



Disability Federation of Ireland

Submission on the Review of the Disability Act 2005

9 October 2026

Introduction

The Disability Act 2005 was passed the year before the United Nations adopted the UN Convention on the Rights of Persons with Disabilities, or UN CRPD, and over a decade before Ireland ratified the Convention in 2018. While the Disability Act is an important piece of legislation, it does not embody the rights-based approach to disability required by the UN CRPD, and those found in newer approaches to disability in Ireland such as the National Human Rights Strategy for Disabled People 2025-2030.

The current review of the Disability Act will be the first major update of the Act since it was originally passed in 2005, and as such must respond to the changes in the legal and cultural landscape in Ireland over the past 20 years. It is not enough to tweak the Act. It will require substantial and comprehensive reform, rather than minor changes; if it is to be part of the full implementation of the UN CRPD in Ireland, and serve the over 1 in 5 Irish people who live with a disability.¹

The Disability Federation of Ireland, DFI, welcomes the opportunity to contribute to this review process. We are a federation of 106 disability organisations around the country, from local to national groups, organisations that provide services and community supports, those that are advocacy and information providing organisations and organisations that identify as Disabled Person's Organisations. As an organisation DFI participates in disability policy on a local, national, European and international level. This submission is informed by our engagements across these spaces, and from consultation and engagement with our extensive membership and through policy analysis.

To ensure that this submission represents the views of our member organisations, we held an extensive consultation process. Members were invited to an initial

¹ <https://nda.ie/uploads/publications/NDA-Disability-Statistics-Factsheet-Accessible-Design.pdf>

consultation, where views were gathered and collated, along with DFI's own expertise, to create a first draft. That draft was then circulated to all members who had expressed interest in the first consultation, to gather feedback and refine the recommendations. This paper is the final product of that process.

It is our goal to be involved in all stages of the Disability Act review. We would welcome our, and our members inclusion, in planned focus groups and any future stages of the review process. Consultation must be meaningful and ongoing throughout the process.

We also recommend that sufficient time and resources are given to engage with disabled people and their representative organisations at all stages, taking a co-design approach that is supported by a transparent and cohesive structure of engagement; that is co-design with a broad spectrum of disabled people. Allowing sufficient time to consider different legislative and enforcement options.

In preparing this submission several views of the existing Act emerged repeatedly and will be outlined in greater detail below. These are issues that stretch across the Act and are not confined to a single section. While this submission will address how the issues affect each section, it is also important to keep them in mind during a review of the Act as a whole. These include:

- There is a lack of awareness about what the Act provides, and how people with disabilities can report violations of the Act, such as a lack of access to public buildings.
- The Act suffers from a lack of enforcement, accountability and monitoring. Where it does create standards or requirements, there's no clear path to reporting violations, and often there is no clear consequences for public bodies that do not meet the standards of the Act.
- Related to the lack of enforcement and monitoring, there is a lack of disaggregated data on disability across government. It's unclear how common violations of the Act are, or how they are addressed for instance. This creates difficulties both in enforcement, and for civil society in their advocacy around the Act.
- What enforcement mechanisms there are, are adversarial, requiring a person whose rights have been violated to bring a complaint to court or to the Workplace Relations Commission. This comes with costs to the person, including their time, emotion, and often financial resources, particularly when seeking legal advice or assistance.
- The Act stops short in many cases of granting rights to people with disabilities. It takes a very non-rights-based approach to setting standards and addressing barriers, which makes it difficult for individuals to feel that their rights under the UN CRPD are well-served by the Act.

All of these issues must be addressed with any reform of the Act.

Part 1 Definition of Disability

The current definition of disability found in the Disability Act 2005 is:

“Disability, in relation to a person, means a substantial restriction in the capacity of the person to carry on a profession, business or occupation in the State or to participate in social or cultural life in the State by reason of an enduring physical, sensory, mental health or intellectual impairment”

This definition is both medical and deficits focused. It uses terms such as “restriction”. It embodies and perpetuates many of the stereotypes about disability - that it is an undesirable state, and that having a disability means that there is something wrong with a person.

It also ties disability to a person’s economic role in society. Whether one can carry on a profession is emphasised. This fails to capture the entirety of the person in society, and erases those who generally don’t work, such as older people and children. It is also very entrenched in the medical model. Where the medical model of disability focuses on the individual, on what is wrong with them, and how and whether they can be fixed. Ireland is in the process of moving on from this model, and this perception of people with disabilities, which we have seen in the ratification of the UN CRPD in 2018. The approach has been further enhanced by the move of disability policy and specific services from the Department of Health to the Department of Children, Disability and Equality in March 2023.

Instead, we recommend that the definition of disability should adopt a social model. In this model, disability is seen as the result of the way society is structured. The way it creates obstacles for people with disabilities. Consider the definition of disability used in the UN CRPD:

“Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.”

Language is important. This definition explicitly acknowledges that society creates barriers for people with disabilities. It also describes disability without the use of negative terms, or the implication that disability is a negative state. Using such a definition would be significant progress in Irish equality legislation. In addition, the definition captures both visible and invisible disabilities, and acknowledges that disability isn’t always a permanent state. It can be temporary or episodic.

Furthermore, it would be beneficial if Irish law used a single definition of disability. Currently, different pieces of legislation define disability differently, creating confusion when someone has a disability under some legislation but not others. DFI

has recommended, for instance, using the UN CRPD definition in equality legislation, such as the Equal Status Act, which would harmonise the definition across Irish legislation. It is possible that simply transposing the UN CRPD definition does not meet the requirements of Irish law. However, any new definition must take the social model as its guiding principle.

The social model of disability adapted in a new definition should be transposed across the whole Act, and a human-rights framework adopted.

In addition, intersectionality needs to be clearly reflected in the Act. Where gender; gender equality; different identities and circumstances; and the particular barriers experienced by groups within the disabled population are applied across all rights areas.

Recommendations

- Use a definition of disability that is based in the social, rather than the medical model
- Do not tie disability to the ability to hold a job or economic productivity
- Use a definition that will work across the life-course, for children and older people as well as working age adults.
- Adopt a rights-based approach across the revised Act. Specific rights-based areas are outlined below.
- Reflect intersectionality within the Act.

Part 2 Assessment of Need

One of the few rights found in the Disability Act in its current form is the right to an Assessment of Need, AON. While this is a significant right, the current process is plagued with staff shortages, long waiting times, lack of follow-on pathways or right to further intervention or support, staffing issues, a push towards private providers, and other issues. The failure to include a rights approach to services is problematic and regressive, even if an assessment has identified service and therapeutic requirement there is no right to access. Clearly, reforms are needed.

DFI's members identify long waiting time, the need to resort to the private health providers, and a lack of services after assessment as the biggest problems they see in the current system. They also note that there is often a medical approach to identified disabilities, rather than a social, whole-person approach that accounts for disability in all aspects of a person's life.

The long waiting times/lists and other problems in the public system often fall on the most marginalised, people who may not be able to afford privately provided services. For instance, Polio Survivors, a group that works closely with people in direct provision who have been affected by polio, note that people entering the country through the International Protection system are not receiving required assessments which they are entitled to. As a result, they are living without vital services, and no

access pathways. The system needs to be designed within a rights-framework, inclusive of all those residing in the country.

The current proposed amendments to AON should not be treated as resolving the issue. We strongly urge that the current process does not conclude the review of AON and it is fully considered under the broader review of the Act.

In addition, we recommend a rights framework that mirrors the UN CRPD, including the right to independent living; the right to participate in community life and the right to a family. A right to independent living would give people confidence that, with or without an assessment, they will receive the services they need. It would also ensure that people are not left with an assessment and no way to access the supports that were recommended, and which they would like to access.

DFI recommends that there is an amendment to this section so that an identified need triggers a defined, time-bound and reviewable pathway to appropriate services and supports. This is in line with the UN CRPD, which in Article 26 states the people with disabilities should have access to a variety of services, “particularly in the areas of health, employment, education and social services”, to help them achieve maximum ability and independence. There are many resources and interventions that people with disabilities could access without going through formal needs assessment, like those available within Family Resource Centres. People seeking assessment could be signposted immediately to possible services they can access without assessment. Community services, they can be an important source of support. People should not be left with the impression they must wait for an assessment before any services can be accessed.

The pathway should specify responsible bodies, provide accessible information, require national reporting, protect review and appeal rights, and provide an effective remedy where access is unavailable. This right to access services should be explicitly tied to fulfilling the rights in the UN CRPD, in particular the rights to independent living, employment, education, and being part of community life. No one in Ireland should be without the services they need to achieve a fulfilling life, and without the opportunity to achieve their highest level of independence. This would include creating a right to Personal Assistance hours, as this is one of the most valuable services to achieving an independent life.

Recommendations

- It is not enough to have a right to an assessment, a right to services and link to a chosen pathway of support, as set out in Article 26 of the UN CRPD, must exist alongside it.
- Rights should be extended to the person’s right to live independently and to a life of their choosing.
- Anyone applying for an assessment should receive immediate signposting to community resources and public services they may need with a choice to

access these without an assessment. However, this should not be seen as a sufficient response to a rights based approach.

- The current proposed amendments to AON should not be treated as resolving ongoing issues implementing the existing Disability Act. We strongly urge that the current process does not conclude a review of AON, but that it is fully considered under the broader review of the Act.
- Any right to an independent life must focus on the entire life of the person being assessed, not just medical needs. It should include education, employment, community life and accessible housing.

Part 3 Access to buildings, services and sectoral plans

Access to public building and services is an important part of the Disability Act as it stands. However, DFI members note that there are serious problems delivering on this accessibility requirement. Accessibility of buildings, information and services is an important part of the UN CRPD. It is found primarily in Article 9, one of the longest and most detailed articles of the entire convention.

As with most parts of the Act, there is a lack of monitoring and enforcement of accessibility standards. It's not clear where a person who finds a building or service inaccessible, should bring their complaint. Furthermore, the standards for physical accessibility are out of date to many.

The current standards are found in Part M of the building code, but they do not integrate many elements of universal design. For instance, home construction only requires a home to be visitable for wheelchair user, and not liveable. These standards should be revisited with due regard for the the UN CRPD and the social model of disability.

The adaptability of buildings should also be considered. How people live within a building can change; accessibility can change. In addition, climate change has become a real presence in Ireland, and buildings built to adapt can change to react to all of these issues.

When it comes to the accessibility of public services, the need to provide information in formats suitable to all people is important; including cultural and linguistic requirements. There are several formats designed for people with different disabilities, including easy-to-read, braille, and sign language. All of these formats, and more, should be considered when distributing important public information. Public bodies must have the resources—time, staff, and technical knowledge—to ensure that they can provide accessible information to anyone who chooses it.

It should also be considered that when accessing public services or buildings, it is often the journey from home to those buildings or services that creates the biggest obstacle. Access to public services should include access to public transit, and the ability to travel independently through one's community.

Finally, the Act currently only applies to public buildings and services. In people's day-to-day lives, the separation between public and private is not always clearcut. People need to access a variety of spaces and services. The state often contracts private entities to provide public services. Applying the same standards to, at the very least, those bidding for public contracts, would go a long way towards improving the accessibility of everyday life for many people with disabilities. In addition, local authorities can use the planning process to ensure that many private spaces are designed with people with disabilities in mind, as the right to access community life depends on being able to access private spaces open to the public, such as cafes, shops, hotels and other social areas.

One role that is in a prime position to assist in ensuring accessibility standards are met, and in liaising with the public around those standards, is the Access Officer in every local authority. In 2025 DFI published its own research report on local implementation of the UN CPRD. Among a number of the findings, the role of Access Officers in local authorities was critical.² Often it is the Access Officers in local authorities that people with disabilities and organisations will most likely to work with. While it is true that every local authority has an Access Officer, it is often a part-time position, or an "add on" to an already full-time role. Many Access Officers report that they were not given a defined job description when they were assigned the role. They also reported a lack of consistent training and funding, and no national guidance for their role.

DFI would recommend that the role of Access Officer be expanded into a full-time, senior role at Grade 7, with clearly defined duties around accessibility in each local authority. Funding for the Access Officer's role should be ensured by the Department of Children, Disability, and Equality. Each Access Officer should receive appropriate training in their role to ensure they understand issues of accessibility. Each local authority should also have a clear engagement mechanism with people with disabilities in their community. We would also recommend a way for local authorities to share good practices around accessibility, as currently many people find that their experiences vary widely, depending on which local authority they are in.

This framework of Access Officers could improve accessibility across the country and help address the issues of monitoring and enforcement that many of our members feel are found throughout the current Act.

Recommendations

- Expand the definition of a public building or service. Private bodies provide many services on behalf of the government, and many services that are vital to living well and independently.
- Ensure all public bodies can provide information in a variety of formats, suitable to everyone who needs to communicate with them.

² <https://www.disability-federation.ie/dfi-and-local-government1/bridging-the-gap-local-authorities-and-disability.html>

- Expand the role of Access Officer to a full-time senior post, as one way to help meet the goals of accessibility.

Part 4 Genetic Testing

One area where people with genetic diagnoses and other conditions face discrimination, that has a real effect on their lives, is in insurance. DFI has in the past called for the exemption in the Equal Status Act that allows insurance companies to discriminate against people with disabilities to be limited or removed entirely. People with genetic conditions are finding that their diagnosis is limiting their access to insurance, or making it more expensive. This results in opportunities such as buying a house or getting life insurance becoming impossible or more difficult.

This problem is, not of course, limited to people with genetic disabilities. DFI has heard from many people with disabilities who have lost chances at employment because of insurance problems. These individuals were offered jobs, but subsequently had the job offer rescinded when their potential employer realised that employing a person with a disability would raise the employers' insurance premiums.

DFI has also been informed of other problems people with disabilities have faced due to higher insurance costs. People have been unable to access life insurance due to their disability, and are therefore unable to get a mortgage.

DFI would repeat our call for this exemption to be examined. In particular a limitation on discrimination due to genetic conditions, or family members with genetic conditions, should be considered. But removing the ability to discriminate against people with disabilities at all would also address this problem.

More broadly, the government should look at what information bodies such as insurance companies and employers are allowed to seek from individuals. Generally direct genetic information cannot be requested, "family history" is still allowed, which can, of course, reveal genetic conditions that run in families, such as Huntington's disease. Our members have heard of cases where individuals delay seeking a diagnosis for themselves, worried that it will affect their children when they are asked about their family history. In other cases, people are denied access to insurance based solely on a diagnosis, without the particulars of their case being considered. People living with Cystic Fibrosis, for example, have seen significant improvements in health outcomes in recent years, yet many continue to be denied access to mortgage protection insurance because of their diagnosis.

Recommendations

- Address how insurance companies are currently able to discriminate against people with disabilities.

Part 5 Public Sector Employment

Employment is a particularly important issue for people with disability in Ireland. It is an area where Ireland continues to underperform compared to other EU nations. It is also an important component of addressing poverty among people with disabilities in Ireland, also an outsized issue.

Currently, the public sector is asked to reach an employment quota of 6% of the workforce being people with disabilities. There are a number of issues with this. First, the quota is not well enforced, and many departments fail to meet it. This is an example of where greater monitoring and enforcement is needed. Also, while the quota was recently raised, it should be reconsidered in light of the 2022 census, which found that almost 20% of people in Ireland identify as having a disability.

In the Act itself, the focus is very much on the quota, and not on employment conditions for people with disabilities in the public sector. A quota measures representation but does not establish whether recruitment is accessible, accommodation is timely, employees are retained, acquired disability is supported, career progression is equitable or workplace culture is inclusive. Monitoring should therefore cover the employee journey from recruitment and disclosure through accommodation, retention, return to work, progression and exit.

For instance, the phrase “reasonable accommodation” does not appear once in the Act. While public bodies are governed by the Employment Equality Acts, this revision is a chance to consider if public bodies should be held to additional standards. This would ensure that once people with disabilities are employed in the public sector, they do not face barriers at work, including to full integration into the workplace, promotion, and advancement. DFI’s members have spoken to people with disabilities who have encountered a very negative culture in the workplace while working the public sector, including, for instance, people who have acquired disabilities being discouraged from returning to work. While revising the Act, consideration should be given to how to best make the public sector a welcoming and equitable employer for people with disabilities.

Recommendations

- Alongside the public sector quota include working conditions in the public sector under the revised Act. This includes the right to reasonable accommodation, and also measures taken to ensure the public sector is a disability inclusive workplace.
- Consider the 6% quota in public sector employment, in light of the most recent census showing more than 1 in 5 people in Ireland have a disability
- Put in place better monitoring and enforcement mechanisms, both around the quota, but also to ensure people with disabilities do not feel overlooked or discriminated against in the workplace in the public sector.

Part 6 Universal Design

It is generally agreed among our members that the Centre for Excellence in Universal Design is an important body, doing critical work. Most of the issues that arise in this area are in how guidance on universal design is applied in the real world. Much of the Centre's work is advisory, with few requirements that these are applied to physical and digital infrastructure in the real world.

The revised Act should require that universal design is considered from the earliest planning stages. Infrastructure that is designed from the beginning when the principles of universal design are less likely to require expensive retrofitting further down the line. These principles should also, being universal, benefit more than people with disabilities. Older people, parents with children in buggies, those moving heavy objects and those with temporary disabilities due to injury or other conditions are all groups that can benefit from universal design in our physical/built infrastructure/environment.

Principles of universal design should also be considered in public procurement. Right now, the Act makes a sharp distinction between public and private buildings and infrastructure. However, as stated above the State often obtains services from private bodies. Therefore, bodies seeking state contracts should be held to the same standards of universal design and accessibility that the state holds itself to. Otherwise, there is a risk of making public services and amenities inaccessible to large groups of people, and the creation of unnecessary barriers.

Public procurement should be treated as an implementation mechanism for disability rights, not merely a purchasing process. Accessibility, universal design, participation, data protection, continuity of service, workforce obligations and measurable outcomes should be built into specifications, tender evaluation, contracts, contract management and remedies for non-compliance. These duties should follow public funding where private or voluntary bodies deliver public services.

Finally, as with many areas of the Act, there is the problem of monitoring and enforcement. The work of the Centre needs to be used to create new standards to hold both public and private bodies accountable. A body to monitor these standards and enforce them is needed, either the Centre itself, with new powers, or some other body.

Recommendations

- Expand the role and resources of the Centre for Excellence in Universal Design, so that its recommendations are no longer solely advisory.
- Use the public procurement process to ensure that the private sector takes universal design and accessibility into account within all state contracts.

- Incorporate the best universal design principles at an early stage, as retrofitting of both physical and digital infrastructure is costly and time consuming.
- Improve monitoring and enforcement to ensure that universal design principles are incorporated into public and private projects.

Improved Enforcement, Monitoring and Accountability

A revised Disability Act requires effective enforcement, meaningful accountability, accessible, transparent and timely complaints mechanisms and independent advocacy (both for children and adults), with accessible routes to justice and redress.

One suggested approach, and outlined in DFI's last General Election Manifesto,³ is the creation of a Disability Ombudsman. In light of the many issues around enforcement and monitoring of disability rights in the Disability Act, we would like to repeat this recommendation.

A Disability Ombudsman could address many of the issues currently faced by the Disability Act. A need for greater monitoring, enforcement, and an easier way for people to report violations of the Act. All of which were named as serious issues for the Act by DFI's members.

A Disability Ombudsman would be well-placed to act on all of these issues. They could monitor compliance with the Act (as well as the disability portions of the Equal Status Act and Employment Equality Acts). Work with other government bodies to enforce the act. Provide an easy and accessible place to report violations of the act. Even in cases where they were not the appropriate body to accept a complaint, they could signpost where to take complaints or other issues.

Having a specialised disability body to address issues of monitoring, compliance and complaints would not be unique to Ireland. Several countries have their own forms of such bodies. Sweden had the first dedicated Disability Ombudsman, which operated for many years, before the country merged all of its ombudsmen into a single office in 2009. Austria currently has a Disability Ombudsman, established in 2006. It supports people who feel discriminated against on the grounds of disability. Areas the Disability Ombudsman can investigate include both public and private discrimination in the areas of employment, consumer protection, transport, education and accessibility.⁴

New Zealand only has one Ombudsman, but they have a much stronger disability mandate than the Ombudsman in Ireland. They have a mandate to take a proactive approach to equality for people with disabilities, and can question public bodies on

³ <https://www.disability-federation.ie/news/latest/2024/10/25/dfi-general-election-campaign-2024/>

⁴ <https://equineteurope.org/eb/cp-slug-3/#overview>

their approach to any article of the UN CRPD. Their Ombudsman works with civil society, and has a Disability Advisory Panel to provide expert advice on the lived experience of New Zealanders with disabilities.⁵

Ireland already had a strong network of Ombudsmen that the Disability Ombudsman could join. Establishing this body could quickly strengthen the Disability Act, as well as legal protections for people with disabilities from other acts such as the Equal Status Act. People with disability often find the Work Relations Commission and the courts difficult to access, due to costs or other barriers. An Ombudsman could provide an alternative route to handle complaints, including issues around the assessment of need. With Ireland's first examination before the UN CRPD Committee upcoming, the establishment of such a body would be a useful display of Ireland's commitment to the UN CRPD.

Recommendations

- Improve and strengthen monitoring, accountability and enforcement mechanisms under the new Act.
- Make provision for independent advocacy to support realisation of individuals rights.
- Create a new independent Disability Ombudsman that has the necessary resources needed to monitor many of the issues found in this Act, with consideration given to the equality acts and others.
- Ensure the office has the investigatory and enforcement powers to handle and settle complaints about discrimination and other violations of the laws around disability.

Conclusion

DFI welcomes the review of the Disability Act and commends the Department on this work. It is clear the Disability Act requires not simply tweaks, but a ground-up reimagining, focused on the recognition and enforcement of real rights, not simply setting standards.

Almost every section requires substantial reform. The addition of an Ombudsman would address many of the complaints around monitoring and enforcement with the current act, provided the Ombudsman was given appropriate powers.

The Act must be viewed through the lens of the UN CRPD. It must also take into account the ongoing review of equality legislation, to ensure that the various acts governing the rights of people with disabilities agree on their definitions, aims, and policies.

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⁵ <https://www.ombudsman.parliament.nz/what-ombudsman-can-help/fair-treatment-disabled-people>