Dyspraxia/DCD Ireland

Pre Budget Submission 2026

September 2025

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Dyspraxia/DCD Ireland – Pre-Budget Submission 2026

One Pager - Executive Overview & Summary of Key Asks

Dyspraxia/DCD Ireland's Pre-Budget Submission 2026 presents a bold, evidence-based roadmap to address these systemic gaps. It is informed by lived experience, national survey data, and international best practice. The proposals outlined are costed, achievable, and aligned with Ireland's commitments under *Sláintecare*, the *UN Convention on the Rights of Persons with Disabilities (CRPD)*, and the *National Disability Inclusion Strategy*.

Budget 2026 is a pivotal opportunity to invest in inclusion, prevention, and innovation. The proposals in this submission are not just about funding, they are about unlocking potential, reducing long-term costs, and building a society where neurodivergent people can thrive.

Summary of Key Budget Asks

Health & Therapy Access

- Fund a national OT-led assessment pathway to reduce diagnostic delays.
- Expand POTTS telehealth services and ADL clinics for children and adults.
- Develop mental health programmes tailored to DCD.
- Train professionals in neurodiversity-informed practice.
- Support peer-led resilience workshops for families and individuals.

Education Supports

- Deliver CPD training for teachers and SNAs on DCD.
- Provide assistive technology grants for students with DCD.
- Increase SNA hours and embed therapists in schools.
- Fund life skills and intervention programmes for adolescents at risk of early school leaving.

Social Protection & Financial Supports

- Raise and benchmark Disability, Carers, and Domiciliary Care Allowances.
- Introduce a €55/week Cost of Disability payment.
- Abolish means testing for Carers Allowance.
- Individualise means testing for disability supports.
- Guarantee financial independence for adults with disabilities.
- Recognise the cost of disability in social protection policy.

Organisational Sustainability

- Provide multi-annual core funding to Dyspraxia/DCD Ireland.
- Address pay parity and service gaps.
- Sustain our national helpline, training, and outreach programmes.

1. Introduction

Dyspraxia/DCD Ireland is the national organisation supporting children, young people, and adults with Developmental Coordination Disorder (DCD), commonly known as Dyspraxia. With a membership base of over 400 families and individuals across Ireland we advocate for equitable access to education, healthcare, employment, and community participation for the estimated 6-10% of the population affected by this lifelong neurological condition.

2. Context and Rationale

The Irish DCD Impact Survey (n=87 families) found 74% struggled with handwriting, 72% with self-care, while 85% reported bullying or exclusion, particularly during key transitions[i].

Although concerns emerge by age 2.9, the average age of diagnosis is 8 years, delaying support during crucial developmental stages. Despite growing awareness, individuals with DCD continue to face:

- Delayed diagnosis and limited access to occupational therapy
- Barriers to inclusive education and employment
- Lack of targeted supports for daily living and mental health
- Limited recognition in national disability strategies

3. Cost of Disability

The Cost of Disability remains a significant burden, with families often paying out-of-pocket for private assessments, therapies, assistive technology, and educational supports. Of particular concern is the exorbitant cost of private assessments, which many families feel forced to pursue due to the chronic lack of access to timely public services. This situation is being exacerbated by the Government's increasing reliance on private practitioners to address public waiting lists, often at a premium rate. This not only places undue financial pressure on families but also raises serious questions about equity, sustainability, and the long-term viability of outsourcing essential diagnostic and therapeutic services.

Occupational therapy (OT) services in Ireland face significant capacity issues. 69% of families surveyed sought private therapy (averaging €906/month), while 63% travelled over 41km to access services. These findings highlight the urgent need for timely, accessible, family-centred care that is equitable for all[ii].

The Indecon Report[iii]commissioned by the Department of Social Protection found that:

- The additional cost of disability in Ireland ranges from €9,000 to €12,000 per year, depending on the severity and type of disability.
- These costs include mobility, care services, assistive technology, and medical expenses.

Key Budget Asks

Our key budget asks target the most pressing and systemic failures impacting children, young people, and adults with DCD in Ireland. These are not just policy gaps; they are lived realities for thousands who face delayed diagnoses, inaccessible therapies, exclusion from education, and limited employment opportunities. This submission is a bold, evidence-based roadmap to end the neglect, close the equity gap, and build a truly inclusive Ireland. The time to act is now, because every delay puts a child's future at risk, leaves another young person struggling without support, pushes another adult further into despair, and reminds yet another family that they've been left behind.

A. Health & Therapy Access

To address the long primary care waiting lists for therapies in Ireland for children and adults with Developmental Coordination Disorder (DCD) we need to think differently and act boldly. Here are innovative and evidence-informed strategies that could make a real impact. For example, a systematic review of International therapeutic service provision found that redesigning therapy services through rapid response clinics, process efficiency improvements, and that substitution strategies can significantly reduce waiting times for paediatric rehabilitation[iv].

OUR ASK

- Expand access to POTTS (partnering in occupational therapy telehealth services) and ADL (Activities of Daily Living) clinics for children and adults with DCD.
- Fund a national OT-led assessment pathway for DCD to reduce diagnostic delays.

B. Education Supports

Children with DCD struggle with handwriting, motor planning, and classroom participation. Without teacher training, assistive technology, and adequate SNA support, they fall behind. These measures promote inclusive education and reduce early school leaving.

OUR ASK

- Teacher and Special Needs Assistant (SNA) training on DCD through CPD modules.
- Assistive technology grants for students with DCD, managed through Dyspraxia DCD Ireland.
- Increased SNA hours for children with motor planning and coordination needs.
- Increase the number of therapists in schools.
- Fund life skills and intervention programmes for adolescents with DCD at risk of early school leaving.

C. Employment & Independent Living

People with DCD often face challenges related to motor coordination, time management, multitasking, communication, fatigue, social connections, workplace accessibility, stigma, unemployment and underemployment. These barriers can make it difficult to thrive in the community and in traditional work environments without targeted supports and accommodations. Ireland ranks fourth worst of 27 countries in the EU for its disability employment gap[v] due to long term under-resourcing of necessary supports and education.

OUR ASK

- Fund life skills and transition programmes for young adults with DCD to support social inclusion by enhancing communication and interpersonal skills, build confidence and resilience and improve employment readiness.
- Adopt an Individual Placement and Support (IPS) place and train model and introduce targeted employment supports for adults with DCD, including job coaching and workplace adaptations. Interventions based on evidence based programmes such as IPS will see far greater outcomes for adults with DCD and other neurodivergent conditions.

D. Financial Support for Families and Individuals

Ireland ranks 20th of the 27 EU countries for disability poverty[vi] Families are being forced into a two-tier system; those who can afford private therapy get help, and those who can't afford private therapies are left waiting, sometimes for years. We are watching a generation of children with disabilities grow up in limbo, denied the support they urgently need. It's time for the government to say "enough is enough" and adequately fund therapeutic services for every child who needs them.

In Ireland, adults with disabilities, including those with DCD, are often penalised under the current means-testing system, which assesses their eligibility for support based on their partner's income. This policy denies many individuals access to Disability Allowance, leaving them entirely financially dependent on their partner. This is not just unfair, it's dangerous. Denying adults with disabilities access to financial supports based on their partner's income undermines their autonomy, increases vulnerability to abuse and perpetuates inequality and exclusion.

OUR ASK

- Support the recent ask from the Oireachtas Disability Group, calling for a Cost of Disability payment of €55 per week (€2, 860 per annum) .
- Abolish means testing for the Carers Allowance.
- Individualise means testing for disability supports.
- Guarantee financial independence for adults with disabilities, regardless of living arrangements.
- Recognise the cost of disability as a standalone factor in social protection policy.
- Raise the levels of payments for Carers Allowance, per the commitment in the Programme for Government.
- At an absolute minimum Disability Allowance, Carers Allowance and Domiciliary Care Allowance must be benchmarked on an annual basis to the highest rate of inflation.

E. Mental Health & Wellbeing

Research consistently shows that without targeted mental health support, children and adults with DCD are more likely to experience long-term psychological difficulties. According to Goldsmiths University London, 'teachers reported that children with DCD are more anxious, tearful, and downhearted than peers. Two-thirds of children with DCD showed signs of emotional distress. Poor motor skills were linked to social isolation, low confidence, and difficulty forming friendships'[vii]. Young adults with DCD are at higher risk of internalising problems, especially mood disorders.[viii]

Early intervention reduces long-term reliance on health and social services, promotes independence, increases self-esteem and perseverance leading to better long term life outcomes.

OUR ASK

- Development and delivery of mental health programmes specifically for children and adults with DCD.
- Training for mental health professionals in neurodiversity-informed practice.
- Peer-led support groups and resilience-building workshops for parents and young people with DCD.

F. Organisational Sustainability

Voluntary organisations like Dyspraxia/DCD Ireland play a vital role in delivering essential disability services, often serving as the first and only support for families in crisis. Despite performing work equivalent to public sector roles, we face chronic financial instability and pay disparities, which threaten staff retention, service quality, and long-term sustainability.

To ensure that we and other similar organisations can continue providing critical services the Government must commit to multi-annual funding and fair pay for voluntary agency staff. Stable funding enables strategic planning, innovation, and scalable solutions, fostering a more equitable and effective support system for the disability community.

OUR ASK

Provide multi-annual core funding to Dyspraxia/DCD Ireland to:

- Scale current service provision.
- Address service gaps and pay parity.
- Sustain national helpline and advocacy services.
- Deliver parent and professional training.
- Expand outreach to underserved communities.

4. Alignment with National Policy

Budget Ask	Sláintecare Alignment	Government Policy Alignment	Responsible Departments
A. Health and Therapy Access	Supports timely, needs-based access to care in community settings	Action Plan for Disability Services; HSE therapy services	Department of Health, HSE
B. Education Supports	Supports staff development and public engagement	Programme for Government commitments to inclusive education and employment	Department of Education, Department of Enterprise, Trade and Employment
C. Employment and Independent Living	Supports social inclusion, independence, and community-based living	Comprehensive Employment Strategy for People with Disabilities; Pathways to Work; UN CRPD	Department of Enterprise, Trade and Employment; Department of Social Protection; DCDE
D. Financial Supports for Families and Individuals	Supports equity and universal access to supports for families	Programme for Government 2025; National Disability Inclusion Strategy; DSP Pre-Budget Submissions	Department of Social Protection
E. Mental Health and Wellbeing	Supports integrated, person-centred care and early intervention in community settings	Sharing the Vision (National Mental Health Policy); UN CRPD; Programme for Government commitments to mental health and neurodiversity	Department of Health, HSE Mental Health Services, DCDE
F. Multi-Annual Funding for Disability Services	Supports community-based care and sustainable service delivery	Action Plan for Disability Services 2024–2026; Programme for Government 2025	DCDE, HSE
F. Pay Parity for Section 39 Organisations	Supports staff empowerment and equity across service providers	March 2025 pay agreement for Section 39 organisations	DCDE, Department of Health, WRC

5. Conclusion

Budget 2026 is not just a fiscal exercise. We believe that it is a moment to be bold, to lead with vision, and to invest in innovation that transforms lives. Dyspraxia/DCD Ireland is already doing just that. Despite being a small, underfunded organisation, we are delivering outsized impact through pioneering initiatives like telehealth-led service delivery, peer-led supports, and national advocacy. We are the first point of contact for families in crisis, filling critical gaps left by the state.

The scale of need far exceeds the resources currently available. DCD affects an estimated 5–6% of the youth population and an estimated 10% of the overall population of Ireland, yet funding and recognition remain disproportionately low compared to other neurodivergent conditions. This imbalance must be addressed if we are serious about addressing equity, prevention and inclusion as outlined in the *HSE Synthesis Report on Population Health, Demographic and Service Trends 2026*.

The proposals in this submission are evidence-based, cost-effective and have the potential to be transformative. They align with Ireland's commitments under *Sláintecare*, the *UN CRPD*, and the *National Human Rights Strategy for Disabled People 2025-2030*, and they offer a roadmap for reducing long-term costs across health, education, and social protection systems.

Investing in Dyspraxia/DCD Ireland is not just the right thing to do, it is a smart, strategic move toward a more inclusive, innovative, and resilient Ireland. We urge the Government to act decisively. Because when we invest in timely, targeted support, we don't just change lives we unlock potential and we provide an environment for neurodivergent people to thrive.

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[i] "DCD impact study in Ireland". Paper presented at the Dyspraxia Ireland Conference, Dublin, Ireland. Hynes, P., & Hodnett, S. (2025, February).
[ii] "DCD impact study in Ireland". Paper presented at the Dyspraxia Ireland Conference, Dublin, Ireland. Hynes, P., & Hodnett, S. (2025, February).
[iii] https://www.gov.ie/en/department-of-social-protection/publications/the-cost-of-disability-in-ireland-research-report/
[iv] "Service redesign interventions to reduce waiting time for paediatric rehabilitation and therapy services: A systematic review of the literature." Harding et al. (2022)
[v] https://www.disability-federation.ie/publications/disability-in-ireland-factsheet-2024
[vi] https://www.gold.ac.uk/news/dyspraxia-and-emotional-distress/
https://www.gov.ie/en/department-of-children-disability-and-equality/publications/action-plan-for-disability-services-2024-2026
[vii] Mental health outcomes of developmental coordination disorder in late adolescence

Appendix A

Dyspraxia/DCD Ireland – Pre-Budget Submission 2026

Costing Breakdown for Organisational Initiatives

DDCD Ireland Initiative	Estimated Annual Cost (€)	Estimation Method	Notes
National OT-led assessment pathway for DCD (child and adult services)	950,000	Based on average OT salary (€70k) × 10 staff + admin & overheads	Assumes 10 OTs nationally to reduce diagnostic delays
Expansion of POTTS and ADL clinics x 3	300,000	Benchmarking lower than similar HSE-funded clinics	Includes staffing, equipment, and regional rollout
CPD training for teachers on DCD	100,000	€100 per teacher × 1,000 teachers	Delivered via online modules
Assistive technology grants	500, 000	€1,000 per student × 500 students	Managed through Dyspraxia/DCD Ireland
Mental health programmes (children & adults)	85,000	€85 per session × 1,000 sessions	Includes group and individual sessions
Peer-led support groups & workshops for parents, adults and children	52,500	€3,500 per group × 15 groups	Includes facilitator training and materials
Core funding for Dyspraxia/DCD Ireland	225,000	Based on comparable funding to similar orgs	To scale services, retain staff, and expand reach
Total Cost	**€2,212,500**		**Opportunity to test new funding model**

NB: Detailed costings can be developed in partnership with the relevant department.

Appendix B

Costing Breakdown for National Initiatives

National Initiatives	Estimated Annual Cost (€)	Estimation Method	Notes
1. Raise Carer's Allowance payments	€325 million (for €65/week increase)	Based on 100,000 recipients × €65 × 52 weeks	Current rate is €260/week; proposed increase to €325/week
2. Benchmark Disability Allowance, Carer's Allowance, and Domiciliary Care Allowance to inflation	Variable (depends on inflation rate)	Use CSO inflation data (e.g. 5%) × total annual spend	DSP budget for Disability Allowance alone is €1.5 billion/year
3. Introduce €55/week Cost of Disability Payment	€1.43 billion/year	€55 × 52 weeks × 500,000 people with disabilities	Based on Inclusion Ireland and DFI estimates
4. Abolish means testing for Carer's Allowance	€397 million/year	Parliamentary Budget Office & Family Carers Ireland	
5. Individualise means testing for disability supports	No official costing yet	Would require DSP modelling (e.g. SWITCH model)	Could be a phased reform with pilot costing?
6. Guarantee financial independence for adults with disabilities	Policy reform – cost depends on implementation	Could be cost-neutral if replacing household-based assessments	Aligns with UN CRPD Article 28
Supported employment and job readiness programmes for adults with DCD	€1.2 million	Based on IPS model (€6,000/client) × 200 clients	Includes job coaching, employer engagement, and in-work supports
Transition programmes for young people with DCD	€750,000	Based on WorkAbility model (€7,260,000 ÷ 5,000 participants) × 500 participants	Includes job coaching, life skills, and employer partnerships
7. Recognise cost of disability in social protection policy	Included in €55/week payment above	See Indecon's Cost of Disability Report	Adds legitimacy to the €55/week ask