



The Y NSW Youth Parliament

Disability Community Inclusion and Engagement Youth Act 2026

Bill Proposed By:	2026 Disability Inclusion & Accessibility Portfolio
Lead Sponsor:	Imogen Szabo, Youth Minister for Disability Inclusion & Accessibility, Youth Member for Drummoyne
Sponsors:	Aabisha Varatharasan, Youth Member for Macquarie Fields Anna Rintoul, Youth Member for Epping Azazel Kent, Youth Member for Blue Mountains Lukas White, Youth Member for Charlestown
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Refuters:	Dan Clayton, Youth Member for Hawkesbury Gypsy Rigatos, Youth Member for Bega Mollie Webb, Youth Member for Balmain

Summary of Debate:

On Wednesday the 15th of July 2026 the *Disability Community Inclusion and Engagement Youth Bill 2026* was debated on the floor of the NSW Legislative Assembly; presided over by Ms Marjorie O'Neill MP, Parliamentary Secretary for Transport, Member for Coogee.

Results of the Vote:

The results of the vote on the passage of amendments were 29 Ayes, 24 Noes, 1 Abstentions. As such, the amendments were passed.

The results of the vote on the passage of the bill were 53 Ayes, 0 Noes, 2 Abstentions. As such, the bill was passed.

The *Disability Community Inclusion and Engagement Youth Bill 2026* was passed in its amended form.

I certify that this Bill has been duly passed by the Y Youth Legislative Assembly of New South Wales, has received assent, and is now a Youth Act.

A stylized, handwritten signature in black ink, appearing to be 'JD' with a long horizontal stroke extending to the right.

Jamison Dustin, 24th Youth Governor of the Y NSW Youth Parliament

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The Y NSW Youth Parliament

Disability Community Inclusion and Engagement Youth Act 2026

Act no. 03, 2026

An Act to

Expand access to community engagement and integration for people with a disability and related purposes.

I have examined this bill and find it to correspond in all respects with the bill as finally passed by the Youth Legislative Assembly.

A handwritten signature in black ink, consisting of a large, stylized 'A' followed by a series of loops and a final flourish.

Alyssa Pinchbeck, Youth Premier of the Y NSW Youth Parliament – Leader of the Government in the Legislative Assembly

Explanatory Note

Summary

This bill aims to improve community engagement for disabled people across NSW, allowing all individuals to live, work, and connect in a society that does not simply accommodate their access needs, but values and celebrates their contributions.

These reforms respond to a prevalence of ableism and accessibility issues across local and broader communities, particularly in transport, healthcare and social spaces. Under current systems, disabled persons are not offered the powers to challenge this unjust treatment nor opportunities that empower them further.

This bill responds to this through a multifaceted approach: enhancing accessibility in public transport, addressing discriminatory attitudes and treatment within healthcare settings through education and accountability measures, and promoting greater social inclusion by providing disabled individuals with resources and mechanisms to respond to social discrimination.

Part 2– Transport

This part outlines the standards for accessibility that new and existing transport infrastructure must follow, including handrails, tactile ground surface indicators, ramps at all entry and exit points, elevators of lifts at multi-level/wharfs, and at least one wheelchair accessible bathroom. It also sets out the allowed transition period for the conversion of existing stations before compliance is enforced.

Part 3 – Health

In this bill, we outline an act that would complement this existing legislation by preventing discrimination while also promoting active and personalised support for disabled persons within the healthcare system. This bill aims to achieve this support through ensuring disabled persons have access to all necessary tools for communication and mental health support, expanding access to community-based health initiatives, particularly in indigenous communities, and increasing the overall autonomy of disabled patients.

Part 4 – Social

This part establishes a commission to stop ableist behaviour and discrimination to assist in societal participation for people with disability. The part outlines the authority of the commission and It also sets up initiatives to foster inclusion through initiatives and programs. This part helps at breaking down stigma and actively taking a role against it, to create an environment where disabled individuals can live, work, and connect freely and to their fullest.

Rationale

Across New South Wales, people living with disabilities face a range of problems in daily life, particularly around transport, health, and social inclusion. Although existing legislation, including the Anti-discrimination Act 1977, the Disability Services Act 1993, and the Disability Inclusion Act 2014, aim to protect and assist them, these frameworks often fall short. As a result, many individuals still experience discrimination, inadequate accommodations, and barriers to ensure proper engagement and inclusion in society.

Despite legal protection under these acts, disabled persons face constant exclusion in the transport sector. Outdated legal frameworks act as barriers to accessing public transport services. The Anti-discrimination Act 1977 states that transport service providers do not have to make their fleet accessible if they deem it as an unjustifiable hardship. Many older trains are an “unjustifiable hardship” for providers to convert to modern accessibility standards, but are still considered fit for public service; this, among other issues, prevents the implementation of effective state-wide accessible train networks.

According to the NSW Youth Week 2026 polling report, only 61% of young people with disabilities and diverse health experiences agreed that services they use are accessible. Barriers extend beyond physical access; people with blindness, low vision, psychiatric disabilities or multiple disabilities face the greatest challenges in using public transportation for community participation (Bezyak *et al.*, 2019). Challenges include limited accessible information, inadequate ramps and the negative attitudes from transport staff towards disabled persons (Park and Chowdhury, 2018) (Mwaka *et al.*, 2024).

As of February 2026, Transport for NSW identifies that only 72% of train stations and 76.92% ferry wharfs are independently accessible, leaving around 1 in 4 stations inaccessible. Even where access exists, facilities such as lifts are often poorly maintained. These issues are exacerbated in rural and regional areas, disproportionately impacting Aboriginal communities, who experience higher disability rates but reduced service access.

The Disability Discrimination Act 1992 (NSW) aims to ensure that disabled persons are neither denied nor unnecessarily forced into medical services, and that healthcare providers offer “reasonable adjustments” to accommodate them. However, since this existing framework centres around preventing discrimination rather than actively promoting positive medical encounters, significant inequities persist in the navigation of the healthcare system, with the Disability Royal Commission identifying 222 systemic failures in the treatment of disabled persons (DRC 2023 Final Report). Notably, these failures primarily centred on barriers to access, attitudinal issues of staff and isolation from extended hospitalisation or other medical treatments. This lack of quality healthcare stems from the vagueness of current legislative standards, with the minimum requirement for care being “non-discriminatory”, rather than actively supportive. As a result, most accommodations for disabled persons are generalised and insufficient, despite 10-15% of NDIS participants having complex support needs that require “multiple, coordinated services rather than single type care” (NDIS 2026). It is vital that care for disabled persons is respectful to patients’ autonomy, specific to individual health needs, culturally sensitive and promotes community and emotional wellbeing.

Aboriginal and Torres Strait Islander people experience disability at disproportionately high rates with 25.3% of Indigenous peoples living with a disability compared to 17.7% of the general Australian population (ABS 2025). Despite this overrepresentation, 32% of Indigenous Australians were unable to access necessary health services and indicated that this was due to cultural reasons, such as language barriers, discrimination and cultural appropriateness. This demonstrates the necessity for equitable healthcare inclusion for Aboriginal and Torres Strait Islander peoples with a disability (Australian Institute of Health and Welfare, 2018-2019).

Likewise, communication barriers for culturally and linguistically diverse (CALD) and non-verbal individuals have perpetuated social isolation and inaccessibility to essential services. According to the 2021 Australian Census, there are only 747 certified Auslan interpreters available for the 16,242 Auslan users in Australia. This indicates that demand for accessibility support is not currently being met, and that greater incentivisation for Auslan training is necessary to address gaps in community engagement and inclusion among Auslan users and CALD disabled persons.

However, even when provided with the necessary resources to facilitate interaction and inclusion, disabled persons often face community exclusion due to social factors, such as stigma and attitudinal barriers. This has resulted in 19% of disabled people feeling socially isolated and 29% experiencing loneliness, despite 68.9% of these respondents reporting that they regularly engage in social environments.

Stigma and harmful stereotypes towards disabled people significantly contribute to community exclusion by perpetuating fear and hesitancy towards interacting with disabled persons. This is evident as 67% of non-disabled persons report "feeling awkward or tentative" to approach or speak to people with a visible disability (Scope Aus 2017). Additionally, this stigma and the risk of negative interactions discourages disabled persons from pursuing community engagement themselves, with 27% of disabled persons reporting that they do not leave their homes as often as they would like due to fear and anxiety caused by selective inclusion.

Although current, aforementioned legislation aims to condemn and prevent the exclusion of disabled people, enforcement of these acts is weak and relies on disabled individuals reporting their experiences, rather than actively promoting a culture of inclusion, awareness, empathy and community accountability.

There are services that provide social inclusion for Indigenous peoples with disability, around 31% of people are dissatisfied with their communities, with Aboriginal and Torres Strait Islander peoples making up most of that number.

Additionally, with 33% of Aboriginal and Torres Strait peoples experiencing disability discrimination due to their background, 46% of which have severe or profound disabilities, many report it being extremely difficult to access a needed service, and when they do access services, they often describe these services as "unsafe", "traumatising" and/or "inequitable".

2023 legislation titled the Disability Services Inclusion Act 2023 was introduced to replace the Disability Services Act 1986, mandating that all disability support services be made culturally safe and appropriate and introducing penalties for violations. However, this act only targets services and has little emotional or mental support and does not encourage the inclusion of Indigenous people with disabilities, creating a gap between the individual and their needs.

With a lack of care and services specifically tailored to people with disabilities to address the problems they face, people with disabilities are being excluded and discriminated against in the transport sector, health system, and society throughout New South Wales. Therefore, reforms are vital to improve the lives of people living with disability.

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The Y Youth Legislature of New South Wales enacts—

Part 1 Preliminary

1 Name of Act

This Act is the Disability Community Inclusion and Engagement Youth Act 2026 .

2 Commencement

This Act commences from the 1st of January 2028.

3 Objects

The objects of this Act are to—

- (a) Improve accessibility for disabled persons within public transport systems;
- (b) Protect disabled persons from discrimination and discriminatory treatment in health care and social settings;
- (c) To empower people with disabilities to take part in community engagement, leadership and workforce opportunities.

4 Definitions

In this Act—

Wheelchair Accessible Bathroom: A bathroom equipped with sufficient space and equipment as, including but not limited to:

- (i) Grab rails attached to the walls.
- (ii) Doors can be hinged or sliding but must be easy to open (less than 20 Newtons).
- (iii) Paper towels and other sanitary products are at an accessible height and location.
- (iv) Water taps have lever handles, sensor plates or similar.

Reasonable Alternatives: Another option that is a fair and equal alternative to the initial thing that can not be provided.

Valuable, Interactive Training: Training that is informed by a diverse range of lived-experiences of disabled persons and encompasses knowledge and various skills necessary to facilitate day-to-day support for and interaction with disabled persons in the trainees relevant field.

Medical Interactions and Certain Procedures: Interactions within or adjacent to the healthcare system, including interactions with support workers, counsellors

Return to Country and On Country Health Initiatives: Indigenous-led, holistic health programs and services that recognise physical, emotional, cultural and spiritual wellbeing as intrinsically connected, and implements processes to protect this wellbeing

Disabled Person: A person who has a long-term physical, mental, intellectual, neurological, or sensory impairment

Disabled Employee: An employee who identifies as having a long-term physical, mental, intellectual, neurological, or sensory impairment

Gradient Standards: Regulatory limits, technical specifications or guidelines which govern the slope of constructed surfaces.

Note— The *Interpretation Act 1987* also contains definitions and other provisions that affect the interpretation of this Bill.

Part 2 Transport and Infrastructure

5 Accessible Infrastructure for Transport

- (1) All newly constructed stations must comply with the NSW accessible infrastructure standards prior to commencing public operation, including:
 - a. Handrails installed alongside stairways, ramps and boarding areas.
 - b. Tactile ground surface indicators positioned along platform edges, entrances, exits and hazardous areas.
 - c. Ramps compliant with national accessibility gradient standards at all exit and entry points, as outlined in the National Construction Code (NCC).
 - d. Elevators or lifts at multi-level stations and wharfs.
 - e. At least one wheelchair accessible bathroom, with additional bathrooms being required with consideration for the demand for resources.
- (2) Existing stations must achieve compliance within 2 years of the commencement of this act with annual progress reports submitted to the relevant transport authority and inspections of accessible infrastructure occurring at intervals not exceeding six months. All accessible bathroom facilities must be inspected, cleaned and maintained daily to ensure safety, hygiene and functionality.

6 Accessibility of Information

- (1) All NSW Transport services and locations must be compliant with the NSW standard of information accessibility by January 1 2028, by including
 - a. Auditory announcement systems;
 - b. Braille signage;
 - c. High-visibility signage, including bold words and colours;
 - d. Real-time digital updates;
- (2) Requires all NSW transport services and locations, with consideration for demand and capacity determined by a review conducted by the Accessible Transport Advisory Committee, to provide reasonable alternatives to facilitate the accessibility of information in the interim before January 1 2028, including, but not limited to, requiring:
 - a. Transport workers to relay information to impaired passengers.
 - b. Prior notification to passenger about accessibility issues in certain locations and on certain services through the Opal app.
 - c. An alternative bus route subject to accessibility accommodation and demand.

7 Awareness and Education

- (1) Requires all Transport NSW workers in community-facing and management roles to complete and receive a certificate from the Australian Human Rights Commission's Disability Awareness Training workshop, funded by Transport NSW.
 - a. Including the skills needed to support those with a disability.
 - b. Staff remaining present to support those with a disability on and off transportation.
 - c. Ensuring equipment is up to date and ready to be used.
- (2) Onboard and train community volunteers to support advocacy, accessibility initiatives, outreach programs and inclusive engagement with local communities in.

Part 3 Health

8 Indigenous-Specific Health Initiatives

- (1) Requires all hospitals and health service providers to offer access to and make Indigenous disabled patients aware of their access to a support person during all medical appointments and procedures where a support person can medically be present procedures, including a:
 - a. Indigenous Disability Advocate, or;
 - b. Aboriginal Disability Liaison Officer, or;
 - c. Indigenous community leader or member.
- (2) Allocates 15% of total health expenditure for First Nations Peoples to Indigenous-lead Return to Country and On Country health initiatives that support the inclusion of Indigenous persons with disability in their communities, including:
 - a. Aboriginal Community Controlled Health Organisations
 - b. Yarn2Action
 - c. First Peoples Disability Network
 - d. Indigenous Disability Advocacy Services

9 Accessibility of Communication

- (1) Establishes a NSW-funded Auslan Workforce Development Program that provides free interpreter training, certification grants and paid traineeship through TAFE NSW
 - a. Established by January 1st, 2028.
- (2) Establishes the Healthcare Disability Inclusion and Awareness Course, led by the NSW Department of Health in conjunction with the NSW Disability Advocacy Futures Program and in consultation with people with lived-experiences of disability, as a mandatory course for all healthcare providers covering:
 - a. Appropriate behaviours in interaction with disabled patients and colleagues.
 - b. Environmental awareness for disability accessibility.
 - c. Appropriate terminology surrounding disability.
 - d. Communication skills for interacting with both neurodivergent and physically disabled persons.

- (3) Establishes the Disabled Patient Autonomy Commission as an independent regulatory body that may receive complaints surrounding and take litigatory or alternative dispute resolution action in response to the mismanagement of care by health service providers, including but not limited to
- a. Over-admission
 - b. Denial of patient autonomy
 - c. Diagnostic overshadowing
 - d. Delayed discharge

10 Isolation in Hospitals

- (1) Requires all health service providers to facilitate socialisation and community engagement opportunities within hospitals and healthcare settings, while ensuring the safety of all, through:
- a. The organisation of regular social group gatherings.
 - b. The creation of accessible social spaces.
 - c. The organisation of social and community programs in conjunction or collaboration with external specialist or not-for-profit organisations.

Part 4 Social

11 Establishment of Disability and Neurodivergence Commission

- (1) Establishes the Disability and Neurodivergency Discrimination Commission as an independent body that may respond to reports of ableist behaviours, discrimination and exclusion in community spaces and recommend awareness and education programs in:
- a. Schools,
 - b. Workplaces,
 - c. Community Centres,
 - d. Health Centres.
- (2) Confers upon the Commission the authority to:
- a. Receive complaints
 - b. Conduct investigations
 - c. Issue findings
 - d. Provide recommendations to relevant government agencies
 - e. Monitor compliance with national accessibility and inclusion standards
 - f. Pursue litigatory action
 - g. Facilitate alternative dispute resolutions
- (3) Mandate the coordination of disability awareness, accessibility and neurodivergence education programs including, but not limited to LEANS Australia, a teacher-delivered classroom program, to be delivered at community spaces throughout New South Wales.
- (4) Employ First Nations people to assist with cultural appropriation and work with case reports including a First Nations person:
- a. Allows the commission to take action that respects cultural boundaries.

- b. First Nations employees can be tasked with handling reports and incidents including a First Nation individual to provide extra support.

12 Inclusion and Anti-Ableism Initiatives

- (1) Provides NSW Government funding to businesses to renovate or install adjustments to their properties if 15 employees or 25% of the workforce has a disability. These renovations and adjustments can be, but are not limited to:
 - a. Elevators or ramps in entries and exits
 - b. Sensory rooms or more sensory friendly environment such as LED lights
 - c. Structural changes to make the workplace more physically and cognitively accessible for workers
 - d. Local construction businesses are contracted to design and install changes providing experience and more employment opportunities for people in that industry
 - e. Makes environment culturally appropriate for First Nations employees by adding a yarn room or making the work environment a bit more culturally orientated such as ramps or new structure include art or other cultural representation
- (2) Delivered through NSW government grants provided to council and government-run community programs, programs receive an additional 5%-20% increase in funding when inclusion and accessibility requirements are met such as but not limited to:
 - a. Adaptive sports activities
 - b. Trained staff that run community-led activities
 - c. Accessible facilities in community programs
- (3) Eligibility must be determined through accessibility audits, compliance checks and participant feedback.
 - a. Organisations would be required to submit inclusion action plans and quantifiable participation outcomes to maintain eligibility for continued incentive funding.
 - b. Higher levels of accessibility receive larger funding bonuses, distributed through existing local councils and state recreation grant programs.
 - c. Force stronger relationships between non-First Nations students to foster reconciliation.

13 Disability Leadership and Representation Program

- (1) A program implemented in each electorate that allows people living with disabilities to have direct influence in State decision making through advocacy and representation while also encouraging leadership among all individuals.
 - a. Includes eight people from differing age groups.
 - b. Allows direct access to state MPs.
 - c. Advocates for more inclusive policy and further accessibility improvements.
 - d. Promotes an inclusive environment with leadership opportunities.



Produced for The Y NSW Youth Parliament