

4 Use of aids and equipment in Australia

This chapter presents data on the use of aids and equipment by people with a disability in Australia. Aids and equipment are one of the environmental factors recognised by the ICF as influencing the level of impairment, activity limitation or participation restriction experienced by a person with a disability.

The data presented below profile the overall use of aids and equipment by people with a disability in terms of age group, core activity restriction status, and main disabling condition. Use of aids and equipment and its association with assistance from a personal carer and the need for assistance with core activities (i.e. self-care, mobility and communication) are also covered. Aids and equipment will be referred to herein as aids.

4.1 ABS Survey of Disability, Ageing and Carers, 1998

The primary data source used in this report is the 1998 Survey of Disability, Ageing and Carers. The 1998 survey is the latest in a series of disability surveys collected by the ABS, the previous surveys taking place in 1981, 1988 and 1993⁶. The ABS disability surveys are an important source of national population data on disability. Data are collected from both households and cared accommodation samples, in all states and territories.

The 1998 disability survey defines people as having a disability if they report a limitation, restriction or impairment which has lasted, or is likely to last, for at least six months and restricts everyday activities (ABS 1999:67). A 'specific restriction' is defined as a restriction in core activities (self-care, mobility and communication), schooling or employment (ABS 1999:72).

Four levels of core activity restriction—profound, severe, moderate and mild—are determined in the 1998 survey, based on whether a person needs help with, has difficulty with, or uses aids and equipment for any of the core activities. A person's overall level of core activity restriction is determined by the highest level of restriction they experience in any of the core activity areas. Each level of core activity restriction is defined in Box 4.1.

In the survey, respondents were also asked to indicate their long-term condition. A long-term condition is defined as a disease or disorder that has lasted or is likely to last for at least six months; or a disease, disorder or event that produces an impairment or restriction that has lasted or is likely to last for at least six months. A main condition is a long-term condition identified by a person as the one causing the most problems. Where only one long-term condition is reported, it is recorded as the main condition (ABS 1999:69).

⁶ The fifth Survey of Disability, Ageing and Carers will be run in 2003.

Box 4.1: ABS 1998 Survey of Disability, Ageing and Carers: restrictions and their severity**Specific restrictions** are:

- *Core activity restrictions; and/or*
- *Schooling or employment restrictions.*

Core activities are:

- *Self care—bathing or showering, dressing, eating, using the toilet, and managing incontinence;*
- *Mobility—moving around at home and away from home, getting into or out of a bed or chair, and using public transport; and*
- *Communication—understanding and being understood by others: strangers, family and friends.*

A **core activity restriction** may be:

- *Profound—unable to perform a core activity or always needing assistance;*
- *Severe—sometimes needing assistance to perform a core activity;*
- *Moderate—not needing assistance, but having difficulty performing a core activity: or*
- *Mild—having no difficulty performing a core activity but using aids or equipment because of disability.*

*Source: ABS 1999***Aids included in the survey**

Survey respondents identified as having a disability (see above) were asked about their use of aids for self-care, mobility and communication tasks and, specifically, the types of aids they used for mobility (e.g. wheelchairs, canes), medical and communication purposes (e.g. non-electronic and electronic aids). These aids are listed in Table 4.1.

Table 4.1: Types of aids included in the Survey of Disability, Ageing and Carers, 1998

Broad category	Specific aid
Self-care	Eating, showering, toilet, incontinence and dressing aids
Mobility	Electric wheelchairs and scooters, manual wheelchair, cane, crutches or walking stick, walking frame, seating and bedding aids, modified car aids and other
Communication (Reading and writing)	Non-electronic aids e.g. picture boards, symbol boards, large print books Electronic aids e.g. audio tapes, talking word processor, special computer software and printout system
Communication (Speaking)	Non-electronic aids e.g. picture boards, symbol boards, letter/word boards Electronic aids e.g. digitised or synthesised speech output systems Fax and mobile phone
Meal preparation	Not specified
Medical aids	Nebulisers, dialysis machines, feeding pumps, pacemakers, oxygen concentrator or cylinder, ventilators, medical dressings, surgical stockings, pain management aids and other
Hearing aids	Hearing aids, cochlear implants

Source: 1998 Survey of Disability, Ageing and Carers Questionnaire (including prompt cards).

While this list broadly captures the kinds of aids mostly available to people with a disability, it omits some items provided in Australian aids and equipment schemes, such as prostheses and orthoses, hoists, lifters and standing equipment, and some specific communication aids. Also absent from the survey are questions on 'seeing-eye dogs' and other assistant animals, important for people with vision and hearing impairments, and mobility limitations.

4.2 Prevalence of aid use

A total of 1,737,800 people with a disability used aids in 1998, or 48% of all people with a disability (Table 4.2). Among people with a disability, aid use was higher for those aged over 65 (64%) compared with those aged between 0–64 years (40%). Males and females with a disability used aids at similar rates, although females did tend to show a higher use (51%) compared with males (46%). Sex differences in aid use was more pronounced in the under 65 year age group.

Table 4.2: Use of aids by people with a disability by age group and sex, 1998

	0–64 years			65+ years			All ages		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Uses aids									
Number ('000)	496.8	461.6	958.4	337.6	441.8	779.4	834.5	903.3	1,737.8
% of all with a disability	38.7	41.9	40.1	63.0	64.3	63.7	45.8	50.5	48.1
Total with a disability ('000)	1,285.1	1,102.2	2,387.4	536.0	686.7	1,222.5	1,821.1	1,788.9	3,610.0

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

4.3 Age

The relationship between age and aids use is represented in more detail in Table 4.3.

People with a disability and aged 45–64 (28%) or 65 years and older (45%) were greater users of aids than younger people (Table 4.2). Aid users with a severe or profound core activity restriction also tended to be older. Fifty two per cent of such users were aged over 65 years and 24% between the ages of 45 and 65.

Aid use within age groups

The likelihood of aid use showed some variation between age groups. The proportion of younger people using aids ranged from 36% (15–29) to 40% (0–14) (Table 4.3). This compares with 43% of people aged 45–64 years and 64% of people aged over 65 years who reported aid use.

Table 4.3: People with a disability using aids, by age group, 1998

	Age group (years)					Total
	0–14	15–29	30–44	45–64	65+	
All with disability						
Number using aids ('000)	118.2	134.8	222.4	483.0	779.4	1,737.8
% of all with a disability	6.8	7.8	12.8	27.8	44.8	100.0
% within age group	39.8	36.1	36.9	43.3	63.7	48.1
Severe/profound core activity restriction						
Number using aids ('000)	66.7	37.7	85.1	181.2	396.2	766.9
% of all with a SP core activity restriction	8.7	4.9	11.1	23.6	51.6	100.0
% within age group	46.2	45.6	60.0	63.1	82.5	67.5

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

Some evidence of an age trend was also found if only people with a profound or severe core activity restriction were considered. While around 46% of people in the two youngest age groups used aids, this climbed to 60% and 63% for the 30–44 and 45–64 age groups respectively and to 83% for the over 65s. This shows that the variation in use of aids with age is not just a result of variation in severity of core activity limitation.

Type of aids used

Aid users under the age of 65 used an average of 1.5 or 1.6 aids. For the over 65s, the average number of aids used rose to 2.4 aids per individual (Table 4.4).

The use of aids for specific activities also showed a relationship with age (Table 4.4 and see Appendix Table 4.1 for proportional use of all aid types). By far the most commonly used type of aid for people with a disability aged under 65 years were medical aids; these aids represented 40% or more of all aids used in each age group. Mobility aids were the second most used aid for those aged between 15 and 65 years, followed by self-care or communication aids. In contrast, self-care and communication aids were more commonly used by the under 15s (16% each).

Medical aids were also important for people aged over 65, accounting for 17% of all aids used. However, older people tended to rely more on aids for self-care (32%) and mobility (28%). Hearing aids were also an important type of aid for this group, with 18% of all aids used being some sort of hearing aid or cochlear implant.

Table 4.4: Aids used, by type of aids and age group (people with a disability), 1998

Type of aid	Age group (years)									
	0–14		15–29		30–44		45–64		65+	
	'000	%	'000	%	'000	%	'000	%	'000	%
Self-care	28.4	15.9	24.3	12.3	47.2	13.2	117.9	15.1	587.7	31.8
Mobility	21.2	11.8	33.7	17.1	60.1	16.8	137.8	17.7	512.4	27.8
Communication	28.5	15.9	24.0	12.1	58.5	16.4	119.1	15.3	87.6	4.7
Hearing	10.1	5.6	10.2	5.1	19.0	5.3	73.3	9.4	322.8	17.5
Meal preparation	*3.0	*1.7	*4.3	*2.2	13.2	3.7	20.9	2.7	21.7	1.2
Medical	88.1	49.1	101.0	51.2	159.7	44.6	309.5	39.8	314.1	17.0
Total aids used	179.3	100.0	197.4	100.0	357.7	100.0	778.5	100.0	1,846.3	100.0
Total users	118.2		134.8		222.4		483.0		779.4	
Average no. of aids used	1.5		1.5		1.6		1.6		2.4	

Note: Estimates marked * have an associated relative standard error of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

4.4 Severity of restriction

Aid use increased with the severity of restriction. Twenty one per cent of people reporting either a schooling or employment restriction only used aids, compared with between 47–52% of those with a moderate or mild core activity restriction and 60% with a severe restriction (Table 4.5). Three quarters of people with a profound core activity restriction used aids.

Table 4.5: People with specific restrictions, by use of aids and severity of restriction, 1998

	Severity of core activity restriction				Schooling or employment restriction only ^(a)
	Profound	Severe	Moderate	Mild	
0–64 years					
Number using aids ('000)	127.6	243.1	208.3	249.2	67.9
% uses aids	58.4	55.6	48.0	39.4	20.7
65+ years					
Number using aids ('000)	278.4	117.9	130.9	232.8	..
% uses aids	87.2	73.1	58.0	58.4	..
All ages					
Number using aids ('000)	406.0	361.0	339.3	482.0	67.9
% uses aids	75.5	60.3	51.5	46.8	20.7
Total with restriction	537.8	598.7	659.4	1,030.6	328.4

(a) Schooling or employment restriction is not applicable to the over 65 age group.

.. not applicable

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

Around 58% and 56% of people aged 0–64 and with either a profound or severe core activity restriction respectively used aids. Aid use declined to 48% of people with a moderate core activity restriction and 39% of people with a mild core activity restriction. The generally higher proportion of aid use by the over 65s (as shown in Table 4.3) is reflected in the higher percentages observed for each restriction group, compared with the under 65s.

Type of aids used

People with a profound core activity restriction used an average of 3.5 aids (Table 4.6). Average number of aids used was lower for people with a severe or moderate core activity restriction—1.9 and 1.5 aids respectively.

Table 4.6: Aids used, by type of aids and severity of core activity restriction, 1998

Type of aid	Severity of core activity restriction							
	Profound		Severe		Moderate		Mild	
	'000	%	'000	%	'000	%	'000	%
Self-care	575.0	40.0	127.7	18.4	75.3	15.0	26.8	4.6
Mobility	481.7	33.5	166.9	24.0	77.0	15.3	39.7	6.9
Communication	92.6	6.4	102.3	14.7	57.5	11.5	55.0	9.5
Hearing	73.9	5.1	61.6	8.9	68.4	13.6	231.4	39.9
Meal preparation	26.3	1.8	20.5	3.0	*6.7	*1.3	*6.6	*1.1
Medical	188.2	13.1	215.5	31.0	216.7	43.2	219.7	37.9
Total aids used	1,437.7	100.0	694.4	100.0	501.5	100.0	579.2	100.0
Total users	405.6		361.0		339.3		482.0	
Average no. of aids used	3.5		1.9		1.5		1.2	

Note: Estimates marked * have an associated relative standard error of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

The type of aid used varied with severity of core activity restriction (Table 4.6 and see Appendix Table 4.2 for proportional use of all aid types). People with a profound core activity restriction relied mostly on self-care (40%) and mobility aids (34%). Medical aids were the most commonly used aid for people with a severe (31%) or moderate (43%) core activity restriction, followed by mobility and self-care aids.

Hearing aids were the most commonly used aid for people with a mild restriction (40%), followed by medical aids (38%) and communication aids (10%). The marked variation in type of aid use between this and other restriction groups is probably due to people with a mild restriction generally not experiencing difficulty performing a core activity (i.e. mobility, self-care or communication) and thus not having as great a need for related aids.

4.5 Main disabling condition

For people with a core activity restriction and using aids, most reported a physical/diverse condition as their main disabling condition (Table 4.7 and see Appendix Table A4.3 for list of main disabling conditions associated with each primary category). Around 77% and 74% of aid users under and over the age of 65 years respectively had such a condition. Aid use was most commonly associated with 'other musculoskeletal conditions' (32%) in the under 65s and arthritis in the over 65s (21%).

Table 4.7: People with a core activity restriction using aids, by main disabling condition, 1998

Main disabling condition	0–64 years			65+ years		
	Uses aids ('000)	% of all aid users	% uses aid in condition group	Uses aids ('000)	% of all aid users	% uses aid in condition group
Physical/diverse	638.5	77.1	50.7	559.6	73.6	66.7
Circulatory	45.5	5.5	48.4	113.5	14.9	66.1
Respiratory	94.5	11.4	74.3	59.8	7.9	88.3
Arthritis	87.9	10.6	47.6	158.2	20.8	64.5
Neurological	12.8	3.0	47.3	23.5	3.1	77.3
Other musculoskeletal	261.3	31.5	46.4	109.0	14.3	60.4
Other physical	22.4	2.7	67.8	*5.2	*0.7	83.5
All other physical	101.9	12.3	50.1	90.4	11.9	65.7
ABI	12.3	1.5	39.3	*3.8	*0.5	89.8
Psychiatric	47.4	5.7	37.3	60.2	7.9	72.2
Intellectual/learning	47.0	5.7	29.4	*2.6	*0.3	51.9
Sensory/Speech	76.7	9.3	59.3	132.8	17.5	77.6
Vision	*7.2	*0.9	32.0	37.8	5.0	57.1
Hearing	67.7	8.2	78.7	95.0	12.5	91.0
Speech	**1.8	**0.2	8.5	**0.1	**0.0	8.0
Not applicable	*6.3	*0.8	39.1	**0.9	**0.1	56.2
Total	828.3	100.0		759.9	100.0	

Note: Estimates marked with ** have an associated relative standard error (RSE) of 50% or more. Estimates marked with * have an associated RSE of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

Aid use within main disabling condition groups

Aid use among people aged 0–64 years and with a core activity restriction was especially prevalent for those with a sensory/speech (60%) or physical/diverse disability (51%) (Table 4.7). Within these groups, aids were commonly used by people with a hearing impairment (79%) or an ‘other physical’ (e.g. paralysis) condition (68%).

For people aged 65 years and over, aid use was generally very high (50% plus) for all disabling condition groups. People with an acquired brain injury (ABI) (90%) or a sensory/speech disability (78%) had the highest prevalence of aid use, followed by people with a psychiatric disability (72%).

Average number of aids used

Generally, people aged under 65 years and with a core activity restriction used an average of one or two aids each (Table 4.8). A low use of aids was reported by people with a neurological condition, with an average of 0.4 aids used. In contrast, people reporting an ‘other physical’ condition used on average 4.7 aids.

Compared with people in the under 65 age group, the average number of aids used by people aged 65 years and over was high (Table 4.9). An average of 4.1 aids was used by people with an intellectual disability and 5.0 aids by those with an ‘other physical’ condition. An interesting difference between the two age groups is the 9-fold increase in the average number of aids used by people with a neurological condition, from 0.4 for the under 65s to 3.6 in the group aged 65+.

Type of aids used

People aged under 65 years and with either a hearing impairment or a respiratory-related condition showed considerable use of just one aid category (Table 4.8). For the hearing impaired these were, not surprisingly, ‘hearing and hearing associated aids’ (80%). Medical aids were the most important group for those with a respiratory-related condition (77%).

Medical aids were also the most commonly used aid for people under 65 years and with ‘all other physical’ conditions or a psychiatric condition. Use of medical aids accounted for 44% and 52% of all aid use for these two groups respectively (Table 4.8). In contrast, those who had a neurological condition most commonly used mobility aids (32% of all aid use) and people with a vision impairment relied mostly on communication aids (46%).

People aged 65 years and over and with a core activity restriction reported a higher proportional use of self-care and mobility aids, regardless of main disabling condition (Table 4.9). People with a respiratory-related condition, however, did show a slightly different pattern. As found for people aged under 65, medical aids were the most important aid used (45% of all aids used), followed by mobility aids at 19%. People with a hearing impairment also showed a significant reliance on hearing and hearing associated aids (78% of all aids used).

4.6 Need for assistance

Table 4.10 examines need for assistance (either help or supervision) with daily activities for people with a core activity restriction of any level or those with a severe or profound restriction, and their use of aids. ‘Core activities’ are communication, mobility and self-care

Table 4.8: People aged 0–64 years with a core activity restriction and using aids, by main disabling condition and type of aid used, 1998

Main disabling condition	Type of aid												Total aids ('000)	Total use aids ('000)	Average no. aids
	Self-care		Mobility		Communication		Hearing		Meal preparation		Medical				
	'000	% all aids	'000	% all aids	'000	% all aids	'000	% all aids	'000	% all aids	'000	% all aids			
Physical	180.6	16.4	225.3	20.5	160.1	14.6	33.4	3.0	32.4	2.9	466.7	42.4	1,099.2	638.5	1.7
Circulatory	16.8	19.9	19.7	23.4	15.5	18.5	*2.9	*3.4	**1.4	**1.7	27.9	33.11	84.2	45.5	1.9
Respiratory	*6.0	*5.0	*5.3	*4.5	11.9	10.0	**1.5	**1.3	**2.2	**1.8	92.1	77.4	119.0	94.5	1.3
Arthritis	22.0	15.8	25.1	18.0	19.2	13.7	*7.0	*5.0	*5.2	*3.7	61.2	43.8	139.7	87.9	1.6
Neurological	17.0	25.0	21.6	31.7	10.1	14.8	**1.8	**2.6	*3.4	*5.1	14.2	20.8	68.2	68.2	0.4
Other musculoskeletal	53.7	12.7	88.3	20.9	68.0	16.1	11.9	2.8	10.7	2.5	189.4	44.8	423.1	261.3	1.6
Other physical	39.0	37.1	40.1	38.3	9.8	9.4	**1.5	**1.4	*3.5	*3.3	11.0	10.5	104.9	22.4	4.7
All other physical	26.1	16.2	25.2	15.6	26.3	16.3	*6.8	*4.2	*6.1	*3.8	70.8	43.9	161.3	101.9	1.6
ABI	*6.8	*26.4	*7.3	*28.3	*4.1	15.9	**0.0	**0.0	**1.3	**4.9	*6.3	*24.5	25.7	12.3	2.1
Psychiatric	*8.0	*12.5	*4.5	*7.0	13.2	20.6	*4.4	*6.9	**0.8	**1.2	33.1	51.8	63.9	47.4	1.3
Intellectual	19.4	23.9	*8.1	*10.0	25.0	30.8	*2.8	*3.4	**1.7	**2.1	24.2	29.8	81.3	46.9	1.7
Sensory/speech	**2.4	**2.3	*4.2	*4.0	16.3	15.5	71.9	68.6	**1.7	**1.7	*8.4	*8.0	104.9	76.7	1.4
Speech	0	0.0	0	0.0	**1.7	**71.6	0	0.0	0	0.0	**0.7	**28.4	**2.4	**1.8	1.4
Vision	**0.2	**1.4	*2.9	*22.8	*6.0	*46.3	**0.0	**0.2	**1.4	**10.5	**2.4	**10.5	12.9	*7.2	1.8
Hearing	**2.2	2.5	**1.3	1.5	*8.6	9.6	71.9	80.2	**0.3	0.4	*5.3	5.9	89.6	67.7	1.3

Note: Estimates marked with ** have an associated relative standard error (RSE) of 50% or more. Estimates marked with * have an associated RSE of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

Table 4.9: People aged 65 years and over with a core activity restriction and using aids, by main disabling condition and type of aid used, 1998

Main disabling condition	Type of aid												Total aids ('000)	Total use aids ('000)	Average no. aids
	Self-care		Mobility		Communication		Hearing		Meal preparation		Medical				
	'000	% all aids	'000	% all aids	'000	% all aids	'000	% all aids	'000	% all aids	'000	% all aids			
Physical	395.5	29.1	337.7	28.9	65.3	4.8	195.0	14.4	18.4	1.4	254.0	18.7	1,357.7	559.6	2.4
Circulatory	127.9	38.4	96.0	28.8	16.5	5.0	37.6	11.3	*4.7	*1.4	50.2	15.1	333.0	113.5	2.9
Respiratory	17.4	16.2	20.6	19.2	*3.2	3.0	16.4	15.3	**1.7	**1.6	48.2	44.9	107.4	59.8	1.8
Arthritis	75.5	21.0	53.1	14.8	17.7	4.9	55.8	15.5	*5.5	*1.5	59.6	16.6	358.9	158.2	2.3
Neurological	39.9	46.8	27.0	31.7	**2.4	**2.8	*4.4	*5.1	**1.5	**1.7	10.0	11.7	85.1	23.5	3.6
Other musculoskeletal	64.3	27.4	73.9	31.6	12.7	5.4	39.9	17.0	*2.8	*1.2	40.7	17.4	234.2	109.0	2.1
Other physical	9.4	36.1	11.9	45.3	**1.1	**4.3	**1.3	**5.0	0	0.0	**2.4	**9.3	26.2	5.2	5.0
All other physical	61.1	28.7	53.3	26.0	11.7	5.5	39.7	18.6	**2.2	**1.1	42.8	20.1	212.8	90.4	2.4
ABI	*4.3	*45.0	**2.2	**23.0	0	0.0	**1.2	**12.2	0	0.0	**1.9	**19.8	9.6	3.8	2.5
Psychiatric	94.6	46.7	72.7	35.9	*3.5	*1.7	9.5	4.7	0	0.0	22.2	11.0	202.4	60.2	3.4
Intellectual	*5.4	*51.0	*3.0	28.3	**1.2	**11.3	**0.2	**2.3	0	0.0	**0.8	**7.1	10.5	2.6	4.1
Sensory/speech	26.6	12.4	33.0	15.4	17.2	8.0	116.3	54.4	*3.3	*1.5	17.5	8.2	213.8	132.8	1.6
Speech	0	0.0	**0.1	**50.0	0	0.0	0	0.0	0	0.0	**0.0	**50.0	**0.1	**0.0	2.0
Vision	18.4	21.6	25.5	29.9	12.4	14.6	16.3	19.2	**2.3	**2.7	10.3	12.1	85.2	37.8	2.3
Hearing	*8.2	*6.4	*7.4	*5.8	*4.8	*3.7	100.0	77.8	**0.9	**0.7	*7.2	*5.6	128.5	95.0	1.4

Note: Estimates marked with ** have an associated relative standard error (RSE) of 50% or more. Estimates marked with * have an associated RSE of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

activities while 'All activities' include core activities plus guidance, meal preparation, health care, housework and transport.

Use of aids for daily activities

People aged 0–64 years, with a core activity restriction and who needed assistance with all daily activities, generally reported a higher proportional use of aids compared with those who did not need assistance. This difference between use and non-use of aids was greater for those who did not need assistance with all daily activities (38% and 62% respectively) than for those who did need assistance (52% and 48% respectively) (Table 4.10). This suggests that aids are less likely to be used when assistance is not needed.

Table 4.10: People with a core activity restriction, by use of aids and need for assistance with specific activities, 1998

	0–64 years				65+ years			
	Needs assistance		Doesn't need assistance		Needs assistance		Doesn't need assistance	
	'000	%	'000	%	'000	%	'000	%
Core activity restriction								
<i>All activities^(a)</i>								
Uses aids	623.7	52.2	190.8	37.8	468.9	67.6	147.9	59.0
Not using aids	571.8	47.8	314.3	62.2	224.5	32.4	102.7	41.0
Total	1,195.5	100.0	505.3	100.0	693.4	100.0	250.6	100.0
<i>Core activities^(b)</i>								
Using aids	354.6	56.3	459.9	43.0	250.1	78.7	366.7	58.6
Not using aids	275.7	43.7	610.4	57.0	67.7	21.3	259.5	41.4
Total	630.3	100.0	1,070.3	100.0	317.9	100.0	626.2	100.0
Severe or profound core activity restriction								
<i>All activities</i>								
Using aids	355.8	56.2	**1.5	59.3	256.2	79.0	**1.1	100.0
Not using aids	277.6	43.8	**1.0	40.7	68.3	21.0	0	0.0
Total	633.4	100.0	**2.5	100.0	324.6	100.0	**1.1	100.0
<i>Core activities</i>								
Using aids	354.6	56.3	*2.7	48.1	250.1	78.7	*7.2	92.5
Not using aids	275.7	43.7	*3.0	51.9	67.7	21.3	**0.6	7.5
Total	630.3	100.0	*5.7	100.0	317.9	100.0	*7.8	100.0

(a) All activities include self-care, mobility, communication, health care, housework, guidance, meal preparation and transport.

(b) Core activities include self-care, mobility and communication.

Note: Estimates marked with ** have an associated relative standard error (RSE) of 50% or more. Estimates marked * have an associated relative standard error of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

For persons aged 0–64 years and with a severe or profound restriction, aid use for 'all activities' was slightly higher for those who did not need assistance (59%) compared with those who did need assistance (56%). However, aid use appeared more important for those who needed assistance specifically with the 'core activities'; 56% used aids compared with 48% who did not need assistance. Aid use by the over 65s with a core activity restriction was significant, regardless of whether the person needed assistance or not. However, the

proportion of aid use was much higher if assistance was needed. For example, 68% and 79% of those who needed assistance with 'all activities' or 'core activities' respectively used aids compared with 59% (both activity categories) who did not need assistance.

This trend was not so evident for the over 65s with a severe or profound core activity restriction. Indeed, people reporting no need for assistance used aids more often than those who needed assistance. This finding, however, might be a product of low numbers in this group.

Type of aid used

Needing assistance with a core activity was not necessarily associated with the use of an aid specific to the activity the aid was designed for (Table 4.11). On average, 40% of people with a severe or profound core activity restriction and reporting a need for assistance with self-care used an aid for self-care purposes. Uptake of self-care aids varied somewhat depending on age group, from 17% for under 15s to 61% for the over 65s.

A similar percentage, i.e. 41%, of people needing assistance with mobility used a mobility aid. Again, the over 65s showed the highest proportional use of aids (59%), with use by the other groups ranging from 16% to 29%.

The majority of people with a communication limitation did not use a communication aid, with only 8% of respondents reporting use of such an aid. The greatest use of communication aids (13%) was found for the age group 30–44 years, the lowest (4%) for the 45–64 year olds.

Table 4.11: People with a severe or profound core activity restriction and need for assistance with a core activity, by use of aids specific to the core activity, and age group, 1998

	Age group (years)					Total
	0–14	15–29	30–44	45–64	65+	
Self-care						
Needs assistance ('000)	85.9	34.5	87.3	171.5	302.6	681.8
Uses self-care aid ('000)	14.4	9.6	17.8	45.9	183.2	270.9
%	16.8	27.7	20.4	26.8	60.5	39.7
Mobility						
Needs assistance ('000)	73.3	64.3	109.0	218.2	408.4	873.2
Uses mobility aid ('000)	11.9	13.1	29.4	62.4	239.1	355.9
%	16.2	20.4	27.0	28.6	58.5	40.8
Communication						
Needs assistance ('000)	91.4	25.0	20.0	16.8	133.2	286.3
Uses communication aid ('000)	10.7	**2.3	**2.6	**0.6	*6.8	23.0
%	11.7	**9.3	**12.9	**3.7	*5.1	8.0

Notes

1. These data for each core activity group are not mutually exclusive, i.e. people expressing need for assistance with one core activity may also express need for assistance with another.
2. Estimates marked with ** have an associated relative standard error (RSE) of 50% or more. Estimates marked * have an associated relative standard error of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

Frequency of need for assistance

Generally, people aged 0–64 years who required frequent need for assistance with a core restriction (i.e. more than three times a day) were more likely to use aids (Table 4.12). This was particularly true for those with a high need for self-care assistance; 47% of those who reported using a self-care aid required frequent assistance compared with 19% of those who did not use a self-care aid. As frequency dropped, so too did the reliance on aids. Around 32% and 33% of people reporting use of a self-care and mobility aid respectively needed assistance between twice a week and twice a day. These proportions declined to 21% and 26% when assistance was needed once a week or less.

The non-use of self-care aids was associated with a lower need for self-care assistance but this was not the case for people who needed assistance with mobility or communication. For example, over half of people needing assistance with mobility but not using a mobility aid (55%) needed assistance between twice a week up to twice a day, compared with 10% who needed assistance less than once a week.

While there is evidence that the need for assistance with core activities is associated with the uptake of aids, there remains the finding that many people who need assistance with self-care, mobility or communication did not use any form of aid assistance. Reasons given in the 1981 Survey of Disability, Ageing and Carers for not using aids included:

- the high cost of aids (31%)
- the amount of trouble associated with obtaining aids (30%)
- the respondent not knowing where to get aids (14%)
- the respondent reporting they did not need or cannot use it yet (12%) (ABS 1982).

A similar question was not asked in the 1988, 1993 or 1998 surveys.

Table 4.12: People aged 0–64 years with a severe or profound core activity restriction, by use of aids specific to core activities, by frequency of need for assistance, 1998

	Frequency of need for assistance						Total	
	1/month to 1/week		2–6/week to 2/day		3–5/day to 6+ day			
	'000	%	'000	%	'000	%	'000	%
Needs assistance with self-care								
Uses self-care aid	18.0	20.6	28.1	32.0	41.6	47.4	87.8	100.0
Doesn't use self-care aid	121.1	41.6	113.6	39.0	56.7	19.4	291.4	100.0
Needs assistance with mobility								
Uses mobility aid	30.3	26.0	38.8	33.2	47.7	40.9	116.8	100.0
Doesn't use mobility aid	34.9	10.0	191.1	54.9	121.9	35.0	348.0	100.0
Needs assistance with communication								
Uses communication aid	*4.0	*5.0	*4.4	*7.1	*7.7	*47.9	16.2	100.0
Doesn't use communication aid	36.3	26.5	47.8	34.9	52.9	38.6	137.0	100.0

Notes

1. These data for each core activity group are not mutually exclusive, i.e. people expressing need for assistance with one core activity may also express need for assistance with another.
2. Estimates marked * have an associated relative standard error of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

Type of assistance

Another reason for non-use of aids might be a greater reliance on personal assistance instead. Table 4.13 investigates need for self-care, mobility and communication and the type of assistance received—aids only, personal care only, a combination of aids and personal care, or no assistance at all.

Personal assistance only was by far the most common form of assistance received—44%, 48% and 47% of people aged 0–64 years and who needed help with self-care, mobility and communication respectively relied solely on a primary carer. The sole use of aids was, correspondingly, quite low. Only 12% of people with a need for assistance with self-care or mobility used aids only, falling to 5% for those with a need for communication assistance. The use of both aids and personal assistance accounted for similar levels of use as that found for aids use only—11% for self-care, 14% for mobility and 5% for communication.

Despite considerable reliance on personal assistance, there still exists a large proportion of people who did not receive assistance. Forty three per cent of people who needed assistance with communication did not use either form of assistance. This percentage declined for people needing self-care and mobility assistance but remains significant at 33% and 27% of all respondents respectively.

Table 4.13: People aged 0–64 years with a severe or profound core activity restriction, by need for assistance with self-care, mobility or communication, by use of aids and primary care, 1998

Need for assistance	Type of assistance								Total '000
	Uses aids only		Uses primary carer only		Uses aids and personal carer		Uses neither		
	'000	%	'000	%	'000	%	'000	%	
Self-care	46.6	12.3	166.3	43.9	41.2	10.9	125.1	33.0	379.1
Mobility	54.3	11.7	222.7	47.9	62.5	13.5	125.3	27.0	464.8
Communication	*7.9	*5.2	72.0	47.0	*8.3	*5.4	65.0	42.5	153.2

Notes

1. These data for each core activity group are not mutually exclusive i.e. people expressing need for assistance with one core activity may also express need for assistance with another.
2. Estimates marked * have an associated relative standard error of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

4.7 Assistance from a primary carer

Tables 4.14 to 4.16 focus on use of aids and assistance from a primary carer, the carer's relationship to the person they are caring for, and the hours the primary carer spends in attending to the person's needs. The ABS defines a primary carer as a person of any age who provides the most informal assistance, in terms of help or supervision, to a person with one or more disabilities. The assistance has to be ongoing, or likely to be ongoing, for at least six months and be provided for one or more of the core activities (communication, mobility and self-care) (ABS 1999).

Receiving assistance from a primary carer

Generally, people with primary carers had a higher use of aids compared with people who did not have carers (Tables 4.15, 4.15 and 4.16). This association held across all severity groups and age groups although it was the least strong among people with a profound core activity restriction.

Sixty percent of people aged under 65 years and who had a primary carer used aids compared with 46% of those who did not have a carer. For the over 65s, this difference was 82% and 63% respectively. Having a primary carer may mean the person has greater assistance requirements and thus is more likely to rely on aids.

Relationship of primary carer

The relationship of the primary carer to the person they were caring for differed somewhat for users and non-users of aids. Among people under the age of 65 and with a core activity restriction, a spouse or partner was the most likely primary carer for those using aids (57%) whereas a parent was the more likely carer for people not using aids (49%) (Table 4.14). This was not the case for the over 65s where a spouse or partner was the most common primary carer regardless of aid use or non-use.

Table 4.14: People with a core activity restriction living in households, by primary carer status, relationship of carer and hours of care per week and use of aids, 1998

	0-64				65+			
	Uses aids		Doesn't use aids		Uses aids		Doesn't use aids	
	'000	%	'000	%	'000	%	'000	%
Primary care assistance								
Has primary carer	139.4	60.0	92.9	40.0	102.5	82.4	21.9	17.6
Doesn't have primary carer	675.2	46.0	793.1	54.0	514.3	62.8	305.3	37.2
Relationship of carer								
Spouse or partner	79.9	57.3	35.9	38.6	65.3	63.7	13.7	62.3
Parent	44.9	32.2	45.8	49.2	0	0.0	0	0.0
Child	*8.2	*5.9	*3.6	*3.9	32.2	31.4	*5.8	26.2
Other relative or friend	*6.4	*4.6	*7.7	*8.2	*5.0	*4.9	**2.5	**11.5
Hours of care per week								
<20 hours	51.8	37.1	31.0	33.4	26.5	25.9	*6.4	*29.4
20-39 hours	25.4	18.2	15.3	16.4	19.1	18.7	*2.7	*12.1
40+ hours	55.0	39.5	40.6	43.7	50.3	49	11.8	53.7
Not stated	*4.6	*3.3	*6.1	*6.5	*6.6	*6.4	**1.1	**4.8

Note: Estimates marked with ** have an associated relative standard error (RSE) of 50% or more. Estimates marked * have an associated relative standard error of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

Severity of restriction

Aid users with a profound core activity restriction relied relatively equally on parents (50%) or a spouse (44%) to provide primary care, compared with non-users whose parent was the usual primary carer (70%) (Table 4.15). This pattern changed for people with a severe core

activity restriction where the spouse was the most important primary care giver for both users and non-users but more so for the former group (75% as compared to 64%).

Table 4.15: People aged 0–64 years with a profound or severe core activity restriction living in households, by primary carer status, relationship of carer and hours of care per week, by severity of core activity restriction and use of aids, 1998

	Profound				Severe			
	Uses aids		Doesn't use aids		Uses aids		Doesn't use aids	
	'000	%	'000	%	'000	%	'000	%
Primary care assistance								
Has primary carer	69.9	57.7	51.1	42.3	61.6	61.9	37.9	38.1
Doesn't have primary carer	45.6	56.2	35.5	43.8	180.3	53.9	154.0	46.1
Relationship of carer								
Spouse or partner	30.4	43.5	9.7	18.9	44.9	75.2	24.2	63.6
Parent	34.8	49.8	35.9	70.3	*8.7	*14.5	9.2	24.2
Child	*2.7	*3.8	**1.7	**3.3	*5.1	*8.6	**1.3	**3.5
Other relative or friend	**2.0	**2.9	*3.8	*7.5	*3.1	*5.2	*3.3	*8.7
Hours of care per week								
<20 hours	13.6	19.4	*8.0	15.6	33.8	56.7	20.6	54.3
20–39 hours	12.3	17.7	11.2	22.0	10.5	17.5	*4.0	*10.5
40+ hours	42.1	60.3	27.2	53.2	12.6	21.1	12.0	31.6
Not stated	**1.2	**1.7	*4.7	*9.2	*2.0	*4.7	**1.4	**3.6

Note: Estimates marked with ** have an associated relative standard error (RSE) of 50% or more. Estimates marked * have an associated relative standard error of between 25% and 50%. These estimates should be interpreted accordingly.

Source: AIHW analysis of ABS 1998 Survey of Disability, Ageing and Carers Confidentialised Unit Record File.

Age groups

Parents tended to be the primary care giver for people aged 0–14 and 15–29 years, regardless of whether the care recipient used aids or not (Table 4.16). For the older age groups, care was received primarily from a spouse or partner, again regardless of aid use. Around 71% of primary care givers for aid users 30–44 years and using aids was a spouse or partner. This contrasts with non-users of the same age group where 44% of primary care givers were a spouse or partner and 32% a parent.

Hours of care

Aids users aged under 65 received shorter hours of care from the primary carer, albeit only slightly less so (Table 4.14). In contrast among the over 65s it was non-users who received fewer hours of care.

Severity of restriction

Receiving 40 or more hours of care a week was common for people with a profound core activity restriction (Table 4.15). Of those who used aids, 60% reported receiving 40 or more hours of care compared with 53% of those who did not use aids. Hours of care received were less on average for people with a severe core activity restriction. Just over half received less

than 20 hours of care, regardless of aid use. A greater proportion of non-users received 40 or more hours care a week compared with aid users.

Age groups

Sixty three per cent of people aged 14 years or younger and using aids received 40 or more hours of care a week compared to 54% of non-users (Table 4.16). For those over the age of 65 years, 49% and 54% of aid users and non-users respectively obtained 40 or more hours of care.