

NDIS reform needed to better support children with autism or developmental delay

Community-based programs would provide better long-term outcomes for young children with autism or developmental delay compared to individual supports currently provided by the National Disability Insurance Scheme (NDIS), according to a paper released today by two senior actuaries.

The Dialogue Paper*, written by actuaries Maathu Ranjan and Anthony Lowe and published by the Actuaries Institute, argues that community-based programs would improve long-term outcomes for children, better align to the original NDIS design, and help make the Scheme financially sustainable.

The paper, <u>Providing better support for children with autism and developmental delay</u>, outlines three measures for consideration by the NDIS Independent Review Panel ahead of its final findings in October.

These include replacing clinical diagnoses with functional assessments by early childhood specialists to better support early intervention, investing in community-based supports rather than individualised funding to make the support more effective, and transforming the provider market to better measure outcomes, direct people to the right settings, and focus "on what people could do" instead of "what they can't do".

"The NDIS was envisioned and legislated based on a social model of disability but has been implemented using a medical model. We are proposing that the Scheme return to its original design with an increased focus on community-based support for young children with autism and developmental delay," Ms Ranjan said.

The number of NDIS participants living with autism has increased markedly, representing almost a third of new entrants to the Scheme. There are now over 313,000 NDIS participants under 18, accounting for more than half the Scheme population and a fifth of its costs. Of those children, 75% have a primary disability of autism or developmental delay.

"Children, particularly children with autism or developmental delay, are one of the fastest growing cohorts of NDIS participants – this is largely because the system gives families little choice but to seek out formal medical diagnoses," said Ms Ranjan.

"This means lengthy waitlists that can prevent timely access to early interventions – something we know is most effective when it happens earlier in a child's life. If we provide support through community-based programs, we can bring that timeline forward.

"We see these changes as win-win-win. It will mean better outcomes for children and families, more effective government spending to achieve a sustainable NDIS, and an essential step towards a society that is more aware and actively inclusive of the needs of neurodiverse people, including those with autism.

"We acknowledge implementation will not be easy. However, a transformational change in the way children are supported by the NDIS and the community is necessary to ensure that the Scheme will continue to be there for those who need it in the years to come. This Review is a crucial opportunity to facilitate that change."

[ENDS]

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