

Agenda for Action: Understanding the intersection of ageing and disability in Victoria



Overlapping, not interchangeable, experiences

Disability is not an inevitable part of ageing, yet many older people do live with disability. This includes those who age with lifelong disabilities, those with chronic conditions that lead to disabilities later in life, and those who acquire disability through illness or injury in older age.

These individuals have diverse and often complex needs that overlap with but are often distinct from needs commonly associated with ageing.

This intersection is growing. As Australia's population ages and life expectancy increases, greater numbers of people will experience disability in later life. Our systems must evolve to respond equitably to the needs all of people with a disability, irrespective of age.

Ageing and disability can each, on their own, lead to marginalisation, discrimination and abuse. When they coexist in an individual, the risk multiplies. As highlighted in the United Nations Convention on the Rights of Persons with Disabilities, we need to understand the complex ways in which ageing impacts on disability rights and vice versa.

This resource summarises the full Agenda for Action, [which you can read here](#).



By the numbers:

- An estimated 528,00 Victorians aged 65+ have a disability. This is a prevalence of 51%, compared to 21% for the wider population.
- Disability in the older population is 2.5 times more likely to be profound or severe.
- The volume of older Victorians with a disability is set to increase markedly as the population ages and life expectancy of people with many types of disability improves.
- Nearly 40% of all disability needs relate to older Victorians. At the same time, almost half of those with a disability and ineligible for the NDIS are aged over 65.
- Some 339,000 Victorians aged 65+ with a disability need assistance to live at home and 229,000 receive help from a service provider. Around a third report that their support needs were either not met or only partially met.
- Nearly 20% of Victorians over 65 care for a family member or friend with a disability or condition related to chronic ill-health, age, or both. Carers are almost twice as likely to have a disability themselves compared to non-carers.

Impact on support needs

Older people with disabilities are often caught between service systems, with ageing services on one side and disability services on the other, without either being equipped to fully meet their needs. Too often, disability needs are subsumed into an aged care framework or siloed off rather than forming part of a well-integrated whole-of-person assessment of needs.

Among the challenges associated with this situation are:

- Navigating disconnected systems (NDIS and aged care).
- Higher financial burdens and limited choice.
- A lack of tailored, accessible supports.
- Reduced visibility in policy and program design.

A call for change, and a plan to act

The problem we face

Currently, Victorians aged 65 and over with disability face a patchwork of supports that are often limited, financially burdensome, and unfit for purpose. My Aged Care is not equipped to deliver the specialist supports required and the NDIS excludes new entrants who acquire disability after 65.

This is an inadequate and inequitable response to some of our most vulnerable members of the community, leaving too many older people unsupported, under-served, and too often, invisible.

With significant positive reforms in both aged care and disability services in train, now is the time to plan for a more joined-up system that recognises the whole older person, not just which system they “belong” to.

Real experiences, real impacts

“Most disabled people live in poverty due to a lifetime of no or underemployment and increased medical costs... there are not easily identifiable supports for disabled older people and, those that are found, are not affordable.”

“Aged Care is treated differently to Disability Services. If you have had a stroke at 55 or at 85 the outcome is the same. The same supports should be available to both age groups.”

“Being elderly and having a disability makes you a somewhat invisible person. If the government put clients first instead of funding... peoples’ conditions would deteriorate less rapidly, and they would be able to remain functioning members of society.”

These are not isolated experiences. They reflect a systemic failure to recognise the complexity of disability in later life and to respond with equity and inclusion.

Purpose of the Agenda for Action

Led by COTA Victoria and Seniors Rights Victoria, in consultation with other leading statewide peak bodies, the Agenda for Action sets out a multi-faceted, five-year roadmap for lasting change to deliver equitable, inclusive support for older people with disability.

At its heart is one guiding principle: Support must be based on need, not age.

We are calling on governments, service providers, and the community to act together guided by the lived experience of older people with disability. A total of 35 specific actions are proposed across six key areas.

Six priority action areas

1. Voice, advocacy, and representation – enabling genuine participation by older people with disability in policy development and service design.
2. Specialist disability services – ensuring access to high-quality, fit-for-purpose, age-appropriate disability supports within and beyond the NDIS, including through workforce development.
3. NDIS and My Aged Care system interface – addressing gaps across systems to provide a more equitable, connected support pathway.
4. Mainstream community services – promoting inclusive access and responsiveness for older people with disability delivery across local service networks.
5. Carer supports – recognising the essential role of unpaid carers and strengthening informal supports, recognising that many are themselves older people with a disability.
6. Safeguarding and preventing abuse – embedding protections to uphold the rights, dignity, and safety of older people with disability in services and community settings.

Read the full Agenda and get involved:
<https://cotavic.org.au/policy/publication/disability-supports-for-older-victorians-agenda-for-action>

Action themes

Proposed actions are grouped into six themes:

Voice, advocacy and representation

Specialist disability services

NDIS and My Aged Care interface

Mainstream community services

Carer supports

Safeguarding and preventing abuse

While the actions in the table below are grouped by theme, many cut across the overarching priorities identified. The table also highlights the government departments best positioned to lead each action. However, successful implementation will also rely on strong partnerships with non-government organisations, local councils, and private providers.

Area of opportunity	Proposed action
VOICE, ADVOCACY, AND REPRESENTATION	
1 Disability State Plan	<p>1.1 Undertake targeted consultation with older Victorians and representative bodies to ensure that ageing and disability issues are well identified and addressed in the next Victorian Disability Plan 2027-2031</p> <p>1.2 Incorporate an explicit life course approach into the Plan, that articulates key disability support and inclusion needs for older Victorians, alongside commitments to prosecute elements of disability services reform that affect older people.</p>
2 Victorian Disability Advocacy Program	<p>2.1 Strengthen the Victorian Disability Advocacy Program through funding for older person's groups and/or supporting existing groups to actively extend their membership to people over 65.</p>
3 Engagement with older people with lived experience of disability	<p>3.1 Identify older persons as a specific cohort to be represented on the Victorian Disability Advisory Council, to support advocacy for the interests of older people with a disability.</p> <p>3.2 Ensure that the Senior Victorians Advisory Committee incorporates and connects with the lived experience of older people with a disability.</p>

Area of opportunity	Proposed action
SPECIALIST DISABILITY SERVICES	
4 Access to Assistive Technology and Home Modifications in Aged Care	4.1 Develop an integrated plan on assistive technology access for older people that ensures equity with NDIS supports and ensure that the proposed new aged care Support at Home program provides comprehensive access to assistive technology in a streamlined way. This should include support to facilitate access to quality registered providers and ensure appropriate wrap-around support.
5 Victorian Aids and Equipment Program	5.1 Enhance the Victorian Aids and Equipment Program (VAEP) to expand the range of products for older users, simplify access and link older users with suitable wrap-around services.
6 Foundational Supports	6.1 Ensure that older adults have access to key elements of new foundational supports including improved information and system navigation support. 6.2 Recognise that carers are a critical support to older people with disability and must be a priority focus in all government funded strategies and initiatives to improve health, wellbeing and social connection.
7 Disability Support for Older Australians program	7.1 Provide clarity on the future of the DSOA program and ensure all remaining participants have access to a combination of NDIS level support (including specialist disability accommodation where required), personalised transition to My Aged Care and/or Foundational Supports.
8 Support for older people from migrant backgrounds	8.1 Provide enhanced outreach and case management for older people with a disability from migrant backgrounds who need proactive, tailored support to engage and access funded services (including enhanced capacity for interpreting and translation)
9 Access to social connection programs	9.1 Improve access to local, community-based social connection programs for older people with disability by ensuring consistent and sustainable funding across the NDIS, My Aged Care, and relevant state programs such as the HACC PYP. This should include physical spaces and face to face connection to avoid digital exclusion experienced by many older people with a disability.
10 Enhance provision of allied health to older people with continuing, emerging or newly acquired disability	10.1 Provide for greater flexibility in provision of allied health to people receiving My Aged Care home care, including where the needs are not solely linked to “age-related disability”. This could be supported by common or aligned assessment process across the disability and aged care systems. 10.2 Expand availability of allied health supports from community health services and through Medicare Team Care arrangements– including speech pathology, occupational therapy and podiatry – to older people with disabilities who do not meet aged care assessment thresholds.
11 Workforce	11.1 Strengthen geriatric knowledge and capacity within the disability workforce through targeted training, professional development, and cross-sector learning opportunities. 11.2 Ensure greater parity in pay, conditions, and career pathways between the disability and aged care sectors to prevent workforce distortion and the loss of skilled workers with experience across both systems.

Area of opportunity	Proposed action
NDIS AND MY AGED CARE INTERFACE	
12 Service navigation and case management	12.1 Create more integrated place-based service navigation programs that cover ageing, disability and chronic health management and everyday living needs. These should facilitate care coordination and leverage inputs from mainstream health and social support agencies. They should build on Care Finder and Victorian-based pilots of general navigation support for younger people. 12.2 Scale up the availability of active case management for older people with a disability living at home – including intensive support at critical stages - for those whose disability poses challenges that cannot be met entirely within the aged care system. This could build on the Critical Interim Support pilot run by the Brotherhood of St Laurence. ⁷
13 Improved NDIS and Aged Care interface	13.1 Implement the recommendation of the NDIS Review to allow greater access to crossover aged care program supports for NDIS participants. 13.2 Ensure that individuals, irrespective of age, requiring disability support receive a transparent, needs-based assessment (common to My Aged Care and NDIS) that clearly identifies the appropriate level and type of disability support required – including AT-HM. Where NDIS participation is not possible or preferred, this assessment should form the basis for equivalent support to be delivered by alternative systems, including My Aged Care

Area of opportunity	Proposed action
MAINSTREAM COMMUNITY SERVICES	
14 Home and Community Care Program for Younger People	14.1 Review how the HACC PYP supports people approaching 65 years and enhance support to ensure that the level of disability support provided is maintained once a person reaches 65.
15 Safe, affordable and accessible housing for older people with disability	<p>15.1 Enhance social housing and private rental standards to support independent ageing in place for people aged 65+ with existing or emerging disabilities. This includes incorporating accessibility features, promoting universal design, and strengthening protections against ageism and ableism in the housing market.</p> <p>15.2 Provide tailored, individualised housing support - similar to the Home at Last program - for older people with disability in insecure housing. This should ensure access to home-based aged care, disability support, and AT-HM necessary to maintain successful tenancies.</p> <p>15.3 Streamline requirements to enable providers of supported housing to accommodate both NDIS and My Aged Care recipients and encourage development of independent living units designed for older people with a disability.</p>

Area of opportunity	Proposed action
SAFEGUARDING AND PREVENTING ABUSE	
16 Abuse of older people with disability	<p>16.1 Enhance and consolidate a coordinated statewide approach to adult safeguarding in the community that covers both people with disability and older people.</p> <p>16.2 Develop a system for collating data relating to the risk and prevalence of abuse of older Victorians with a disability, including enhanced data sharing between NDIS, My Aged Care and state-based programs.</p> <p>16.3 Build frontline workforce capacity through targeted training on the intersection of ageing, disability, and abuse, including how to recognise subtle signs of coercion, neglect, or financial exploitation specific to this cohort. This training should be embedded across aged care, disability services, health, family violence, and legal sectors.</p> <p>16.4 Strengthen legal and advocacy support for older people with disabilities experiencing or at risk of abuse, ensuring access to independent, culturally safe, and disability-informed advice and representation – especially for those in supported accommodation, residential aged care, or reliant on informal carers.</p> <p>16.5 Invest in community education and outreach campaigns that raise awareness of elder abuse among people with disabilities, families, carers, and community organisations – focusing on rights, reporting pathways, and available supports.</p>

Area of opportunity	Proposed action
CARER SUPPORTS	
17 Carer support	<p>17.1 Ensure accessible, integrated navigation supports that address both disability and age-related care needs, specifically for unpaid carers – including older carers who may face barriers related to digital communication and technology barriers, and their own health or care requirements.</p> <p>17.2 Extend eligibility for utility concessions and cost-of-living supports to unpaid carers, similar to those available for pensioners and health care card holders, in recognition of the economic disadvantage associated with long-term caring roles.</p> <p>17.3 Ensure carers receive timely, accessible information about available supports at the point of diagnosis. Embed routine recognition of carers in health, aged care and disability systems, and actively involve them in care planning and delivery.</p> <p>17.4 Expand availability of both planned and emergency respite, with options tailored to the carers needs and identity (including age, cultural identity and circumstances).</p> <p>17.5 Fund and promote age-specific carer support groups to reduce isolation and foster peer networks.</p> <p>17.6 Lead by example with the Victorian Public Service becoming an accredited carer friendly workplace and launch a public campaign to encouraging adoption the not-for-profit and community services sectors, enabling carers to balance employment and care responsibilities without premature workforce exit.</p>