# 3 Recipients of CSDA services

## 3.1 Age and sex

Males were 58% of recipients of CSDA-funded services (37,275 of 64,432, Table 3.1). The number of recipients in each five-year age group varied substantially (Figure 1.1, Table A.2). The 25–29 and 30–34 year age groups comprised the highest numbers of recipients (8,517 and 8,466 respectively or 13.2% each) and the 65–69 year age group the lowest (863 or 1.3%). Though the shape of the age distribution was similar for each sex, there were greater numbers of males for most age groups. This difference was proportionally greatest for the 5–9 year age group (4% of males compared to 3.2% of females) and in general diminished as age increased.

## 3.2 Disability type

The disability type with the most effect on the service recipient's everyday life was reported as the 'primary' disability type. Respondents were asked to report all 'other significant' disability types causing difficulty.

Of the 64,432 service recipients on the 'snapshot' day 43,378 (66.8%) were reported as having a primary disability type of 'intellectual' (Table 3.1). This proportion was similar for both sexes.

The next most frequently reported primary disability types were physical disability (7,718 or 11.6%), psychiatric disability (3,782 or 6.1%) and acquired brain injury (1,935 or 3.6%). The category of 'deafblind' was the least frequently reported, being recorded for 156 (0.2%) service recipients.

The following primary disability types showed differences between male and female service recipients. There was a higher number and proportion of males reported with autism, specific learning/ADD, speech disability, acquired brain injury and psychiatric disability relative to females. Conversely, a lower number and proportion of males than females reported a vision disability type.

The distribution of primary disability type also varied between age groups. Developmental delay was reported as 'primary' for 981 (44.7%) of those service recipients aged 0 to 4 years, and for 155 (3.5%) of those aged 5 to 14. This disability type category was intended only to apply to 0–5 year olds, and made up 0.2% or less of older age groups.

For those service recipients aged 15 years or more, the proportion with intellectual disability as the primary type decreased with increasing age (from 8,205 or 73.1% of those aged 15–24 years to 1,678 or 44.6% of those aged 60 years or more). Corresponding increases occur in the categories of physical disability (from 1,267 or 11.3% of those aged 15–24 years to 629 or 16.7% of those aged 60 years or more), and vision disability (from 154 or 1.4% of those aged 15–24 years to 785 or 20.9% of those aged 60 years or more). Psychiatric disability had a reported peak of 825 or 7.5% in the 45–59 age group (the 25–44 age group was close with 2,288 or 7.3%).

Table 3.1: Recipients of CSDA-funded services, sex and primary disability type by age group, Commonwealth, States and Territories, 1997

Primary disability			Age	e group (yea	ars)			Total		
type	0–4	5–14	15–24	25-44	45–59	60+ No	t stated	No.	%	
Males										
Developmental delay	575	92	3	9	2	3	7	691	1.9	
Intellectual	150	1,202	4,827	13,410	4,276	920	97	24,882	66.8	
Specific learning/ADD	28	123	87	64	10	1	0	313	0.8	
Autism	103	258	325	346	27	1	4	1,064	2.9	
Physical	217	770	678	1,646	729	280	22	4,342	11.6	
Acquired brain injury	24	46	178	659	346	82	14	1,349	3.6	
Deafblind	3	4	14	36	11	11	1	80	0.2	
Vision	32	28	73	207	120	247	6	713	1.9	
Hearing	47	37	61	120	39	43	1	348	0.9	
Speech	102	46	9	14	5	3	0	179	0.5	
Psychiatric	3	6	257	1,410	479	121	14	2,290	6.1	
Neurological	78	112	126	277	202	67	11	873	2.3	
Not stated	7	26	13	64	20	14	7	151	0.4	
Total males	1,369	2,750	6,651	18,262	6,266	1,793	184	37,275	100.0	
Females										
Developmental delay	404	61	0	5	4	1	4	479	1.8	
Intellectual	88	774	3,369	10,068	3,313	756	67	18,435	68.2	
Specific learning/ADD	7	39	26	22	4	0	0	98	0.4	
Autism	22	60	85	92	5	0	1	265	1.0	
Physical	154	508	584	1,210	540	349	14	3,359	12.4	
Acquired brain injury	11	36	75	283	130	41	4	580	2.1	
Deafblind	3	4	11	42	4	10	2	76	0.3	
Vision	26	30	81	132	96	530	2	897	3.3	
Hearing	26	26	40	88	32	46	1	259	1.0	
Speech	30	22	4	7	6	1	1	71	0.3	
Psychiatric	2	1	166	871	346	89	10	1,485	5.5	
Neurological	44	110	104	285	213	112	14	882	3.3	
Not stated	6	13	7	51	16	23	18	134	0.5	
Total females	823	1,684	4,552	13,156	4,709	1,958	138	27,020	100.0	
Recipients										
Developmental delay	981	155	3	14	6	4	11	1,174	1.8	
Intellectual	238	1,977	8,205	23,507	7,602	1,678	171	43,378	67.3	
Specific learning/ADD	35	162	113	86	14	1	0	411	0.6	
Autism	125	318	410	439	32	1	5	1,330	2.1	
Physical	371	1,281	1,267	2,862	1,270	629	38	7,718	12.0	
Acquired brain injury	35	82	254	945	477	124	18	1,935	3.0	
Deafblind	6	8	25	78	15	21	3	156	0.2	
Vision	58	58	154	339	216	785	9	1,619	2.5	
Hearing	73	63	101	209	71	89	2	608	0.9	
Speech	132	68	13	21	11	4	1	250	0.4	
Psychiatric	5	7	423	2,288	825	210	24	3,782	5.9	
Neurological	122	222	230	563	415	179	25	1,756	2.7	
Not stated	13	39	20	116	37	37	53	315	0.5	
Total recipients	2,194	4,440	11,218	31,467	10,991	3,762	360	64,432	100.0	
Notes			-					•		

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

<sup>2.</sup> Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/ alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

The CSDA service type received varied with primary disability type (Table 3.2, see Table A.3 for percentages of total for service type). The service types most frequently reported as being received on the 'snapshot' day are summarised for each primary disability type in Box 3.1.

- Supported employment services and open employment services were significant service types for recipients with a number of primary disability types.
- Group homes were a frequently reported service type for many recipients with intellectual disability, physical disability, autism, or who were deafblind.
- Continuing education/independent living training/adult training centres were important service types for all the latter disability types, as well as for recipients with vision and hearing disabilities as primary disability types.
- Institutions/large residentials were important for those with acquired brain injury, intellectual disability or physical disability.
- Early childhood intervention services were important for many recipients with developmental delay, a specific learning disability/attention deficit disorder (ADD), a speech disability or autism.

 $\begin{tabular}{ll} Table 3.2: Recipients of CSDA-funded services, service type by primary disability type, Commonwealth, States and Territories, 1997 \end{tabular}$ 

	Develop- mental	Intellec-	Specific learning/			Acquired brain	
Service type	delay	tual	ADD	Autism	Physical		Deafblind
Accommodation support							
Institutions/large residentials	12	4,757	6	48	593	323	4
Hostels	1	821	1	15	153	26	1
Group homes	13	7,049	7	204	627	124	28
Attendant care	1	83	3	4	415	30	0
Outreach/other 'in-home'/drop-in support	7	1,768	8	39	709	101	6
Alternative family placement	0	49	0	3	7	7	0
Accommodation support: other/not stated	0	201	1	8	32	8	0
Community support							
Early childhood intervention	710	220	42	124	263	19	5
Recreation/holiday programs	4	852	26	44	145	40	8
Therapy (PT OT ST)	91	1,201	40	36	855	45	11
Family/individual case practice/management	48	1,243	17	58	209	227	26
Behaviour/specialist intervention	2	412	3	29	14	3	0
Counselling: individual/family/group	4	83	3	18	50	13	1
Brokerage/direct funding	7	378	12	55	112	28	1
Mutual support/self-help groups	0	14	1	0	12	6	1
Resource teams/regional teams	188	749	25	52	262	32	0
Community support: other or not stated	20	180	27	18	179	4	0
Community access							
Continuing education/independent living training/adult training centre	6	6,135	10	193	547	167	23
Post-school options/social and community support/community access	0	1,464	13	87	239	44	7
Community access and day programs: other/not stated	5	1,621	11	27	254	69	7
Respite							
Own home respite	10	127	4	14	124	22	4
Respite: centre/respite home	4	522	7	45	178	31	3
Respite: host family/peer support	10	66	4	11	21	3	0
Respite: other/flexible/combination	13	224	7	16	145	18	2
Employment							
Open employment	0	2,445	22	23	596	186	6
Supported employment	0	10,342	108	149	838	340	11
Open and supported employment	0	289	3	1	39	13	0
Other employment	0	7	0	0	5	0	0
Service type not stated	18	76	0	9	95	6	1
Total	1,174	43,378	411	1,330	7,718	1,935	156

(continued)

Table 3.2 (continued): Recipients of CSDA-funded services, service type by primary disability type, Commonwealth, States and Territories, 1997

Service type	Vision	Hearing	Speech	Psychi- atric	Neuro- logical	Not stated	Total
Accommodation support							
Institutions/large residentials	3	5	5	48	150	11	5,965
Hostels	13	17	0	99	57	6	1,210
Group homes	38	26	8	328	42	33	8,527
Attendant care	0	1	1	2	47	1	588
Outreach/other 'in-home'/drop-in support	29	12	3	567	70	13	3,332
Alternative family placement	0	1	0	0	0	0	67
Accommodation support: other/not stated	4	0	0	202	1	3	460
Community support Early childhood intervention	48	63	135	2	92	18	1,741
Recreation/holiday programs	348	6	3	78	25	19	1,598
Therapy (PT OT ST)	103	29	22	1	182	16	2,632
Family/individual case practice/management	154	32	3	24	181	18	2,240
Behaviour/specialist intervention	4	0	0	11	2	5	485
Counselling: individual/family/group	6	0	2	1	21	1	203
Brokerage/direct funding	4	4	0	32	14	8	655
Mutual support/self-help groups	9	2	1	169	10	13	238
Resource teams/regional teams	6	6	29	8	54	3	1,414
Community support: other or not stated	0	2	7	2	35	0	474
Community access Continuing education/independent living training/adult training centre	354	103	1	80	84	73	7,776
Post-school options/social and community support/community access	8	5	0	24	87	0	1,978
Community access and day programs: other/not stated	51	14	5	609	73	33	2,779
Respite							
Own home respite	3	1	2	37	21	4	373
Respite: centre/respite home	51	3	0	45	27	6	922
Respite: host family/peer support	1	5	2	2	7	1	133
Respite: other/flexible/combination	6	0	1	5	22	0	459
Employment							
Open employment	154	150	8	806	145	0	4,541
Supported employment	219	115	11	564	191	18	12,906
Open and supported employment	2	3	0	36	7	0	393
Other employment	0	1	0	0	0	0	13
Service type not stated Total	1 <b>1,619</b>	2 <b>608</b>	1 <b>250</b>	0 <b>3,782</b>	109 <b>1,756</b>	12 <b>315</b>	330 <b>64,432</b>

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

<sup>2.</sup> Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

Box 3.1: Service types for which a CSDA service was most frequently received by primary disability type on a 1997 'snapshot' day

Developmental delay Early childhood intervention

Resource teams/regional teams

Intellectual disability Supported employment

**Group homes** 

Continuing education/Independent living training (ILT)/adult

training centre

Institution/large residential

Open employment

Specific learning/ADD Supported employment

Early childhood intervention

Autism Group homes,

Continuing education/ILT/adult training centre

Supported employment Early childhood intervention

Physical disability Therapy (PT OT ST)

**Supported Employment** 

Group homes Open employment

Institution/large residential

Acquired brain injury Supported employment

Institution/large residential

Family/individual case practice/management

Open employment

Deafblind Group homes

Family/individual case practice/management Continuing education/ILT/adult training centre

Vision Continuing education/ILT/adult training centre

Recreation/holiday programs Supported employment

Hearing Open employment

Supported employment

Continuing education/ILT/adult training centre

Speech Early childhood intervention

Psychiatric Open employment

Outreach/other 'in-home'/drop-in support

Community access and day program: other/not stated

Supported employment

Neurological Supported employment

Therapy (PT OT ST)

Family/individual case practice/management

All service recipients Supported employment

Group home

Continuing education/ILT/adult training centre

Institution/large residential

Open employment

Source: Table 3.2.

Intellectual disability is the most frequently reported primary disability type for most of the common service types (Box 3.2). Group homes, hostels, post-school options/social and community support/community access, and brokerage/direct funding service types appear focused on recipients with an intellectual or physical disability in the main. Early childhood intervention and family/individual case practice/management service types appear more broadly focused.

Box 3.2: Most frequently reported primary disability types of recipients of CSDA services
by service type on a 1997 'snapshot' day

Supported employment Intellectual, physical, psychiatric Group homes Intellectual, physical, autism Continuing education/ILT/adult training centre Intellectual, physical, vision

Open employment Intellectual, psychiatric, physical, acquired brain

injury, vision, hearing, neurological

Therapy (PT OT ST)

Intellectual, physical, neurological, vision,

developmental delay

Recreation/holiday programs Intellectual, vision, physical, psychiatric,

neurological, autism, acquired brain injury

Post-school options/social and community

support/community access

Intellectual, physical, autism, neurological

Outreach/other 'in-home'/drop-in support Intellectual, psychiatric, physical, acquired brain

injury

Community access and day programs:

other/not stated

Intellectual, psychiatric, physical, neurological

Brokerage/direct funding Intellectual, physical, autism, acquired brain injury

Family/individual case practice/management Intellectual, acquired brain injury, physical,

neurological, vision

Early childhood intervention Developmental delay, physical, intellectual, speech,

autism

Resource teams/regional teams Intellectual, physical, developmental delay, autism

Hostels Intellectual, physical, psychiatric, neurological

 $\it Note:$  Service types with less than 1,000 recipients are excluded here.

Source: Table 3.2.

The proportion of service recipients reporting each primary disability type is different from the proportion reporting all significant disability types (Table 3.3). The category 'intellectual disability' remains the most frequently reported, increasing from 66.8% of service recipients to 74.9% when all disability types reported are considered. The proportion of service recipients who reported 'physical disability' as one of their disabilities was 29.3%, compared with 12.2% of recipients who reported this as their primary disability. While 0.4% of service recipients reported speech disability as their primary disability, 21.5% reported this as one of their disabilities. This indicates that speech and physical disability are often associated with another reported primary disability of service recipients.

Table 3.3: Recipients of CSDA-funded services, primary disability type and all significant disability types, Commonwealth, States and Territories, 1997

Disability type	Primary disability type reported	% of all service recipients	All significant disability types reported, including primary	% of all service recipients
Developmental delay	1,095	1.7	1,625	2.6
Intellectual	42,133	66.8	47,267	74.9
Specific learning/ADD	411	0.7	1,592	2.5
Autism	1,330	2.1	2,657	4.2
Physical	7,718	12.2	18,513	29.3
Acquired brain injury	1,935	3.1	2,658	4.2
Deafblind	156	0.2	436	0.7
Vision	1,619	2.6	7,605	12.1
Hearing	608	1.0	3,909	6.2
Speech	250	0.4	13,571	21.5
Psychiatric	3,782	6.0	7,261	11.5
Neurological	1,756	2.8	9,258	14.7
Not stated	315	0.5	n.a.	n.a.

- 1. An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.
- Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.
- 3. Data for recipients of CSDA directly provided 'Intellectual Disability Service' services funded by Queensland were not collected on disability types other than primary. These 1.324 recipients are excluded, resulting in lower total numbers.
- 4. The total for 'all significant disability types' adds to more than the total number of recipients, and the total for '% of all service recipients' adds to more than 100% since recipients may be counted in more than one disability type.

Many service recipients reported multiple disability in 1997. The extent of multiple disability varied with primary disability type (see Table 3.4). Of those service recipients whose reported primary disability type was deafblind, autism, acquired brain injury, neurological disability or developmental delay, 60% or more reported the presence of other significant disabilities. The average reporting of other significant disability types, across all primary disability types, was 50.5%. In contrast, other significant disabilities were reported by less than half of service recipients with primary disability types of psychiatric disability, specific learning/ADD, vision, speech and hearing.

Table 3.4: Recipients of CSDA-funded services, primary disability type, with or without the presence of other significant disability types, Commonwealth, States and Territories, 1997

	With other signification disability ty	nt	Without of signification disability ty	nt	Other signif disability ty not known not state	pes or	Total		
Primary disability type	No.	%	No.	%	No.	%	No.	%	
Developmental delay	668	61.0	344	31.4	83	7.6	1,095	100.0	
Intellectual/learning	21,575	51.2	18,363	43.6	2,195	5.2	42,133	100.0	
Specific learning/ADD	124	30.2	271	65.9	16	3.9	411	100.0	
Autism	901	67.7	382	28.7	47	3.5	1,330	100.0	
Physical	4,235	54.9	3,090	40.0	393	5.1	7,718	100.0	
Acquired brain injury	1,276	65.9	629	32.5	30	1.6	1,935	100.0	
Deafblind	112	71.8	36	23.1	8	5.1	156	100.0	
Vision	586	36.2	916	56.6	117	7.2	1,619	100.0	
Hearing	284	46.7	298	49.0	26	4.3	608	100.0	
Speech	100	40.0	132	52.8	18	7.2	250	100.0	
Psychiatric	778	20.6	2,802	74.1	202	5.3	3,782	100.0	
Neurological	1,109	63.2	531	30.2	116	6.6	1,756	100.0	
Not stated	100	31.7	101	32.1	114	36.2	315	100.0	
Total	31,848	50.5	27,895	44.2	3,365	5.3	63,108	100.0	

- 1. An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.
- Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.
- Data for recipients of CSDA directly provided 'Intellectual Disability Service' services funded by Queensland were not collected on disability types other than primary. These 1,324 recipients are excluded, resulting in lower total numbers.

The importance of examining multiple disability is further highlighted when data on the frequency of support required in the activities of daily living are examined.<sup>3</sup> Figure 3.1 shows that the frequency of need for this support increases with increasing number of disability types reported. Of those service recipients with only one (the primary) disability, 24.2% were reported as having no need for help in the activities of daily living, and 16.5% as having a continual need. As the number of disability types for each individual increased, the proportion with 'no need for assistance' decreased, to less than 1% for service recipients with five or more disability types (including the primary). The proportion with occasional need also decreases with increasing number of disability types. For frequent need the proportion rises, then decreases as the proportion with continual need rises to over 80% for service recipients with five or more disability types.

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<sup>3.</sup> To enable comparisons (if desired) to be drawn between CSDA service recipients and the general population, areas of support or assistance needed which have been used by the ABS to categorise 'severity of handicap' have been used. These areas of support are self-care, mobility and verbal communication, which, for the purposes of this report, are collectively known as 'activities of daily living'.

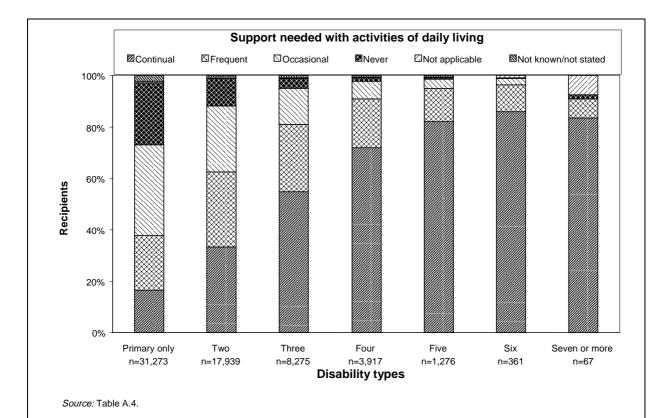


Figure 3.1: Recipients of CSDA-funded services, number of disability types (primary plus other) reported by relative frequency of support required in activities of daily living, Commonwealth, States and Territories, 1997

# 3.3 Country of birth

Information on the country of birth of service recipients was recorded in the categories of: Australia, other English-speaking countries, and non-English-speaking countries. This classification is under review (see Section 6.3). 'Other English-speaking countries' followed the former ABS standard definition: United Kingdom, Ireland, Canada, the United States of America, South Africa and New Zealand.

Data presented in Table 3.5 indicate that, of the 63,108 service recipients about whom country of birth data were collected, 57,040 (90%) were born in Australia, 1,568 (2%) in 'other English-speaking' countries and 2,003 (3%) in 'other' countries. These last two figures can be added to compare with the considerably higher figure of 22.2% of the Australian population aged 0 to 64 years born overseas (ABS 1997). Country of birth was 'not known or not stated' for 2,497 (4%) of the total recipients.

The distribution of reported primary disability type varies among country of birth groups. Intellectual disability was the primary disability type for 68% of service recipients born in Australia, but for only 42% of those born in other English-speaking countries and 44% of those born in other countries. Psychiatric disability, vision disability, acquired brain injury and neurological disabilities were more likely to be reported for those service recipients born outside of Australia.

The health screening of people seeking to migrate to Australia, combined with the known tendency for migrants to be in good health when deciding to migrate, has probably had an effect on lowering their overall prevalence of disability, and on the pattern of disability type.

Disability types most likely to arise from conditions present at birth, or the early developmental period, could be expected to be less frequent for the overseas-born population.

Table 3.5: Recipients of CSDA-funded services, primary disability type by country of birth, Commonwealth, States and Territories, 1997

	Austra	lia	Other Eng		Othe	er	Not kno	-	Total		
Primary disability type	Number	%	Number	%	Number	%	Number	%	Number	%	
Developmental delay	1,054	1.8	12	0.8	11	0.5	18	0.7	1,095	1.7	
Intellectual	38,755	67.9	650	41.5	886	44.2	1,842	73.8	42,133	66.8	
Specific learning/ADD	375	0.7	8	0.5	5	0.2	23	0.9	411	0.7	
Autism	1,228	2.2	16	1.0	33	1.6	53	2.1	1,330	2.1	
Physical	6,897	12.1	268	17.1	361	18.0	192	7.7	7,718	12.2	
Acquired brain injury	1,649	2.9	126	8.0	111	5.5	49	2.0	1,935	3.1	
Deafblind	135	0.2	8	0.5	8	0.4	5	0.2	156	0.2	
Vision	1,304	2.3	127	8.1	93	4.6	95	3.8	1,619	2.6	
Hearing	541	0.9	23	1.5	33	1.6	11	0.4	608	1.0	
Speech	235	0.4	1	0.1	4	0.2	10	0.4	250	0.4	
Psychiatric	3,154	5.5	210	13.4	339	16.9	79	3.2	3,782	6.0	
Neurological	1,481	2.6	108	6.9	101	5.0	66	2.6	1,756	2.8	
Not stated	232	0.4	11	0.7	18	0.9	54	2.2	315	0.5	
Total	57,040	100.0	1,568	100.0	2,003	100.0	2,497	100.0	63,108	100.0	

#### Notes

- 1. An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.
- 2. Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.
- Data for recipients of CSDA directly provided 'Intellectual Disability Service' services funded by Queensland were not collected. These 1,324
  recipients are excluded, resulting in lower total numbers.
- 4. Other English-speaking countries named were New Zealand, United Kingdom, South Africa, Ireland and United States of America.

Service recipients born outside Australia were more likely than those born in Australia to be represented in the older age groupings (Table 3.6). Of recipients born in Australia, 22% were aged 45 or over, compared with 41% of recipients born in 'other English-speaking countries' and 36% of recipients born in 'non-English-speaking countries'. This difference in age distribution may also be an effect of the health screening of people seeking to migrate to Australia. These people could be expected to have a lower proportion of conditions present at birth, or in the early developmental period, and a relatively higher proportion acquired in adult years and, thus, be an older population, on average, with disabilities.

Table 3.6: Recipients of CSDA-funded services, age group by country of birth, Commonwealth, States and Territories, 1997

	Austra	Other English- Not know ia speaking Other not state					<del>-</del>			
Age group (years)	Number	%	Number	%	Number	%	Number	%	Number	%
0–4	2,016	3.5	28	1.8	27	1.3	55	2.2	2,126	3.4
5–14	3,958	6.9	54	3.4	108	5.4	249	10.0	4,369	6.9
15–24	10,166	17.8	189	12.1	308	15.4	380	15.2	11,043	17.5
25–44	27,979	49.1	658	42.0	843	42.1	1,274	51.0	30,754	48.7
45–59	9,543	16.7	392	25.0	469	23.4	373	14.9	10,777	17.1
60+	3,101	5.4	244	15.6	236	11.8	98	3.9	3,679	5.8
Not stated	277	0.5	3	0.2	12	0.6	68	2.7	360	0.6
Total	57,040	100.0	1,568	100.0	2,003	100.0	2,497	100.0	63,108	100.0

- 1. An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.
- Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.
- 3. Data for recipients of CSDA directly provided 'Intellectual Disability Service' services funded by Queensland were not collected. These 1,324 recipients were excluded, resulting in lower total numbers.
- 4. Other English-speaking countries named were New Zealand, United Kingdom, South Africa, Ireland and United States of America.

# 3.4 Indigenous origin

On the 1997 'snapshot' day, 1,583 CSDA service recipients (2.5%) were identified as being of Indigenous origin (Table 3.7). This is commensurate with their overall representation in the population (2.4% of the population aged less than 65 years (ABS 1998)).

Physical, hearing, developmental delay and acquired brain injury primary disability types were more commonly reported among Indigenous recipients than among non-Indigenous recipients. This pattern appears consistent with patterns of Indigenous morbidity, including relatively high rates of injury and hearing disorders (ABS & AIHW 1997). Autism, vision and intellectual primary disability types were less commonly reported among Indigenous recipients than among non-Indigenous recipients. Some caution is needed in interpreting these data, as for 5,259 recipients (8.2% of the total), Indigenous status was not known or not stated.

Table 3.7: Recipients of CSDA-funded services, primary disability type by Indigenous origin, Commonwealth, States and Territories, 1997

	Indigen	ous	Non-Indig	enous	Not kno	wn	Not sta	ted	Tota	I
Primary disability type	Number	%	Number	%	Number	%	Number	%	Number	%
Developmental delay	43	2.7	1,096	1.9	25	0.5	10	2.1	1,174	1.8
Intellectual	910	57.5	38,037	66.0	4,219	88.1	212	45.3	43,378	67.3
Specific learning/ADD	11	0.7	358	0.6	40	0.8	2	0.4	411	0.6
Autism	23	1.5	1,269	2.2	23	0.5	15	3.2	1,330	2.1
Physical	357	22.6	7,165	12.4	153	3.2	43	9.2	7,718	12.0
Acquired brain injury	55	3.5	1,824	3.2	50	1.0	6	1.3	1,935	3.0
Deafblind	2	0.1	145	0.3	3	0.1	6	1.3	156	0.2
Vision	16	1.0	1,505	2.6	72	1.5	26	5.6	1,619	2.5
Hearing	24	1.5	563	1.0	15	0.3	6	1.3	608	0.9
Speech	5	0.3	232	0.4	10	0.2	3	0.6	250	0.4
Psychiatric	102	6.4	3,491	6.1	114	2.4	75	16.0	3,782	5.9
Neurological	28	1.8	1,658	2.9	38	0.8	32	6.8	1,756	2.7
Not stated	7	0.4	247	0.4	29	0.6	32	6.8	315	0.5
Total	1,583	100.0	57,590	100.0	4,791	100.0	468	100.0	64,432	100.0

Service recipients of Indigenous origin were more likely to be represented in State-funded services than in the general population, with the exception of Tasmania and the Australian Capital Territory where the proportion was lower (Table 3.8).

Table 3.8: Percentage of service recipients of Indigenous origin, State/Territory distribution by State or Commonwealth funding of CSDA services, compared with the proportion of people of Indigenous origin in the total population, Commonwealth, States and Territories, 1997

State/Territory	State funded	People of Indigenous origin in the population, aged 0-64	Commonwealth funded	People of Indigenous origin in the population, aged 15–64
New South Wales	2.9	1.9	1.4	1.5
Victoria	1.4	0.5	0.4	0.4
Queensland	4.0	3.3	1.2	2.6
Western Australia	4.1	3.3	2.3	2.6
South Australia	1.9	1.6	0.9	1.3
Tasmania	2.0	3.5	1.9	2.7
Australian Capital Territory	0.8	1.0	1.5	0.8
Northern Territory	57.5	27.4	35.2	23.1

#### Notes

- 1. An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.
- 2. Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.
- People of Indigenous origin means those of Aboriginal or Torres Strait Islander origin in the 1997 CSDA MDS collection. The data for the
  total population were obtained from 'Experimental projections of the Aboriginal and Torres Strait Islander population 30 June 1996 to 30 June
  2006', Australian Bureau of Statistics, 1998, Cat. No. 3231.0.
- CSDA service recipients totalled 64,432, of which 1,583 were recipients of Indigenous origin. Indigenous origin was 'not known' or 'not stated' for 5,259 service recipients.

Sources: Appendix 3 Table A.1; ABS 1997, 'Australian Demographic Statistics', March Quarter 1997, Cat. No. 3101.0.

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

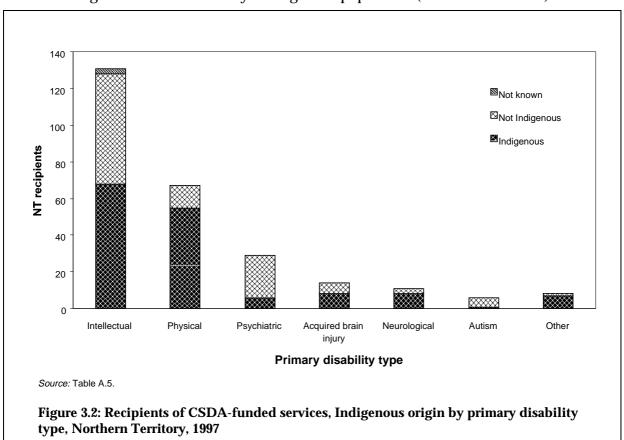
Data for recipients of CSDA-funded services with service types: Advocacy, Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

Service recipients of Indigenous origin were less likely to be represented in Commonwealth-funded services provided in most States than expected from the proportion of Indigenous people in each State's population. Only Commonwealth-funded services provided in the Northern Territory and the Australian Capital Territory were provided to greater numbers of Indigenous recipients than expected.

With over 57% of Northern Territory service recipients being of Indigenous origin, it is interesting to compare the distribution of reported primary disability type across this group with that of the rest of the Territory's service recipients.

Indigenous service recipients in the Northern Territory were relatively more likely to record the primary disability type category of physical disability (36% compared with 14% for non-Indigenous recipients) and less likely to record psychiatric disability (5% compared with 21%) (Figure 3.2).

The reasons for the variation reported cannot be ascertained from the CSDA MDS collection; however, it is consistent with a higher prevalence of accident, injury and substance abuse found among the Northern Territory's Indigenous population (ABS & AIHW 1997).



### 3.5 Communication

Most service recipients (63.4%) communicated by using a spoken language, however 6.2% used a sign language or other non-spoken method of communication and 25.6% used little or no method of effective communication (Table 3.9).

As might be expected, recipients who were deafblind and those with a hearing disability were more likely to use a non-spoken method of communication than other recipients. However the greatest numbers of recipients using a non-spoken method of communication

were those with intellectual and physical disabilities, reflecting their predominance among service recipients.

Recipients with autism, an intellectual disability or who were deafblind were recorded as having little or no method of effective communication more often than other recipients. (Again, the greatest numbers of recipients using little or no effective method of communication were those with intellectual and physical disabilities.)

Speech disability was found to be the third most numerous disability type affecting service recipients, most often as a non-primary disability type (Table 3.3). This may explain to some degree the high proportion of recipients who had little or no method of effective communication.

The relationship between frequency of support or assistance needed and method of effective communication is indicated in Figure 3.3 (see Section 3.6) for the self-care area of support.

Table 3.9: Recipients of CSDA-funded services, primary disability type by method of effective communication, Commonwealth, States and Territories, 1997

	Little or	none	Non-sp	oken	Spok langua		Child a under 5 y		Not kno	-		otal	
Primary disability type	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
Developmental delay	101	9.2	20	1.8	66	6.0	894	81.6	14	1.3	1,095	100.0	
Intellectual	12,722	30.2	2,540	6.0	26,148	62.1	267	0.6	456	1.1	42,133	100.0	
Specific learning/ADD	19	4.6	11	2.7	340	82.7	36	8.8	5	1.2	411	100.0	
Autism	663	49.8	129	9.7	410	30.8	110	8.3	18	1.4	1,330	100.0	
Physical	1,603	20.8	728	9.4	4,871	63.1	366	4.7	150	1.9	7,718	100.0	
Acquired brain injury	383	19.8	102	5.3	1,400	72.4	34	1.8	16	8.0	1,935	100.0	
Deafblind	48	30.8	55	35.3	43	27.6	6	3.8	4	2.6	156	100.0	
Vision	65	4.0	7	0.4	1,429	88.3	57	3.5	61	3.8	1,619	100.0	
Hearing	46	7.6	203	33.4	282	46.4	72	11.8	5	8.0	608	100.0	
Speech	40	16.0	24	9.6	57	22.8	127	50.8	2	8.0	250	100.0	
Psychiatric	65	1.7	19	0.5	3,652	96.6	2	0.1	44	1.2	3,782	100.0	
Neurological	351	20.0	62	3.5	1,138	64.8	116	6.6	89	5.1	1,756	100.0	
Not stated	49	15.6	20	6.3	179	56.8	14	4.4	53	16.8	315	100.0	
Total	16,155	25.6	3,920	6.2	40,015	63.4	2,101	3.3	917	1.5	63,108	100.0	

#### Notes

# 3.6 Frequency and area of support

Data on the overall support needs of service recipients have been recorded in the CSDA MDS. In addition to 'activities of daily living' (that is, self-care, mobility and communication), data were sought on needs in seven other areas of support: home living, social skills, self-direction, managing emotions, learning, working and other day activity.

Table 3.10 indicates the variation in reported need for assistance for all primary disability types reported, and for intellectual disability and psychiatric disability separately. Some

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

Data for recipients of CSDA directly provided 'Intellectual Disability Service' services funded by Queensland were not collected. These 1,324
recipients were excluded, resulting in lower total numbers.

<sup>4. &#</sup>x27;Non-spoken' encompasses sign language and other effective non-spoken communication.

caution is needed in interpreting these data, because of variability in the 'not known/not stated' response rates for each of the areas of support need. Some data are absent in the areas of managing emotion, learning, working and self-direction support.

In almost every area of support need, between 20% and 40% of recipients reported a need for continual support when considering all primary disability types together. A lower percentage of need for continual support was obtained for the area of 'mobility' (17.4%).

In relation to the need for working support, the response 'not applicable' was reported for a large number of recipients (20.5%). Many of these recipients were children aged under 15 years (5,691 or 44%) and people aged 60 years or over (2,006 or 16%).

At the other end of the frequency of support need scale, 41.6% of recipients never needed support or assistance for the mobility area of support need. Support was reported as 'never needed' by 15% or less of recipients, for all the areas of support need which were not those termed 'activities of daily living' (i.e. those other than self-care, mobility and communication).

These observations are generally consistent when recipients with a primary disability type of 'intellectual' are considered separately, though for the area of working, 43.4% required continual support.

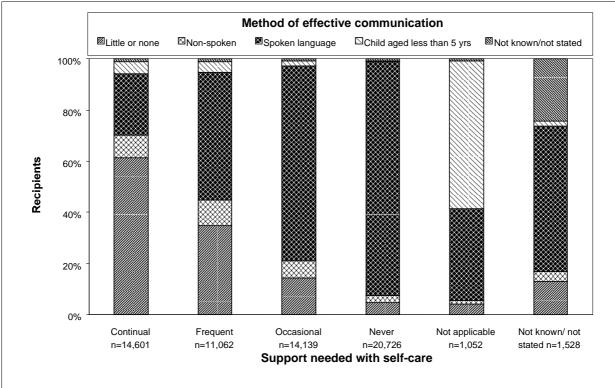
Recipients with a psychiatric disability as the primary type were the most likely to be recorded as never needing assistance in the 'activities of daily living' (self-care 76.7%, mobility 79.9% and communication 58.6%). Need for continual support was reported to be 8% or less for all support areas except working (25%). Yet for all areas of support need in activities that were not 'activities of daily living', the need for some support (either occasional, frequent or continual) varied from 54.2% for home living up to over 80% for self-direction and managing emotion.

Table 3.10: Recipients of CSDA-funded services, primary disability type and area of support needed by frequency of support or assistance needed, Commonwealth, States and Territories, 1997

	Nev	er	Occas	ional	Frequ	ent	Conti	nual	No applic	-	Not sta		Tot	al
Area of support	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
All primary disabili	ty types													
Self-care	20,726	32.2	14,187	22.0	11,289	17.5	15,480	24.0	1,131	1.8	1,619	2.5	64,432	100.0
Mobility	26,833	41.6	14,664	22.8	9,193	14.3	11,213	17.4	767	1.2	1,762	2.7	64,432	100.0
Communication	18,246	28.3	16,980	26.4	12,795	19.9	14,503	22.5	633	1.0	1,275	2.0	64,432	100.0
Social skills	9,633	15.0	17,832	27.7	16,262	25.2	17,066	26.5	1,519	2.4	2,120	3.3	64,432	100.0
Managing emotion	6,673	11.3	18,729	31.6	15,180	25.6	15,114	25.5	1,211	2.0	2,298	3.9	59,205	100.0
Learning	5,597	8.9	14,614	23.2	18,547	29.4	20,249	32.1	1,905	3.0	2,196	3.5	63,108	100.0
Working	2,850	4.5	8,506	13.5	11,075	17.5	24,366	38.6	12,916	20.5	3,395	5.4	63,108	100.0
Home living	6,114	9.5	10,909	16.9	14,563	22.6	21,211	32.9	6,914	10.7	4,721	7.3	64,432	100.0
Self-direction	5,453	8.6	15,668	24.8	18,849	29.9	19,748	31.3	1,596	2.5	1,794	2.8	63,108	100.0
Other day activity	8,324	12.9	14,215	22.1	15,478	24.0	15,533	24.1	5,360	8.3	5,522	8.6	64,432	100.0
Intellectual disabili	ty													
Self-care	13,252	30.5	11,040	25.4	8,234	19.0	9,594	22.1	294	0.7	964	2.2	43,378	100.0
Mobility	18,602	42.9	10,359	23.9	6,187	14.3	6,839	15.8	216	0.5	1,175	2.7	43,378	100.0
Communication	9,939	22.9	12,386	28.5	9,400	21.7	10,818	25.0	105	0.2	730	1.7	43,378	100.0
Social skills	4,083	9.4	12,343	28.4	12,249	28.2	13,190	30.4	370	0.9	1,143	2.6	43,378	100.0
Managing emotion	2,715	6.8	12,832	32.3	10,827	27.3	11,739	29.6	192	0.5	1,348	3.4	39,653	100.0
Learning	1,093	2.6	9,277	22.0	13,955	33.1	15,835	37.6	844	2.0	1,129	2.7	42,133	100.0
Working	1,555	3.7	6,059	14.4	8,307	19.7	18,274	43.4	6,050	14.4	1,888	4.5	42,133	100.0
Home living	2,613	6.0	7,702	17.7	11,314	26.1	15,552	35.8	2,713	6.3	3,484	8.0	43,378	100.0
Self-direction	1,344	3.2	9,998	23.7	13,996	33.2	15,416	36.6	448	1.1	931	2.2	42,133	100.0
Other day activity	4,168	9.6	9,747	22.5	11,573	26.7	11,737	27.1	2,448	5.7	3,705	8.5	43,378	100.0
Psychiatric disabili	ty													
Self-care	2,869	76.7	568	14.8	191	4.6	46	1.0	47	1.3	61	1.6	3,782	100.0
Mobility	3,005	79.9	524	13.6	128	3.3	33	0.6	34	0.9	58	1.6	3,782	100.0
Communication	2,202	58.6	1,094	28.8	357	9.2	47	1.2	26	0.7	56	1.5	3,782	100.0
Social skills	974	26.1	1,548	41.2	921	24.0	197	4.9	33	0.9	109	2.9	3,782	100.0
Managing emotion	490	14.2	1,483	42.2	1,142	32.2	297	8.0	24	0.7	94	2.7	3,530	100.0
Learning	1,166	31.3	1,534	41.0	678	17.6	215	5.1	43	1.1	146	3.9	3,782	100.0
Working	371	10.0	911	24.4	1,021	27.4	962	25.0	274	7.0	243	6.4	3,782	100.0
Home living	1,456	39.2	1,161	31.1	705	18.0	212	5.1	77	2.1	171	4.6	3,782	100.0
Self-direction	515	13.8	1,704	45.5	1,216	32.0	255	6.3	17	0.5	75	2.0	3,782	100.0
Other day activity	1,228	33.0	1,280	34.0	757	19.8	159	3.8	96	2.5	262	7.0	3,782	100.0

- 1. An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.
- Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.
- 3. Data on learning, working and self-direction for recipients of CSDA directly provided 'Intellectual Disability Services' services funded by Queensland were not collected. These 1,324 recipients are excluded, resulting in lower total numbers.
- Data on managing emotion for recipients of CSDA services funded by Western Australia were not collected. These 5,227 recipients are excluded, resulting in lower total numbers.
- 5. The consequence of Notes 3 and 4 is that there are different total populations for some of the support areas measured.

Figure 3.3 shows how the method of effective communication of service recipients aged 5 or more varies with the reported frequency of need for support, using the area of self-care as an example. The proportion of recipients with spoken language decreased as the need for support increased. Spoken language was the method of communication for 18,928 (91.3%) of recipients needing no support with self-care. The proportion of recipients with 'little or no effective communication' increased as the need for support increased. Little or no effective communication was indicated for 8,966 (61.4%) of recipients needing continual support with self-care, and 1,272 (8.7%) indicated sign language or other non-spoken methods of effective communication.



Source: Table A.6.

Figure 3.3: Recipients of CSDA-funded services, frequency of support or assistance needed in the area of self-care by method of effective communication, Commonwealth, States and Territories, 1997

### 3.7 Income source

The reported main income source of service recipients aged 16 years or more varied with reported primary disability type (Table 3.11). The Disability Support Pension was the main income source for most service recipients in 1997 (85.5% overall). Those with vision disability (36.7%) and hearing disability (52%) reported a lower proportion of Disability Support Pension (DSP) recipients as a main source of income.

People with primary disability types of vision and hearing disability were the most likely to report 'other pension or benefit' as the main income source (43.7% and 18.8% respectively). Other pensions include the age pension (vision having the greatest proportion in the 60 years or over age group—785 of 1,619 or 49%) (Table 3.1) and the Blind Pension. When all pensions are considered, people with a primary hearing disability were the only sizeable recipient group (that is, greater than 200 recipients in the group) where less than three-quarters reported a pension as the main source of income.

Compared with other disability types, service recipients with hearing disability as the reported primary disability type had the highest reported proportions with paid employment (19.7%) and 'other income' (3%) as the reported main income sources (other than service recipients with speech disability as the primary disability type, of whom there were only 49 in total).

Table 3.11: Adult recipients (aged 16 years or more) of CSDA-funded services, main income source by primary disability type, Commonwealth, States and Territories, 1997

Primary disability type	Disability Support Pension	Other pension or benefit	Paid employ- ment	Compen- sation	Other income	No income	Not known/ not stated	Total
				Number				
Developmental delay	29	0	0	0	0	0	2	31
Intellectual	36,088	671	1,219	23	78	37	1,640	39,756
Specific learning/ ADD	156	21	13	0	2	4	10	206
Autism	793	10	8	0	2	1	36	850
Physical	4,600	427	377	39	96	29	373	5,941
Acquired brain injury	1,356	98	82	146	34	9	84	1,809
Deafblind	108	24	1	1	0	1	5	140
Vision	544	648	80	1	24	7	178	1,482
Hearing	243	88	92	1	14	7	22	467
Speech	33	5	8	0	2	1	0	49
Psychiatric	2,911	347	290	10	38	21	152	3,769
Neurological	1,009	133	74	6	35	21	109	1,387
Not stated	137	34	12	0	6	2	68	259
Total	48,007	2,506	2,256	227	331	140	2,679	56,146
				Percentag	ge			
Developmental delay	93.5	0.0	0.0	0.0	0.0	0.0	6.5	100.0
Intellectual	90.8	1.7	3.1	0.1	0.2	0.1	4.1	100.0
Specific learning/ ADD	75.7	10.2	6.3	0.0	1.0	1.9	4.9	100.0
Autism	93.3	1.2	0.9	0.0	0.2	0.1	4.2	100.0
Physical	77.4	7.2	6.3	0.7	1.6	0.5	6.3	100.0
Acquired brain injury	75.0	5.4	4.5	8.1	1.9	0.5	4.6	100.0
Deafblind	77.1	17.1	0.7	0.7	0.0	0.7	3.6	100.0
Vision	36.7	43.7	5.4	0.1	1.6	0.5	12.0	100.0
Hearing	52.0	18.8	19.7	0.2	3.0	1.5	4.7	100.0
Speech	67.3	10.2	16.3	0.0	4.1	2.0	0.0	100.0
Psychiatric	77.2	9.2	7.7	0.3	1.0	0.6	4.0	100.0
Neurological	72.7	9.6	5.3	0.4	2.5	1.5	7.9	100.0
Not stated	52.9	13.1	4.6	0.0	2.3	0.8	26.3	100.0
Total	85.5	4.5	4.0	0.4	0.6	0.2	4.8	100.0

Compensation income was the main source reported for 8.1% of service recipients with acquired brain injury as the primary disability type. This was by far the highest proportion of the primary disability groups, and constituted 146 (64%) of the 227 service recipients reporting compensation income as the main income source.

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

<sup>2.</sup> Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

<sup>3.</sup> Data for recipients of CSDA directly provided 'Intellectual Disability Service' services funded by Queensland were not collected. These 1,174 recipients aged 16 or more are excluded, resulting in lower total numbers.

<sup>4.</sup> Adults were those CSDA recipients where a response was provided about income sources other than the Child Disability Allowance. Only those aged 16 or more were asked to respond about non-CDA income, however 58 recipients whose age was given as 0–15 years responded about non-CDA income and are included. Also 39 recipients whose ages were given as 0–15 did not respond about CDA and are included as 'not known/not stated'.

Numbers of child recipients of CSDA-funded services whose parents receive some income from the Child Disability Allowance (CDA) are given in Table 3.12. There were 4,766 recipients whose parents were known to receive CDA income and 653 known not to receive CDA income. The number of not known responses was quite high at 1,543 (22.2%).

Table 3.12: Child recipients of CSDA-funded services, income to parents from the Child Disability Allowance by primary disability type, Commonwealth, States and Territories, 1997

	With CDA		Without CI	PΑ	CDA not kno	wn	Total	
Primary disability type	No.	%	No.	%	No.	%	No.	%
Developmental delay	749	70.4	198	18.6	117	11.0	1,064	100.0
Intellectual	1,536	64.6	140	5.9	701	29.5	2,377	100.0
Specific learning/ADD	82	40.0	51	24.9	72	35.1	205	100.0
Autism	352	73.3	20	4.2	108	22.5	480	100.0
Physical	1,330	74.8	79	4.4	368	20.7	1,777	100.0
Acquired brain injury	91	72.2	14	11.1	21	16.7	126	100.0
Deafblind	15	93.8	0	0.0	1	6.3	16	100.0
Vision	100	73.0	8	5.8	29	21.2	137	100.0
Hearing	103	73.0	9	6.4	29	20.6	141	100.0
Speech	80	39.8	91	45.3	30	14.9	201	100.0
Psychiatric	1	7.7	9	69.2	3	23.1	13	100.0
Neurological	293	79.4	23	6.2	53	14.4	369	100.0
Not stated	34	60.7	11	19.6	11	19.6	56	100.0
Total	4,766	68.5	653	9.4	1,543	22.2	6,962	100.0

#### Notes

- 1. An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.
- 2. Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.
- 3. Data for recipients of CSDA directly provided 'Intellectual Disability Service' services funded by Queensland were not collected. These 150 recipients aged 0–15 years are excluded, resulting in lower total numbers.
- 4. Children were those CSDA recipients where a response was provided about CDA income source. Only those aged 0–15 were asked to respond about CDA income, however 123 recipients whose age was given as 16 or more years responded about CDA and are included. Also 95 recipients whose ages were given as 0–15 did not respond about CDA or non-CDA income source and are included in Table 311 as 'not known/not stated'.

### 3.8 Accommodation

The living arrangement/accommodation type of service recipients is presented for each primary disability type in Table 3.13. Most service recipients lived with family members and/or their spouse (25,985 or 40.3%). Smaller numbers lived in special purpose (disability) community accommodation (19,162 or 29.7%), institutional accommodation other than hospitals or nursing homes (9,279 or 14.4%) or lived alone (6,067 or 9.4%).

People with a primary disability type of 'psychiatric' or 'vision' disability were the most likely to report living alone (29.7% and 28.2% respectively), followed by people with a hearing disability (19.6% living alone) and acquired brain injury (16.1% living alone) as the primary disability reported.

Table 3.13: Recipients of CSDA-funded services, primary disability type by 'living arrangement/ accommodation type', Commonwealth, States and Territories, 1997

Primary disability type	Lives alone	Lives with family member(s) and/or spouse	Special purpose (disability) community accommo- dation	Other comm- unity arrang- ement	Nursing home	Hospital	Other insti- tutional accommo- dation	No usual residence	Not known /not stated	Total
					Num	ber				
Developmental delay	y 3	1,125	18	2	0	1	8	0	17	1,174
Intellectual	2,852	14,906	15,737	1,312	166	204	7,745	15	441	43,378
Specific learning/ADD	27	333	15	12	0	0	6	0	18	411
Autism	46	722	415	32	4	5	85	1	20	1,330
Physical	841	4,217	1,469	183	118	15	757	7	111	7,718
Acquired brain injury	312	767	296	91	88	41	317	1	22	1,935
Deafblind	24	63	48	7	2	1	9	0	2	156
Vision	457	812	116	36	29	3	52	0	114	1,619
Hearing	119	388	55	23	2	0	9	1	11	608
Speech	10	216	12	3	0	0	6	0	3	250
Psychiatric	1,125	1,291	730	381	8	22	131	16	78	3,782
Neurological	217	1,004	196	76	65	12	141	1	44	1,756
Not stated	34	141	55	12	1	0	13	1	58	315
Total	6,067	25,985	19,162	2,170	483	304	9,279	43	939	64,432
					Perce	ntage				
Developmental delay	y 0.3	95.8	1.5	0.2	0.0	0.1	0.7	0.0	1.4	100.0
Intellectual	6.6	34.4	36.3	3.0	0.4	0.5	17.9	0.0	1.0	100.0
Specific learning/ADD	6.6	81.0	3.6	2.9	0.0	0.0	1.5	0.0	4.4	100.0
Autism	3.5	54.3	31.2	2.4	0.3	0.4	6.4	0.1	1.5	100.0
Physical	10.9	54.6	19.0	2.4	1.5	0.2	9.8	0.1	1.4	100.0
Acquired brain injury	16.1	39.6	15.3	4.7	4.5	2.1	16.4	0.1	1.1	100.0
Deafblind	15.4	40.4	30.8	4.5	1.3	0.6	5.8	0.0	1.3	100.0
Vision	28.2	50.2	7.2	2.2	1.8	0.2	3.2	0.0	7.0	100.0
Hearing	19.6	63.8	9.0	3.8	0.3	0.0	1.5	0.2	1.8	100.0
Speech	4.0	86.4	4.8	1.2	0.0	0.0	2.4	0.0	1.2	100.0
Psychiatric	29.7	34.1	19.3	10.1	0.2	0.6	3.5	0.4	2.1	100.0
Neurological	12.4	57.2	11.2	4.3	3.7	0.7	8.0	0.1	2.5	100.0
Not stated	10.8	44.8	17.5	3.8	0.3	0.0	4.1	0.3	18.4	100.0
Total	9.4	40.3	29.7	3.4	0.7	0.5	14.4	0.1	1.5	100.0

People reporting 'developmental delay' and 'speech' were most likely to be living with family members (95.8% and 86.4% respectively), probably related to the young age of most people in these categories (see Table 3.1).

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

<sup>2.</sup> Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

People reporting 'intellectual', 'autism' and 'deafblind' as the primary disability were the groups most likely to be reported as being in special purpose (disability) community accommodation (36.3%, 31.2% and 30.8% respectively). Those with psychiatric disability as the primary disability type were the most likely to be in 'other' community accommodation—defined as being non-disability specific, and not with any family members (10.1%).

People reporting the following primary disability groups were most likely to be living in institutional accommodation: acquired brain injury (23%, including 16.4% in 'other' institutional), 'intellectual disability' (18.8%, including 17.9% in 'other' institutional) and 'neurological disability' (12.4%, including 8% in 'other' institutional).

Nearly a third of service recipients (20,826) reported a continual need for support (the highest level of need) with activities of daily living, and most of these lived in special purpose (disability) community accommodation or with family members and/or their spouse (7,106 and 6,865 respectively, Table 3.14).

The highest proportions of recipients reporting a continual need for support with activities of daily living were for those living in institutional settings—nursing homes, hospitals and 'other' institutions—all over 55%. Next were those living in special purpose (disability) community accommodation (37.1% of 19,162), those living with family members (26.4% of 25,985), those living in 'other community' accommodation (15.5% of 2,170), and those living alone (9.4% of 6,067).

The 'living arrangement/accommodation type' pattern for recipients reporting no need for support with activities of daily living was the reverse order to that described for recipients needing continual support with 'activities of daily living'. Some 9,860 service recipients (15.3%) reported no need for support with activities of daily living.

In the support area of home living—support involving housekeeping, cooking, budgeting, home maintenance, etc.—21,211 recipients reported a need for continual support. Many of these people lived in special purpose (disability) community accommodation or 'other' institutional accommodation (8,203 and 6,061 respectively).

The pattern for recipients reporting a continual need for support with home living is the same as that for 'activities of daily living' described above. The highest proportions of recipients reporting a continual need for support with home living were for those living in institutional settings—nursing homes, hospitals and 'other' institutions—all over 45%. Next were those living in special purpose (disability) community accommodation (42.8%), those living with family members (20.7%), those living in 'other community' accommodation (18.9%), and those living alone (9.4%).

Table 3.14: Recipients of CSDA-funded services, frequency of support or assistance needed in activities of daily living and home living by 'living arrangement/accommodation type', Commonwealth, States and Territories, 1997

		Living arrangement/accommodation type													
Area of support	Lives alone	Lives with family member(s) and/or spouse	Special purpose (disability) community accommo- dation	Other comm- unity arrang- ement	Nursing home	Hospital	Other insti tutional accommo- dation	No usual resi- dence	Not known /not stated	Total					
Activities of daily	living			ı	Number										
Never	2,062	4,789	1,789	516	24	12	530	9	129	9,860					
Occasional	2,370	7,564	4,787	789	43	27	1,293	18	200	17,091					
Frequent	985	5,964	5,405	477	99	43	2,161	10	144	15,288					
Continual	572	6,865	7,106	336	313	220	5,243	4	167	20,826					
Not applicable	21	396	8	5	0	0	2	0	14	446					
Not known	52	395	61	46	3	2	41	2	248	850					
Not stated	5	12	6	1	1	0	9	0	37	71					
Total	6,067	25,985	19,162	2,170	483	304	9,279	43	939	64,432					
Home living	,	,	•	,			•			,					
Never	1,616	3,384	506	240	15	8	212	6	127	6,114					
Occasional	2,020	4,575	2,924	645	28	10	578	9	120	10,909					
Frequent	1,373	4,788	6,132	695	51	21	1,382	17	104	14,563					
Continual	569	5,373	8,203	410	241	213	6,061	3	138	21,211					
Not applicable	130	5,321	488	50	108	20	697	1	99	6,914					
Not known	348	2,516	897	128	37	32	337	7	313	4,615					
Not stated	11	28	12	2	3	0	12	0	38	106					
Total	6,067	25,985	19,162	2,170	483	304	9,279	43	939	64,432					
Activities of daily	living				Percentag	•									
Never	34.0	18.4	9.3	23.8	5.0	<b>e</b> 3.9	5.7	20.9	13.7	15.3					
Occasional	39.1	29.1	25.0	36.4	8.9	8.9	13.9	41.9	21.3						
Frequent	16.2	23.0	28.2	22.0	20.5	14.1	23.3	23.3	15.3						
Continual	9.4	26.4	37.1	15.5	64.8	72.4	56.5	9.3	17.8						
Not applicable	0.3	1.5	0.0	0.2	0.0	0.0	0.0	0.0	1.5						
Not known	0.9	1.5	0.3	2.1	0.6	0.7	0.4	4.7	26.4	1.3					
Not stated	0.1	0.0	0.0	0.0	0.2	0.0	0.1	0.0	3.9	0.1					
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0					
Home living															
Never	26.6	13.0	2.6	11.1	3.1	2.6	2.3	14.0	13.5	9.5					
Occasional	33.3	17.6	15.3	29.7	5.8	3.3	6.2	20.9	12.8	16.9					
Frequent	22.6	18.4	32.0	32.0	10.6	6.9	14.9	39.5	11.1	22.6					
Continual	9.4	20.7	42.8	18.9	49.9	70.1	65.3	7.0	14.7	32.9					
Not applicable	2.1	20.5	2.5	2.3	22.4	6.6	7.5	2.3	10.5	10.7					
Not known	5.7	9.7	4.7	5.9	7.7	10.5	3.6	16.3	33.3	7.2					
Not stated	0.2	0.1	0.1	0.1	0.6	0.0	0.1	0.0	4.0	0.2					
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0					

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

<sup>3.</sup> Frequency of need for activities of daily living is the most frequent need for support with self-care, mobility or communication for each recipient.

### 3.9 State distribution

Data on the number of recipients of various service types in each State and Territory are presented in Table 3.15. Of the 64,432 service recipients, many were recipients of services in Victoria (20,398, with notably 6,210 community access recipients). New South Wales had the next highest recipient numbers (18,737), followed by Queensland (8,934).

The number of service recipients using different service types varies from State to State. Overall, there were 42.3% (8,527) of accommodation support recipients using a group home; 29.6% (5,965) were using an institution or large residential; 16.5% (3,332) were using outreach support and 6% (1,210) were using a hostel. In South Australia this pattern shifted towards use of institutions or large residentials, rather than of group homes and hostels. In New South Wales also there was greater use of institutions or large residentials, rather than outreach support, relative to the overall pattern. In Victoria, a higher proportion of recipients use outreach services. In Tasmania, there was greater use of hostels rather than outreach support. In the two Territories, use of group homes predominated.

Forty-one per cent (2,447) of recipients of institution/large residential services were in New South Wales. Of those receiving hostel services, 38.6% (467) were in Victoria, as were 31.8% (187) of those using attendant care and 48.3% (222) of those using 'other/not stated' accommodation support.

The employment service data supplied by the Commonwealth also show that the number of service recipients using different employment service types varies from State to State. Overall, 25.4% of employment service recipients were using open employment services, 72.3% were using supported employment services and 2.2% were using a combined service type. New South Wales and South Australia had the lowest proportion of their employment service recipients in open employment services (17.7% and 11.9% respectively).

When national service counts are considered, about a third (1,441) of all open employment service recipients were in Victoria and under a quarter in New South Wales (1,067). Over a third (4,866) of all supported employment service recipients were in New South Wales, with one-fifth (2,536) in Victoria.

For respite service recipients the overall pattern of usage was: 49% centre-based respite, 20% own home respite and 24% other respite. This pattern was different in New South Wales, with greater use of host family respite rather than own home respite. In Victoria, there was greater use of centre-based respite than other respite. In Queensland and Western Australia, there was relatively greater use of 'other respite'.

Table 3.15: Recipients of CSDA-funded services, service type by State and Territory, Commonwealth, States and Territories, 1997

Service type	NSW	Vic.	Qld	WA	SA	Tas.	ACT	NT	Total
Institutions/large residentials	2,447	1,115	532	663	1,041	167	0	0	5,965
Hostels	289	467	79	229	18	128	0	0	1,210
Group homes	2,447	2,528	1,416	959	593	283	211	90	8,527
Attendant care	139	187	82	60	66	41	0	13	588
Outreach/other 'in-home'/drop-in support	467	1,219	986	331	260	38	3	28	3,332
Alternative family placement	11	3	34	18	0	1	0	0	67
Accommodation support: other/not stated	140	222	31	51	5	0	0	11	460
Total accommodation support	5,940	5,741	3,160	2,311	1,983	658	214	142	20,149
Early childhood intervention	650	931	66	70	24	0	0	0	1,741
Recreation/holiday programs	216	319	114	353	513	46	25	12	1,598
Therapy (PT OT ST)	700	700	539	613	33	25	22	0	2,632
Family/individual case practice/management	59	1,047	35	391	648	45	15	0	2,240
Behaviour/specialist intervention	177	114	9	122	38	25	0	0	485
Counselling: individual/family/group	0	4	66	101	32	0	0	0	203
Brokerage/direct funding	26	207	137	195	5	0	83	2	655
Mutual support/self-help groups	4	202	0	11	21	0	0	0	238
Resource teams/regional teams	1,083	0	72	39	146	74	0	0	1,414
Community support: other or not stated	343	0	0	116	15	0	0	0	474
Total community support	3,258	3,524	1,038	2,011	1,475	215	145	14	11,680
Continuing education/independent living training/adult training centre	1,318	4,747	1,312	187	122	80	7	3	7,776
Post-school options/social and community support/community access	985	131	237	339	208	32	21	25	1,978
Community access and day programs: other/not stated	810	1,332	92	102	59	350	4	30	2,779
Total community access	3,113	6,210	1,641	628	389	462	32	58	12,533
Own home respite	4	142	78	94	10	0	20	25	373
Respite: centre/respite home	225	374	149	85	38	25	21	5	922
Respite: host family/peer support	84	1	12	25	4	4	0	3	133
Respite: other/flexible/combination	89	20	206	73	16	6	44	5	459
Total respite	402	537	445	277	68	35	85	38	1,887
Open employment	1,067	1,441	942	580	247	124	97	43	4,541
Supported employment	4,866	2,536	1,708	1,432	1,814	340	145	65	12,906
Open and supported combined	91	104	0	49	9	120	20	0	393
Employment: other, and not stated	0	0	0	0	1	0	0	12	13
Total employment	6,024	4,081	2,650	2,061	2,071	584	262	120	17,853
Service type not stated	0	305	0	0	10	0	13	2	330
Total	18,737	20,398	8,934	7,288	5,996	1,954	751	374	64,432

There were 12,533 community access service recipients, 49% of whom were in Victoria. Of community access service recipients, 62% were using continuing education/independent living training (ILT)/activity therapy centre (ATC), 16% were using post-school options and 22% were using other community access services. In Victoria and Queensland, there was greater use of continuing education/ILT/ATC than the other two service types. In Victoria there was also a relatively greater use of other community access services and less use of

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

post-school options. In Western Australia and South Australia, there was greater use of post-school options and less of continuing education. Tasmanian community access service recipients tended to use other community access services rather than the other two service types.

Community support service recipients were the fourth most numerous of the major service type groups (11,680). However, recipients of some community support service types, such as advocacy, information and print disability were not counted in this collection (see Section 2.3). The overall pattern for community support service recipients was that 23% were receiving therapy (PT OT ST) services, 19% family/individual case practice/management services, 15% early childhood intervention services, and 6% brokerage/direct funding services. Individual States differ from this overall national pattern. Notable are the use of resource teams/regional teams in New South Wales, early childhood intervention services in Victoria, therapy (PT OT ST) services in Queensland, brokerage/direct funding in Western Australia and the Australian Capital Territory and family/individual case practice/management services in Victoria and South Australia.

Recipients of services identified as being specifically services for people with a psychiatric disability are excluded from Table 3.17, consistent with the performance indicators in Section 5.

Table 3.16: Recipients of CSDA-funded employment support services, auspicing organisation by State and Territory, Commonwealth, 1997

Auspicing organisation	NSW	Vic.	Qld	WA	SA	Tas.	ACT	NT	Australia
Government	221	90	24	10	0	0	8	15	368
Non-government	5,803	3,991	2,626	2,037	2,070	584	254	93	17,458
Not stated	0	0	0	14	0	0	0	0	14
Total	6,024	4,081	2,650	2,061	2,070	584	262	108	17,840

#### Notes

- 1. An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.
- 2. CSDA services funded by the Commonwealth did not exclude any specifically identified psychiatric services.

Table 3.17: Recipients of CSDA-funded services, excluding specific psychiatric services, auspicing organisation and State and Territory by service type, States and Territories, 1997

Auspicing Auspicing Auspicing	ccommodation support	Community support	Community access	Respite	Other/not stated	Total
Government	2,906	1,878	1,180	217	0	6,181
Non-government	3,034	1,380	1,933	185	0	6,532
Total New South Wales	5,940	3,258	3,113	402	0	12,713
Government	3,092	1,072	221	130	0	4,515
Non-government	1,973	2,205	5,333	330	0	9,841
Auspicing org. not stated	0	0	0	0	305	305
Total Victoria	5,065	3,277	5,554	460	305	14,661
Government	916	506	23	54	0	1,499
Non-government	2,072	503	1,615	391	0	4,581
Total Queensland	2,988	1,009	1,638	445	0	6,080
Government	1,042	1,252	257	81	0	2,632
Non-government	1,021	749	369	196	0	2,335
Auspicing org. not stated	20	10	2	0	0	32
Total Western Australia	2,083	2,011	628	277	0	4,999
Government	795	687	37	8	1	1,528
Non-government	1,188	788	352	60	0	2,388
Auspicing org. not stated	0	0	0	0	10	10
Total South Australia	1,983	1,475	389	68	11	3,926
Government	99	130	112	12	0	353
Non-government	543	76	350	23	0	992
Auspicing org. not stated	0	0	0	0	0	0
Total Tasmania	642	206	462	35	0	1,345
Government	133	54	0	18	0	205
Non-government	81	91	32	67	0	271
Auspicing org. not stated	0	0	0	0	13	13
Total Australian Capital Te	erritory 214	145	32	85	13	489
Government	0	0	0	0	0	0
Non-government	142	14	58	13	25	264
Auspicing org. not stated	0	0	0	0	2	2
Total Northern Territory	142	14	58	13	27	266
Total government	8,983	5,579	1,830	520	1	16,913
Total non-government	10,054	5,806	10,042	1,290	12	27,204
Total auspicing org. not st	ated 20	10	2	0	330	362
Total excluding specific psychiatric services	19,057	11,395	11,874	1,810	343	44,479

<sup>1.</sup> An individual may be counted more than once if more than one service type was accessed on the 'snapshot' day.

<sup>2.</sup> Data for recipients of CSDA-funded services with service types: Advocacy; Information/referral; Combined advocacy/information; Print disability/alt. formats of communication; Service evaluation/training; Peak bodies; Research/development; and Other were not collected.

Data for recipients of CSDA-funded psychiatric services are excluded to enable a more direct comparison between States and Territories for Industry Commission purposes. These recipients were using Victorian, Western Australian and Queensland services.