

# 5 Population estimates of demand and unmet demand

This chapter presents population estimates of demand and unmet demand for accommodation, respite, community access (specifically, day activities) and employment services.

Section 5.1 provides background information about the approach to and main data sources for population data analysis and estimates of unmet demand. Discussion of the baseline estimates of unmet demand is presented in three sections:

- Section 5.2 Accommodation and respite services
- Section 5.3 Community access services
- Section 5.4 Disability employment services.

Section 5.5 presents consolidated estimates of unmet demand for disability services.

## 5.1 Approach and main data sources

### Approach to estimates of unmet demand

Estimates of unmet demand in this study are largely updates of analyses undertaken in previous AIHW unmet demand studies, using the most recent available data. The key concepts and approaches, including how they were developed and agreed upon with national disability administrators, were discussed in detail in the earlier study reports (AIHW: Madden et al. 1996; AIHW 1997, 2002).

Chapter 2 sets out the important concepts and definitions that underlie the estimates, relates them to key data sources and outlines the study method. Figure 2.1 illustrates the relationship between met demand, unmet demand and potential need along with relevant data indicators. Table 2.1 provides a framework relating ABS disability survey data on need for assistance with activities to the need for CSTDA services. Figure 2.2 shows an example of the process of 'drilling down' through population data to develop baseline estimates of unmet demand for accommodation and respite services. Box 1.1 (Chapter 1) provides detailed definitions of services covered by the CSTDA.

A key feature of the approach in the two previous studies was that, although they provided estimates relating to a range of levels of support needs, most effort was directed at making estimates relating to the higher end of the support needs range robust, in order to provide reliable, 'conservative' estimates (AIHW 1997, 2002).

In the 1997 demand study, attention was focused on people reported by the 1993 ABS disability survey as having 'severe or profound handicap' (the word 'handicap' was replaced by 'restriction' in the 1998 survey and 'core activity limitation' in the 2003 survey). In the ABS disability survey definitions, severity of 'handicap' or 'core activity limitation' is measured by the intensity of, and need for, personal assistance in self-care, mobility and communication activities, namely whether the person 'always' or 'sometimes' needed

assistance with these activities. In the 1993 survey, 'severe or profound handicap' was identified when a person with a disability 'sometimes' or 'always' needed personal assistance or supervision in the three activities of daily living.

In the 1998 and 2003 disability surveys information was collected for the first time about how frequently, on average, a person needed personal assistance or supervision for a particular activity. Analyses show that the frequencies of need for assistance with daily activities vary substantially among people with a severe or profound core activity limitation, ranging from less than once per month to 6 or more times a day (AIHW 2002:Tables A6.1 and A6.2). This new survey information allowed the 2002 study and present study to define more precisely a spectrum of baseline estimates and grade the range of estimated needs. Detailed operational definitions and methods are presented in each subsequent section on baseline population estimates.

Estimates of unmet demand for services are based on three types of data sources and are produced in two stages. In the first stage (Sections 5.2 to 5.4), baseline estimates of unmet demand for disability support services are based on data from the 2003 ABS disability survey and are adjusted for population growth to 2005. The following two main population data sources are used for baseline estimates:

- ABS 2003 Survey of Disability, Ageing and Carers, which provides the latest national information on the number of people with a severe or profound core activity limitation and their need and unmet demand for formal and informal assistance
- ABS data on the 2005 estimated resident population, to take account of changes between 2003 and 2005 in births, deaths and international and interstate migration, and factor in the effect of population ageing resulting from the interaction of these demographic components.

In the second stage (Section 5.5), baseline estimates of unmet demand are adjusted for increases in service supply between 2003 and 2005 using data on CSTDA service provision from Chapter 3. Information from jurisdictional registers and waiting lists (Chapter 4) are used to check the orders of magnitude of these estimates.

The baseline estimates of unmet demand for disability support services, and unmet support needs for ageing carers, are based on the confidentialised unit record file (CURF) of the ABS 2003 Survey of Disability, Ageing and Carers. To protect confidentiality, some children's records, and any households that were identifiable, have been dropped from the CURF. Therefore, the estimates based on the CURF do not exactly match those of ABS published reports.

Like any population sampling survey data, the ABS 2003 disability survey data are subject to sampling error. As a general guide, estimates of less than 10,400 have an associated relative standard error (RSE) between 25% and 50% and should be used with caution, while estimates of less than 2,100 have an associated RSE of 50% or more and are considered too unreliable for general use. The confidence intervals of population estimates are presented for final estimates of unmet demand for disability services in Section 5.5.

## **Methods of updating unmet demand estimates to adjust for population growth from 2003 to 2005**

The present study uses the 2003 disability survey data to construct baseline population estimates and then updates the estimates to 2005 by projecting them forward using overall

population growth, appropriately adjusted for age and sex. The process for adjusting or updating the baseline estimates relies on two underlying assumptions: the age- and sex-specific prevalence rates of severe or profound core activity limitation remained constant between 2003 and 2005, and other factors affecting need and unmet demand remained unchanged between 2003 and 2005. Detailed steps for adjustments were as follows:

- Step 1: Calculate the age- and sex-specific rates of severe and profound core activity limitation in 2003, using the estimated numbers of people with a severe or profound core activity limitation living in households in each age and sex category, divided by the number of people in that age and sex category in the overall 2003 populations.
- Step 2: Calculate estimates of the numbers of people with severe or profound core activity limitation living in households in 2005, using the rates calculated for 2003 in step 1, and applying them to the 2005 estimated resident population (Table A5.1).
- Step 3: Calculate the 2005 estimate for age group 0–64 years (subtotal from step 2).
- Step 4: Calculate unmet demand proportions for each service category of baseline estimates in 2003, as a proportion of the total number in age group 0–64 years (2003).
- Step 5: Using these proportions derive equivalent baseline estimates for 2005 by applying the proportions from step 4 to the 2005 total from step 3.

## **Main relevant data items from the 2003 ABS disability survey**

This section outlines the main data items used for baseline estimates of unmet demand. More specific data items relating to particular service types are presented in the subsequent sections.

The data items from the 2003 ABS survey most relevant to the provision of CSTDA services are discussed separately below.

### **Activity restrictions and their severity**

In the 2003 disability survey a person has a disability if he/she has at least one ‘limitation, restriction or impairment’ (determined by survey screening questions), which has lasted, or is likely to last, for at least 6 months and restricts everyday activities (ABS 2004a:72).

A ‘specific limitation or restriction’ is defined in the 2003 survey as a limitation in core activities (self care, mobility and communication), or a restriction in schooling and/or employment.

In the survey four levels of core activity limitation are determined, based on whether a person needs personal assistance with, has difficulty with, or uses aids or equipment for any of the core activities. A person’s overall level of core activity limitation is determined by the highest level of limitation the person experienced in any of the core activity areas (ABS 2004). The four levels of core activity limitation are:

- profound – unable to perform a core activity or always needs assistance
- severe – sometimes needs assistance to perform a core activity, or has difficulty understanding or being understood by family or friends, or can communicate more easily using sign language or other non-spoken forms of communication
- moderate – does not need assistance, but has difficulty performing a core activity

- mild – has no difficulty performing a core activity but uses aids or equipment because of disability; or cannot perform the activities of easily walking 200 metres, walking up and down stairs without a handrail, easily bending to pick up an object from the floor, and using public transport; or can use public transport but needs help or supervision; or needs no help or supervision but has difficulty using public transport.

Core activities comprise the following tasks:

- self-care – bathing or showering, dressing, eating, using the toilet, and bladder or bowel control
- mobility – getting into or out of a bed or chair, moving around at home and going to or getting around a place away from home
- communication – understanding and being understood by others: strangers, family and friends.

People with a severe or profound core activity limitation conform quite well to the definition of the target group of CSTDA services (substantially reduced capacity in communication, learning or mobility, and needing ongoing or episodic support services). The group is accepted as comprising the broad ‘potential population’ for CSTDA services.

### **The age of the person**

While the CSTDA does not specifically exclude people above a certain age, many services do so in practice. While people who age ‘in the service’ can continue to receive services, services do not generally take on new clients who are aged 65 years or more. In addition, the overall approach of this study of producing robust and conservative estimates, weighs against including people who may be eligible for aged care services. In using the survey data to estimate demand the analyses therefore focus on people aged 0–64 years.

### **Whether the person is living in a household**

Only people living in households were included. In the survey, questions on unmet demand were not asked of people living in institutions.

### **Activities in which help was needed**

People who were identified as having a disability (using the survey screening questions) and all people aged 60 years or over, were asked about their need for assistance with various daily activities. In addition to three ‘core activities’ (self-care, mobility and communication), questions were asked about other activities: health care, housework, property maintenance, paper work, meal preparation, transport and cognition or emotion. ‘Cognition or emotion’ refers to interacting, making or maintaining relationships, coping with feelings or emotions, making decisions or thinking through problems. In the 1998 disability survey, these tasks were referred to as ‘guidance’.

Survey respondents could report the need for assistance with more than one activity. Need for assistance is defined as needing help or supervision with at least one task constituting that activity because of disability or old age.

## **Frequency of need for assistance because of disability**

In the 2003 survey additional questions were asked about how often a person needs assistance with a particular activity. The categories of the frequency in the confidentialised unit record file of the survey data are: does not need assistance, <1/month, 1-3/month, 1/week, 2-6/week, 1/day, 2/day, 3-5/day and 6+/day.

## **Whether or not there was a stated unmet demand for help**

People who needed help were asked about the type of assistance they received, whether the source was a formal service and/or informal assistance, whether there was an unmet demand for help and why.

## **The reason stated for there being no or not enough formal assistance**

The possible categories into which responses were allocated by the ABS interviewers in the 2003 survey were:

- the person did not know of the service
- the person did not consider their need important enough
- the person would not ask for the service, for reasons of pride
- the person was unable to arrange a service
- no service was available
- not eligible for service (additional category in the 1998 and 2003 surveys)
- service costs too much (additional category in the 1998 and 2003 surveys)
- service does not provide sufficient hours (additional category in the 1998 and 2003 surveys)
- other.

It was considered in both the 1995 and 1997 AIHW demand studies that the reasons that most clearly demonstrated unmet demand for CSTDA services were that the service was not available, or could not be arranged. This is evidence that the person has identified the relevant service and has expressed a real need by attempting to access a service, only to find that it was not available at all or access could not be arranged (AIHW 1997). The 2002 study and this study maintain the focus on the same two groups. In addition, and for the same reasons, the additional categories (introduced in the 1998 and 2003 surveys) of 'service costs too much' and 'service does not provide sufficient hours' are also considered to provide evidence that need was translated into some kind of action, and these categories are also included in the analysis and estimation of unmet demand.

Views were put to the study team that there are very good reasons for including some people from other categories. For example, lack of knowledge of a service may be seen to be a failing of the service rather than a lack of demand for it. Similarly, people may not consider their need important enough only because they have low expectations that they will be eligible for the sorts of services that are available. Inclusion of additional response categories for these data would lead to an increase in the estimates of unmet demand. The project team decided to exclude these categories to provide 'conservative' estimates (Madden et al. 1996; AIHW 1997, 2002).

## 5.2 Accommodation and respite services: baseline estimates of unmet demand

A step-by-step exclusion process to estimate unmet demand for accommodation and respite services is presented in Figure 5.1. This process was designed to exclude any group where there was doubt about the existence of unmet demand.

In 2003 there were 677,700 people with a severe or profound core activity limitation aged under 65 years. Of these, a total of 16,300 were living in cared accommodation. These people were not asked in the survey to report on unmet demand for assistance, and for this very practical reason were excluded from further consideration. This left 661,400 people who were living in households.

People living in households could report unmet demand for formal services in a range of activities. The 156,900 people who reported unmet demand for formal assistance with self-care, mobility or communication were included in the estimates of unmet demand. About 504,600 people with unmet demand for formal assistance only in activities such as health care, guidance, housework, meal preparation, paperwork, property maintenance and transport were excluded.

The 51,700 people who were considered to have clearly demonstrated their unmet demand by reporting that the service was unavailable or could not be arranged (25,800), or that the service cost too much or did not provide sufficient hours (26,000) were included as a basis for final estimates. Around 105,200 people who gave other reasons for their unmet demand for formal assistance not being met were excluded.

Finally, only the 26,700 people who needed ADL assistance at least 3–5 times per day (or less frequently if they needed help with more than one ADL) were included in the baseline estimates of unmet demand (Tables 5.1 and A5.2).

The resulting estimate is that, in 2003, there were 26,700 people needing accommodation and/or respite services. This reflects the conservative approach being taken in focusing on people with higher support needs and unmet need with core activities. This group consists of people who:

- needed assistance with one core activity and needed help at least 3 to 5 times a day
- needed assistance with two core activities and needed help at least twice daily for one activity
- needed assistance with three core activities and needed help at least once daily for one activity.

The remaining 25,000 people who required less frequent assistance were not included in the baseline estimates of unmet demand.

Finally, this estimate was adjusted using ABS data on estimated resident population, to account for changes in population size and age structure between 2003 and 2005. The resulting estimate of the number of people with unmet demand for accommodation and/or respite services in 2005 is 27,800.

**Table 5.1: Estimates of unmet demand for accommodation and respite services,<sup>(a)</sup> 2003 and 2005 ('000)**

	Age groups (years)		
	0–4	5–64	0–64
<b>2003 survey estimates</b>			
Unmet demand for formal help in one or more core activity	11.6	145.3	156.9
Reason for no or not enough formal help:			
(A) No service available, or unable to arrange a service	*3.2	22.6	25.8
(B) Service costs too much or does not provide sufficient hours	*3.5	22.4	26.0
<i>Total (A) &amp; (B)</i>	*6.7	45.0	51.7
Unmet demand for accommodation & respite services <sup>(b)</sup>			
(A) No service available, or unable to arrange a service	**1.7	*10.2	11.9
(B) Service costs too much or does not provide sufficient hours	*2.6	12.2	14.8
<i>Total (A) &amp; (B)</i>	*4.3	22.4	26.7
Others with lower frequency of need for help	*2.4	22.6	25.0
<b>Total severe or profound living in household</b>	<b>35.7</b>	<b>625.7</b>	<b>661.4</b>
<b>2005 estimates (updated for population growth)</b>			
Unmet demand for formal help in one or more core activity	12.0	151.1	163.1
Reason for no or not enough formal help:			
(A) No service available, or unable to arrange a service	*3.3	23.5	26.8
(B) Service costs too much or does not provide sufficient hours	*3.7	23.3	27.0
<i>Total (A) &amp; (B)</i>	*7.0	46.8	53.8
Unmet demand for accommodation & respite services			
(A) No service available, or unable to arrange a service	**1.8	10.6	12.4
(B) Service costs too much or does not provide sufficient hours	*2.7	12.7	15.4
<i>Total (A) &amp; (B)</i>	*4.5	23.3	27.8
Others with lower frequency of need for help	*2.5	23.5	26.0
<b>Total severe or profound living in household</b>	<b>37.0</b>	<b>650.8</b>	<b>687.8</b>

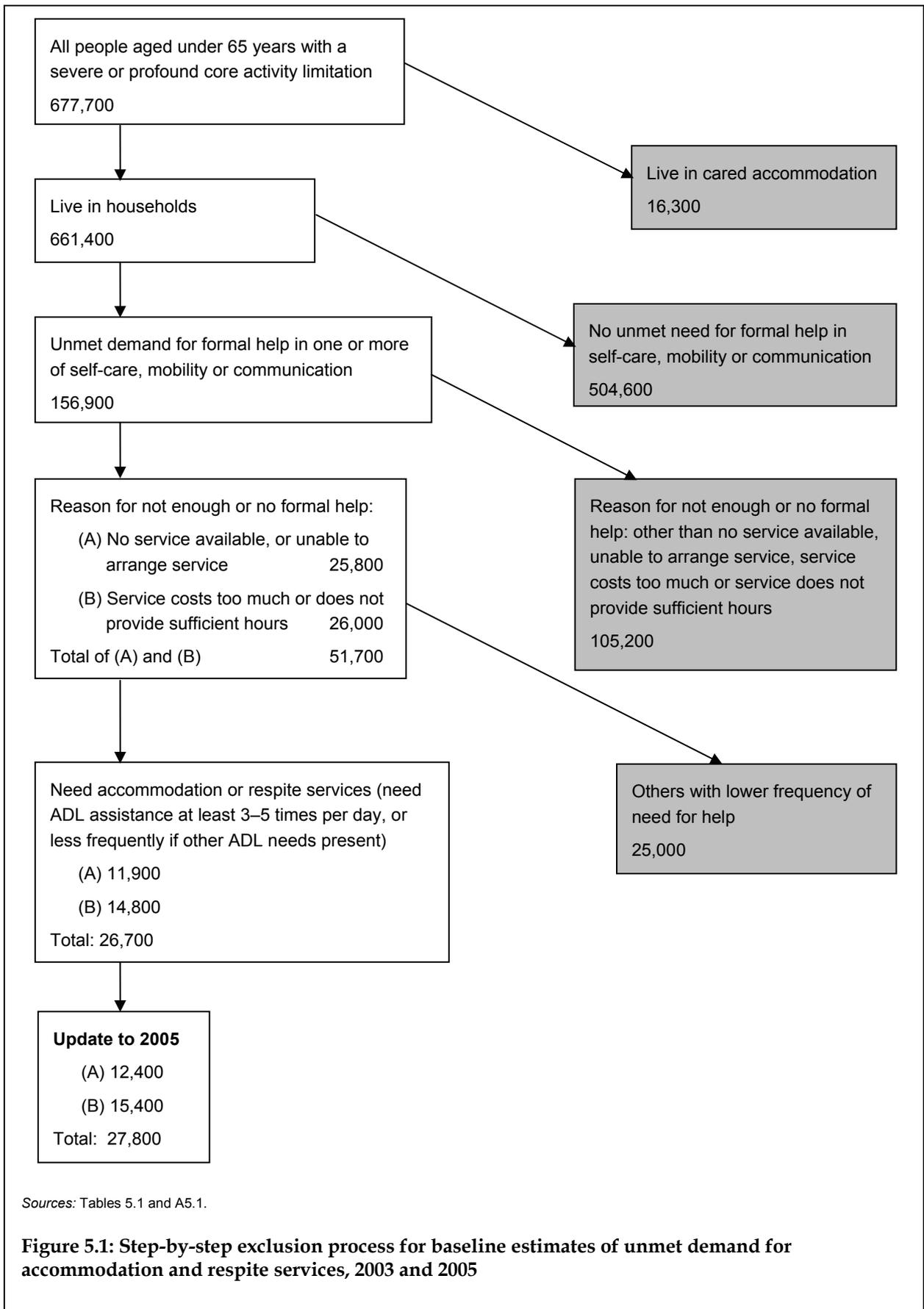
\* These estimates have an associated relative standard error of between 25% and 50% and should be used with caution.

\*\* These estimates have an associated relative standard error (RSE) of greater than 50% and are considered too unreliable for general use.

**Notes**

- (a) Analysis was restricted to people aged under 65 years with a severe or profound core activity limitation living in households, who reported having an unmet demand for formal assistance with core activities.
- (b) People who need assistance with one ADL at least 3–5 times per day, with two ADLs at least twice daily for one ADL, or with three ADLs at least once daily for one ADL, are considered as candidates for accommodation or respite services.

Sources: AIHW analysis of ABS 2003 Survey of Disability, Ageing and Carers confidentialised unit record file; ABS 2004a.



## 5.3 Community access services: baseline estimates of unmet demand

Community access services (predominantly day activity programs) are services designed to provide opportunities for people with a disability to gain and use their abilities to enjoy their full potential for social independence. These services are mainly used by people who do not attend school, and who are not employed full-time. The purpose of the services is to provide activities for people with a disability, so that they continue to develop, receive stimulation, and experience social interaction and community participation.

The policy assumptions underlying the estimation of unmet demand for community access services are that the target group for these services comprises people with a disability with high-level support needs who:

- are aged 18 or over
- are not in, and not likely to be in, the labor force (including supported employment)
- are not studying or likely to study.

This study continues an assumption used in the 1997 and 2002 study that the provision of day activities should be sufficient to ensure that family carers are not obliged to provide 24-hour care for people with high support needs on a lifelong basis. That is, although people with high-level support needs may still be receiving accommodation support from their families from the time they are 18 years old and have left school, they should not be reliant on their families for the equivalent of day activities (AIHW 1997, 2002).

Figure 5.2 illustrates the process used to estimate unmet demand for community access services and Table 5.2 contains further explanatory data.

In 2003, about 496,400 people with a severe or profound core activity limitation aged 15–64 years were living in households. Of these, 347,000 people were not in the labour force (not employed or looking for a job).

There are three sub-groups of those who were not in the labour force:

- First, 15,300 people reported that they ‘could work with special arrangements, equipment or assistance’. This group will be considered in Section 5.4 – baseline estimates of unmet demand for disability employment services.
- Second, 241,200 people stated that they ‘could not work at all’ for various reasons<sup>3</sup> (Table 5.3); of these, 25,900 people were attending supervised day programs for people with a disability (Table A5.3).
- Third, 90,500 people did not state whether they could work or not, but were not in the labour force for different reasons. Of these, 11,900 people were attending day programs.

For the purpose of estimating unmet demand for community access services, only people in the second and third groups who did not attend day activities were considered. The numbers for these two groups were 215,200 and 78,600 respectively. Further restrictions

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<sup>3</sup> Survey respondents were asked to nominate the main reason they were not looking for work. Possible options were: retired; study or returning to study; own ill health or disability; child care availability or children too young or prefers to look after them; too old; does not need or want work; someone else’s ill health or disability; other family considerations; lacks relevant schooling, training and experience; don’t know; and other.

were imposed to select about 56,800 people who were aged 18–64 years, not studying, who were not looking for a job mainly because of their own illness or disability, and who did not go out as often as they would have liked because of their own illness or condition. The restriction of ‘wanting to go out more’ is imposed simply to ensure that unmet demand is not being inferred among people who do not wish to go out more.

Finally, the group with unmet demand for community access services was limited to only those people who needed at least daily assistance in two or more core activities. The frequency of need for assistance, and the number of core activities in which assistance is needed, among the broader group of 56,800 is shown in Table 5.2.

The baseline estimates of unmet demand for community access services in 2003 were, thus, 5,700 people aged 18–64 years with a severe or profound core activity limitation living in households who:

- were not in the labour force (were not looking for a job) and were reported as ‘could not work at all’
- said the main reason for not looking for a job is their own illness or disability
- were not currently studying
- would have liked to go out more but were prevented from doing so by their illness or condition (that is, they expressed some demand for more activity)
- were not currently attending supervised activity programs for people with a disability
- needed at least daily assistance in two or three of the core activities of self-care, mobility or communication.

Adjusting for population size and age structure, the baseline estimate of unmet demand for community access (day activity) services is projected to be 5,900 people in 2005.

It should be noted that the estimate excludes people attending any kind or frequency of day activity. Some jurisdictions attempt to provide post-school options services to a wider group of 18–20 year olds than other age groups. However, no specific allowance for age has been made here – that is, the same restrictions in terms of need for support have been applied to all people. Both of these factors ensure that the estimate is conservative.



**Table 5.2: Frequency of need for help with core activities, by number of activities in which help is needed among candidates for community access services (day activities), 2003 and 2005 ('000)**

Frequency of need for help	Number of core activities			Total
	One	Two	Three	
<b>2003 survey estimates</b>				
At least 1/day for two or more ADLs	**—	*5.5	**0.2	*5.7
Other lower frequencies	30.1	19.3	**0.9	50.3
<b>Total</b>	<b>30.1</b>	<b>24.8</b>	<b>**1.1</b>	<b>56.0</b>
<b>2005 update (for population growth)</b>				
At least 1/day for two or more ADLs	**—	*5.7	**0.2	*5.9
Other lower frequencies	31.4	20.1	**1.0	52.5
<b>Total</b>	<b>31.4</b>	<b>25.8</b>	<b>**1.1</b>	<b>58.4</b>

\* These estimates have an associated relative standard error of between 25% and 50% and should be used with caution.

\*\* These estimates have an associated relative standard error of greater than 50% and are considered too unreliable for general use.

Note: Analysis was restricted to people aged 18–64 years with a severe or profound core activity limitation living in households, who could not work and were not studying, were not looking for a job because of their own illness or disability, did not go out as often as they would like because of their illness or condition, and were not attending a supervised activity program for people with disability or older people (day activity).

Sources: AIHW analysis of ABS 2003 Survey of Disability, Ageing and Carers confidentialised unit record file; ABS 2004a.

## 5.4 Disability employment services: baseline estimates of unmet demand

Employment services provide assistance to people with a disability in obtaining and/or retaining paid employment in the open employment market (open employment services), or support or employ people with a disability within the organisation providing the service (supported employment).

### Employment restrictions and need for assistance

Of the 496,400 people aged 15–64 years with a severe or profound core activity limitation living in households, 347,000 people were not in the labour force while 15,100 were unemployed and 134,300 people were employed (Table 5.3).

An employment restriction is determined, in the ABS disability survey, for a person aged 15–64 years with a disability if, because of their disability, they:

- are permanently unable to work
- are restricted in the type of work they can/could do
- need, or would need at least one day a week off work on average
- are restricted in the number of hours they can/could work
- require, or would require an employer to provide, special equipment, modification of the work environment or special arrangements

- need, or would need to be given ongoing assistance or supervision
- would find it difficult to change job or get a better job (ABS 2004a:73).

There appears to be a strong correlation between not being in the labour force or being unemployed, and the severity of restriction and level of need for assistance. Around 80% of people who were not in the labour force had a severe or profound employment restriction (Table 5.3). Severe employment restriction was more common among unemployed people (59%) than employed people (17%). While no one in the labour force reported a profound employment restriction, some 67% (233,600) of people who were not in the labour force had a profound employment restriction.

Of people who were not in the labour force, 71,300 people (21%) were restricted in the type of work they could do; 92,600 (27%) either were restricted in the number of hours they could work or needed time off from work (at least one day per week); and 61,100 (18%) either needed employer-provided equipment and/or special arrangements or ongoing supervision and assistance (Table 5.3).

For people in the labour force, a substantially higher proportion of unemployed people than employed people reported various employment restrictions, such as need for time off work or need for their employer to provide equipment or special arrangements.

Higher proportions of people who were not in the labour force reported support needs for all the non-core activities compared with employed people. Higher proportions of people who were unemployed or who were not in the labour force reported needing assistance with cognition or emotion, mobility and transport compared with employed people.

## **Unmet demand for disability employment services**

The present study uses only one method of the two methods applied in the 2002 unmet need study. The method used in this study (referred to as Method 1 ADL in the 2002 study) relates closely to the CSTDA target group definition, focusing on the need for assistance with self-care, mobility and communication. The method is also in line with the approach used for accommodation and respite and community access services. Some evidence of relatively high support needs is used to include people in the estimate: people are included in the estimate only if they needed at least daily assistance with at least one of the ADL (core) activities (self-care, mobility and communication). The second method used in the 2002 study (Method 2 guidance) focuses more on the need for help with 'cognition and emotion' than on the need for help with the ADL (core) activities. It was agreed in the project proposal that this method would not be used in the present study.

The baseline estimates of unmet demand for employment services focus on two groups of people aged 15–64 years with a severe or profound core activity limitation living in households. Group ADL1 consists of people who:

- were unemployed (that is, looking for either full-time or part-time work)
- were not currently attending supervised activity programs for people with a disability
- needed at least daily support in any of the self-care, mobility or communication activities.

Group ADL2 consists of people who:

- were not in the labour force but were reported as 'could work with special arrangements, equipment, training or assistance'

- gave as their main reason for not looking for a job their own illness or disability
- were not currently attending supervised activity programs for people with a disability
- needed at least daily support in any of the self-care, mobility or communication activities.

Figure 5.2 illustrates the process used to estimate unmet demand for employment services.

In 2003, of the total 496,400 people aged 15–64 years with a severe or profound core activity limitation living in households, 134,300 people were employed. Of these employed people, 13,000 (10%) were also attending day programs. Some of these may have been receiving employment services.

Over 100,000 (76%) employed people were restricted in the type of job they could do and 70,200 (52%) were restricted in the number of hours they could work (Table 5.3). Some needed their employers to provide equipment and/or make special arrangements (23,000, 17%), and/or to provide ongoing supervision or assistance (21,000, 12.8%). Some of these people could need other employment assistance, but are not included in the baseline estimates of unmet demand.

A total of 15,100 people were unemployed, that is, actively looking for work. Of these, 1,400 needed at least daily assistance in any of self-care, mobility and communication activities and did not attend day programs. These 1,400 people comprise Group ADL1 in the baseline estimates of unmet demand for employment services.

Of the total 347,000 people who were not in the labour force, 15,300 stated that they could work with special assistance, such as special arrangements, equipment, training or other assistance. Of these 15,300, around 6,100 people (40%) reported the main reason as their own illness or disability, while 9,200 people reported various other reasons for not looking for work.

The focus then is on the 6,100 people who said that they could work with special assistance and their main reason for not looking for a job is their own illness or disability. Within this group, there were 700 people who needed at least daily assistance in any of the self-care, mobility and communication activities, and did not attend day programs. These 700 people comprised Group ADL2 in the baseline estimates of unmet demand for employment services.

These two groups totalled 2,100 people in 2003. Adjusting for population size and age structure, the baseline estimate of unmet demand for employment services in 2005 is projected to be 2,200 people.

**Table 5.3: People aged 15–64 years with a severe or profound core activity restriction living in households: labour force status, by employment restrictions, severity of employment restriction and requirements to enable workforce participation, 2003**

	Employed		Unemployed		Not in the labour force	
	No. ('000)	%	No. ('000)	%	No. ('000)	%
<b>Age</b>						
15–19	*5.0	*3.8	*2.7	*18.0	22.8	6.6
20–64	129.3	96.2	12.4	82.0	324.1	93.4
15–64	134.3	100.0	15.1	100.0	347.0	100.0
<b>Sex</b>						
Male	69.4	51.7	*7.5	*49.7	150.2	43.3
Female	64.9	48.3	*7.6	*50.3	196.7	56.7
<b>Severity of employment restrictions</b>						
Profoundly restricted	**—	**—	**—	**—	233.6	67.3
Severely restricted	22.4	16.7	*8.9	**58.5	43.5	12.5
Moderately or mildly restricted	90.3	67.3	*5.7	*37.4	48.4	14.0
No employment restriction	21.5	16.0	**0.6	**4.1	21.4	6.2
<b>Employment restrictions<sup>(a)</sup></b>						
Restricted in type of job	102.5	76.3	14.0	92.2	71.3	20.6
Restricted in number of hours	70.2	52.2	*9.5	*62.9	53.1	15.3
Difficulty changing jobs or getting a preferred job	95.2	70.8	13.7	90.3	61.1	17.6
Need for time off from work (at least one day per week)	31.5	23.5	*7.9	*52.4	39.5	11.4
Need for employer-provided equipment and/or special arrangements	23.0	17.1	*7.7	*50.8	35.1	10.1
Need for support person at work or is receiving assistance from a disability job placement program or agency	*9.0	*6.7	*4.0	*26.3	**—	**—
Need for ongoing supervision or assistance	21.3	15.9	*7.1	*47.0	26.0	7.5
<b>Other employer arrangements<sup>(a)</sup></b>						
A special support person to assist/train on the job or provided help from someone at work	*10.3	*7.7	*3.6	*23.8	*10.1	*2.9
Provided special equipment	13.4	10.0	*3.1	*20.2	16.4	4.7
Modified buildings/fittings or provided special/free transport or parking	*5.9	*4.4	*2.5	*16.2	12.6	3.6
Provided training/retraining	*3.7	*2.8	*2.2	*14.7	14.3	4.1
Allocated different duties	*5.6	*4.2	*2.8	*18.3	*10.3	*3.0
Other	*3.1	*2.3	**1.3	**8.6	*6.3	*1.8

(continued)

**Table 5.3 (continued): People aged 15–64 years with a severe or profound core activity restriction living in households: labour force status, by employment restrictions, severity of employment restriction and requirements to enable workforce participation, 2003**

	Employed		Unemployed		Not in the labour force	
	No. ('000)	%	No. ('000)	%	No. ('000)	%
<b>How often attended supervised activity program for disability</b>						
Not applicable	*6.4	*4.8	**0.3	**2.2	*5.0	*1.4
Does not attend	114.9	85.5	12.1	79.9	301.4	86.9
5 days a week or more	**0.6	**0.5	**0.6	**4.0	*6.2	*1.8
3–4 days a week	**_	**_	**_	**_	*4.1	*1.2
1–2 days a week	*7.4	*5.5	**_	**_	16.7	4.8
One day a fortnight or less	*5.0	*3.7	**2.1	**14.0	13.5	3.9
<b>Total attended</b>	<b>13.0</b>	<b>9.7</b>	<b>*2.7</b>	<b>18.0</b>	<b>40.5</b>	<b>11.7</b>
<b>Need for assistance with core and non-core activities<sup>(b)</sup></b>						
Self-care	59.9	44.6	*5.7	*37.8	173.3	49.9
Mobility	91.9	68.4	12.1	80.0	283.6	81.7
Communication	12.1	9.0	**2.1	**14.1	38.0	11.0
Cognition or emotion	41.1	30.6	*10.4	*68.6	154.3	44.5
Health care	58.9	43.8	*5.5	*36.0	181.4	52.3
Housework	57.8	43.0	*4.6	*30.2	197.3	56.9
Property maintenance	65.4	48.7	*8.2	*54.2	204.9	59.1
Paperwork	17.6	13.1	*5.7	*38.0	103.2	29.7
Meal preparation	16.3	12.1	**2.0	**13.3	97.8	28.2
Transport	53.2	39.6	*8.1	*53.6	207.0	59.7
<b>Total</b>	<b>134.3</b>	<b>100.0</b>	<b>15.1</b>	<b>100.0</b>	<b>347.0</b>	<b>100.0</b>

\* These estimates have an associated relative standard error of between 25% and 50% and should be used with caution.

\*\* These estimates have an associated relative standard error of greater than 50% and are considered too unreliable for general use.

**Notes**

- (a) Totals may not be equal to the sum of the components, as questions on employment restrictions and arrangements were asked separately in the survey.
- (b) Total may be less than sum of the number of people needing assistance with each activity type, as people may need help with more than one activity.

Source: AIHW analysis of ABS 2003 Survey of Disability, Ageing and Carers confidentialised unit record file.

## 5.5 Consolidating the population estimates of unmet demand

Previous sections of this chapter provided population baseline estimates of unmet demand for accommodation and respite, community access and employment services, based on the data from the 2003 ABS Survey of Disability, Ageing and Carers and updated to 2005 using ABS estimated resident population data. This section presents consolidated population estimates of unmet demand, which are arrived at using a process that consists of the following steps:

- CSTDA NMDS data are used to estimate changes in the number of service users between 2003–04 and 2004–05 for specific service types.
- The baseline estimates of unmet demand in 2005 are adjusted by subtracting the increases in service users (that is, adjusting for increased service supply) between 2003–04 and 2004–05.
- The resulting estimates of unmet demand are then compared, to check orders of magnitude, with the information available in some states on unmet demand as recorded on their administrative systems.

Detailed discussions of the estimate of unmet demand for specific service types are explained separately for each service type in the following sections. Notable changes in the population baseline estimates of unmet demand between 1998 and 2003 are also briefly reviewed.

### Accommodation and respite services

Comparative analysis of the 1998 and 2003 disability survey data shows that the number of people aged 0–64 years with a severe or profound core activity limitation increased from 656,100 in 1998 to 677,700 in 2003. Within this group, those living in cared accommodation declined from 20,100 to 16,300, while those in households increased from 636,000 to 661,400—an increase of 25,400 people or 4% (Figure 5.1; AIHW 2002:Figure 6.1).

The population baseline estimates of unmet demand for accommodation and respite services increased by 27% from 21,000 people in 1998 to 26,700 people in 2003, largely due to the increase of people reporting ‘service costs too much or does not provide sufficient hours’ (Table 5.4).

When adjusted for population growth, the population baseline estimate of unmet demand for accommodation and respite services in 2005 is 27,800 people (Figure 5.1 and Table 5.4).

The net gain in supply of accommodation services between 2003–04 and 2004–05 was 612 people (Table 3.1). This comprises an increase in community-based accommodation support services, especially in-home accommodation support and attendant care/personal care, offset by a decline in services received in institutional settings, including group homes. These changes are in line with the trend away from providing care for people with a disability in institutional settings.

Between 2003–04 and 2004–05, users of respite services increased from 20,547 to 23,951 (an increase of 3,404 users), reflecting increases in all the service sub-categories except ‘host family respite/peer support respite’ (Table 3.1). This figure of 3,404 people is added to the net gain in users of accommodation services (612 people) to give the total increase in supply

of accommodation and respite services—4,016 people. This is consistent with the approach described in Chapter 2, to treat these services as somewhat substitutable and on the same spectrum of needs.

The estimate of unmet demand for accommodation and respite services is thus 23,800 people (calculated by subtracting the increase in supply from the baseline estimate). Comparing this with the final estimate of the 2002 study (12,500 people in 2002) suggests an increase of 11,300 people (Table 5.4). This may be partly attributable to ongoing deinstitutionalisation. More people with high support needs are staying in the community (AIHW 2001).

**Table 5.4: Changes in the estimates of unmet demand for disability services, 1998 (2001) and 2003 (2005)**

<b>Baseline estimates of unmet demand</b>	<b>1998 ('000)</b>	<b>2003 ('000)</b>	<b>Change ('000)</b>
Accommodation and respite	21.0	26.7	*+5.7
No service available, or unable to arrange service	10.9	11.9	**+1.0
Service costs too much or does not provide sufficient hours	10.1	14.8	*+4.7
Community access	9.9	*5.7	*-4.2
Disability employment	*6.8 <sup>(a)</sup>	*2.1	*-4.7
	<b>2001 update</b>	<b>2005 update</b>	<b>Change</b>
Adjusted for population growth			
Accommodation and respite	22.2	27.8	*+5.6
Community access	10.6	*5.9	*-4.7
Disability employment <sup>(a)</sup>	*7.3 <sup>(a)</sup>	*2.2	*-5.1
	<b>2001</b>	<b>2005</b>	<b>Change</b>
Adjusted for increase in service supply (final estimates)			
Accommodation and respite	12.5	23.8	+11.3
Community access	*8.2	*3.7	*-4.5
Disability employment	*5.4 <sup>(a)</sup>	**1.7	*-3.7

\* These estimates have an associated relative standard error of between 25% and 50% and should be used with caution.

\*\* These estimates have an associated relative standard error of greater than 50% and are considered too unreliable for general use.

(a) Estimates of unmet demand for disability employment services based on Method 1 ADL, as used in the 2002 study (see Section 5.4).

Source: Figures 5.1 and 5.2; AIHW 2002.

The final step is to check the estimate of 23,800 against unmet demand as indicated by jurisdiction data on people waiting for services. Unmet demand data at state level were converted to national equivalent estimates of unmet demand. This was done by multiplying the number of people requesting a specific service type (as recorded in the jurisdiction data on applicants waiting for services) by the inverse of the total number of people aged under 65 years with a severe or profound core activity limitation in the state expressed as a proportion of the number of people nationally aged under 65 years with a severe or profound core activity limitation (Table 5.5). For example, the number of people waiting for accommodation services in South Australia was 1,678 in 2005 and the number of people aged under 65 years with a severe or profound core activity limitation in South Australia in 2005 was 53,300, or 7.5% of the national total (706,600). Hence, the national equivalent estimate of unmet demand for accommodation services in South Australia was 22,400 people (1,678 divided by 0.075).

National age- and sex-specific rates of severe or profound core activity limitation, rather than jurisdiction rates, were applied to the population data for each jurisdiction to estimate the number of people aged under 65 years with a severe or profound core activity limitation for that jurisdiction. This was done because the relatively small survey sample size for some states and territories means that estimated rates for those jurisdictions would have large sampling errors.

Jurisdiction data on unmet demand are incomplete, inconsistent and subject to various data issues and therefore do not provide a solid basis to validate and confirm the estimates of unmet demand (Chapter 4). The national equivalent estimates of unmet demand for particular service types vary substantially across the states where information is available (Table 5.7). The estimates derived are likely to be lower than the actual unmet demand as they are based on data from jurisdictions' registers that may be not the sole tools used to manage demand.

The national equivalent estimate of unmet demand for accommodation support and respite services in South Australia (28,600) is greater than the figure of 23,800 (Table 5.5). Data for South Australia may over-estimate the number of people with unmet demand due to double counting of people who have applied for both accommodation and respite services. The national equivalent estimate of unmet demand for accommodation services for Victoria is 17,400 people; this figure may include some double-counting of people who have applied for both shared supported accommodation and HomeFirst (see Table 4.2). No information is available on unmet demand for respite services in Victoria, which are coordinated at local level in that state. If the ratio of unmet demand for respite services to accommodation services for Victoria is assumed to be the same as the ratio for South Australia (that is, approximately 1:3.5), the combined national equivalent estimate of unmet demand for accommodation and respite services in Victoria would be 22,200 people, which is close to the figure of 23,800. This comparison with data available in Victoria and South Australia does not suggest that the estimate of 23,800 people with unmet demand for accommodation and respite service is unreasonable.

The national equivalent estimate of unmet demand for Western Australia is very low – 3,300 people for accommodation and respite – as it is based only on known demand for individual funding (see Chapter 4). The national equivalent estimate for Tasmania (11,900) is substantially lower than those based on South Australian and Victorian data; it is based only on unmet demand for accommodation support, as data on unmet demand for respite services are not collected in Tasmania.

Support for the conservative nature of the estimate of 23,800 people with unmet demand for accommodation and respite services comes from national data on the need for respite care. In 2003, around 16,700 primary carers of people with a disability aged under 65 years had never received respite but needed it, and 18,800 had received it at some stage but needed more (AIHW 2005a:Table 5.23). This suggests possible unmet demand for respite services alone of up to 35,500 people.

Finally, the relative survey sampling error of the final estimate of 23,800 people with unmet demand for accommodation and respite services is about 4,000 (17%). Hence, there are about two chances in three that the actual number of people in this category is within the range 19,800 to 27,800 and about 19 chances in 20 that it is within the range 15,900 to 31,700.

**Table 5.5: Consolidated estimates of unmet demand, 2005**

	Baseline estimates of unmet demand, 2005 (Figs 5.1, 5.2)	Increase in supply from 2003–04 to 2004–05	Unmet demand estimate Column C = column A minus column B	Jurisdiction data on applicants waiting services	Cross-check <sup>(a)</sup> (national equivalent demand estimates) (Table 4.2)
Service type	Column A	Column B	Column B	Column D	Column E
<b>Accommodation and respite</b>	27,800	612 (accomm.)	23,800	4,254 accomm.(Vic)	17,400
				194 accomm.(WA)	1,800
				1,678 accomm.(SA)	22,400
				284 accomm. (Tas)	11,900
		3,404 (respite)		150 respite (WA)	1,500
			469 respite (SA)	6,300	
<b>Community access<sup>(b)</sup></b>	*5,900	2,232	*3,700	507 (Vic)	2,100
				76 (WA)	800
				533 (SA)	7,100
				70 (Tas)	2,900
<b>Disability employment</b>	*2,200	554	*1,700	N/A	N/A

\* These estimates have an associated relative standard error of between 25% and 50% and should be used with caution.

*Notes*

- (a) The estimates in column E have been derived by multiplying the number of people requesting a specific service type (jurisdiction data on waiting lists) by the inverse of the proportion of the total number of people aged under 65 years with a severe or profound core activity limitation in the jurisdiction. Figures presented are rounded to the nearest 100.
- (b) Community access estimates and supply exclude recreation and holiday programs.

Sources: AIHW analysis of ABS 2003 Survey of Disability, Ageing and Carers confidentialised unit record file; Tables 3.1, 4.2.

## Community access services

Analysis of CSTDA NMDS data shows that between 2003–04 and 2004–05, the total number of users of community access services decreased from 47,636 to 44,166, a decrease of 3,470 service users (Table 3.1). However, this was mainly attributable to a decrease of 5,809 users of recreation/holiday programs, which was partially offset by an increase of 2,232 users of day activity programs: learning and life skills development and other community access services.

Community access services are mainly day activity programs. Recreation/holiday programs had been classified under community support services before the redevelopment of the CSTDA NMDS that was implemented in 2002. The AIHW project team has decided to exclude recreation/holiday programs from the estimate of changes in supply of community access services in the process of consolidating the estimate of unmet demand. This decision was made in order to: focus the estimate on unmet need for regular services that meet people’s ongoing need for meaningful day activities (rather than more irregular recreation/holiday activities); maximise consistency with the method used to estimate

unmet demand for community access services in the 2001 unmet needs study; and ensure a conservative approach to the estimation of unmet demand. Applying this exclusion, the estimated increase in the supply of community access service is 2,232 people between 2003–04 and 2004–05 (Tables 3.1 and 5.5).

As discussed in Section 5.3, the approach to estimating unmet demand for community access services focuses on people who are not in, and not likely to be in, the labour force, and who are not studying or likely to study. Between 1998 and 2003, there was an increase of 25,300 people aged 15–64 years with a severe or profound core activity limitation who were not in the labour force. The increase was mainly made up of 18,900 people who could not work and 4,600 people with other reasons for not seeking a job, while some 1,900 people stated that they could work with special assistance (Table 5.6).

Despite this increase in the number of people who were not in the labour force, there was a decrease in the population baseline estimate of unmet demand for community access services, from 9,900 people in 1998 to 5,700 people in 2003 (a decline of 4,200). Adjusted for population growth, the baseline estimate of unmet demand for community access services in 2005 is 5,900 people (Figure 5.2 and Table 5.5).

A close examination of the disability survey data suggested that the decline in the estimate of unmet demand may be attributable to an increase in attendance at day activities by people with a disability. Between 1998 and 2003, there was an increase of 9,100 people attending day activities among those who could not work (6,800) and others who were not in the labour force (2,300) (Table 5.6).

The resulting estimate of unmet demand for community access services is thus 3,700 people (calculated by subtracting the increase in supply from the baseline estimate), reflecting a decrease of about 4,500 people from the previous estimate of 8,200 people in 2001 (Table 5.4).

The final step is to check the estimate of 3,700 people against unmet demand recorded in jurisdictional registers. The national equivalent estimate of unmet demand varies across the four jurisdictions with available data. However, the estimate derived from analysis of the population survey lies within the range of estimates produced using state administrative data. It can therefore be concluded that the estimate of unmet demand for community access services of 3,700 people is reasonable, and in the lower end of the range of unmet demand, given the conservative approach taken to the derivation process. The estimate excludes people attending any kind or frequency of day activity programs, some of whom may have under-met demand for community access services (Section 5.3). This ensures that the estimate is conservative.

The estimate appears to indicate a decline in unmet demand for community access services between the 2002 study and the present study (Table 5.4). This may be partly explained by the increase of 9,100 people attending day activities among those who could not work and those who reported other reasons for not being in the labour force, reflecting increased supply of day activity programs (Table 5.6).

Finally, the relative standard error of the survey estimate of 3,700 people with unmet demand for community access services is about 1,500 (40%). Therefore, there are about two chances in three that the actual number of people in this category is within the range 2,200 to 5,200 and about 19 chances in 20 that it is within the range of less than 1,000 to 6,600.

**Table 5.6: People aged 15–64 years with a severe or profound core activity limitation in households: labour force status and attendance of day activities for people with a disability, 1998 and 2003**

Labour force status	1998 (’000)	2003 (’000)	Changes 1998–2003	
			’000	% of 1998 population
<b>Employed</b>	<b>151.9</b>	<b>134.3</b>	<b>-17.6</b>	<b>-11.6</b>
Attend day activity	9.5	13.0	*3.5	36.8
Do not attend	142.4	114.9	-27.5	-19.3
<b>Unemployed</b>	<b>18.7</b>	<b>15.1</b>	<b>*-3.6</b>	<b>-19.3</b>
Attend day activity	**0.8	*2.7	**1.9	237.5
Do not attend	17.9	12.1	*-5.8	-32.4
<b>Not in the labour force</b>	<b>321.7</b>	<b>347.0</b>	<b>25.3</b>	<b>7.9</b>
Could work with special assistance	13.4	15.3	**1.9	14.2
Main reasons not looking for a job				
Own illness or disability	*8.3	*6.1	*-2.2	-26.0
Other reasons	*5.2	*9.1	*3.9	75.0
Could not work	222.3	241.2	18.9	8.5
Attend day activity	19.1	25.9	*6.8	35.6
Do not attend	203.2	215.2	12.0	5.9
Other not in the labour force	85.9	90.5	*4.6	5.4
Attend day activity	9.6	11.9	*2.3	24.0
Do not attend	76.3	78.6	*2.3	3.0
<b>Total</b>	<b>492.3</b>	<b>496.4</b>	<b>*4.1</b>	<b>0.8</b>

\* These estimates have an associated relative standard error of between 25% and 50% and should be used with caution.

\*\* These estimates have an associated relative standard error of greater than 50% and are considered too unreliable for general use.

Sources: AIHW analysis of ABS 2003 Survey of Disability, Ageing and Carers confidentialised unit record file; Figure 5.2.

## Disability employment services

Disability employment services focus on people who are in the labour force and those who are not in the labour force but could work with special assistance (Section 5.4).

Analysis of ABS disability survey data indicates that there was a decline of 21,200 people aged 15–64 years with a severe or profound core activity limitation who were in the labour force between 1998 and 2003. This comprises a decrease of 17,600 employed people and 3,600 unemployed people (Table 5.6). Most of the decrease in the number of employed people between the two surveys was in the age groups 50 years and over (Table 5.7).

While there was a small increase over this period in the number of people who were not in the labour force but could work with special assistance (1,900 people), there was an increase of 3,900 people not looking for a job for various reasons (other than their own illness or

disability), which was partially offset by a decrease of 2,200 people who were not seeking a job because of their disability or illness (Table 5.6).

**Table 5.7: People aged 15–64 years with a severe or profound core activity limitation who were employed, by age, 1998 and 2003**

	1998 '000	2003 '000	Change between 1998 and 2003 <sup>(a)</sup>	
			'000	%
15–19	*7.0	*5.0		
20–24	*8.8	11.4	*4.4	*61.9
25–29	*10.2	*8.9	**0.1	**1.5
30–34	16.6	11.7	**1.5	**14.6
35–39	19.6	15.0	**–1.5	**–9.3
40–44	21.9	20.0	**1.3	**6.7
45–49	27.0	23.5	**1.5	**7.0
50–54	20.4	18.1	*–8.8	*–32.8
55–59	14.0	11.0	*–9.4	*–46.0
60–64	*6.3	*8.7	*–5.4	*–38.1
<b>Total</b>	<b>151.9</b>	<b>134.3</b>		

\* These estimates have an associated relative standard error of between 25% and 50% and should be used with caution.

\*\* These estimates have an associated relative standard error of greater than 50% and are considered too unreliable for general use.

(a) In the absence of longitudinal data, it is possible to use data from a sequence of cross-sectional surveys to construct what is referred to as 'synthetic age cohorts'. For example, a comparison is made between people who were aged 15–19 years in the 1998 Survey of Disability, Ageing and Carers and people aged 20–24 years in the 2003 survey. These can then be used to analyse how the circumstances of cohorts change as they move through a statistically constructed life cycle.

Source: AIHW analysis of ABS 2003 Survey of Disability, Ageing and Carers confidentialised unit record file.

These changes indicate a reduction in the number of people with a severe or profound core activity limitation who potentially need employment services. The population baseline estimate of unmet demand for disability employment services declined from 6,800 people in 1998 to 2,100 people in 2003. Adjusted for population growth, the population baseline estimate of unmet demand in 2005 is 2,200 people (Figure 5.2 and Table 5.4).

Analysis of CSTDA NMDS data shows that the net gain in employment services over 2003–04 and 2004–05 was 554 people, which includes an increase of 789 people in open employment and a decrease of 487 people in supported employment services or open and supported employment services.

The estimate of unmet demand for employment services in 2005 is thus 1,700 people (calculated by subtracting the increase in supply from the baseline estimate), a decrease of 3,700 people from the previous estimate of 5,400 in 2001 (Table 5.4). However, the survey estimate of 1,700 people with unmet demand is subject to a very high relative standard error (55%) and is considered too unreliable for general use.

The Australian Government does not have centralised data on applicants waiting for disability employment services, which might be useful for checking the order of magnitude of unmet demand. Information provided by DEWR states that, in October 2006, there were about 2,000 people who had been or were being assessed for services provided in the Disability Employment Network capped stream, who had not yet commenced assistance;

there were about 1,000 places vacant nationally (Section 4.2). This suggests a possible unmet demand of around 1,000 people. However, DEWR reports that there is currently no apparent significant unmet need in either the capped or uncapped Disability Employment Network steams.

The very low estimate in 2005 appears to indicate a decline between 2001 and 2005 (based on baseline estimates using 1998 and 2003 survey data respectively) in the number of people with unmet demand for disability employment services. However, it may not be prudent to interpret this as an indication of no substantial unmet demand for disability employment services. Factors that should be considered in the interpretation of the estimate of unmet demand for employment services include:

- The decline in the baseline estimate of unmet demand for employment services between 1998 and 2003 partly reflects the decrease in the number of people with a severe or profound core activity limitation who were in the labour force (a decline of 21,200 people) and may potentially need disability employment services (Table 5.6).
- Although the baseline estimate of unmet demand in 2003 is updated to 2005, it is adjusted for population growth only. Other factors may impact on unmet demand, including recent changes in welfare policy and disability employment services administered by the Australian Government (see Chapter 7 discussions).

## 5.6 Summary

The estimation of unmet demand for disability services is a complex task. This study has used two national data sources to conduct the estimation. Population disability survey data have been used for baseline estimates of unmet demand for accommodation and respite, community access (day activity programs) and disability employment services. These baseline estimates are adjusted for increases in service supply based on data from the CSTDA NMDS. The resulting estimates of unmet demand are then compared, to check orders of magnitude, with information available in some jurisdictions on unmet demand on their administrative systems. Changes in population baseline estimates of unmet demand between 2001 (based on 1998 survey data) and 2005 (based on 2003 survey data) are briefly reviewed to assist in verifying and understanding current estimates of unmet demand.

### Accommodation and respite services

The final estimate of unmet demand for accommodation and respite services is 23,800 people (Table 5.7). Considering survey sampling errors, there are about two chances in three that the actual number of people in this category is within the range 19,800 to 27,800 and about 19 chances in 20 that it is within the range 15,900 to 31,700.

Compared with the final estimate of the 2002 study (12,500 people), the estimate of 23,800 people suggests an increase of 11,300 people with unmet demand for accommodation and respite services between 2001 and 2005 (Table 5.4). According to the 2003 population survey, the majority of the extra unmet demand may be attributed to services being unable to provide enough hours, or costing too much. An increasing number of people with high support needs who are living in the community, as opposed to institutions, may have also contributed to a rise in the need and unmet demand for these services.

## **Community access services**

The final estimate of unmet demand for community access services is 3,700 people/places (Table 5.5). The estimate is subject to a relative standard error of 40% (1,500). Therefore, there are about two chances in three that the actual number of people in this category is within the range 2,200 to 5,200 and about 19 chances in 20 that it is within the range of less than 1,000 to 6,600.

The estimate excludes people attending any kind or frequency of day activity programs to ensure that the estimate is conservative (Section 5.3). In other words, the estimate included no allowance for 'under-met' demand.

The estimate appears to indicate a decline in unmet demand for community access services between 2001 and 2005 (Table 5.4). This may be partly explained by the increase of about 9,000 people attending day activities among those who could not work (6,800) and others who were not in the labour force, reflecting increased supply of day activity programs (Table 5.6).

## **Disability employment services**

The estimate of unmet demand for employment services in 2005 is 1,700 people. The estimate is subject to a very high relative standard error (55%) and is considered too unreliable for general use.

The very low estimate in 2005 appears to suggest a decline between 2001 (1998) and 2005 (2003) in the number of people with unmet demand. However, this should not be interpreted as an indication of no substantial unmet demand for disability employment services. The decline in the baseline estimate of unmet demand for employment services between 1998 and 2003 is partly due to the decrease in the number of people with a severe or profound core activity limitation who were in the labour force (Table 5.6). The fact that decline was concentrated in older age groups, suggests that retirement of older workers could also be a significant factor.

Although the baseline estimate of unmet demand in 2003 is updated to 2005, it is adjusted for population growth only. Other factors may have impacted on unmet demand (see Chapter 7 discussions). Recent changes in Australian Government welfare policy may bring more people with a disability into the labour force and increase the unmet demand for disability employment services.