

Tasmanian Disability Inclusion Plan

March 2026

Dementia Australia

Dementia Australia is the peak dementia advocacy organisation in Australia.

Our organisation engages with people with dementia, their families and carers in our activities, planning, policy and decision-making, ensuring we capture the diversity of the living experience of dementia across Australia.

Our advocacy amplifies the voices of people living with dementia by sharing their stories and helping inform and inspire others. As the trusted source of information, education, and support services, we advocate for positive change for people living with dementia, their families and carers, and support vital research across a range of dementia-related fields.

Dementia and inclusion in Tasmania

Dementia is the term used to describe the symptoms of a large group of complex neurocognitive conditions which cause progressive decline in a person's functioning.

Dementia is not just memory loss - symptoms can also include changes in speech, reasoning, visuospatial abilities, emotional responses, social skills and physical functioning. There are many types of dementia, including Alzheimer's disease, vascular dementia, frontotemporal dementia and Lewy body disease.

Dementia is a progressive and life limiting illness that is now the leading cause of death in Australia.[1] In 2026, it is estimated there are 446,500 people living with all forms of dementia in Australia. Without a significant intervention, this figure is projected to increase to over 1 million by 2065.[2] There are an estimated 1.7 million Australians involved in the care of people with dementia.¹

In 2026, it is estimated there are 11,200 people living with all forms of dementia in Tasmania. This figure is projected to increase to an estimated 16,500 by 2054.[3] In Tasmania, there are an estimated 700 people living with young onset dementia, which refers to any dementia diagnosed in adults aged 18-65.

¹ Based on Dementia Australia's analysis of the following publications - National Dementia Action Plan; Australian Institute of Health and Welfare (2024) 2023 Aged Care Provider Workforce Survey: Summary report, AIHW, Australian Government

Community awareness of dementia as a disability remains limited, and people living with dementia commonly report stigma, stereotyping and exclusion. Recognising dementia as a disability is critical to realising human rights and full inclusion.

Dementia Australia previously recommended that inclusion planning must be transparent and accessible and must work across the systems people interact with. We are encouraged by the Department of Premier and Cabinet (DPAC) providing multiple accessible formats for the discussion paper (including Easy Read, Auslan, audio and braille-ready format) and for enabling submissions in diverse forms (written, audio, video, in-person engagement).

We also welcome DPAC's explicit recognition that "full accessibility" requires more than a single accessible format and should include multiple channels and formats that meet differing needs, including cognitive disability.

Dementia Australia also welcomes the discussion paper's reflection of community feedback about consultation fatigue, the need for co-design, and the importance of closing feedback loops so people understand how their contributions shaped decisions.

Dementia Australia supports a whole-of-government Plan that advances inclusion across mainstream services that people with disability rely on, including health, housing, education, transport and justice.

However, to ensure the Plan delivers real and measurable change, it must be underpinned by a clear outcomes framework that sets out measurable indicators, benchmarks and timeframes, assigns responsibility for delivery, and enables transparent public reporting on progress against the Objects and Principles of the Disability Rights, Inclusion and Safeguarding Act.

Dementia Friendly Communities

Communities play a critical role in enabling inclusion, reducing discrimination and supporting access to services, activities and spaces that all Tasmanians have a right to. For people living with dementia, inclusion is shaped by physical accessibility, community understanding, attitudes and the design of everyday environments.

A dementia-friendly community is one in which people living with dementia are supported to live with meaning, purpose and value, and to continue participating in community life for as long as possible. Dementia-friendly approaches respond to both the visible and invisible impacts of disability, addressing stigma and misunderstanding alongside environmental barriers.

The physical environment of a dementia-friendly community is important, such as using unambiguous seating design, clear signage, and the inclusion of quiet spaces. Dementia Australia provides resources to support the development of dementia-friendly communities and environments. These resources can be accessed at [**Dementia Friendly Communities**](#).

Dementia Australia has also developed [**Dementia Language Guidelines**](#) to promote consistent use of appropriate, inclusive and non-stigmatising language when talking to or writing about people living with dementia.

The Dementia Language Guidelines are an inclusion strategy. The words used to talk or write about dementia can have a significant impact on how people living with dementia are viewed and treated in our community. Talking about dementia in a negative manner or by using incorrect terminology or inaccurate facts can reinforce stereotypes and further exacerbate stigma and misinformation about dementia.

There are also specific issues experienced by people living with young onset dementia, which is dementia diagnosed between ages 18-65. People living with young onset dementia are often in full-time employment and actively raising and financially supporting a family when diagnosed. Loss of income, self-esteem and perceived future purpose can pose multiple psychological challenges.

Often people with young onset dementia must retire prematurely, which can have significant financial consequences, especially if they are the primary earners for their families. They may still be responsible for paying off mortgages, supporting children, and maintaining other obligations. Strategies to support employment and inclusion are vital for Tasmanians living with young onset dementia.

Recommendations for the final Plan

Outcomes

The final Plan should set out measurable outcomes that demonstrate:

- Outcome measures with benchmarks/targets with baselines and timeframe to ensure measures drive improvement.
- Disaggregated reporting that ensures representation of all disability types in monitoring and evaluation, including cognitive and neurodegenerative disability.

Dementia-inclusive action

Dementia Australia recommends the Plan explicitly recognise dementia as a disability by including:

- Actions to reduce stigma and improve community understanding of cognitive disability and dementia;
- Dementia-friendly approaches within universal design which include the built environment, signage, quiet spaces and communications;
- Employment inclusion actions for people living with young onset dementia.

Cross-system coordination

Clarify cross-system responsibilities (health, aged care, primary care and disability)

- Dementia Australia reiterates its earlier recommendation that the Plan should outline how disability, health, primary care and aged care systems will work together to deliver on the objects of the Act.
- The discussion paper itself highlights confusion about what is “disability” versus “health/aged care”, and varying definitions across services; the final Plan should resolve this.

Accessibility

Dementia Australia recommends the Plan require:

- multiple accessible formats (including cognitive accessibility), released at the same time as standard formats;
- monitoring/reporting on web accessibility and accessible ICT procurement;
- user testing with people with disability (including cognitive disability) to confirm accessibility works in practice.

Safeguarding and restrictive practices

Dementia Australia welcomes the discussion paper's acknowledgement that restrictive practices raise safeguarding concerns across multiple service systems, and that existing workforce capability gaps contribute to the continued inappropriate use of restrictive practices, including chemical restraint.

Dementia Australia recommends the final Plan clearly specify:

- How restrictive practices oversight will interface with health and aged care regulatory systems and complaints pathways;
- Actions to build workforce capability to minimise restrictive practices and reduce inappropriate chemical restraint for people living with dementia across health, aged care and disability settings

Dementia education and workforce capability

To support inclusion, safeguarding and supported decision-making in practice, Dementia Australia recommends the Plan include a focus on dementia capability across the public service, including:

- Adoption of the [Dementia Language Guidelines](#) across Tasmanian government agencies and services, to promote inclusive and non-stigmatising language.
- Dementia-specific education for workforces across disability, health, aged care, justice and emergency services;
- Training that builds understanding of cognitive disability, communication, supported decision-making and changed behaviours; and
- Alignment of workforce development for health and disability services with the Plan's objectives to reduce restrictive practices, improve decision-making support and promote dignity and autonomy.

Supported decision-making

Dementia Australia reiterates its earlier recommendation that the Plan should outline how disability, health, primary care and aged care systems will work together to deliver the objects of the Act.

To support people with disability to participate as fully as possible in decisions that affect their lives, Dementia Australia recommends the Plan explicitly embed supported decision-making as a core inclusion principle across systems. This should include an expectation that

supported decision-making is the default approach in interactions with people with disability, including in health and aged care settings, and that substitute decision-making is used only where necessary and in a manner that prioritises the person’s will and preferences.

This approach is consistent with Dementia Australia’s **policy position on supported decision-making** for people living with dementia, and with the Objects and Principles of the Disability Rights, Inclusion and Safeguarding Act.

Meaningful engagement

Dementia Australia recommends the Plan embed expectations for engagement of people with cognitive and neurological disability including dementia, and use of dementia-specific engagement guidance including “**Half the Story**”.

Conclusion

Thank you for the opportunity to comment on the Tasmanian Disability Inclusion Plan consultation. Dementia Australia supports the development of a whole-of-government Plan and commends DPAC’s strong approach to accessible consultation materials and participation options.

We would welcome ongoing engagement. Dementia Australia can be contacted at **policyteam@dementia.org.au**

References

1. Australian Bureau of Statistics, *Causes of Death Australia, 2024*. 2025, Australian Bureau of Statistics.
2. Australian Institute of Health and Welfare, *Dementia in Australia*. 2025, Australian Government.
3. Dementia Australia, *Commissioned AIHW Dementia Prevalence Data 2024-2054*. 2023, Dementia Australia.