in low socio-economic areas, stressing the need for improved access for all Australians with disabilities, not just privileged groups.

Access inequality for people in regional, rural and remote areas remains unexamined. Despite regional, rural and remote communities comprising about one-quarter of Australia's population,² Disney and colleagues¹ found that 50% of NDIS participants in socio-economically disadvantaged areas live in regional and remote communities, indicating an overrepresentation among disadvantaged backgrounds in this NDIS participant cohort. Older individuals are also more likely to reside in rural areas. The authors adjusted for remoteness in their analysis, although these factors suggest that a nuanced examination of rurality is required. Place is crucial in exploring disability service inequality and equity, as Smith-Merry and Chan³ noted in the linked editorial.

Furthermore, NDIS access does not accurately reflect rural community service needs. Many rural people with disabilities who are likely eligible for the NDIS may not access it, often due to low literacy levels and Scheme awareness, poor internet access, and inadequate support to navigate the Scheme.⁴ Thin and fragmented markets in geographically isolated areas contribute to the lack of navigation supports and available services.⁵

Equitable disability service provision is vital for the wellbeing of Australians living in regional, rural and remote communities. To achieve this, we must shift our focus from service provision to sustainable rural workforce development. In line with the Australian Universities Accord Final Report, offering relevant tertiary education in health and human services in regional, rural and remote communities will help build a workforce that meets the needs of people with disabilities in these areas. We need stronger collaborations among the health, social, and tertiary education sectors, along with funding to co-design, trial and evaluate innovative rural workforce development models. We need to invest in rural disability research leaders to drive this work. It is essential to keep place and regional, rural, and remote communities in mind when redesigning the NDIS.

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Social inequalities in eligibility rates and use of the Australian National Disability Insurance Scheme, 2016–22: an administrative data analysis

To the Editor: Disney and colleagues¹ highlight the participant demographic characteristics of the National Disability Insurance Scheme (NDIS), focusing on eligibility rates among women and girls, those living in disadvantaged areas, and people aged 55 years and older. They underscore access inequalities, especially for girls, women, and older residents

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- 1 Disney G, Yang Y, Summers P, et al. Social inequalities in eligibility rates and use of the Australian National Disability Insurance Scheme, 2016–22: an administrative data analysis. *Med J Aust* 2025; 222: 135-143. https://www.mja.com.au/journal/2025/222/3/social-inequalities-eligibility-rates-and-use-australian-national-disability
- 2 Australian Institute of Health and Welfare. Rural and remote health [website]. Canberra: AIHW, 2024. https://www.aihw.gov.au/reports/ruralremote-australians/rural-and-remote-health (viewed Mar 2025).
- 3 Smith-Merry J, Chang KJ. Equity first: mapping who gets what is essential to re-designing the NDIS. *Med J Aust* 2025; 222: 131-132. https://www.mja.com.au/journal/2025/222/3/equity-first-mapping-who-gets-what-essential-re-designing-ndis
- 4 Veli-Gold S, Gilroy J, Wright W, et al. The experiences of people with disability and their families/carers navigating the NDIS planning process in regional, rural and remote regions of Australia: scoping review. Aust J Rural Health 2023; 31: 631-647.
- 5 Kuipers P, Lakhani A, Jensen H. Responding to the "thin" markets of rural and remote disability services. Quantitative and spatial analysis is part of the picture. *Rural Remote Health* 2022; 22: 7011. ■