Australian Multicultural Health Collaborative | FECCA

Our cultures
Our languages
Our health

Inclusive Communities Fund

Joint Submission to the Department of Health, Disability and Ageing

SEPTEMBER 2026

About FECCA

The Federation of Ethnic Communities' Councils of Australia (FECCA) is the national peak body representing people from culturally and linguistically diverse (CALD) communities and their organisations across Australia. Through the membership of state, territory and regional ethnic communities' councils and their networks, FECCA represents the interests of more than 1,500 multicultural community organisations nationwide. FECCA provides a collective national voice on issues affecting Australia's multicultural communities, including migration, settlement, workforce participation, skills recognition, human rights, social cohesion and equity.

The Australian Multicultural Health Collaborative (the Collaborative) is the national multicultural health peak body.

Vision Statement: In a truly multicultural Australia, our health and social care system is committed to health equity, and works proactively towards sustained improvement in the physical, mental and spiritual health and wellbeing of our multicultural communities.

The Collaborative

The Australian Multicultural Health Collaborative (the Collaborative) is the national multicultural health peak body.

> ***Vision Statement:*** *In a truly multicultural Australia, our health and social care system is committed to health equity, and works proactively towards sustained improvement in the physical, mental and spiritual health and wellbeing of our multicultural communities.*

The Collaborative is an initiative of the Federation of Ethnic Communities' Councils of Australia (FECCA). We provide a national voice, leadership and advice policy, research, data, and practice to improve access and equity, address systemic racism, and achieve better health and wellbeing outcomes for Australians from multicultural backgrounds.

The Collaborative is representative, and membership based. Members include consumers and carers; health services and wellbeing/social care services; practitioners; and researchers. The Collaborative also welcomes as affiliates other national health peak organisations.

Introduction

Australia is a multicultural nation: Around half of Australian residents were born overseas, or have at least one parent born overseas, and over 5.5 million Australians speak a language other than English at home. To be truly inclusive, we must ensure that the needs of all Australians, including those born overseas, are able to access Australian Government programs, services and systems, and that all people can meaningfully participate in all aspects of Australian life.

FECCA and the Collaborative welcome the Inclusive Communities Fund and its objective of strengthening community organisations so people with disability have greater choice and can participate meaningfully in social, recreational, sporting, arts, cultural, volunteering and other community activities. The proposed $200 million investment over three years is an important opportunity to make inclusion part of ordinary community life, not something confined to specialist disability settings.

However, equity will not be achieved simply by funding more organisations or making more activities available. For multicultural people with disability, meaningful participation may depend on whether communication is accessible and understandable, an organisation is culturally safe, trusted community relationships exist, and whether the pathways into community life are practical for their needs.

The central issue is that eligibility alone will not deliver equity. Multicultural people with disability can face physical, linguistic, cultural, attitudinal, digital and financial barriers, as well as added difficulty navigating disability and community systems. People should not have to choose between culturally familiar spaces that are not disability-inclusive and disability services that are not culturally safe or connected to their community. The Fund should help bring these systems together.

This requires multicultural inclusion to be embedded in the Fund's objectives, grant architecture, partnerships, eligible activities and evaluation. It also requires practical opportunities for organisations to test and embed new approaches in partnership with people with disability, not only produce policies or attend training.

This submission is made by FECCA and the Collaborative and sets out key recommendations and responses to the consultation questions. The Australian Multicultural Women's Alliance, another FECCA initiative, has made its own separate submission with its alliance partners.[10]

Key Recommendations

1. **Embed multicultural equity in the Fund's architecture**

Set clear multicultural objectives, assessment criteria, investment targets and public reporting. Consider a dedicated stream or another enforceable mechanism to ensure equitable investment.

2. **Resource genuine co-design and equal partnerships**

Fund the participation of multicultural people with disability and partnerships between disability-led and multicultural organisations. Recognise cultural expertise and trusted community relationships as distinct contributions.

3. **Fund supported access for smaller organisations**

Resource trusted multicultural peak bodies and networks, working with disability-led partners, to help organisations apply, plan and implement inclusive practice. Provide tiered grants, proportionate reporting, accessible formats and optional auspicing or consortium pathways.

4. **Fund practical and lasting capability building**

Support governance reform, workforce development, accessible communication, interpreter and bilingual worker capability, small accessibility improvements and time-limited demonstration activities.

5. **Keep the Fund additional to individual supports**

It must complement, not replace, NDIS supports, foundational supports or other programs, and must not transfer participation costs to people with disability, families, carers, volunteers or community organisations.

6. **Measure participation, belonging and sustained change**

Assess who benefits, whether people have greater choice and ongoing participation, and whether organisational changes endure, using proportionate intersectional data.FECCA and the Collaborative's disability engagement

FECCA is the national peak body representing people from multicultural communities and their organisations across Australia. The Collaborative is FECCA's national multicultural health peak initiative, working across health and social care, including the intersections between health, disability, ageing, mental health and community participation. Its approach is grounded in health equity, human rights, intersectionality and lived experience.[2]

FECCA has more than a decade of disability policy and delivery experience. Its 2015 NDIS access and equity paper identified barriers relating to language, awareness, navigation, culturally appropriate services, complaints, workforce capability and data. Its 2016 election platform called for targeted funding to multicultural organisations and culturally appropriate opportunities for community participation. FECCA later worked with the National Ethnic Disability Alliance on the NDIS National Community Connector Program, which delivered 80 connectors and assisted close to 2,600 people through outreach, trust building, navigation and connection to NDIS, community and mainstream supports.[3, 4, 5]

FECCA's joint submission to the Disability Royal Commission described the intersecting effects of racism, ableism, language, culture, migration history, visa status, religion and gender. It called for accessible rights-based information, accredited interpreters, supported decision-making, culturally safe services, bicultural workers, independent advocacy and direct participation by people with disability. FECCA's subsequent work on regulatory alignment, the Federal Budget and the Disability Royal Commission has reinforced the need for rights-based regulation, culturally appropriate assessment, navigation, intersectional data, accountable co-design and sustained workforce capability. The Collaborative's 2026 Federal Budget analysis similarly emphasised culturally responsive NDIS reform and effective access to assessment, planning and advocacy.[6, 7, 8, 9]

This experience demonstrates the importance of trusted, community-based approaches to reaching people who may otherwise remain disconnected from mainstream disability and community services. It also demonstrates that capability building cannot be separated from existing trusted community relationships. Organisations need the skills and resources to be inclusive, but they also need accessible pathways through which people can find and engage with them.

Response to the consultation questions

1. What support, resources or changes would help organisations become more inclusive and accessible for people with disability?

Multicultural organisations vary considerably in size, staffing, governance and resources. Smaller and volunteer-led groups may have strong community trust but lack the time, grant-writing capacity or specialist knowledge to apply for funding and develop disability-inclusive practice. The Fund should build this capacity, rather than assume it already exists. Funded support should begin before applications and continue through project planning, implementation and evaluation, with assistance tailored to each organisation's starting point.

FECCA and the Collaborative can contribute experience from the Community Capacity Building Grants and our experience leading other community-led programs. Our grant model brings together community funding, activity-planning tools, reporting guidance, proportionate accountability and opportunities for shared learning.

This experience provides a practical foundation for a supported pathway into the Fund.

Such a pathway could combine support from multicultural organisations and networks, disability-led organisations and people with lived experience, with each contributing distinct experience. Disability-led partners should shape the disability inclusion content and approach, while multicultural organisations can contribute cultural knowledge, language capability and trusted community relationships.[11]

The Fund should use a broad definition of accessibility and support organisations to review the whole participation pathway: how people hear about an activity, whether information is understandable, whether they can travel to and enter the venue, whether staff and volunteers can communicate respectfully, whether families and support people are welcomed, and whether participants can influence decisions and continue participating over time.

Eligible capability-building activities should include:

- accessibility and cultural safety audits linked to funded inclusion action plans.
- training co-designed and delivered with people with disability, including multicultural people with disability
- accessible multilingual communication using plain language, Easy Read, audio, video and oral communication, not written translation alone.
- appropriate use of accredited interpreters and defined, supported and remunerated bilingual and bicultural roles.

- inclusive governance, complaints and safeguarding processes, plus technical assistance and shared tools for smaller organisations

The Fund should recognise that disability inclusion and multicultural inclusion are complementary but distinct capabilities. Partnerships should therefore combine disability rights, accessibility and lived-experience expertise with multicultural organisations' cultural knowledge, language capability and community trust. FECCA and the Collaborative, working with ethnic community councils and disability-led organisations, could help smaller groups identify inclusion priorities, develop applications, connect with specialist partners and embed practical changes. People contributing lived experience, multicultural organisations and disability-led partners should all be properly funded. Organisations able to apply independently should retain that option; an NDIS provider relationship is not a substitute for disability-led co-design.

2. What activities should the Fund support, given that it will not pay for service delivery?

The Fund should support disability inclusion training, accessibility advice and audits, inclusion action plans, accessible communication and changes to governance and practice. It should also fund organisations that provide tailored capacity-building support to smaller community groups, including mentoring, shared tools, partnership development and implementation guidance. This is organisational capability building, not ongoing service delivery. The fund should also allow time-limited testing, with people with disability, where it is integral to embedding these changes and learning from feedback.

Eligible enabling costs should include interpreters, bilingual facilitators, accessible transport, outreach, communication supports, support-person costs and remuneration for lived-experience participants where needed for co-design or testing. Guidance should also distinguish clearly between routine legal obligations and improvements that go beyond minimum compliance, so uncertainty does not deter small organisations from seeking advice or making meaningful changes.

3. What role could local governments play in supporting community inclusion?

Local governments can convene partners, map inclusive activities, make facilities available, align projects with broader disability and multicultural plans, support local grant administration and embed successful approaches in procurement and community arrangements. This role may be particularly valuable for organisations with limited capacity to identify potential partners. Their involvement should be supportive, rather than compulsory. Capability and relationships vary between councils, especially outside metropolitan areas, and councils should not become gatekeepers. Multicultural and disability-led organisations must be able to apply directly, lead projects and work across council boundaries.

4. What is the best way for community organisations to build meaningful and lasting inclusion?

Benefits beyond the three-year funding period require organisations to be equipped to sustain inclusive practice themselves. Each project should have an achievable sustainability plan identifying who will maintain inclusive practice, how people with disability will remain involved and how ongoing accessibility costs will be met. Training should be embedded in induction; resources, partnerships and referral pathways should remain usable; and boards and leaders should remain accountable for inclusion. Tailored support should reduce as capability grows, while leaving access to shared resources and peer networks.

Grant design should recognise different starting points through small grassroots grants, medium partnership grants and larger system-level projects. Assessment should value community trust, cultural reach and lived-experience governance, not only existing administrative capacity. A national support function could provide shared tools and learning, while funded local assistance helps organisations apply them. Any auspicing or consortium arrangements should preserve community decision-making, make costs transparent and reduce rather than add administrative burden.

Evaluation should go beyond organisations funded, people trained and policies produced. It should examine whether people have greater choice, feel safe and welcome, develop relationships and roles, and continue participating. Data should be disaggregated by relevant cultural, ethnic, language, disability, gender, age, income and geographic characteristics, with proportionate collection, privacy safeguards and community involvement.

Additionality and coordination

Organisational inclusion does not remove a person's need for transport, interpreting, personal assistance, assistive technology or other individual supports. The Fund must remain additional to individual NDIS supports and must not shift costs to families, carers, volunteers or under-resourced organisations. The Department should also explain how it will interact with the Disability Peer Support and Connections Program, Accessible Australia, state and territory initiatives and future foundational supports. Clear boundaries and referral pathways will reduce duplication and help organisations identify the right program.[1]

Conclusion

The availability of services, activities and community spaces does not, in itself, guarantee that people will use or benefit from them. An opportunity can exist locally while remaining out of reach because of language, cultural, practical and disability-related barriers. For multicultural people with disability, equity will therefore not be achieved simply by funding more organisations or making more activities available. It requires deliberate investment in the conditions that make participation possible: trusted relationships, accessible communication, culturally safe practice and practical pathways into community life.

The Fund must address this gap between availability and participation if it is to serve the people it is intended to reach. To do so, multicultural inclusion must be embedded in the Fund from the outset, including its objectives, assessment criteria, eligible activities and evaluation. This means equipping multicultural organisations of all sizes to become disability-inclusive, including those that need support to access funding and implement change.

FECCA and the Collaborative, working alongside disability-led partners, can bring established community networks and capacity-building experience to this task. The measure of success must be whether people previously excluded have greater choice, a stronger sense of belonging and sustained opportunities to participate. Inclusion is not achieved when an opportunity is offered; it is achieved when people can genuinely take it up and benefit from it.

References

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Australian Multicultural Health Collaborative

Unit 1, Level 6, 54 Marcus Clarke Street
Canberra City, ACT 2601
t (02) 6282 5755
e admin@multiculturalhealth.org.au
s @amhcollab
multiculturalhealth.org.au

FECCA

An initiative of The Federation of Ethnic Communities' Councils of Australia