



Disability Federation of Ireland General Election Manifesto

October 2024

1. Introduction

According to the most recent census, over 1 in 5 people in Ireland identify as a person with a disability. The majority of disability is acquired during working age and age itself is a major risk factor for disability. Despite this, disability is often not a priority and is ignored or dismissed at a societal and policy level. People continue to face barriers of all kinds, across all aspects of their lives in realising equality and inclusion, having an adequate standard of living, gaining access to timely health care and access to critical specialist supports in the community, as well as participating in community life which includes access to education, decent work and having a career. These barriers are experienced across the life-course. Critically, this includes current failures for disabled children in timely access to assessment and therapeutic interventions.

The extra cost of having a disability also perpetuates exclusion. Extra costs makes it much more difficult to live a life equal to others, as an ambition set out in the United Nations Convention on the Rights of People with Disabilities, UN CRPD.

As a society, we must move to meaningful co-design in the creation of policies, programmes and services that affect people with disabilities. If we fail to do this, people will continue to feel unheard and ignored. Self-advocacy is a key step in relation to people directing their services and being involved in decision-making across all aspects of their lives.

DFI's General Election Manifesto provides key facts and figures on disability in Ireland (see section 1.1). We set out a number of immediate, quick wins that can be achieved in Year 1 of the new government (see section 1.2) and call for a whole-of government response to disability (see section 1.3), taking seriously our commitments to national and international policy directives.

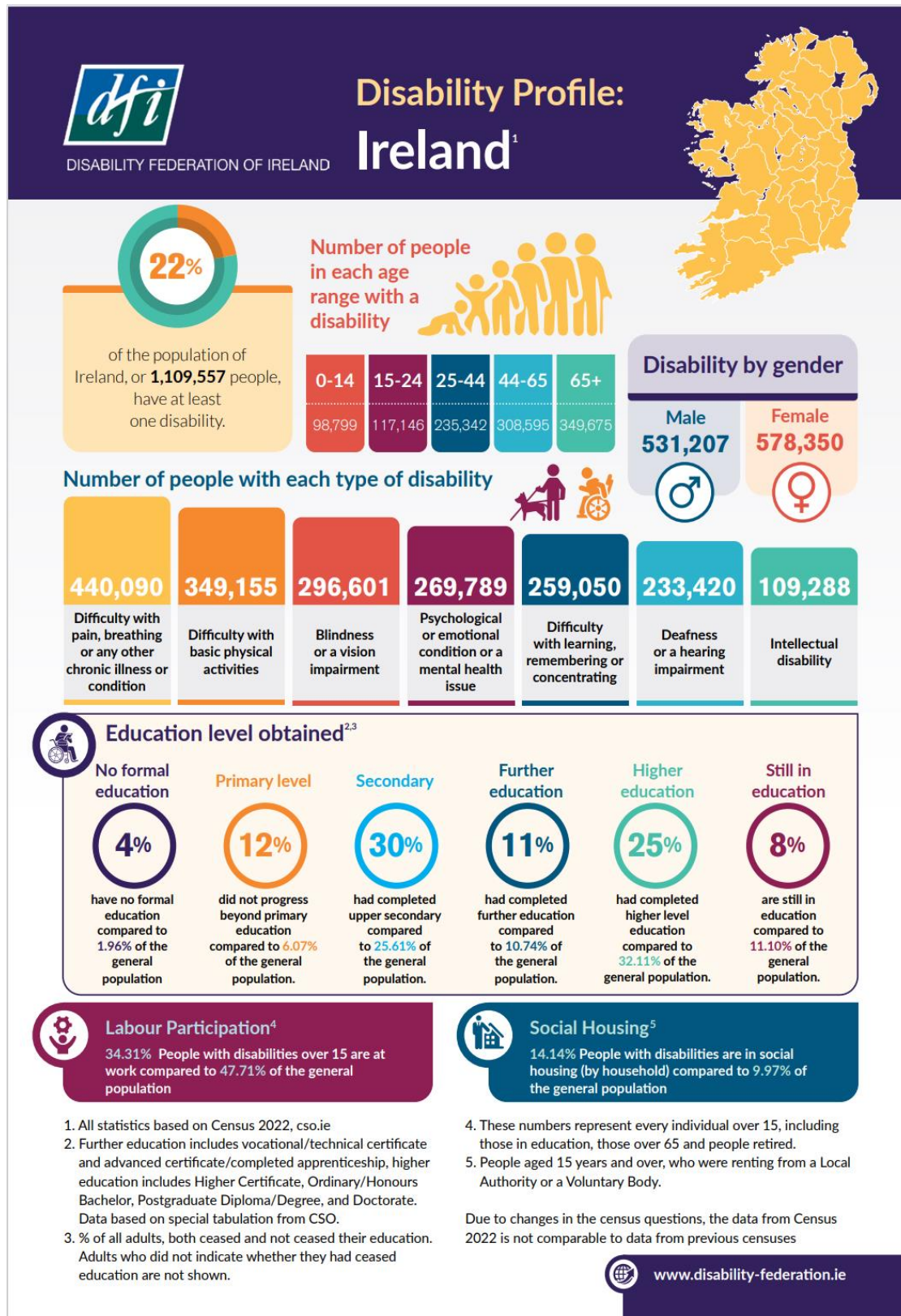
Following, structural and systemic reform and development is outlined across six areas of focus, each addressed in turn:

- Barriers to realising equality and inclusion
- Having an adequate standard of living
- Reducing the impact of the extra cost of disability
- Access to timely health care, and to specialist community supports
- Participating in community life, including access to education and decent work

1.1 Disability in Ireland

If we turn briefly to the national picture, there is significant variability in life outcomes for disabled people, with significant gaps in education levels, employment and housing status compared to the general population, as shown in Diagram 1 below.

Diagram 1: DFI's Census 2022 Disability in Ireland Factsheet



1.2 Immediate Action

From the above it is clear that serious and urgent action is needed to:

1. Realise full implementation of the UN Convention on the Rights of People with Disabilities.
2. Allow Ireland to meet our obligations to other international commitments - Sustainable Development Goals and European Pillar of Social Rights.
3. Deliver existing national plans such as National Housing Strategy for Disabled People, Action Plan for Disability Services and the Roadmap for Social Inclusion.
4. Ensure the forthcoming National Disability Strategy, which is currently in development, is ambitious in tackling the issues outlined below.

Table 1 outlines actions for the first year of government, each one has a hyperlink to explain the rationale as they appear later in the text.

Table 1: Proposed Year One Actions for the New Government.

- [Maintain important structures of leadership, accountability and transparency across government and our democratic system, with continuation of the Joint Oireachtas Disability Matters Committee, the Cabinet Committee and Ministerial role for Disability.](#)
- [Locate senior disability oversight in the Department of the Taoiseach.](#)
- [Introduce a mechanism for equality and disability proofing all relevant legislation.](#)
- [Introduce a recurring Cost of Disability payment in Budget 2026.](#)
- [Convene an oversight group to develop a cross-departmental Strategy and Action Plan on Cost of Disability and poverty.](#)
- [Further develop responses to address workforce issues in the disability sector and tackle the challenge of the chronic undersupply of trained people to work in the disability sector.](#)
- [Establish a fully functioning Personalised Budget Office within each Health Region.](#)
- [Expand the role of Access Officers in each Local Authority.](#)
- [Provide funding to make Local Authority Disability Housing Technical Advisors standalone roles.](#)
- [Remove barriers to the functioning of the Capital Assistance Scheme.](#)
- [Extend the criteria for the disability parking badge.](#)
- Commence implementation of the National Disability Strategy, with identified targets met in Year 1 of Government.

1.3 Taking a Whole-of-Government Approach

The current nature of government department and community disability services is to take a siloed approach. A shift to a holistic response across government departments can address structural and systemic issues that affect disabled people. This would consider people in the round and increase opportunities through integrated systems of transport, personal supports and community participation to name a few.

Cross-departmental working is an essential step to deliver positive change. Equally, it follows national and international best practice to adopt principles of co-design, co-creation and co-production, which deliver best outcomes.

2. Making Progress in Equality and Inclusion

An important goal for the next government will be introducing, amending and updating policies that progress equality and inclusion for disabled people in Ireland. As per **Article 1 of the UNCRPD** to “promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity”.

These actions include:

2.1 Big Picture Infrastructural Changes

- **Maintain the Joint Oireachtas Disability Matters Committee, Cabinet Committee and Minister for Disability.** Retain the structures of accountability, transparency and monitoring of disability policy across three areas:
 - The Oireachtas Disability Matters Committee is a positive innovation– one DFI had recommended – and has brought increased scrutiny of government policy with a disability lens.
 - Continue the recently established Cabinet Committee on Disability, which is taking a whole of government response to disability issues and shows leadership and prioritisation, with transparent reporting on the priority issues for the Cabinet and progress of this work.
 - Disability to fall under the responsibility of a Senior Cabinet level Minister, along with a Minister of State for Disability.
- **Locate Senior Disability Oversight in the Department of the Taoiseach.** Taking effective action to address disability often requires significant inter-Departmental coordination. The work that the Department of Children, Equality, Disability, Integration and Youth, DCEDIY is undertaking to develop the National Disability Strategy, NDS is welcome and appreciated. To support the

implementation, which requires a whole of Government approach, we recommend the Department of the Taoiseach take a key oversight role. This can ensure the full engagement and commitment of all relevant Ministers and Departments in meeting their responsibility to uphold the rights of people with disabilities. This will be essential to the effectiveness of the NDS.

- **Resource the Community and Voluntary sector.** Community and voluntary organisations provide essential services and community supports across Ireland, on behalf of the state. Notably they are the backbone of community disability-specific services, are innovative, responsive, embedded in community life and operate to the public benefit. To be able to continue to perform this essential role, they require resourcing. Reformed, sustainable multi-annual planning and funding will help to create greater certainty, security, efficiency and innovation across critical community supports.
- **Improve the complaints mechanism for violations of disability rights.** Many people with disabilities, and their families experience huge difficulties in vindicating their rights, and often find themselves chasing multiple Departments to try to secure access to public services and supports. Ratifying the Optional Protocol to the UN CRPD is a positive step, but redress under this complaints mechanism takes a very long time to achieve. There is a significant unmet need for an accessible, straightforward method for people with disabilities to bring complaints about rights violations. A new **Office of the Disability Ombudsman** would address a wider range of issues around disability and provide a clear contact point for people who have experienced rights violations. This could be modelled on the very effective Ombudsman Office for Children.
- **Conduct rigorous equality and disability impact assessments for all relevant legislation.** All legislation should be proofed for equality against all nine grounds of discrimination, including disability. Prior to a bill becoming law, there is an opportunity to stress-test it to evaluate its impact on people who experience discrimination and marginalisation, therefore avoiding unintended consequences. This process could also support consultation and co-design of legislation with marginalised groups, including people with disabilities. Inclusive impact assessments that incorporate the lived experience will produce legislation that actively promotes equality, independence, and autonomy.
- **Undertake strong equality and disability proofing of budget decisions.** While some level of equality proofing already takes place, there is significant room to improve and strengthen the approach. Rigorous equality and poverty proofing of all budget

decisions will ensure social progress and positive budgetary impact. Such a process will support the government to ensure that each budget has a clear and permanent positive impact on disability poverty.

- **Provide stable, multi-annual funding for Disabled Persons' Organisations, DPOs and to support self-advocacy, civil society, and capacity building for disabled people to have a voice in decision-making.** DPOs need predictable ongoing funding - to pay staff, develop capacity, and to build organisational knowledge, governance and compliance. Without this, they cannot fully engage with government or participate in decision-making. DPOs cannot fulfil the roles set out for them in the UN CRPD without stable funding. More resources are also needed to support disabled people to engage with organisations and community groups, and to support self-advocacy by people with disabilities across Ireland; focusing on increasing their capacity and opening up opportunities for greater engagement in decision-making.
- **Fully resource Independent Advocacy for Disabled People.** The Citizen's Information Act 2007 contains a provision for a statutory advocacy service which has never been commenced. As an interim measure the National Advocacy Service, NAS, was introduced. However, NAS is under continuing financial pressure - according to an August 2023 report it had not received an increase in funding to create new permanent positions since 2011, despite waiting lists continuing to grow. An independent statutory advocacy service for disabled people is another essential structural pillar to realise full and equal rights.

2.2 Legal and Regulatory Review and Changes

- **Reform the Disability Act (2005).** During the tenure of the next government, the Disability Act will be 20 years old. This legislation was drafted prior to Ireland's ratification of the UN CRPD. A generation of people have grown up under the provisions of the Disability Act, and much has changed in the interim. It is time now to review this important Act's contents. A review through the lens of the UN CRPD, can help to ensure its continued relevance, and that it reflects the ethos and values of the convention. An ambitious and progressive review can strengthen Ireland's commitments to people with disabilities now, and to the generations who will follow.
- **Reform Legislation that Permits Disability Discrimination.** The Equal Status Act, in Section 5(2)(d), allows insurance companies to discriminate against people with disabilities and charge higher premiums in certain cases. The impact of this provision on a disabled person's capacity to live their own life and make their own

choices can be significant. Home ownership becomes impossible for some disabled people because they cannot access or afford mortgage protection insurance. Travel abroad is limited for some disabled people because travel insurance is unaffordable. Finding employment, which is already challenging, becomes even more difficult as job offers are not made, or rescinded after an employer learns that employing a disabled person will increase their employment insurance premium. There are also ongoing issues with car insurance for people with disabilities, and accommodations not being made for changing life circumstances. Government policy promotes home ownership and employment for people with disabilities, and this exemption for the insurance companies makes achieving these goals more difficult, creating an unequal and unfair society.

- **Reform the Mental Health Act.** Prioritise the passing, commencement and implementation of the Bill to reform the Mental Health Act, 2001. Currently, many people cannot access mental health care, which can worsen disability. Many people with disabilities also find themselves in need of mental health support, and it is important that such support is easily accessible, affordable, and inclusive of all.
- **Examine Disability Services Regulation.** HIQA regulation on residential services requires review and reform, with outcomes and personal preferences of individuals as per the Assisted Decision-making Act (2015) at its centre. Further regulation of other service areas must take a similar approach. This is to ensure, not only standards and assurances are investigated and upheld but also holding an outcomes and person-centred approach and the preferences of the individual are heard.
- **Commit to Commence already Passed Legislation.** Several pieces of important disability legislation have never been fully commenced. These include:
 - The ESPEN Act 2004, which addresses education for children with disabilities. Large chunks of this act remain un-commenced 20 years since it was passed.
 - Some parts of the Assisted Decision Making (Capacity) Act 2015 remain uncommenced.

In some of the above cases, such as the EPSEN Act, uncommenced sections are now so old that they would have been amended or even replaced by now, had they been commenced. In these cases, new legislation may be needed.

3. Improving People's Standard of Living

- Ireland ranks 20th of the EU 27 for disability poverty, and lowest in the EU for its disability employment gap. (Eurostat, 2024)
- Recent ESRI research shows that 24.4% of households with a disability experience deprivation, compared to 12.6% of households without. (ESRI, 2024)

A shocking reality for people with disabilities, is that they are being pushed into much higher levels of poverty than the general population. This is counter to the **UN CRPD - Article 28** which states that all people with disabilities are to have an adequate standard of living, as well as continuous improvement in their living conditions.

Last year, one in two people unable to work due to a long-standing health problem (disability) lived in deprivation, while 16.5% of this group lived in consistent poverty, 4.5 times higher than the national average of 3.6%.

Disabled people also have significantly higher in-work poverty rates than their non-disabled peers. Ireland has one of the highest rates of poverty among people with disabilities in the EU, ranking higher than only Bulgaria, Estonia, Croatia, Latvia, Lithuania, Malta and Romania.

Government must take this issue seriously and make a real commitment to address this. By:

- **Reform of social protection provisions, including means testing.** Reform the social protection provision for people with disabilities, based on the significant learnings from the Green Paper on Disability Reform (2024) process, and recommendations in submissions made to the Department of Social Protection. This includes:
 - A social model of disability, underpinned by an agreed set of progressive values to be the framework of social welfare reform. The starting point of social protection supports for disabled people should be delivering the rights outlined in the UN CRPD.
 - A sufficient income to support a life of dignity and inclusion for all who cannot work.
 - Equally, tackling the barriers to employment for disabled people who can work.
 - Reform of the means-testing approach, including increasing the capital disregard, and assessing a disabled person's

- income and means, not their family member, partner or anyone else they live with.
- For more on reform see [DFI's Green Paper submission](#).
- **Index social welfare rates above the poverty line.** Indexing social welfare rates or benchmarking these on an annual basis, will support more people above the poverty line and take greater credence for cost of living rises in line with inflation, while also taking the Cost of Disability into account. The Minimum Essential Standard of Living (MESL) recommendations can be used as a guide.
- **Recalibrate eligibility thresholds annually across schemes based on social welfare increases.** Ensure that eligibility thresholds are realigned on an annual basis according to increases in social welfare payments to avoid unintended losses of other supports (for example medical card or housing supports).
- **Implement [DFI's recommendations on Energy Poverty](#), including:**
 - Expansion of the Fuel Allowance payment to all people on a disability-related social protection payment.
 - Linking the Fuel Allowance to those with high level of disability related energy use and recognising that for many this is a year-round requirement.
 - Review, analyse and strengthen the provision of the Heating Supplement. Increase awareness of this support.¹

To tackle poverty, as well as taking action to improve incomes, action also needs to be taken on the many extra costs of having a disability, as we outline below.

4. Reducing the Impact of Extra Cost of Disability

The Department of Social Protections' Cost of Disability report (2021) established significant evidence showing the many additional costs that households with a disability live with, including: equipment, aids and appliances; mobility, transport, and communications; medicines; care and assistance services, and additional living expenses. Many people are pushed into poverty and deprivation due to these extra costs, and the lack of sufficient supports to address them.

The lack of sufficient public services also contributes significantly. The report showed that, for example, 20.7% of respondents had paid privately for a Personal Assistance service, 21.9% for respite care, 29.4% for

¹ See <https://www.disability-federation.ie/publications/epap-consultation-may-2024-dfi-submission/>

psychological or counselling services, and 38.5% for physiotherapy.² Those who cannot afford to pay face a significant disadvantage.

By its very nature the extra Cost of Disability manifests across areas governed by many different government Departments. Thus, an overarching approach or strategy to tackle Cost of Disability is required. These could be outlined in the forthcoming National Disability Strategy, but we argue that a targeted strategic approach is required with a or a specific Cost of Disability Action Plan. With both approaches cross and inter-Departmental action is key. We outline below some actions which can start to address this issue:

- **Cost of Disability Payment.** Bring in a universal, non-means tested Cost of Disability payment at an equivalent level of €50 a week. Initially this can be rolled out to all those in receipt of a disability-related social protection payment. This payment to be administered like Child Benefit - a universal non-taxable payment that is paid by the Department of Social Protection. Over the duration of government, a graduated Cost of Disability Payment scheme based on differential need and best practice internationally can be developed, in consultation with people with disabilities.
- **Develop a Cross-Departmental Strategy and Action Plan on Cost of Disability and Poverty.** A specific plan is required to tackle the twin, and deeply interlinked, challenges of reducing disability poverty, and the extra Cost of Disability to address these issues over the duration of government. This plan should:
 - Be co-designed with disabled people and disability civil society organisations and have the UN CRPD as its foundation.
 - Lay out actions to tackle the extra Cost of Disability across all relevant government departments.
 - Contain clear, measurable and time-bound poverty reduction targets; laying out the actions that will achieve these reductions and report annually against targets.
 - Acknowledge that employment will not be a viable path out of poverty for everyone and ensure a sufficient income to support a life of dignity and inclusion for all.
 - Identify and commit to actions to address the Cost of Disability issues that can be barriers to employment.

Specific actions listed within this manifesto under the relevant thematic area will also contribute to tackling the Cost of Disability e.g. access to health and social care, access to an affordable and accessible home, investing in transport and assistive technology, tackling poverty, low unemployment rates to name a few.

² Indecon (2021), *The Cost of Disability in Ireland*, pp. 122-126.

5. Improving Health Outcomes and Access to Health and Social Supports

- Over 90% of disabled people are supported through mainstream health services, under the Department of Health (Disability Capacity Review, 2021).
- Almost 70% of specialist disability services are provided by the voluntary sector (Disability Capacity Review, 2021).
- Nearly 20% of people with a disability to a great extent experience bad or very bad health, compared with just 1.7% of the general population (Census, 2022),
- Thousands of children remain on waiting lists for Children's Disability Network Teams, CDNTs; with the vast majority waiting over 1 year (Action Plan for Disability Services, 2023).

Health and disability-specific services/supports remain one of the largest areas of concern for people with disabilities. Many disabled people rely on these services, along with mainstream community supports to maintain a standard of health, and to live their lives as independently as possible. However, the system can be unreliable and accessing services is often difficult or impossible.

Changes are needed to address these problems and create a health and social care system that facilitates people with disabilities to live equal to others, as per **Article 25 of the UN CRPD**. Under the next government a commitment to the following is required:

- **Resource the community and voluntary sector.** This sector is the backbone of community disability-specific services and operates to the public benefit. These organisations require resourcing with reformed, sustainable multi-annual planning and funding as a means to create greater certainty, security and innovation across critical community supports.
- **Address workforce issues.** Establish a cross-departmental Strategic Workforce Advisory Group to examine workforce challenges in the disability sector and commit to resourcing the implementation of the findings in their final report.
- **Recognise Section 39 funded organisations.** Recognise the value of the work that Section 39 funded organisations do to support disabled people in the community; therefore, deliver and resource pay parity for workers in these organisations.
- **Implement the Action Plan for Disability Services and develop an ambitious second Action Plan in the lifetime of the next Government.** Provide funding to fully implement the

Action Plan for Disability Services 2024-2026 to address unmet need across a range of service areas including children's services, adult therapies, day services, respite, residential, personal assistance (PA), home support and neurorehabilitation. This is a well-thought-out plan which looks at demographic change and unmet need. The plan clearly articulates the investment required to have an acceptable level of community supports for disabled people.

A successor plan will be required to:

- Have greater ambition for innovation, including developing new service models that support full realisation of the UN CRPD.
 - Recognise that people do not live in silos of specialist disability services. Focus, therefore on integration with mainstream health services, and the wider landscape of community supports including education, employment, housing, transport, etc.
 - Significantly expand access to PA services, including addressing pay and recruitment, geographical inequities, improving data, ensuring a focus on the ethos of self-directed care, and appointing HSE staff dedicated to PA at a national level to drive development.
 - Include a plan to develop a new, viable model to deliver personalised budgets with a permanent funding base.
 - Commit to ending the practice of accommodating people with disabilities aged under 65 in nursing homes - including moving those currently in nursing homes into the community, and building community and rehabilitation supports in tandem with housing to prevent more people entering nursing homes.
- **Improve mainstream health access.** Recognise mainstream health needs, and the poorer health outcomes experienced by disabled people. A disability unit is required in the Department of Health with direct responsibility for improving disabled people's access to mainstream health services, and ensuring integration of services accessed by disabled people across the new health care structures e.g. Health Regions.
 - **Medical Card access for all who need it.** Make the medical card available to any disabled person who needs it. Medical card entitlement should be based on medical need rather than means-testing. Better medical card enforcement is also needed - many

people have found themselves charged for certain costs, such as blood tests, that should have been covered by their medical card.³

- **Improve access to therapies.** Provide funding to address waiting lists for services such as occupational and speech therapists, psychologists and other key health services.
- **Children’s Disability Services.** It has been well documented in recent months and years that the system of access to timely assessment for children with disability is currently broken, with thousands remaining on growing waiting lists. The next government must prioritise this area, considering not only timely assessment but also timely and early intervention.
- **Continue to implement SláinteCare.** Continue the commitment to SláinteCare, recognising the challenges of health care reform across the system and for people using services. Create good communication strategies to share information and knowledge of changes for people interacting with the system, including voluntary service providers, people with disabilities and their families.
- **Improve neurorehabilitation services.** Fully implement the Neurorehabilitation Strategy and establish fully staffed Community Neurorehabilitation Teams in each Health Region.
- **Personalised Budgets.** Establish a fully functioning Personalised Budget Office within each Health Region that can support disabled people with the administration of personalised budgets e.g. setting up a company, going through a broker, revenue, insurance support.

6. Living in the Community, Access to Education and Employment

Living in a community has many facets. It means being able to travel, to make connections, to meet friends and family, to participate in sporting and cultural life and to feel connected to others, with shared identity and community membership. People want to live their lives as part of the community of their choice - for many this includes a community of neighbours, of colleagues at work, or of a group of like-minded people who share a hobby or interest. For many, being employed in the community is also an important part of belonging.

But too often, society is set up to create barriers to this kind of inclusion. These barriers can be physical, such as inaccessible or non-existent transport options or inaccessible buildings, information, and public

³ <https://www.oireachtas.ie/en/debates/question/2024-04-09/1294/>

services. Or they can be more intangible obstacles - such as employment barriers. These can include incorrect beliefs about what people with disabilities are capable of, workplaces that fail to properly accommodate a disabled employee, the reality of living with the extra Cost of Disability, and barriers such as the insurance problems discussed earlier. To address these barriers, the next government needs to:

- **Invest in public and local transport, including Local Link.** Many people with disabilities rely on supports within their community – others cannot benefit due to access issues. Currently, there is no funding for door-to-door transport, unless the individual organises this informally or pays for it privately. Without reliable transport, a person can find themselves stuck at home, unable to form links in their community. Greater investment in increased accessibility and frequency of Local Link transport services for disabled people living in rural areas will be useful, as will increased accessibility across mainstream public transport.
- **Establish a Transport Support Scheme.** Not everyone can access public transport, either because of their disability, or because of their location. Urgent establishment of a Transport Support Scheme to replace the Mobility Allowance, Motorised Transport Grant, and other transport schemes, as per the Ombudsman's longstanding recommendation, will address this issue.
- **Extend the criteria for a disabled parking badge.** Extend the criteria for a disabled parking badge to include categories of disability currently excluded.
- **Fund and coordinate the local implementation of the UN CRPD.** There are many actions that local authorities can take to implement elements of the UN CRPD. This is particularly true of those parts of the convention that deal with community life and inclusion in the community. The national government must lead on this implementation, by providing sufficient funding, coordinating actions, and promoting and encouraging implementation by local authorities. Actions at this level can have a disproportionately positive impact on the everyday lives of people with disabilities.
- **Expand the role of Access Officers.** Make the Local Authority role of Disability Access and Equality Officer a full-time role, with an appropriate grade and salary. To effectively carry out its functions, this role needs to be senior enough to be able to implement change - comparable to other programmes where there are a number of personnel on a team e.g. integration, age friendly.

- **Provide increased, ongoing local funding for the inclusion of people with disabilities.** Create a stable source of funding for local authorities that will allow them to fund staff to address disability issues (such as a full time Access Officer). The funding will also support them to carry out programmes and work to create more disability inclusive communities. This new programme can be coordinated by the national government.
- **Assistive Technology (AT).** Provide sufficient funding for digital assistive technology supports, including to develop a national network, AT Passport, loan library, national funding database, website, training programme and peer support development programme. Provide leadership and coordination at national level on AT, to combat the current fragmentation of programmes.

6.1 Address employment barriers for people with disabilities

- More than 1 in 3 (35%) people unable to work due to long-standing health problems report low satisfaction with their overall lives, compared to the national average of 1 in 10 (10.2%). (CSO SILC 2024)
- 1 in 2 (44.7%) of people unable to work due to long-standing health problems live in deprivation – unable to afford basic essentials like heating, new clothes or socialising with friends and family. (CSO SILC 2024)
- The employment rate of people with disabilities is 49%, compared to 71% of those without a disability. (NDA, 2024)

Addressing employment barriers includes considering transitions to employment, ensuring reasonable accommodation and other employment supports are in place. This also includes addressing means testing of benefits and income disregards for disability allowance, and retaining essential supports when employed, to improve recruitment and retention.

Actions the government can take include:

- Set out ambitious and time-bound annual employment targets, and measure and report on these annually.
- Provide sufficient funding to resource actions under the Employment pillar of the National Disability Strategy.
- Develop actions to address the Cost of Disability and its impact on employment.

- Fully fund, implement, and in due course review and strengthen, the new Work and Access scheme, as well as other employment support programmes for people with disabilities.
- Change criteria for the medical card and other entitlements such as the free travel scheme, to link them to medical need and disability status, rather than means-testing. Remove the 5-year time limit on entitlement to free transport for those in employment.
- Continuously increase the income disregard for disability payments.

7.A Place to Live

- 5,521 households (9.5% of those on the housing waiting list) have identified disability as the main category of need for social housing support (Housing Agency, Summary of Social Housing Assessments, 2022).
- 40% of households include someone with a disability (Census 2022).
- 1,228 people with disabilities under the age of 65 are inappropriately living in nursing homes (Nursing Home Support Scheme, 2023).

There is an endemic housing crisis in Ireland and people with disabilities are feeling the brunt of this crisis. In addition to the many mainstream barriers related to affordability and adequate levels of housing stock, accessing appropriate, accessible housing adds an extra layer for many. Action is needed to, at the very least, put people with disabilities on a level playing field with the rest of the population. This includes:

- **Fully implement and resource the *National Housing Strategy for Disabled People 2022-2027*.** The Strategy and its implementation plan were widely welcomed by disabled people and disability organisations. The next Programme for Government must commit to fully funding and implementing this Strategy.
- **Reform Part M.** Reform and strengthen Part M of the building regulations, so that it requires the building of wheelchair liveable housing.
- **Universal Design.** Ensure a sufficient percentage of fully accessible housing is built - including an appropriate mix of Universally Designed, UD, Homes, UD+ Homes and UD++ Homes.⁴ With Ireland's ageing population, there will be increased demand for universally designed accommodation. In addition, Census 2022 showed that 40.6% of households include someone with a disability

⁴ See Centre for Excellence in Universal Design (2015) [Universal Design Guidelines for Homes in Ireland](#) for more information.

to any extent, while 16.8% of households included someone with a disability to a great extent.

- **Local Authority Disability Housing Technical Advisors.** The introduction of this new role in all Local Authorities under the Housing Strategy is welcome. But as there is no central funding for this, in most cases it has been added on to busy existing roles. Provide funding for this important position to be a dedicated, standalone role, so that it can have the full desired effect.
- **Disability Tenancy Sustainment Officers.** Establish Disability Tenancy Sustainment Officers through the Approved Housing Body sector, based on the Mental Health Tenancy Sustainment Officer model. Tenancy Sustainment Officers work directly with tenants who need support to manage their tenancy. The officers support tenants moving into a property to live independently.
- **Improve the Capital Assistance Scheme.** Remove barriers to the functioning of the Capital Assistance Scheme, which is currently not meeting needs as intended. This must include addressing capital expenditure ceilings and timeframes.
- **Improve and Increase Housing Adaptation Grants.** Reform the Housing Adaptation Grant, including addressing overall funding maximum grant limits, income thresholds and the administrative burden for applicants.
- **Under 65s in Nursing Homes.** Provide funding for accessible housing in the community, to support individuals aged under 65 to move out of nursing homes. To be effective, this must be delivered in tandem with health and social care supports.
- **Coordination of Housing and Social Care Supports.** Greater coordination is needed between Local Authorities and the HSE, to ensure housing and support needs are planned for and met in tandem. This must be driven at national level by strong cross-Departmental structures.
- **Better functioning Housing and Disability Steering Groups (HDSGs).** Strengthen the effectiveness of the HDSGs by improving areas like greater integration with other Local Authority plans; ensuring they set clear, costed, transparent targets; and ensuring greater representation of senior HSE staff, community and voluntary organisations providing housing/housing supports, and lived experienced representatives.

8. In Summary

As this manifesto shows, there are many areas where structural and systemic barriers prevent people with disabilities from living their lives unhindered by obstacles and extra costs. The actions laid out above will not fully address all these barriers, but they are a starting place. The only way to fully create an equal, inclusive society is the comprehensive and rigorous **implementation of the UN CRPD**.

Disability exclusion, marginalisation and deprivation is not inevitable, nor is it acceptable. Individuals, families and communities across Ireland want things to improve for disabled people and expect progress from the next government. The fact that one in five people identify as a person with a disability shows how central disability rights are to social progress in Ireland. We can and must do better. The next government can make different choices in the years ahead.

Taking the actions outlined in this manifesto will act as a launching platform towards the ultimate goal of realising the vision of the UN CRPD in Ireland.

Summary Actions – DFI is calling on the next Government to:

- Maintain and strengthen senior governance, oversight, political leadership and accountability mechanisms on disability.
- Work to improve cross-departmental and agency working through a whole of government approach.
- Develop an improved complaints mechanism on disability (develop an Office of the Ombudsman for Disability) and resource independent advocacy for disabled people.
- Rigorously equality-proof all legislation, national policy and budgetary allocations to ensure it does not further disenfranchise, but instead brings about positive progress for disabled people.
- Resource disability organisations that provide essential community and social supports and make their sustainability a core component of future government.
- Fully commence legislation which promotes and realises disability equality and inclusion, and review and reform other legislation where needed.
- Resource Disability Person's Organisations, civil society and Self-Advocacy; mainstreaming co-design and participatory programme policy developments.

- Commit to address and reduce the Cost of Disability, and work to end high rates of poverty experienced by disabled people.
- Address the ongoing issues across a range of disability services – including supply of a trained workforce, accessible and appropriate pathways to assessment and timely intervention – critically within adults and children services.
- Make ease of access to integrated mainstream community supports a reality for disabled people and commit to improve their health outcomes.
- Take a coordinated, structured approach to community inclusion – with standardised steps to disability inclusion at local authority level.
- Address other issues that prevent community inclusion – including transport, assistive technology and crucially barriers to education and employment.
- Ensure disabled people can afford and have access to a home.