 is unbearable to use, and the rules keep changing, services are just dropped off,

not funded, which dramatically impacts one's life. The complaint system is ineffective, as you log a claim, but since the staff are untrained, they seem to want to close it as soon as possible. I have lodged approximately 20 complaints over the last six months regarding the same issues, all of which have a significant impact on my life and affect me negatively, yet there is still no resolution.

- They have greatly curtailed my independence and access to the community, and to live life on my terms.
- They need to be less broad and more disability specific. More [empathetic], too, please.
- I am now spending my own money to pay for support as I have run out 1 month before the end of my plan. I have a plan manager who does a budget. It was tight, but GST and a few other things have meant that now I have run out of money.
- Faster response times and more appointments.
- Get them to the forefront, not tucked away behind the promotional fluff.
- The NDIA needs to make everything more user-friendly. It seems deliberate
 that they make everything they put out about the NDIS as difficult to
 understand as possible! They have an arrogant, instead of helpful, approach to
 dealing with people with disabilities!
- It would be much better if the proposal by the Grattan Institute for a principles-based approach were adopted rather than a list of rigid supports only being available.
- It terrifies me.
- I want to see more Deaf and disabled people running the NDIS. I want to see every lazy, ignorant non-disabled parasite working there SACKED FORTHWITH.
- I understand the reasoning, but the lack of understanding and gatekeeping has huge implications.
- Support Coordinators now have too much control, and being a self-managed person, I shouldn't have to 'run' everything by that person.
- Amazing initiative- I wish they had invested in really looking at what help and support everyone needs in detail. And how to approach it collectively. I keep getting phone numbers to call, and when I do, I'm told we aren't in a major crisis, so we're not eligible.
- They are preventing me from rebuilding capacity to where I was before Bill Shorten screwed up everything.

- I use iPad as my communication device. I only get \$750 back on it despite objecting. I had speech pathologist reports supporting the device, yet others are getting iPads to play games! To me, my iPad is central to my survival!
- I would like it to be easier to access the support we need to be able to go into the community and do everyday things. I wish they knew how hard it is, and I wish I were given a chance to show what I am capable of.
- As mentioned, I'm not a participant myself, so I have skipped many of the
 questions. However, what the lists fail to acknowledge is how disability impacts
 every facet of our lives, so trying to separate health, mental health, sexual
 health, relationships, etc, from our experience of disability will create significant
 support gaps.
- I have not been assessed by NDIS yet, so I'm unsure about it.
- I'm just so broken by the constant battle. I'm a senior-level public servant, and I still can't find my way through the NDIA red tape and dehumanising processes. I know what works for me, and I am not trusted. My therapists and supporters know what works for me and are not trusted. My dignity is in tatters. My basic human rights are an ongoing financial cost-benefit analysis conducted by a stranger with information they consider important, not me. The scheme may be considered 'unsustainable' to some, but my existence also often feels unsustainable, and what then?
- The rules affect my everyday life as I feel I could cope better and grow stronger mentally with some more support hours.
- Please. Please listen and stop asking us to again and again to explain and provide evidence over and over about my permanent disability.
- They make more work for me to read the rubbish and figure out what it means.
- The NDIS has become so cumbersome that it feels like it's more hard work to abide by their rules, and I'm not sure I want it anymore.
- The new rules make me second-guess what can or cannot be funded and reduce the support my daughter can receive due to creating an environment of fear of doing something wrong and then being asked to refund monies to NDIS, or worse, being charged with fraud.
- While I think it's good for some people to have multiple and regular funding, as
 opposed to the previous one-off funding, I think everyone should be given the
 choice of how they want to receive their funding, i.e. multiple and regular
 funding, or one-off.

Repeated comments

"No" x 3