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Placing Rural in the National Disability Insurance Scheme Review

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ABSTRACT

The National Disability Insurance Scheme is considered Australia's landmark disability support policy reform. The Scheme's implementation has revealed several benefits but also critical shortcomings. The Scheme's benefits have not been equitably distributed with people living in regional, rural and remote areas receiving less. The Australian Government's Independent Review into the National Disability Insurance Scheme in 2023 provided recommendations for improvements to ensure equitable benefits for all Australians. We use a distributed rural proofing lens to explore how processes, recommendations and actions described in the Independent Review into the National Disability Insurance Scheme considered regional, rural and remote contexts. The Review offered ideas for improving services for regional, rural and remote people with disability; however, it failed to adequately consider these contexts. The Independent Review into the National Disability Insurance Scheme missed a key opportunity to rural proof Australian disability support policy. Future disability policymaking requires active engagement of regional, rural and remote people with disability and use of relevant service provision concepts to ensure regional, rural and remote people with disability equitably benefit from the National Disability Insurance Scheme.

1 | Introduction

The National Disability Insurance Scheme (NDIS) is Australia's landmark disability support reform, providing lifelong funding for supports for Australians with permanent and significant disability (National Disability Insurance Agency 2024a; Australian Government Productivity Commission 2017). The market-based disability support funding system replaced government

block-funded models, aiming to provide people with disability person-centred and individualised choice and control over supports (Buckmaster and Clark 2018). The market-based logic underpinning the NDIS, which assumes consumer choice will drive service demand, provider competition, and develop a market to meet demand in an accessible manner (O'Keeffe and David 2022), also led to the use of market-based strategies and marketised terminology (van Toorn 2022).

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The NDIS has benefitted many Australians. In late 2024, more than 680,000 people received NDIS support (National Disability Insurance Agency 2024b); almost half of these would have been ineligible for support under previous funding models (Commonwealth of Australia 2023). Yet, the NDIS benefits have not been equitably distributed, with some community groups having trouble accessing sufficient support and effectively utilising funding (Yates et al. 2021; Smith-Merry 2024; Disney et al. 2025). Terms such as *market failure* and *thin markets* have been used where service availability is nearing failure or has failed to meet the needs of people with disabilities (Department of Social Services 2019). These terms also reflect the state of NDIS service provision in many regional, rural, and remote (RRR) communities (Kuipers et al. 2022; Dew 2022). Despite the attention given to addressing issues of thin markets, the literature indicates that the market has not responded to service demand in RRR communities (Gallego et al. 2017; Wakely et al. 2023; Gilroy et al. 2021).

1.1 | Rural Realities

Inequitable access to services for people with a disability living in RRR communities is not new (Dew et al. 2013a, 2013b; Wark et al. 2014). RRR Australian communities have long been characterised as having fewer services to support people with a disability, and they often experience increased complexity to access supports and services. These complexities include travel time and costs, time away from work for the person and their family, and being away from one's usual routines and support networks (Dintino et al. 2019; Wakely et al. 2023). These complexities are mostly impossible to overcome, meaning equitable access to support is not achievable and subsequently poor health outcomes and/or reduced independence are experienced (Jessup and Bridgman 2022; Gilroy et al. 2021).

Many of the services for people with disability that do exist in RRR areas are less specialised in nature and have long waiting lists (McGill et al. 2020; Dew 2022). RRR health professionals and disability support workers report that they make a positive difference to people who live in their community and are valuable advocates (Moran et al. 2024). Delivering RRR disability services and supports in an under-resourced and overwhelmed system has also been described as emotionally draining, stressful, and sometimes isolating (Dintino et al. 2019; Quilliam and Bourke 2020). It can be a precarious undertaking to introduce a market-based system into an already fragile system without consideration of local RRR needs.

After a decade of implementation, the failure of the market-based NDIS system in RRR communities illustrates a need to re-think how to ensure service provision is equitable for everyone, no matter where they live (Smith-Merry 2024). As RRR people with either lived experiences of disability, caring roles, or experience providing RRR disability services, we argue that a different way of thinking about disability service provision is required for RRR communities to ensure the approximately one-quarter of Australia's population living in non-metropolitan areas can access services they need to live a good life. As Cesta (2023) notes, the Australian Government may need to consider alternative approaches to protect the rights of people with disabilities in RRR

communities and to meet the nation's signatory obligations to the United Nations' (2007) Convention on the Rights of Persons with Disabilities. The Independent Review into the NDIS provided an opportunity for the Australian Government to achieve this (Commonwealth of Australia 2023).

1.2 | The Independent Review Into the NDIS

The Independent Review into the NDIS, known as the *NDIS Review*, provided 26 recommendations and 139 actions to ensure the NDIS leads to a 'more inclusive and fairer Australia for all people with disability' (Commonwealth of Australia 2023, ii). The NDIS Review included three stages of engagement with existing policy documents, people with disability, service providers, and organisations (see Appendix A). We explore the extent to which processes, recommendations, and actions described in the NDIS Review considered RRR contexts and discuss ways to ensure RRR contexts are considered in future policymaking.

2 | Methods

Nordberg's (2021) distributed rural proofing concepts were used as a lens to examine the NDIS Review (Commonwealth of Australia 2023) for RRR relevant content. Nordberg's two main concepts: (1) spatial justice and (2) social innovation, enable a distributed way of rural proofing. Nordberg describes spatial justice as 'the specific needs set by geography, how the needs change over time and their context dependency, for instance regarding power structures, geographic, cultural and temporal distances and local and extra-local cohesion and social innovation' (2021, 148). Nordberg describes social innovation as 'mechanisms able to answer to the needs set by geography' including 'initiation of processes, building on social needs, and improving and/or creating local and extra-local networks for change' (2021, 148). These concepts—spatial justice and social innovation—framed our examination of the NDIS Review to understand how it considered RRR contexts and proposed RRR-specific service innovations. Using these concepts, six pairs of researchers reviewed different sections: Preface and Overview (MK and CQ), Part 1 (NE and LF), Part 2 (TF and RM), Part 3 (CQ and NE), Part 4 (RD and KB) and Appendices (MK and JS). Conducting the analysis in a team-based manner allowed a range of perspectives to inform discussion and shape the findings.

Regarding spatial justice, all sections were reviewed to identify content on contextual differences specific to RRR communities. This included narrative on the differences between RRR communities, differences between metropolitan and RRR communities, and how service models address different participant groups (e.g., children), disability groups/types and providers (e.g., registered vs. unregistered) within RRR contexts. We also noted where specific RRR groups were emphasized.

Regarding social innovation, all sections were reviewed to identify content on RRR-specific innovations. We noted recommendations for innovations in RRR contexts, and the use of rural knowledges, connections and resources to inform these innovations. This included noting specific RRR groups involved in innovative service design and delivery.

To integrate the analysis conducted of each section of the NDIS Review, researcher CQ identified themes within individual section findings and compared these across sections to find key themes within the spatial justice and social innovation concepts. The findings were clarified and refined through iterative writing and review cycles between co-authors (see author biographies for lived experience information).

3 | Results

3.1 | General Reflections on the NDIS Review

The NDIS Review reflects on the NDIS design and implementation, and on the capacity of the broader disability service system to support people with permanent and significant disability, as well as people with disability who are ineligible for individual funding but still require foundational supports (p. 247). It acknowledges that NDIS markets ‘have not worked as originally imagined’ (p. 28), that components of the NDIS—including capacity building activities—have not been implemented as originally intended (p. 24), and that the Scheme has had unintentional impacts on existing supports for people with disability (Commonwealth of Australia 2023).

The engagement process to inform policy development did not follow policy co-design methods (p. 303). The policy problem defining stage primarily drew on existing policy documents to form key NDIS concerns (p. 301). This is a considerable limitation in policymaking, according to Blomkamp (2018). This lack of consultation meant Australians with disabilities were not able to define the fundamental issues and set the NDIS Review agenda prior to strategy development.

3.2 | Spatial Justice Content

The NDIS Review acknowledged RRR contexts to some extent. ‘Rural and remote’ was included in the report’s terms of reference (p. 295–299), with ‘unmet’ need of RRR communities noted, and ‘regional and remote people’ noted as being ‘under-represented’ in the Scheme (p. 30). Authors drew on the Joint Standing Committee on the NDIS Inquiry into NDIS Planning to suggest market failure had occurred particularly in RRR areas, resulting in long wait times and decreased funding for these participants (p. 187). The NDIS Review reported that one-third of participants had failed to access therapy supports in small and medium rural towns, despite funding being available (p. 180). The definition of thin markets acknowledged that these type of markets ‘most commonly occur in rural and remote areas’ (p. 293). While the terms regional, rural, and remote were not defined, policymakers stated that they travelled to ‘remote and regional areas’ (p. 23) in the engagement process.

Despite the NDIS Review acknowledging RRR contexts to some extent, the experiences of people with disability living in these communities were missing on topics of importance to these contexts. For instance, on page 1 in the Acknowledgement of Country ‘those living in regional, rural and remote locations’ were noted among population groups who experience the compounding effects of intersectionality. Yet, in the body of

the report, where the concept of intersectionality and support provision was described in further detail, RRR people with disability were missing from the narrative (p. 31). It is concerning that RRR communities appear to be a forgotten equity group in this context. Metropolitan-based assumptions about how mainstream systems function alongside the NDIS were evident. For example, (poor) interaction between the NDIS and improvements to public transportation physical accessibility is discussed, however there is no acknowledgement that RRR communities exist where there is limited, non-functional, or no public transport (p. 67).

Service access challenges were noted but rarely considered in RRR contexts. Geographic factors such as travel time and complex needs of RRR people with disability were largely overlooked. While issues with the provider search tool were mentioned, its unsuitability for RRR settings—due to low location granularity and restriction to registered providers—was not addressed (p. 158). Price caps were discussed as a challenge to service access for many NDIS participants (p. 166). How the pricing structure may complicate service affordability for people in RRR communities, where people often experience additional expenses to access services, such as travel costs, was not discussed (Wakely et al. 2023). Workforce issues are likely to be amplified in RRR contexts, although this was not strongly articulated in the NDIS Review. For example, poor access to training due to casualisation was emphasised (p. 193), but not how this situation is exacerbated in RRR contexts where there is typically poorer access to training and education (McKinstry et al. 2024).

The NDIS Review focused on achieving service outcomes, although in a geographically indeterminate manner. The need to understand and identify the service needs of differing communities, including RRR communities, was not emphasised. This was evident where funding models and service responsibilities were described at state/territory and federal levels (p. 239), and not local government levels, where localised knowledge could be synthesised regarding service need in each RRR community. While attention was given to geographic and cultural particularities impacting access to services for First Nations people, the service needs and identification of key issues of remotely based people with disability and First Nations people with disability were conflated throughout the document (pp. 46, 186–90, 301).

The missing detail on the lived experience of RRR people with disability and poor consideration of the multiplicity of RRR contexts in the NDIS Review was consistent with the detail provided on stakeholders who informed the report. It is possible the authors did not detail every episode of engagement with people from RRR communities that informed the report (see p. 300–305). While each state and territory was visited, it was not clear how RRR people or organisations were systematically represented in the engagement process. Policymakers visited two remote communities in the Northern Territory (p. 301); however, not all non-metropolitan communities have the same needs, risking broad conclusions being drawn from a limited sample (Australian Institute of Health and Welfare 2024a).

Although there was mention of sub-populations of people with disability who experience additional barriers to influencing policy, consideration of the needs of RRR people with disability was

largely absent from The Review (p. 241). Previous policy documents were utilised to determine key challenges (p. 300) which could perpetuate previous poor consideration of RRR voices and contexts in policy documents; an issue previously observed by Quilliam et al. (2022). The limited discussion on RRR contexts and lived experiences of people with disability in these communities appears to be reflected in the language used. The section on NDIS markets adopted placeless terminology; for example, *thin markets* was used throughout (p. 178), despite the issues of thin markets having particular relevance to RRR contexts, as noted in the glossary (p. 293). Safeguarding issues related to a sudden loss of services in RRR locations are wrapped in marketised language, such as *continuity of supply* (p. 186) which does not reflect the day-to-day realities of RRR disability service access and provision (Quilliam and Bourke 2020; Wakely et al. 2023), yet shapes meaning on the topic and innovations to improve access to services in these contexts.

3.3 | Social Innovation Content

The NDIS Review recommended a range of actions to improve supports for people with disability in Australia. However, many of these did not consider the geographic contexts in which these actions would be implemented. High-level actions were framed with a vision for community inclusion and balance between the broader disability system, where people with disability would be supported via an inclusive mainstream community, government and health service system; and people with significant disability would be supported by individualised services through the NDIS (p. 31). These actions included a call for an appropriately resourced National Disability Supports Commission (p. 176); a new Disability Intergovernmental Agreement; clarified administrative arrangements (p. 242); and the development of a new Disability Supports Quality and Safeguarding Framework (p. 231). Recommendations for investment in datasets to inform policy decisions and action (p. 231) via National Disability Research Partnership funding, the establishment of a National Disability Data Asset, and a disability research and evaluation fund were made. None of these actions were accompanied by details of their implementation in diverse contexts, despite all of these being relevant to RRR communities across Australia.

To some extent, RRR contexts were considered in relation to strengthening the workforce in Recommendation 15. The associated actions included pay increases, the attraction of overseas workers to RRR contexts, providing part-time or casual staff with opportunities to gain further employment in the care sector, and using technology and alternative commissioning funding to deliver training to RRR workers (p. 195). At a program level, the NDIS Review recommended the delivery of foundational supports for a significant proportion of people with disability where support gaps currently exist (p. 35), and new workforce roles—navigators and specialist navigators—to support people with disability to access foundational and mainstream services and apply for the NDIS if required (p. 101). Not explained was how foundational services would be delivered in RRR contexts where disability workforce shortages already exist (Wakely et al. 2023) or how navigator roles would be implemented in RRR contexts, where dual relationships shape professional boundaries and service referrals (Quilliam et al. 2023a).

The NDIS Review recommended pricing and budget changes to increase choice with service access, and regulation changes to ensure high-quality services. Recommendations suggested that changes to price caps need to consider participants in ‘different regions’ (p. 169), although it did not specifically reference rurality. Proposed pricing changes do not account for rural relevant direct labour costs such as attracting rural staff, managing high workforce turnover, and staff travel for training (p. 171). Proposed budget changes, including greater flexibility in use, are unlikely to address service access for RRR people, particularly housing options (p. 141). The proposal of greater regulation of services and onus on services to eliminate restrictive practices, including ensuring timely behaviour support plans development (p. 224), does not consider how RRR service providers will be supported to achieve these changes.

The use of rural knowledges, connections and resources to inform these recommendations and actions was infrequently mentioned. The NDIS Review recommended several consultative committees and councils be established, including the NDIS Review Implementation Advisory Committee, the NDIS Implementation Working Group, and the NDIS Experience Design Office. No mention was made of how RRR people with disability or peak rural bodies would be involved in these groups. The recommendation to establish provider panels in specified locations (p. 184), including small and medium towns (Monash Modified Model 4–5), draws on concepts of alternative and integrated commissioning, acknowledging the government needs to be more active to address RRR service provision. This approach does not address the existing gaps in the health and human services workforce in these communities and implementation is unlikely until workforce shortages are resolved (Jobs and Skills Australia 2024) and will be challenging to implement without significant incentive for service providers to participate in panels.

First Nations people with disability were discussed regarding the implementation of innovative service design and delivery in remote communities. The conflation of the experiences and service needs of non-First Nations people with disability living in RRR communities and First Nations people with disability results in any differences between the two populations being overlooked in strategy development. An example of this is where the same alternative commissioning and integrated commissioning arrangements are proposed for both populations (p. 186–190).

4 | Discussion

Examination of the NDIS Review suggests that it does not sufficiently consider RRR contexts, which is concerning given RRR people with disability generally face poorer service access than metropolitan people (Smith-Merry 2024). Information regarding service provision recommendations for remote communities is primarily in the Alternative Commissioning report (Australian Government 2023), leaving those in RRR areas largely overlooked in this key national disability policy reform. With the number of Australians living in RRR communities and poor service access in these areas (Australian Institute of Health and Welfare 2024b, 2024a), we argue the experiences of RRR people with disability and recommendations to address

such service inequity should be prioritised in Australian disability policy reform documents such as the NDIS Review, not sidelined in other reports.

It is promising that The NDIS Review acknowledged the shortcomings of current NDIS policy and described a focus on improving service outcomes. It is also encouraging to see some recognition that certain populations within Australia are currently unable to access equitable NDIS support, such as First Nations and RRR communities. However, more genuine engagement with these groups is required. The NDIS Review and the Alternative Commissioning report describe the failure of market-based approaches to support service access for many Australians with disabilities, particularly those living in RRR communities (Australian Government 2023; Commonwealth of Australia 2023). Despite this, The Review illustrates how marketised language is likely to continue to dominate how service access and provision are described for these communities. Market-based approaches are not necessarily the most effective means of meeting the service needs of people in RRR communities. In rural contexts, relational and collaborative practices underpin service provision rather than competitive practices encouraged by market-based approaches (Quilliam et al. 2023a). Kuipers et al. (2022) suggested considering rurally relevant concepts such as *service adequacy* alongside market-based concepts to better understand service access in RRR areas. For RRR people with disability, having a wide selection of services might not be as important as having services provided by people they know well (Kuipers et al. 2022). Future Australian disability policymaking could adopt RRR-appropriate service provision conceptualisations to ensure access to services.

The NDIS Review proposed service innovations to improve service quality for people with disability. However, many innovations did not consider rurality, suggesting they were designed for metropolitan contexts, but with good intentions for RRR contexts. For example, increased regulation to improve service quality places additional onus on service providers to eliminate restrictive practices and cover registration, auditing, administrative and other associated costs. In RRR contexts, these changes may increase pressure on smaller disability service providers who are already considering withdrawing from NDIS service provision (Jessup and Bridgman 2022), reducing viability and the availability of RRR NDIS service providers. The NDIS Review frequently conflated the needs of people with disabilities living in remote communities with First Nations communities, indicating a lack of understanding about the diverse needs of RRR populations.

The irrelevance of many recommendations and actions for RRR contexts is coupled with a lack of information about how RRR people will be explicitly involved in newly formed committees and bodies to inform policy implementation. Without active engagement of RRR people in these committees, there is a risk that rural voices and concerns will be excluded from important conversations due to the metrocentric nature of these committees (Daniell et al. 2017). To avoid this occurring, active governance structures that prioritise rural voices and conversations and promote opportunities to consider rural-centric service innovation are required. These structures could enable RRR people with disability to contribute to discussion on implementing existing

initiatives in RRR contexts, identify unique community needs, and support unique service innovations.

Workforce development in RRR contexts was acknowledged in the NDIS Review. Proposed actions for workforce development, including international recruitment and virtual delivery of training, may not be enough to develop a sufficiently trained and expert disability workforce to meet the needs of RRR people with disability, particularly when considered in conjunction with the competition for health workers in mainstream RRR health services. There is little evidence regarding the efficacy of international recruitment of human services professionals to sustainably support workforce shortages. Results from similar programs have been mixed at best (Morell et al. 2014; Young et al. 2010). The COVID-19 pandemic illustrated workforce system vulnerabilities when international borders closed, resulting in recommendations to reduce dependency on the internationally trained workforce (Reid and Knight 2024). Whilst virtual worker training options and client telehealth offer some promise, there is a lack of reliable internet in many RRR communities (Quilliam et al. 2023b; Jobs and Skills Australia 2024). Key lessons from other sectors, including health and education, could be applied to develop the RRR disability workforce. For example, the World Health Organization (2021) recommends providing in-place training for people in RRR locations to sustainably recruit and retain local workforces. Rural health and student equity in higher education literature suggests harnessing partnerships with regional, rural, and remotely based organisations with established infrastructure (e.g., Regional University Study Hubs, University Departments of Rural Health) to deliver contextually appropriate training to RRR disability workers (Crawford and McKenzie 2023; Quilliam et al. 2024).

5 | Conclusion

The NDIS Review has not adequately considered the RRR contexts in its processes, recommendations, and supporting actions. Moving forward, disability policymakers need to consider RRR relevant service provision concepts, develop inclusive government structures and explicitly include RRR people with disability in national committees and bodies informing disability policy, practice and research, and establish sustainable approaches to train, recruit and retain local disability workers. Future disability policymaking in Australia must actively engage RRR people with disability and consider their experiences and contexts as a priority to ensure RRR relevant policy recommendations and actions are formed, and RRR people with disability equitably benefit from the NDIS.

Author Contributions

Claire Quilliam: conceptualization, methodology, formal analysis, project administration, writing – original draft, writing – review and editing. **Luke Wakely:** conceptualization, writing – original draft, writing – review and editing, methodology, project administration. **Louise French:** conceptualization, writing – review and editing, formal analysis. **Natalie Ellis:** conceptualization, formal analysis, writing – review and editing. **Robyn McNeil:** conceptualization, writing – review and editing, formal analysis. **Tony Fallon:** conceptualization, formal analysis, writing – review and editing. **Michelle Kersten:** conceptualization,

writing – review and editing, formal analysis. **Kerryn Bagley**: conceptualization, writing – review and editing, formal analysis. **Jo Spong**: conceptualization, writing – review and editing, formal analysis. **Robyn Doney**: conceptualization, writing – review and editing, formal analysis. **Casey Stubbs**: conceptualization, writing – review and editing. **Alison Devitt**: conceptualization, writing – review and editing. **Carol McKinstry**: conceptualization, writing – review and editing.

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Conflicts of Interest

The authors declare no conflicts of interest.

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Appendix A

Stages of Engagement in the Independent Review into the National Disability Insurance Scheme.

Stage 1 involved reviewing the concerns of people with disability, their family members and organisations, along with reports from recent inquiries.

Stage 2 included the identification of Scheme challenges and requests for solutions from the public.

Stage 3 included draft strategies and requests for feedback. These stages resulted in 3976 consultation submissions in a range of formats, and involved many workshops, conferences, meetings and events held in all state and territories. Community organisations were asked to promote engagement, including 10 virtual workshops to support engagement of people living in regional, rural and metropolitan areas. Disability Representative Organisations, sector and technical experts, state and territory officials, and a NDIS Review Senior Advisory Group were also consulted through the process. Review concepts were discussed over 12 sessions with a small group of people with lived experience of disability. These sessions included 3 sessions with service providers, 3 sessions with National Disability Insurance Agency staff and intermediaries, and 8 sessions with a small group of people with both lived experience of disability and sector expertise (Commonwealth of Australia 2023).