4 Data trends—2003–04 to 2006–07

The 2006–07 financial year marks the nominal end of the third CSTDA. This special focus chapter presents a summary of major trends across the life of CSTDA 3, using four available full years of data (2003–04 to 2006–07)[8]. Analysis is focused on three main areas:

- trends in service use (including a longitudinal analysis of users who have accessed services over the entire period)
- demographic trends—focusing on key characteristics of service users and their carers
- service outlets—a general summary of the numbers and types of services provided and their characteristics.

4.1 Services used

Trends by service group and service type

The estimated number of people accessing CSTDA-funded services in any one year has increased by 24%—from 187,806 in 2003–04 to 232,253 in 2006–07 (Table 4.1). Although numbers of service users have steadily increased for all service groups over the period, the largest proportional increase was for respite (46%). Note, however, that respite had the smallest number of service users of all service groups in 2003–04. Various policy initiatives relating to respite would have contributed to this increase (e.g. bilateral agreements for increased access to respite for older parent carers; see FaHCSIA 2008b). Community access services registered the smallest relative increase (12%). Community support (which increased by 19,751 service users) and employment (by 15,727) services saw the largest absolute increases, with both groups experiencing approximately 25% growth over the period. Community support is also the service group with the largest number of users from year to year.

**Table 4.1: Users of CSTDA-funded services by service group, 2003–04 to 2006–07**

	2003–04	2004–05	2005–06	2006–07	Overall increase (no.)	Overall increase (%)	Average annual growth (%)
Accommodation support	33,175	33,787	35,556	37,473	4,298	13.0	4.2
Community support	78,847	92,610	96,664	98,598	19,751	25.0	7.9
Community access	47,636	44,166	47,738	53,236	5,600	11.8	4.1
Respite	20,547	23,951	27,319	30,058	9,511	46.3	13.6
Employment	64,281	64,835	73,157	80,008	15,727	24.5	7.7
All service users	**187,806**	**200,493**	**217,143**	**232,253**	**44,447**	**23.7**	**7.3**

Notes

1. Service user data are estimates after use of a statistical linkage key to account for individuals who received services from more than one service type outlet during the 12-month period. Totals may not be the sum of service group components because individuals may have accessed more than one service group over the 12-month period.

2. Comparisons across years should be interpreted alongside response rates for each year—see Table 7.1 for details.

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[8] Note that trends in service use and user demographics are influenced by varied data quality across years, as well as trends in service provision and funding.

Between 2003–04 and 2006–07, the most commonly accessed service type has consistently been open employment services (Figure 4.1). Case management, local coordination and development services were the next most common service type. Learning and life skills development regularly featured as the third most common type (in all years except 2004–05; showing steady growth since then), followed by therapy support for individuals (which has had some variation in numbers over the period) and supported employment.

Source: Table A2.8.

Figure 4.1: The five most common CSTDA-funded service types reported, 2003–04 to 2006–07
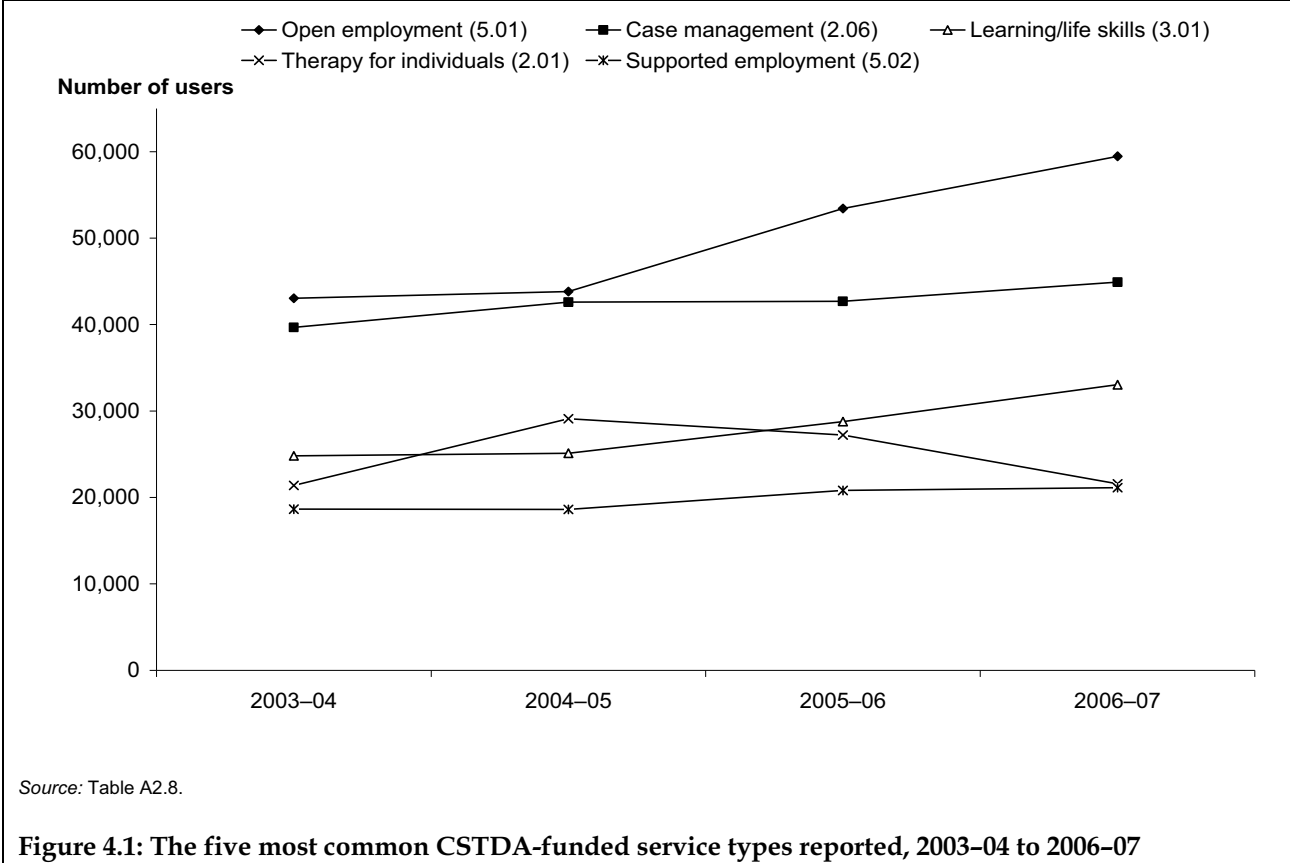
Despite starting out as the largest group, open employment has grown dramatically over the 4 year period (from 43,042 to 59,478 service users, or 38%) (Figure 4.1). Much of this growth can be attributed to the move to full case-based funding in 2005–06, which opened up a large number of new open employment places[9]. Other service types have increased by even larger proportions—flexible/combination respite rose by 7,509 service users or 82%; regional and resource support teams by 6,319 users or 69%; and attendant care/personal care by 764 users or 45% (Table 2.1; AIHW 2005).

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9 The move to full case-based funding in 2005–06 drove a significant increase in client intake into Disability Employment Network (DEN) capped services. Individualised client funding ensures providers have a strong financial incentive to maintain high use of available capacity. Case-based funding is thus a more efficient model than the previous block grant arrangements in terms of flowthrough of clients. More clients are being assisted using the same number of capped places because providers tend to de-list clients when they no longer require assistance. Over the period of the transition in mid-2005, providers identified a large number of effectively inactive clients who were removed from the registers in the first 6 weeks of 2005–06, leading to further intake as places were freed up. In addition, the DEN uncapped stream was introduced in July 2006 for job seekers receiving income support with part-time participation requirements and a future work capacity of 15–29 hours per week with up to 2 years assistance. This new stream of DEN services is fully demand-driven with no cap on the number of eligible clients able to be assisted.

Potential population trends

Changes in service user numbers over time can also be examined by considering them in the context of the potential population for disability services. Recalling that potential population is a measure of the number of people who are likely to require a disability service at some time, Figure 4.2 shows trends in service use relative to the potential population in need of services. Employment and respite services are showing large and steady increases based on this measure, meaning that each year a greater proportion of the broad target group is accessing these services. The other service groups show much flatter lines, indicating that the potential population's rate of access remains fairly stable over time. Interestingly, although community support has by far the highest number of service users, it ranks second in terms of users per 1,000 potential population. As of 2006–07, respite is now a very close third.
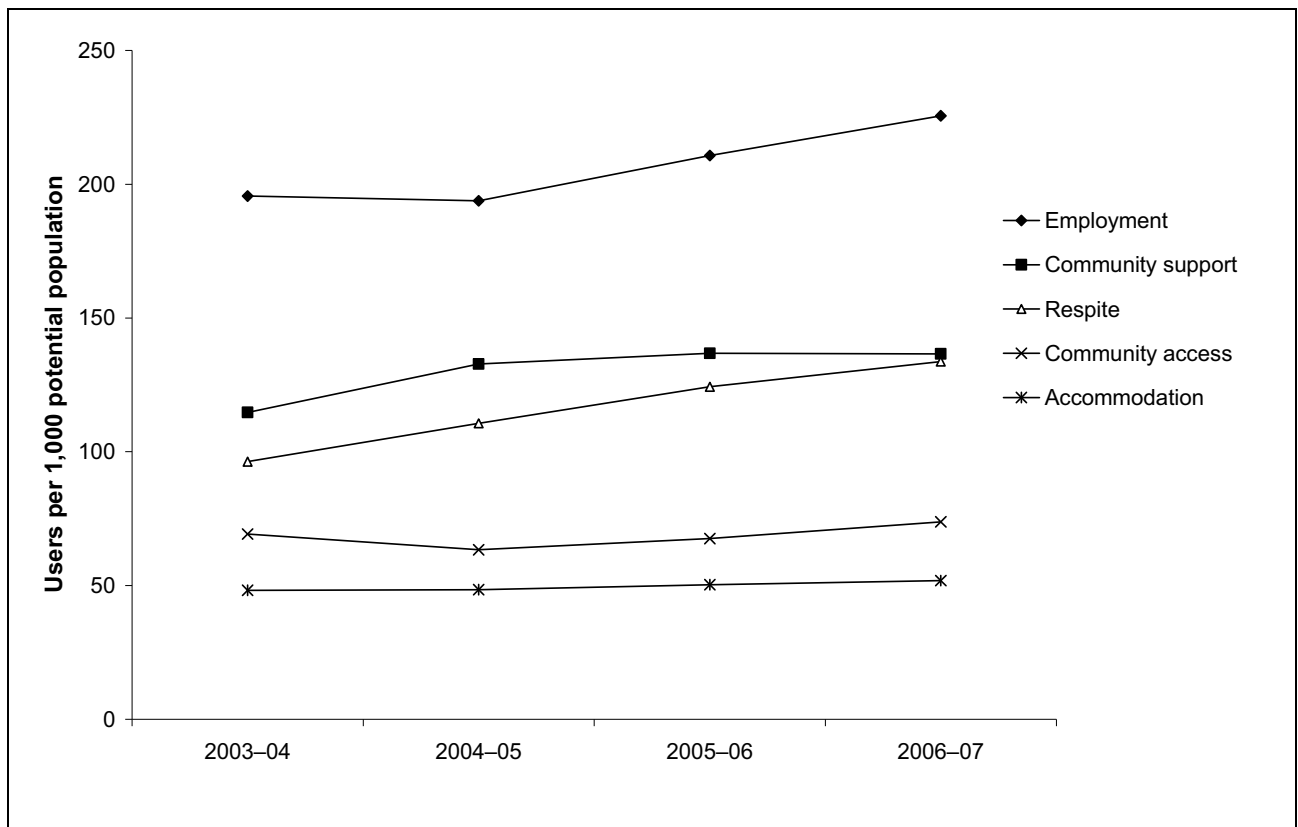
Source: Table A2.9.

Figure 4.2: CSTDA-funded service users, potential population by service group, 2003–04 to 2006–07

Service use over time

A large proportion of CSTDA service users tend to use similar services from year to year. Of the 187,806 service users in 2003–04, almost half (90,073 or 48%) continued to access services in 2006–07 (Table 4.2). Accommodation support users were the most stable group over time, with 54% of users in 2003–04 continuing to access services during 2006–07 (in fact over 65% continued using accommodation support services during 2004–05 and 2005–06). Respite and employment service users were also relatively stable groups, with nearly half of each remaining in a service in 2006–07.

Table 4.2: Users of CSTDA-funded services in 2003–04 who also used services in 2004–05, 2005–06 and 2006–07

	Total users in 2003–04	Return users 2004–05		Return users 2005–06		Return users 2006–07	
	Number	Number	Per cent	Number	Per cent	Number	Per cent
Accommodation support	33,175	23,571	71.1	21,613	65.1	17,852	53.8
Community support	78,847	45,271	57.4	39,226	49.7	29,283	37.1
Community access	47,636	28,112	59.0	25,289	53.1	20,577	43.2
Respite	20,547	13,939	67.8	12,184	59.3	9,745	47.4
Employment	64,281	47,734	74.3	33,089	51.5	29,658	46.1
All service users	**187,806**	**125,370**	**66.8**	**104,987**	**55.9**	**90,073**	**48.0**

Notes

1. 'Return users' refers to users who accessed one or more service during 2003–04 and again in another year. For example, 'return users 2005–06' refers to users accessing services in both 2003–04 and 2005–06.

2. 'All service users' may not equal the sum of component service groups as individual service users may have accessed services from more than one service group in any given financial year.

3. Return user rates for employment should be considered in the context of changed service arrangements—see Section 4.1 or further details.

The support profile of the 90,073 service users who accessed services in both 2003–04 and 2006–07 shows a group with higher needs on average (Table 4.3). Around 36% of these service users reported always needing support in ADL, and a further 41% sometimes needed support. This is higher than those reporting support needs for ADL overall (30% and 42% respectively). The support needs profile of this group has changed between 2003–04 and 2006–07: there has been an increase in the proportion of service users who always need help in ADL from 34% to 36%, and a decrease in the proportion of service users who only sometimes need help in ADL, from 45% to 41%.

Table 4.3: Users of CSTDA-funded services, support needs with activities of daily living (ADL) for those using services in both 2003–04 and 2006–07

Frequency of ADL support need	Number	Support needs profile 2003–04 (%)	Support needs profile 2006–07 (%)	All service users in 2006–07 (%)
Always needs help or unable to do ADL	30,369	33.7	35.7	29.9
Sometimes needs assistance	34,442	45.1	40.5	42.2
Does not need assistance but uses aids	4,327	4.1	5.1	7.1
Does not need ADL support	15,855	17.2	18.7	20.8
Total	**90,073**	**100.0**	**100.0**	**100.0**

Note: Totals include missing data; percentages exclude missing data.

Primary disability over time—service users aged 10–24 years

Access to linked records for each service user allows us to investigate the reporting of primary disability over time. Examination of these records for service users aged 10–24 years shows some shifting of reported primary disability group, in particular for users with physical disability and autism (Tables 4.4 and 4.5). Only three-quarters (75%) of service users with a primary disability of 'physical' in 2003–04 reported physical disability in 2006–07 (Table 4.4). Around 16% of these

people changed their reported primary disability to intellectual disability, and a further 3% to neurological disability. Note that these changes in coding occurred not just for service users in the developmental stage (under 18 years of age) but also for users outside this age group (i.e. 19–24 years). This pattern reflects the co-existence of physical and intellectual disability groups for some people.

Of the service users aged 10–17 years with a primary disability of autism in 2003–04, 82% remained in that disability group in 2006–07, but a further 15% were reclassified as having a primary disability of intellectual disability.

Primary disability classification changes over time could be due to a variety of reasons—for example, a more accurate understanding of the person's disability experience; emergence of new disabilities (possibly because of injury or accident); or service-related experiences (e.g. a reclassification due to changing perceptions within a particular service type). The selected trends shown in Tables 4.4 and 4.5 emphasise the importance of treating disability groups as a dynamic concept. Note that missing data and global coding practice changes have been considered in the analyses presented, and account for only a small proportion of coding changes.

Table 4.4: Users of CSTDA-funded services aged 10–24 years reporting physical disability as a primary group in 2003–04, primary disability groups reported in 2006–07

Primary disability group reported in 2006–07	Number	Per cent
Physical	2,502	75.3
Intellectual	519	15.6
Neurological	111	3.3
Acquired brain injury	35	1.1
Specific learning/ADD	30	0.9
Psychiatric	27	0.8
Autism	22	0.7
All other disability groups	78	2.3
Total	**3,324**	**100.0**

Notes

1. Age of 10–24 years is calculated as at 30 June 2004.

2. 'All other disability groups' includes: deafblind; vision; hearing; speech; psychiatric; and not stated.

Table 4.5: Users of CSTDA-funded services aged 10–17 years reporting autism as a primary disability group in 2003–04, primary disability groups reported in 2006–07

Primary disability group reported in 2006–07	Number	Per cent
Autism	1,129	81.8
Intellectual	207	15.0
Specific learning/ADD	15	1.1
All other disability groups	30	2.2
Total	**1,381**	**100.0**

Notes

1. Age of 10–17 years is calculated as at 30 June 2004.

2. 'All other disability groups' includes: physical; acquired brain injury; neurological; deafblind; vision; hearing; speech; psychiatric; and not stated.

Multiple service use over time

Table 4.6 shows patterns of cross-service use for the 90,703 people accessing services during both 2003–04 and 2006–07. Although these patterns show a tendency for people to return to services within the same service group, there is also a notable level of cross-service use. For example, one-third (33%) of accommodation support service users in 2003–04 accessed a community access service in 2006–07, and 24% a community support service. Conversely, over one-fifth (22%) of community access users in 2003–04 were in accommodation support services in 2006–07. Around 35% of respite users in 2003–04 used community support services during 2006–07. These patterns are similar to use across service groups within a single year (see Table 6.4) and may largely reflect a tendency for users to access two different service groups within each of the 2 years.

Table 4.6: Users of CSTDA-funded services in both 2003–04 and 2006–07, service use patterns across the 2 years

Service groups accessed in 2003–04	Service groups accessed in 2006–07											
	Accomm-odation support		Community support		Community access		Respite		Employment		Total users in 2003–04	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Accommodation support	17,852	53.8	7,959	24.0	10,894	32.8	2,427	7.3	4,577	13.8	**33,175**	**100.0**
Community support	8,083	10.3	29,283	37.1	9,411	11.9	7,967	10.1	5,951	7.5	**78,847**	**100.0**
Community access	10,579	22.2	8,706	18.3	20,577	43.2	4,375	9.2	5,203	10.9	**47,636**	**100.0**
Respite	2,288	11.1	7,153	34.8	4,814	23.4	9,745	47.4	2,084	10.1	**20,547**	**100.0**
Employment	4,775	7.4	4,270	6.6	4,166	6.5	1,892	2.9	29,658	46.1	**64,281**	**100.0**

Notes

1. Totals may exceed the sum of components because individuals may have accessed more than one service group combination across the two 12-month periods. Totals may be less than the sum of components because users of one service group only are excluded from this table.

2. Service users accessing three, four or five service groups are included under all relevant combinations.

Although the number of service users has increased steadily over the 4 years to 2006–07, the trend in multiple service use has been very stable. The proportion of service users accessing more than one service type during a given financial year has shown only minimal fluctuations (ranging between 29% and 31%), as has the average number of outlets accessed (1.5–1.6 per user) and the average number of service groups used (1.3 each year) (AIHW 2005, 2006b, 2007).

4.2 Demographic trends

Overview of selected service user characteristics

Table 4.7 shows that the CSTDA service user group is a relatively stable one over time, with some notable exceptions:

- The proportion of service users born in countries other than Australia has steadily risen (from 7.5% to 10.1%), as has that with an informal carer (42% to 45%).

- As noted in Chapter 2, the percentage of users with individualised funding has dramatically increased over the 4 years to 2006–07 (from 17% to 45%), largely because of the implementation of case-based funding within employment services.

- Both employment and unemployment rates among service users have risen overall.

- The proportion of service users living alone has risen, coupled with a decrease in the proportion of service users living with people other than family.
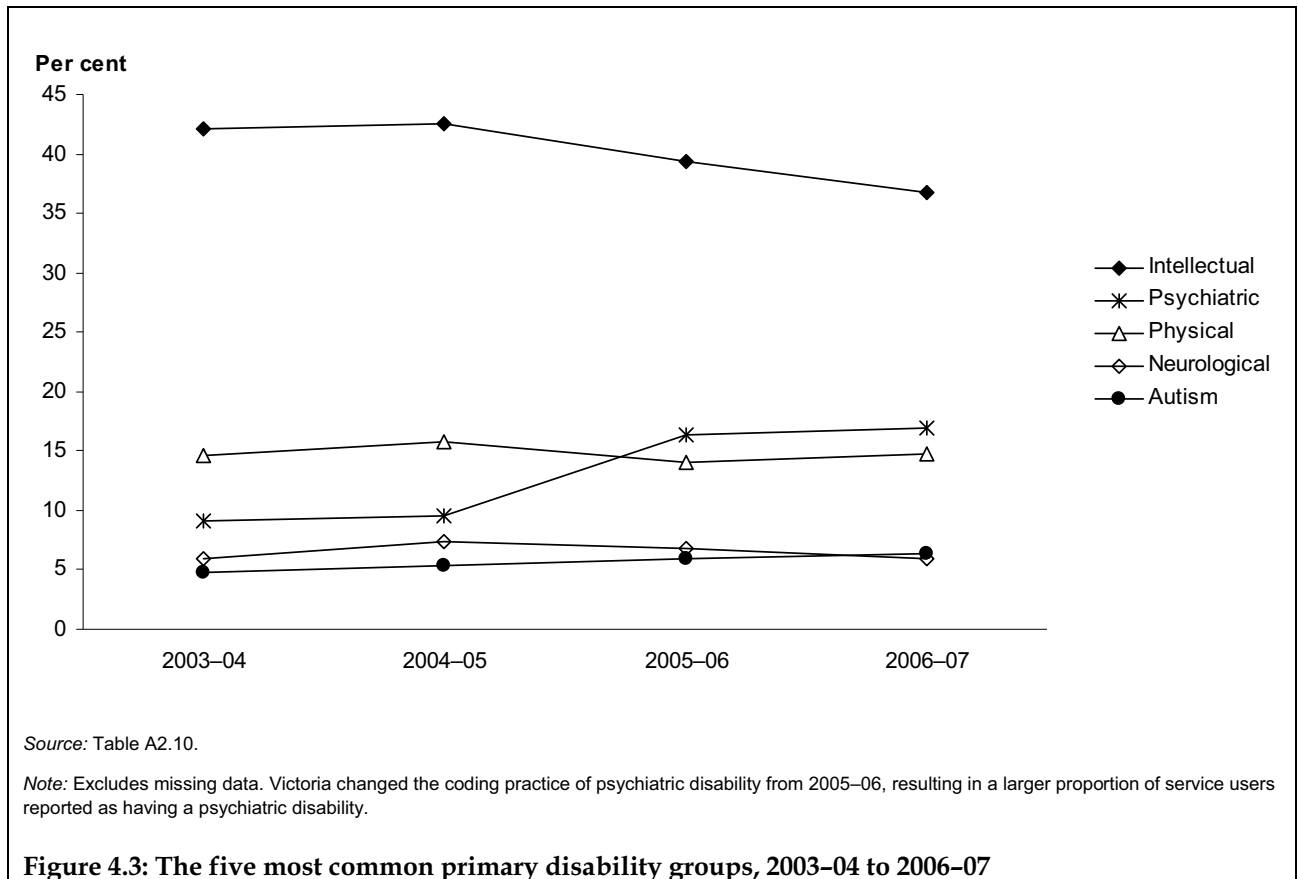
Table 4.7: Users of CSTDA-funded services, summary of selected demographic characteristics, 2003–04 to 2006–07

|	2003–04	2004–05	2005–06	2006–07
Selected service user characteristics	**Per cent**			
Male	59.0	56.4	58.1	59.0
Indigenous	3.5	3.1	3.3	3.8
Born outside Australia	7.5	8.0	8.1	10.1
Needing an interpreter	4.6	4.2	4.0	3.9
With effective communication	64.1	63.2	60.3	61.2
With little, or no effective communication	14.9	13.3	13.0	16.3
Employed (15–64 years)	30.4	34.3	32.2	33.6
Unemployed (15–64 years)	16.8	22.5	25.1	23.8
In receipt of individualised funding	16.6	17.6	43.0	44.7
Has an informal carer	41.7	42.4	44.9	45.0
Lives alone	12.6	12.3	11.7	15.3
Lives with others	54.7	55.7	54.8	51.2
Lives with family	19.2	18.6	17.6	21.9
Main income source Disability Support Pension (missing data excluded)	74.9	73.4	73.9	65.8
Lives in Major City	62.4	60.6	61.7	62.9
Lives in Inner Regional area	23.4	22.3	24.2	24.0
Lives in Outer Regional area	9.9	9.6	10.2	9.7
Lives in Remote/Very Remote area	1.8	1.9	1.7	1.5

Disability groups

Major primary disability groups

Intellectual disability was consistently the most commonly reported disability group across the CSTDA NMDS collections, accounting for between 37% and 43% of service users in any given year (Figure 4.3). In the 2 years to 2006–07, however, intellectual disability decreased in proportion to the other groups, as did neurological disability. At the same time, psychiatric disability increased (note, however, that changes to reporting practices in Victoria largely account for this). Autism consistently increased in terms of percentage of service users over the 4-year period.

Source: Table A2.10.

Note: Excludes missing data. Victoria changed the coding practice of psychiatric disability from 2005–06, resulting in a larger proportion of service users reported as having a psychiatric disability.

Figure 4.3: The five most common primary disability groups, 2003–04 to 2006–07

Disabilities reported by service group

People with an intellectual/learning disability have consistently been the highest proportion of CSTDA-funded service users, across all service groups (Figure 4.4). This disability group was particularly predominant for supported employment services (70–77%), respite (63–70%) and accommodation support (56–66%). Physical/diverse disability was consistently the second most common disability group for community support (28–37%) and respite (24–27%). Intellectual/learning disability was more common in supported employment than in open employment, and physical/diverse, sensory/speech and psychiatric disability were more common in open employment than in supported employment.
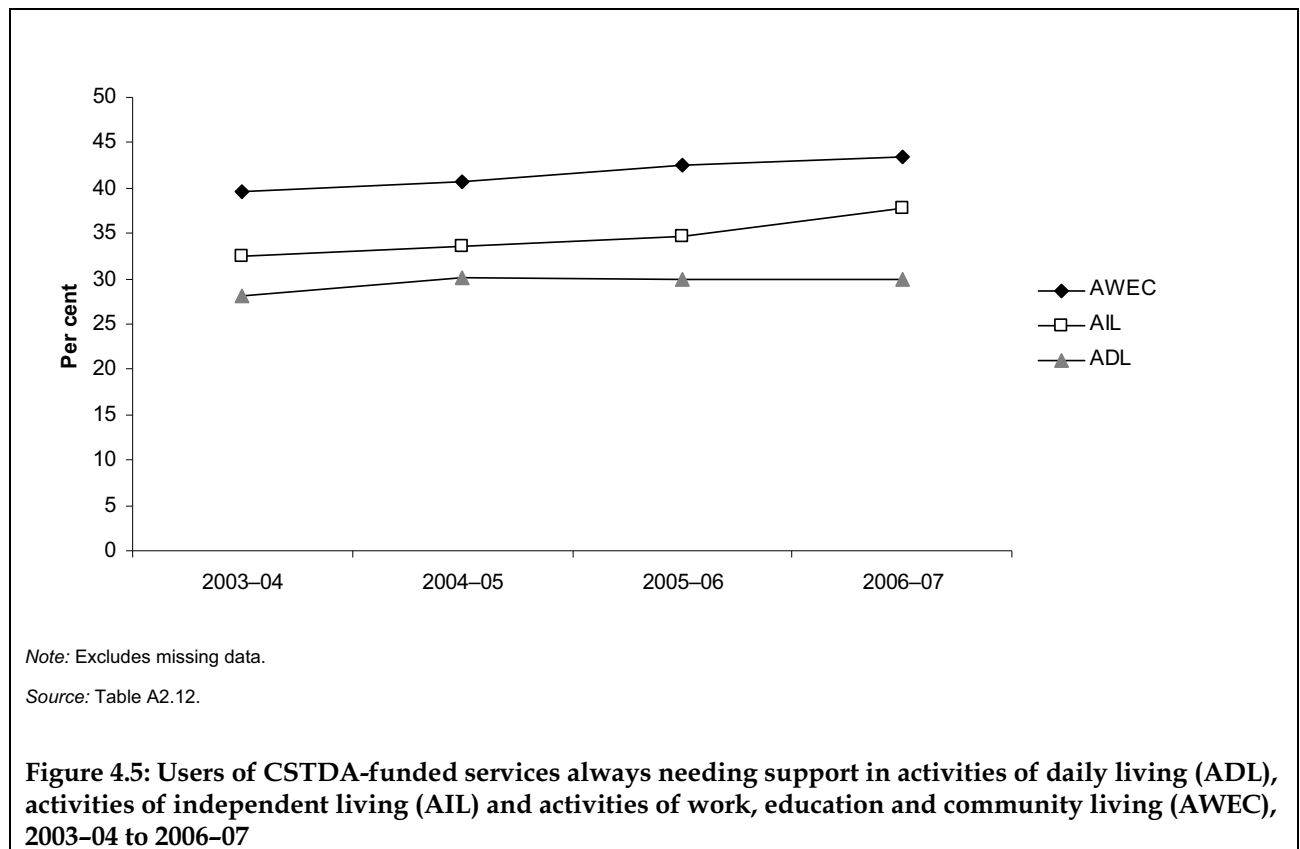
57
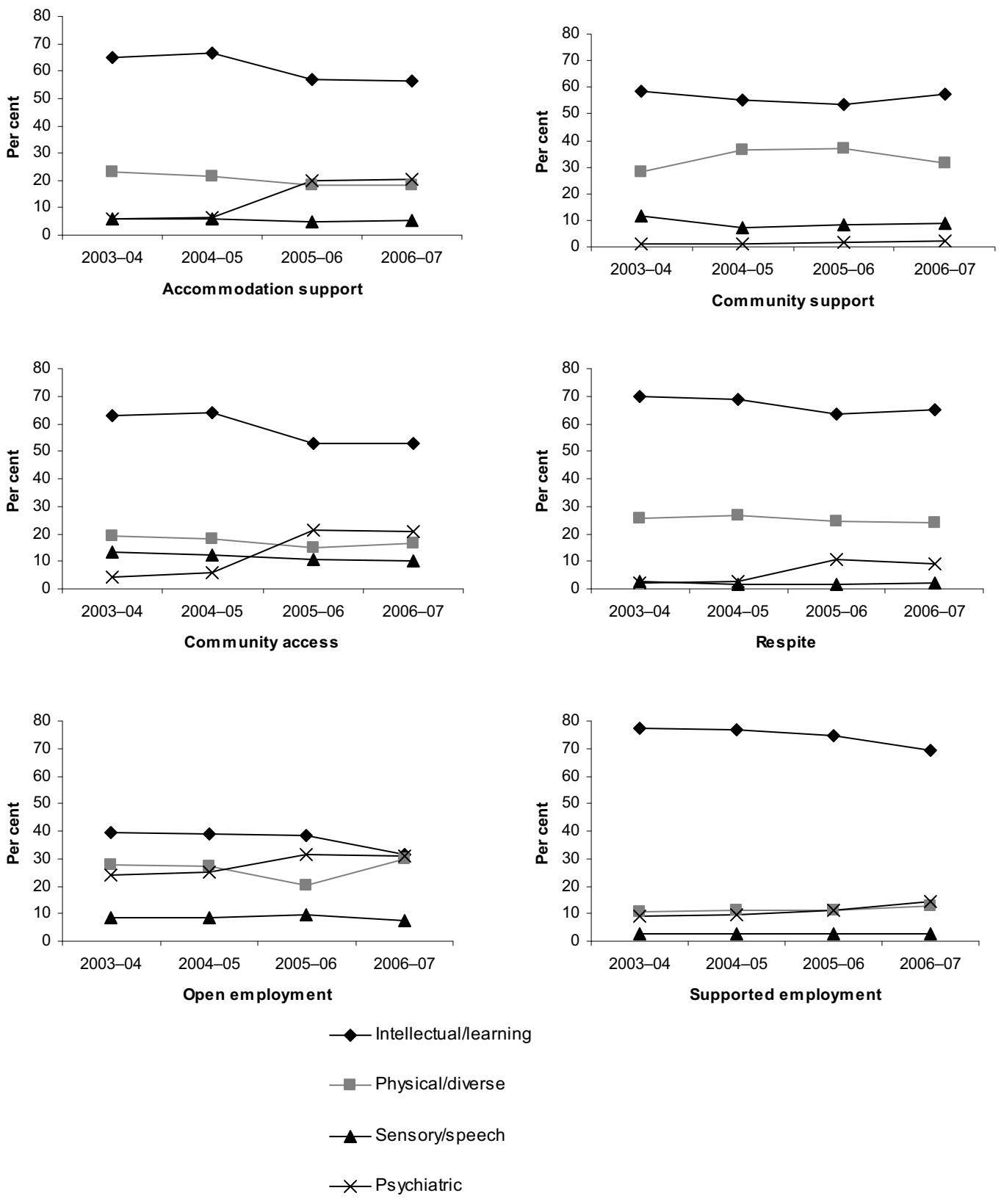
Notes

1. Victorian coding practices changed in 2005–06, meaning a greater proportion of psychiatric service users were identified.
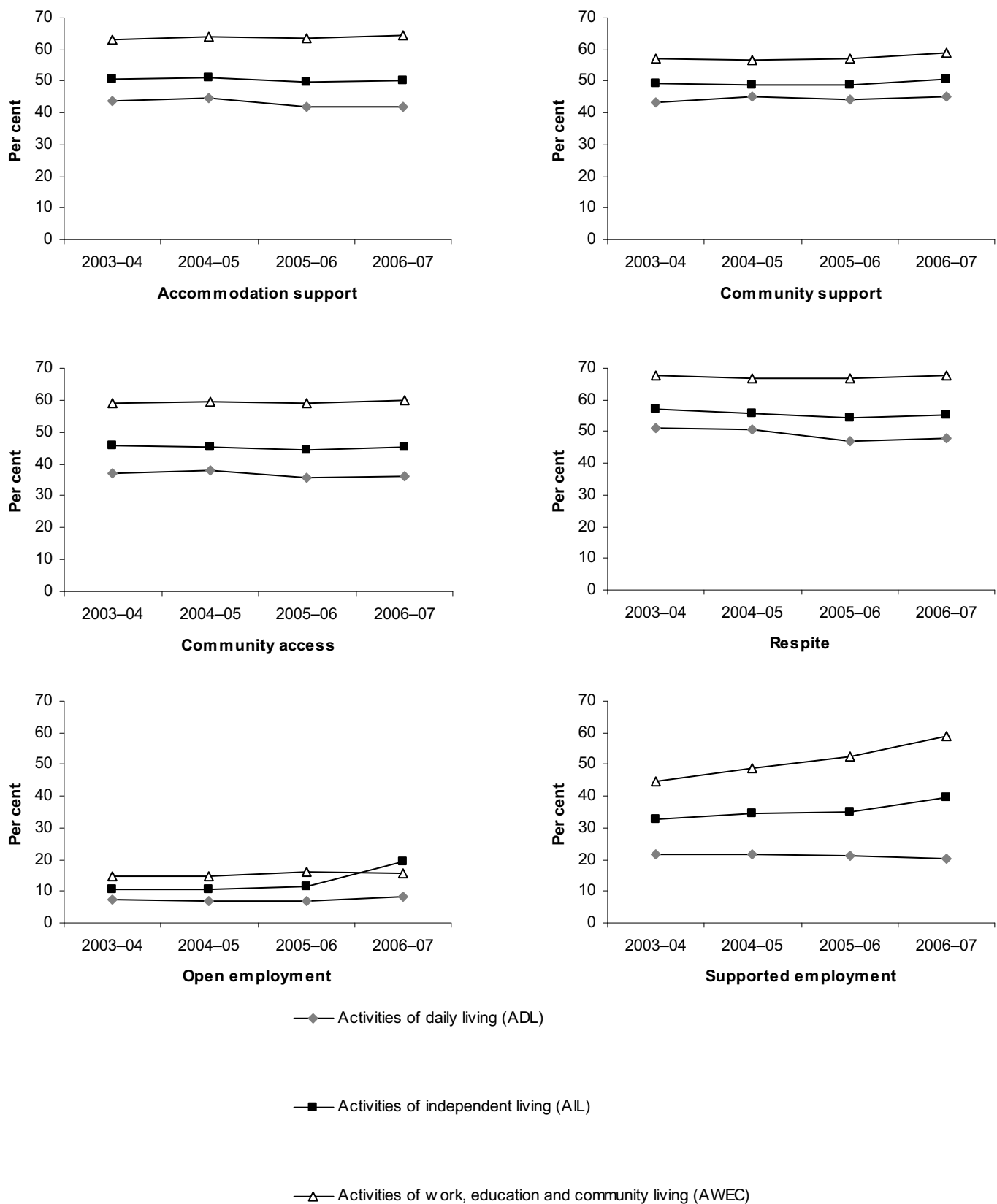
2. Excludes missing data.

Figure 4.4: Primary disability by service group/type, 2003–04 to 2006–07

Support needs

Trends in support needs show small but steady increases in the proportion of service users needing the highest level of support (Figure 4.5). In particular, higher proportions of service users in 2006–07 reported always needing support for activities of work, education and community living (AWEC; rising from 40% in 2003–04 to 44% in 2006–07) and activities of independent living (AIL; from 33% to 38%). The trend for those who reported always needing support for activities of daily living (ADL) has been much more stable overall, sitting at between 28% and 30% over the period.

Trends in support needs varied across service types (Figure 4.6). Proportions of service users reporting always needing help in ADL saw slight decreases among accommodation support, community access, respite and supported employment users. Most service types showed very stable rates for AIL, with the exception of the two groups of employment service users, which both saw an increase between 2005–06 and 2006–07. Supported employment users showed a consistent increase in the proportion always needing help in AWEC—rising from 45% to 59%. Other service groups showed more stable proportions of users who always need support over time for this area.

Note: Excludes missing data.

Source: Table A2.12.

Figure 4.5: Users of CSTDA-funded services always needing support in activities of daily living (ADL), activities of independent living (AIL) and activities of work, education and community living (AWEC), 2003–04 to 2006–07

Accommodation support

Community support

Community access

Respite

Open employment

Supported employment

Per cent

Activities of daily living (ADL)

Activities of independent living (AIL)

Activities of w ork, education and community living (AWEC)

Note: Excludes missing data.

Source: Table A2.12.

Figure 4.6: Users of CSTDA-funded services always needing support in activities of daily living (ADL), activities of independent living (AIL) and activities of work, education and community living (AWEC), by service group/type, 2003–04 to 2006–07

4.3 Service outlets

The number of service type outlets reporting under the CSTDA NMDS has increased from 8,824 in 2003–04 to 10,631 in 2006–07 (Table 4.8). This is consistent with an increase in the number of funded agencies, which rose from 1,973 in 2003–04 to 2,330 in 2006–07. Non-government-funded agencies have consistently accounted for over two-thirds (67–73%) of outlets over the period. Over one-third of outlets (33–38%) reported 24-hour-per-day operation; over two-fifths (44–48%) operated 7 days per week; and between 69% and 71% operated for the full year.

Table 4.8: Number and selected characteristics of CSTDA-funded service type outlets, 2003–04 to 2006–07

	2003–04	2004–05	2005–06	2006–07
Overall counts (number)				
State/territory-funded outlets	7,976	7,651	8,288	9,472
Australian Government-funded outlets	848	797	805	1,159
Total outlets reporting	8,824	8,448	9,093	10,631
Total agencies reporting	1,973	1,867	2,006	2,330
Selected characteristics (%)				
Non-government outlets	72.9	67.4	69.1	70.6
Outlets operating 24 hours a day	34.0	37.8	35.3	33.2
Outlets operating 7 days a week	45.8	45.9	48.2	43.7
Outlets operating 52 weeks a year	70.6	70.0	71.4	69.0

Notes

1. In 2003–04, Australian Government-funded outlets included service type 5.03 'Open and supported employment'. These services ceased to be operational from 1 December 2004.

2. In 2006–07, Australian Government-funded outlets included service type 5.04 'Targeted support' for the first time.