

Psychosocial disability support services

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Key Points

- As at 31 December 2021, people with a psychosocial disability formed the **third largest** primary disability group (53,123 people) among NDIS participants ([NDIA 2021a](#)).
- Almost **3 in 4** (71.8%) active NDIS participants with a psychosocial primary disability resided in *Metropolitan areas* as at 31 December 2021.
- The rate of active participants with a psychosocial primary disability was **almost 3 times** higher for Aboriginal and Torres Strait Islander people than other Australians (468.1 people per 100,000 and 164.0 respectively) as at 31 December 2021.
- **1 in 2** (50.9%) NDIS participants with a psychosocial primary disability had a diagnosis of *Schizophrenia* as their main diagnosis as at 31 December 2021.
- Only **3 in 4** participants with a psychosocial primary disability (76.0%) relied on informal supports such as friends and family as at 31 December 2021, compared to almost all participants (94.7%) across other disability groups.
- For the month ending 31 December 2021, jobseekers with a psychiatric primary disability comprised **40.1%** of all jobseekers (126,100 cases) across the Disability Employment Services, second only to the proportion of jobseekers with a physical disability (43.5% or 136,776 cases).

Summary

Mental illness, and in particular severe mental illness, is an important cause of disability. The Australian Burden of Disease study 2018 found that mental and substance use disorders were the second leading cause of [years lived with disability \(YLD\)](#) (AIHW 2021). Mental illness can vary in severity and be episodic or persistent in nature. The Productivity Commission estimates that around 5% of Australians or 800,000 people have a severe mental illness, of which 500,000 people have episodic mental illness and 300,000 have persistent mental illness (PC 2020).

Many Australians with severe mental illness may also have a [psychosocial disability](#) - and can experience challenges with communication and social inclusion, finding suitable housing and employment and maintaining physical health. As a consequence, they are among the most disadvantaged people in our community (Tune 2019). Disability support services are critical in assisting people with psychosocial disability overcome functional limitations (for example, with communication, daily living or self-care) and facilitating full and equal participation in the community.

This section presents information on specialist disability support services provided under the [National Disability Insurance Scheme \(NDIS\)](#) to participants with a [primary disability](#) of psychosocial disability. The NDIS sets out to provide reasonable and necessary supports to eligible Australians who enter the Scheme under the age of 65 years, with a permanent (or likely to be permanent) and significant disability (NDIA 2021c). The [National Disability Insurance Agency \(NDIA\)](#) is an independent statutory agency whose role is to implement the NDIS. This section also provides information on employment services provided by the [Disability Employment Services \(DES\)](#) for people with a [psychiatric disability](#) as their primary disability. Please note that DES uses the term psychiatric and not psychosocial (for more information please refer to [key concepts](#)).

Spotlight figure: How many NDIS participants have a psychosocial primary disability?

53,123
(34,200 secondary)

Choose a measure
 Number
 Per cent
 Rate (per 100,000 population)

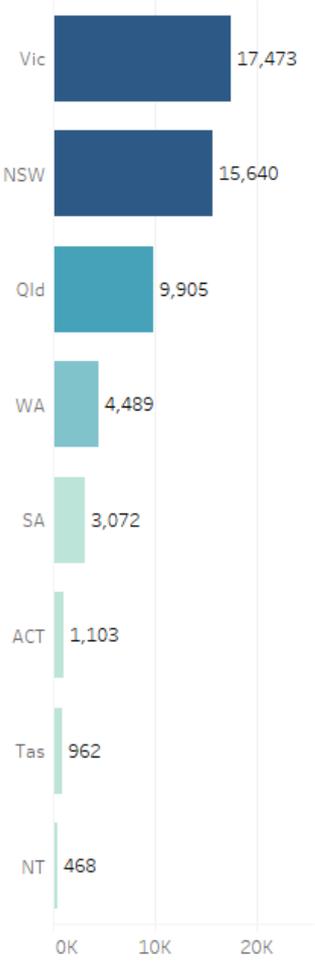
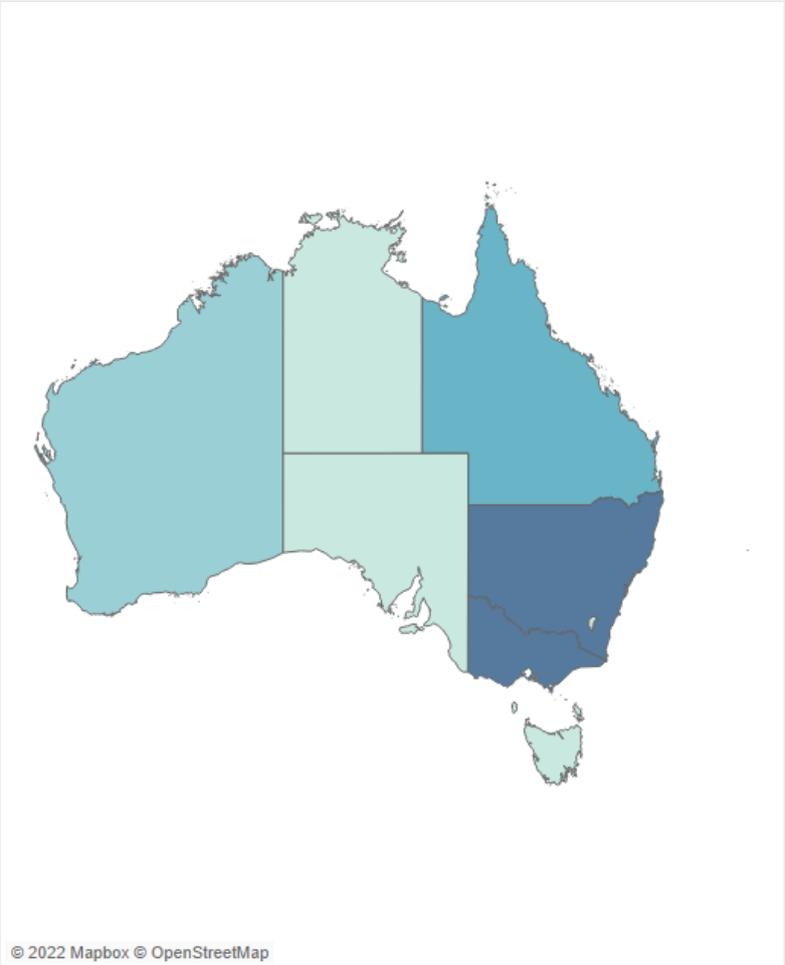


Figure DIS.1: NDIS active participants with a psychosocial primary disability, by state or territory, as at 31 December 2021
www.aihw.gov.au/mhsa

Note: Rates are calculated per 100,000 demographic-specific population.

Source: Psychosocial disability support services as at 31 December 2021 Table DIS.1, Table DIS.4

Figure DIS.1 is an interactive figure, which can be explored in detail on the [MHSA website](#).

Data downloads:

Excel – Psychosocial disability support services as at 31 December 2021 tables (194KB XLS)

PDF - Psychosocial disability support services as at 31 December 2021 section (269KB)

Data coverage for NDIS applies to the second quarter of the 2021-22 financial year. DES monthly data applicable at 31 December 2021.

You may also be interested in:

- [Specialised supports for people with disability](#)

Psychosocial disability and the NDIS

The 2019 review of the *National Disability Insurance Scheme Act 2013* (NDIS Act) commissioned by the Australian Government (commonly referred to as the Tune Review) affirmed the NDIS delivery response works well in general for adults with physical disability, but singled out people with psychosocial disabilities as a group for whom the provision of services had been challenging. Among several findings relating to the NDIS delivery response to people with psychosocial disabilities, the Review found that legislated requirements in relation to permanent impairment for the purposes of eligibility had created particular challenges for people with psychosocial disabilities ([Tune 2019](#)).

In December 2021, following consultation with participants, families, carers, peak bodies, service providers, clinical mental health services, state and territory governments, and NDIA staff, the NDIS Psychosocial Disability Recovery-Oriented Framework (Recovery Framework) was endorsed by Disability Ministers and released. The Recovery Framework sets out six principles and a series of high-level implementation strategies designed to improve the experience of participants with psychosocial disability in the NDIS ([NDIA 2021a](#)).

In March 2022, parliament passed the National Disability Insurance Scheme Amendment (Participant Service Guarantee and Other Measures) Bill 2022 to amend the *National Disability Insurance Scheme Act 2013*. The Bill reflects certain recommendations from the Tune Review including clarifications on the eligibility of people with psychosocial disability, such that impairments that are episodic or fluctuating in nature may be taken to be permanent.

NDIS participants with a psychosocial primary disability

As at 31 December 2021, people with a *Psychosocial disability* as their primary disability formed the third largest primary disability group among NDIS participants (11%), after *Autism* (33%) and *Intellectual disability* (19%) ([NDIA 2021a](#)). At this time there were 53,123 people with a primary psychosocial disability who were active participants with an [approved plan](#) under the NDIS (Figure DIS.2) ([NDIA 2021a](#)).

As at 31 December 2021, among NDIS active participants with a psychosocial primary disability:

- Victoria had the highest rate in the NDIS with a rate of 263.0 participants per 100,000 population, followed by the Australian Capital Territory (256.2). The lowest rate was in Western Australia (167.2).
- 1 in 5 participants (19.1%) were aged under 35 years. The bulk of participants were spread fairly evenly across the 35-44 years (22.7%), 45-54 years (27.7%) and 55-64 years (25.0%) age groups. The highest rate was among the 45-54 years age group with 452.9 participants per 100,000 population whilst the lowest rate was among the less than 15 years age group (5.4).
- males had a higher rate of participation (209.7 participants per 100,000 population) compared with females (198.2).
- 1 in 13 (7.8%) identified as Aboriginal and Torres Strait Islander. The rate of active participants with a primary psychosocial disability was almost 3 times as high for Indigenous Australians (468.1 participants per 100,000 population) than non-Indigenous Australians (164.0).
- 1 in 8 (12.6%) identified as being from a Culturally and Linguistically Diverse (CALD) background.
- almost 3 in 4 (71.8%) usually resided in *Metropolitan areas* compared with 1.5% in *Remote or Very Remote Communities*. People who usually resided in *Large rural towns* had the highest rate of participation with 261.8 participants per 100,000 population, whereas people with a usual residence in *Remote communities* had the lowest (143.4).
- 1 in 2 (50.9%) had a diagnosis of *Schizophrenia* (F20) as their primary diagnosis, making this the largest primary diagnosis group among NDIS participants with a primary psychosocial disability, followed by *Other psychosocial disorders* (F99) at 16.5% and *Bipolar Affective Disorder* (F31) at 9.7%.

Figure DIS.2: NDIS active participants with a psychosocial primary disability, by demographic characteristics, as at 31 December 2021

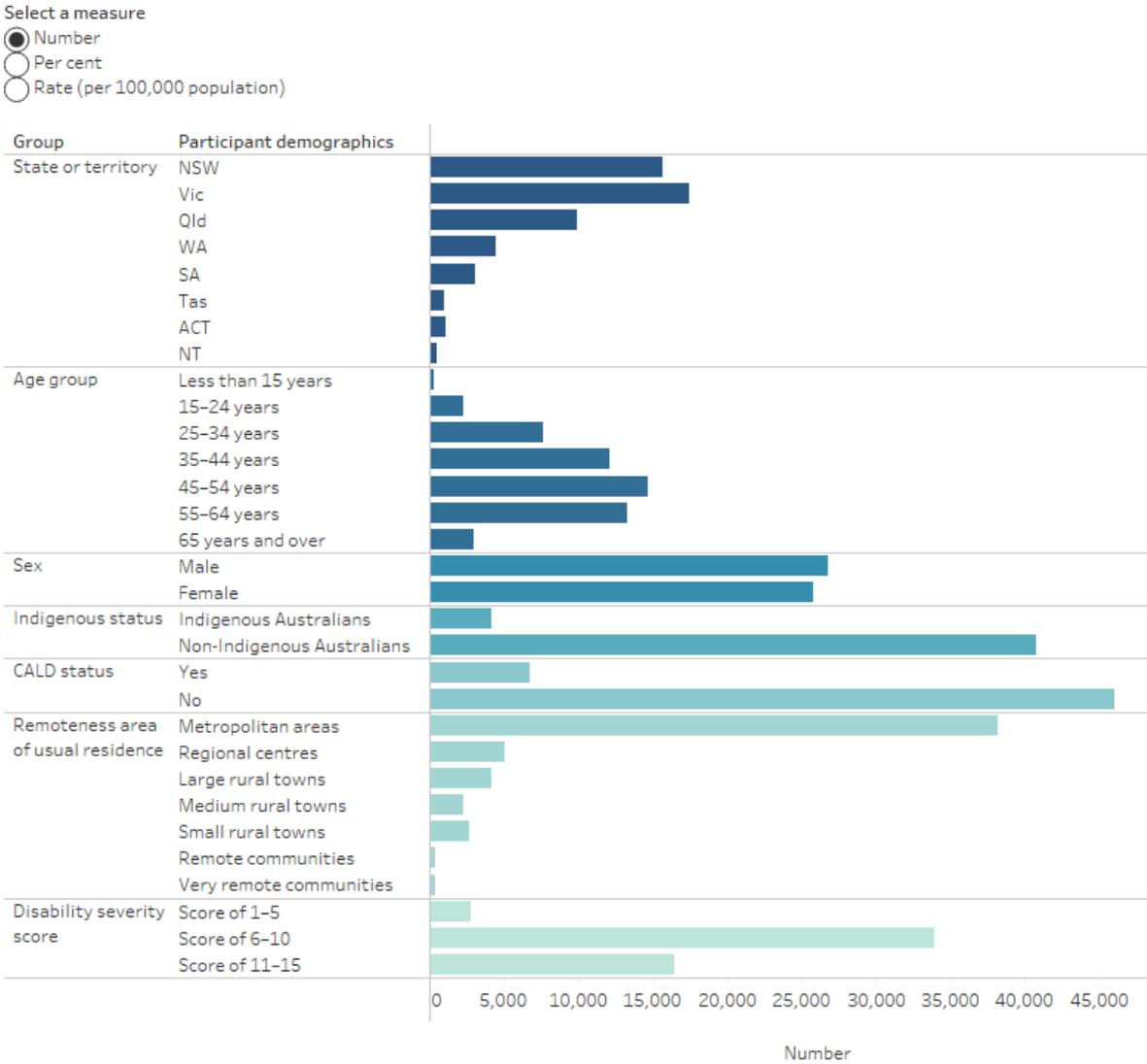


Figure DIS.2: NDIS active participants with a psychosocial primary disability, by demographic characteristics, as at 31 December 2021
www.aihw.gov.au/mhsa

Note: Rates are calculated per 100,000 demographic-specific population.

Source: Psychosocial disability support services as at 31 December 2021, Table DIS.4

Figure DIS.2 is an interactive figure, which can be explored in detail on the [MHSA website](#).

Supports accessed by participants with a psychosocial primary disability

Supports available under the NDIS fall into 15 categories, and include things like assistance with daily life, transport, social and community participation, funding for disability-related consumables, assistive technologies and home modifications (refer to the [Supports and services funded by the NDIS](#)) (NDIA 2021b). Therapeutic supports to

facilitate functional improvement where maximum medical improvement has been reached may also be funded under the NDIS (NDIA 2022a). Early intervention supports are also provided under the NDIS to eligible children and adults (NDIA 2021c).

Among NDIS participants with a psychosocial primary disability, the most accessed services fell under the categories of *Improved Daily Living Skills* (utilised by 96.1% of participants), *Assistance with Social and Community Participation* (94.1%) and *Coordination of Supports* (90.5%). When compared to other participants across the NDIS (whose primary disabilities were not psychosocial) a much higher proportion of participants with a psychosocial primary disability accessed the support categories *Assistance with Daily Life* (88.4% compared with 49.5%), *Assistance with Social and Community Participation* (94.1% compared with 55.4%), *Transport* (75.5% compared with 36.3%) and *Coordination of Supports* (90.5% compared with 38.0%), although a much lower proportion accessed *Consumables* (50.3% compared with 75.5%) (Figure DIS.3).

Figure DIS.3: NDIS active participants, psychosocial primary disability and other primary disability, by support category, as at 31st December 2021

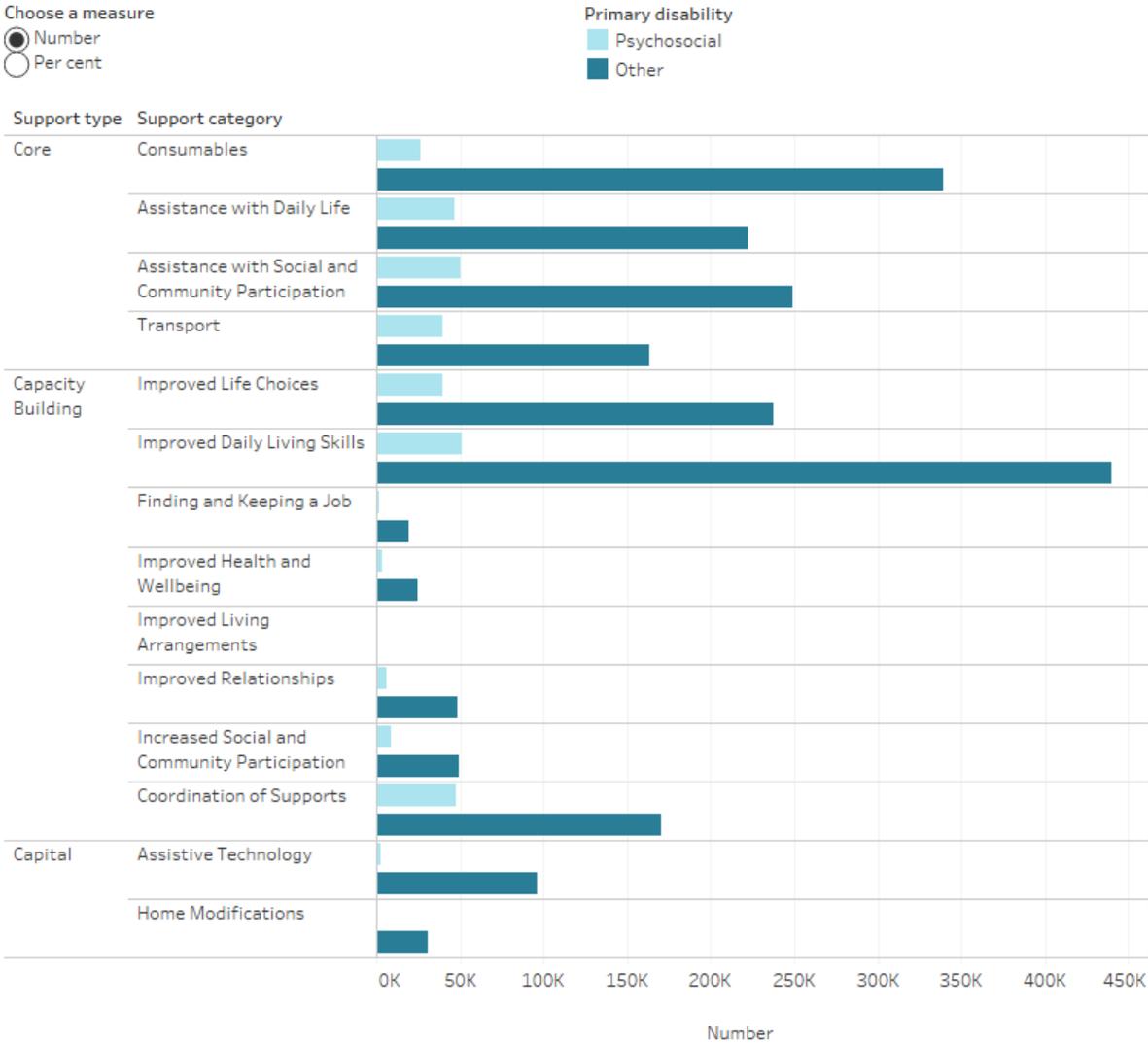


Figure DIS.3: NDIS active participants, psychosocial primary disability and other primary disability, by support category, as at 31 December 2021

<https://www.aihw.gov.au/mhsa>

Note: Among NDIS participants with a non-psychosocial primary disability (i.e. in the category 'other') are participants who may have a psychosocial secondary disability.

Source: Psychosocial disability support services as at 31 December 2021, Table DIS.5

Figure DIS.3 is an interactive figure, which can be explored in detail on the [MHSA website](#)

Residential supports

The NDIS funds various home and living supports including:

- assistance with daily life in the home
- home modifications
- short-term and medium-term accommodation

- assistive technologies
- independent living options (ILO)
- supported independent living (SIL)
- specialist disability accommodation (SDA)

Supported independent living (SIL) is generally for people with higher support needs who require some level of assistance at home all the time. SIL consists of funding for paid personal supports and is most commonly used in shared living arrangements to help participants live as independently as possible, while building skills. Specialist disability accommodation (SDA) is specialised housing designed for people with extreme functional impairment or very high support needs, and usually involves living with a small number of other people (NDIA 2022b). See [NDIS Home and Living Supports](#) for further information on accommodation support.

As at 31 December 2021, among participants with a psychosocial primary disability, about 1 in 80 (1.3% or 685 people) were accessing SDA, and almost 1 in 20 (4.6% or 2,437 people) were accessing SIL packages.

Supports outside the NDIS accessed by participants with a psychosocial primary disability

There are supports outside the NDIS important to the well-being and quality of life of NDIS participants, and which the NDIS tries to connect participants with. These are classified by the NDIS as:

- **Informal supports** such as friends, family and other people that participants know in their community
- **Community supports** such as community groups religious groups and other activities in a participant's area
- **Mainstream supports** such as the health and education systems and other government services available to all Australians (NDIA 2021d).

As at 31 December 2021, almost all (95.1%) participants with a psychosocial primary disability had accessed mainstream supports such as health and other government services, a similar finding to that for other participants across the Scheme (95.3%). The proportion of participants with a psychosocial primary disability who accessed community supports (41.9%) was slightly lower than other participants across the NDIS (46.5%). The proportion of participants with a psychosocial primary disability who are recorded as accessing informal supports such as friends and family was much lower than other participants across the Scheme (76.0% compared to 94.7%).

Employment services for people with a psychiatric disability

Employment services was the most accessed category of service by users with a psychiatric disability under the National Disability Agreement (NDA). Disability Employment Services (DES) are not part of the NDIS and are operated by the Australian Government Department of Social Services (DSS). Supports greater than what may be reasonably provided by an employer or the provisions of the DES are able to be funded by the NDIS ([NDIA 2021e](#)).

DES is made up of two parts. Disability Management Services (DMS) helps jobseekers with disability, injury or health conditions find a job and can also provide occasional support in the workplace. Employment Support Services (ESS) provides assistance to jobseekers with permanent disability to find a job, and regular ongoing support in the workplace to keep a job (for more information see [Disability Employment Services](#)).

According to the DES caseload data at 31 December 2021, jobseekers with a psychiatric primary disability comprised 40.1% of jobseekers (126,100 cases) across the DES, second only to the proportion of jobseekers with a physical disability (43.5% or 136,776 cases).

Within the ESS arm of DES, jobseekers with a primary psychiatric disability comprised the largest proportion of cases among all primary disability groups, forming 42.0% of the caseload (70,040 cases) on 31 December 2021.

Data Source

The NDIS began operating at trial sites in July 2013, and from July 2016 it began transitioning to the full scheme. On 1 July 2020, Christmas Island and Cocos Island joined the NDIS, thus almost completing the staged role out of the Scheme.

Except for Disability Employment Services (DES), the NDIS has largely replaced disability support services provided under the [National Disability Agreement](#) (NDA). Data was last collected under the NDA in the [Disability Services National Minimum Data Set \(NMDS\)](#) in 2018–19. The transition of disability support service users from the NDA to the NDIS effected a gradual reduction in data collection under the NDA between 2013 and final collection in 2019.

The NDIA collects data pertaining to the NDIS and publishes online quarterly reports ([NDIA 2021](#)).

NDIS uses Modified Monash Model (MMM) categories to assign remoteness areas of usual residence. The MMM classifies metropolitan, regional, rural and remote areas according to geographical remoteness, as defined by the Australian Bureau of Statistics (ABS), and town size. The MMM remoteness categories are defined as follows including the Australian Geography Standard – Remoteness Area (2016):

MM 1: Metropolitan areas - Major cities accounting for 70% of Australia's population
All areas categorised ASGS-RA1.

MM 2: Regional centres - Inner (ASGS-RA 2) and Outer Regional (ASGS-RA 3) areas that are in, or within a 20km drive of a town with over 50,000 residents. For example: Ballarat, Mackay, Toowoomba, Kiama, Albury, Bunbury.

MM 3: Large rural towns - Inner (ASGS-RA 2) and Outer Regional (ASGS-RA 3) areas that are not MM 2 and are in, or within a 15km drive of a town between 15,000 to 50,000 residents. For example: Dubbo, Lismore, Yeppoon, Busselton.

MM 4: Medium rural towns - Inner (ASGS-RA 2) and Outer Regional (ASGS-RA 3) areas that are not MM 2 or MM 3, and are in, or within a 10km drive of a town with between 5,000 to 15,000 residents. For example: Port Augusta, Charters Towers, Moree.

MM 5: Small rural towns - All remaining Inner (ASGS-RA 2) and Outer Regional (ASGS-RA 3) areas. For example: Mount Buller, Moruya, Renmark, Condamine.

MM 6: Remote communities - Remote mainland areas (ASGS-RA 4) AND remote islands less than 5kms offshore. For example: Cape Tribulation, Lightning Ridge, Alice Springs, Mallacoota, Port Hedland. Additionally, islands that have an MM 5 classification with a population of less than 1,000 without bridges to the mainland will now be classified as MM 6 for example: Bruny Island.

MM 7: Very remote communities - Very remote areas (ASGS-RA 5). For example: Longreach, Coober Pedy, Thursday Island and all other remote island areas more than 5kms offshore.

For more information on geographic remoteness categories using the MMM refer to the [Modified Monash Model factsheet](#).

References

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NDIA (2022a) [NDIS Pricing Arrangements and Price Limits 2021-22](#), NDIA, accessed 19 April 2022.

NDIA (2022b) [NDIS: Home and living](#), NDIA, accessed 13 April 2022.

Productivity Commission (PC) (2020) Productivity Commission Inquiry – Mental Health Report no.95, Productivity Commission, Canberra.

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Key Concepts

Psychosocial disability support services

Key Concept	Description
Approved plan	A written agreement worked out with the participant, stating their goals and needs, and the reasonable and necessary supports the NDIS will fund for them. Each participant has their own individual plan.
Disability Employment Services	Disability Employment Services help people with disability find work and keep a job. Through Disability Employment Services, people with disability, injury or health condition may be able to receive assistance to prepare for, find and keep a job. Disability Employment Services has two parts: (i) Disability Management Service is for job seekers with disability, injury or health condition who need assistance to find a job and occasional support in the workplace to keep a job; (ii) Employment Support Service is for job seekers with permanent disability who need help to find a job and who need regular, ongoing support in the workplace to keep a job.
National Disability Agreement (NDA)	Originally signed by Australian Government and state and territory governments in January 2008 (replacing the previous Commonwealth State/Territory Disability Agreement), the National Disability Agreement articulated the roles of the governments in delivering specialist disability services. The

agreement's overarching objective was to provide more opportunities for people with disability and their carers to participate in economic and social life (COAG 2011).

A revised NDA was endorsed by Council of Australian Governments (COAG) members in 2012.

From 2013, state and territory-based disability support services provided under the NDA were progressively transitioned to the National Disability Insurance Scheme (NDIS). Data for services provided under the NDA were collected under the Disability Services National Minimum Data Set (DS NMDS) until 2018-19.

National Disability Insurance Agency (NDIA)

The **National Disability Insurance Agency** is responsible for implementing and managing the NDIS.

National Disability Insurance Scheme (NDIS)

The Australian Government announced the introduction of the **National Disability Insurance Scheme (NDIS)** in July 2012. The NDIS provides 'reasonable and necessary supports' to help people who have a 'significant and permanent' disability. The scheme is based on an insurance model, and each individual seeking access is assessed according to a common set of criteria. Individuals who are deemed eligible receive a package of funding to purchase the supports identified in their individualised plan. The NDIS is administered by the National Disability Insurance Agency.

Primary disability

A **primary disability** is the disability that causes the most difficulties in everyday life.

Many people have multiple disabilities or other comorbid conditions that do not impair the person to the same extent as their primary disability. These are referred to as secondary disabilities.

Psychosocial disability

Psychosocial disability describes a disability that comes from a mental health condition. Not everyone who has a mental health condition will have a psychosocial disability. Examples of some psychosocial disabilities include Schizophrenia and Schizoaffective disorder, Anxiety disorders, Obsessive compulsive disorder, Post-traumatic stress disorder, Agoraphobia and Social phobia or Mood disorders, such as Depression and Bipolar.

Psychiatric disability

Psychiatric disability within the Disability Employment Services includes clinically recognisable symptoms and behaviour patterns frequently associated with distress that may impair functioning in normal social activity. Psychiatric disability may be associated with schizophrenia, affective disorders, anxiety disorders, addictive behaviours, personality disorders, stress, psychosis, depression and adjustment disorders, but dementias, specific learning disorders (such as attention deficit disorder) and autism are excluded.

Therapeutic supports

Therapeutic supports provide therapeutic services to participants (over 7 years). In the NDIS, therapy supports are for participants with an established disability, where maximum medical improvement has been reached, to facilitate functional improvement. For people who access the Scheme as 'early intervention' NDIS participants, reasonable and necessary supports are likely to be a blend of medical and disability therapies, but should be predominantly disability therapy supports. Therapy in this context is be aimed at adjustment, adaption, and building capacity for community participation. For more information see [NDIS Pricing Arrangements and Price Limits](#).

Years lived with disability (YLD)

The number of years of what could have been a healthy life that were instead spent in states of less than full health. YLD represent non-fatal burden.