10 Support services for people with psychiatric disability

10.1 Introduction

The third Commonwealth State/Territory Disability Agreement (CSTDA) (FaCS 2002), provides the framework for the Australian and state and territory governments to collaboratively supply specialist support services to people with disabilities, until 31 December 2008. The framework promotes the shared core belief of a just and inclusive society which responds to the needs of all individuals. The CSTDA specifies that the Australian Government is responsible for the planning, policy setting and management of employment services, and that the states and territories are responsible for all other disability support services. Support for advocacy, information and print disability services is a shared responsibility (FaCS 2002).

The CSTDA defines people with disabilities as those people with disabilities attributable to an intellectual, psychiatric, sensory, physical or neurological impairment or acquired brain injury (or some combination of these) which is likely to be permanent and result in substantially reduced capacity in self-care/management, mobility or communication. In addition, the needs of these individuals should be identified as being likely to be significant and ongoing and/or require long-term episodic support. Also, the disability must manifest itself before the age of 65 years (FaCS 2002).

Information presented in this chapter has been extracted from the CSTDA National Minimum Data Set (NMDS), which is a national collation of data on the disability support services receiving CSTDA funding, including the estimated number of service users. The data is from the most recent collection (2006–07), along with 2005–06 data, where applicable for comparative purposes. As reported previously (AIHW 2008g), there were jurisdictional variations in the services funded under the CSTDA and thus comparisons across the states and territories must be undertaken with caution. See Appendix 1 for further information on data quality, coverage and other aspects of the CSTDA data collection.

The data presents detail on CSTDA-funded disability support services provided to service users with a psychiatric disability either as their *primary disability* or as an *other significant disability*. A person who fulfilled the CSTDA definition of 'people with disabilities' may receive a range of CSTDA-funded *service types*, depending on availability and their individual needs. Services may be either *residential* or *non-residential*, or a combination of the two. Data presented cover both of these types of services. For further details on CSTDA-funded services see *Disability support services* 2006–07 (AIHW 2008b). Data on the quantity (or hours) of support received are *not* presented here, as the information collected relates only to selected non-residential services, and has a high proportion of missing information.

Overall, 232,253 people across Australia made use of CSTDA-funded services during 2006–07, an increase of 7% from 2005–06. The most common primary disability among these clients was intellectual disability (33%). *Psychiatric disability* rated as the second most commonly reported primary disability, at 15%, ahead of physical disability, 13%.

Key concepts

Disability groups are a broad categorisation of disabilities in terms of the underlying health condition, impairment, activity limitations, participation restrictions, environmental factors and support needs (NCSDC 2006). The 12 categories are: intellectual; specific learning/attention-deficit disorder; autism; physical; acquired brain injury; neurological; deafblind; vision; hearing; speech; psychiatric; and developmental delay. For the CSTDA data, the relevant disability groups are identified by the service user, carer and/or service provider.

Primary disability is the disability group that most clearly expresses the experience of disability by a person, causing the most difficulty for the person in their daily life.

Other significant disability refers to disability group(s) other than that indicated as being 'primary' that also clearly expresses the experience of disability by a person and/or causes difficulty for the person. A number of other significant disabilities may be identified for each service user from the categories mentioned above.

Psychiatric disability in the CSTDA collection includes clinically recognisable symptoms and behaviour patterns frequently associated with distress and which may impair functioning in normal social activity. The typical effects of conditions such as schizophrenia, affective disorders, anxiety disorders, addictive behaviours, personality disorders, stress, psychosis, depression and adjustment disorders are included but dementias, specific learning disorders (such as attention-deficit disorder) and autism are excluded.

Service type and **service group** refer to the classification of services according to the support activity which the service provider has been funded to provide under the CSTDA. For the purpose of this report, service types relate to residential services. Service groups relate to the provision of non-residential services.

Residential services are services that provide accommodation for people with a disability. They include accommodation in large and small residentials/institutions; hostels; and group homes.

Non-residential services are services that support people with a disability to live in a non-institutional setting through the provision of community support, community access, accommodation support in the community, respite and/or employment services.

10.2 CSTDA services overview

In 2006–07, 47,658 people with a psychiatric disability used CSTDA-funded services, an increase of 25% from 2005–06 (Table 10.1). This increase may be due to an overall rise in the number of people with a psychiatric disability using CSTDA-funded services or it may be due to an increase in the number of people self-identifying as having a psychiatric disability, or a combination of the two factors. There is also some evidence of changes in coding practices affecting the counts of service users.

The number of service users with 'not stated' and 'not known' responses for primary disability group varies between collection periods and within jurisdictions, which impacts on the number of people identified as having a psychiatric disability. In 2006–07, the number of 'not stated' and 'not known' responses ranged from 0.7% to 26.6%. See Appendix 1 for additional information.

CSTDA-funded non-residential support service rates in 2006–07 increased to 2,251 (per million population), from 1,816 (per million population) in 2005–06 (Table 10.1). Residential service rates also increased in 2006–07 to 161 (per million population), from 144 (per million population) in 2005–06.

While at both the national and the state/territory levels, the number of non-residential service users far outweighed the number of residential service users, the proportions differed considerably across the states and territories. In particular, 18.0% of service users in Tasmania accessed residential services, whereas 2.5% did so in Queensland, compared to the national average of 7.1%.

There was a marked difference between residential and non-residential service users in terms of whether their primary disability was psychiatric. For residential service users, psychiatric disability was the primary disability in 10.0% of cases, whereas for non-residential service users it was the primary disability in 75.6% of cases (tables 10.3 and 10.7, respectively).

There was also a difference between residential and non-residential service users in terms of their country of birth. Service users born in Australia accounted for 93.0% of residential service users, compared to 83.1% of non-residential service users (tables 10.4 and 10.8, respectively).

Table 10.1: CSTDA-funded service users with a psychiatric disability, states and territories, 2005–06 and 2006–07

State or territory ^(a)		2005–06			2006–07	
	Non- residential	Residential	Total ^(b)	Non- residential	Residential	Total ^(b)
NSW	6,432	1,218	6,834	9,726	1,304	10,065
Vic	20,619	963	20,784	22,671	1,018	22,862
Qld	5,570	183	5,631	7,574	191	7,629
WA	1,698	20	1,704	2,584	^(c) 195	^(c) 2,637
SA	1,927	335	2,004	2,814	410	2,920
Tas	797	184	846	937	178	989
ACT	317	34	320	535	83	543
NT	87	22	103	147	18	157
Total ^(d)	37,309	2,959	38,086	46,848	3,397	47,658
Rate (per 1,000,000 population ^(e))	1,816	144		2,251	161	

⁽a) State/territory is based on the location of the CSTDA-funded service. Service type outlet response rates varied across state/territory jurisdictions. Information relating to state/territory service user counts should be interpreted with reference to jurisdictional response rates (AIHW 2008b). See also Appendix 1.

⁽b) The number of residential and non-residential service users may not sum to the total because service users may use both types of services.

⁽c) The increase in the number of residential service users in 2006–07 may be the result of changed coding practices in one CSTDA-funded service.

⁽d) The number of service users may not sum to the total because service users may access services in more than one state or territory.

⁽e) Rates were directly age-standardised, as detailed in Appendix 2.

^{..} Not applicable

10.3 Residential services

A range of residential CSTDA-funded services are provided to service users as follows:

- *Large residentials/institutions* provide 24-hour residential support in a setting of more than 20 beds (these are referred to as large institutions in this report).
- *Small residentials/institutions* provide 24-hour residential support in a setting of 7 to 20 beds (these are referred to as small institutions in this report).
- *Hostels* provide residential support in a setting of usually less than 20 beds and may or may not provide 24-hour residential support.
- *Group homes* provide combined accommodation and community-based residential support to people in a residential setting and are generally staffed 24 hours a day. Usually, no more than 6 service users are located in any one home.

Nationally, service users accessed residential services at a rate of 16.3 clients per 100,000 population. This rate was highest in Tasmania (36.2) and lowest in Queensland (4.6) (Table 10.2).

While group homes nationally were the most widely used residential service type (70.9%), the profiles of state/territory CSTDA-funded residential services varied considerably (Table 10.2 and Figure 10.1). Group homes were the largest service type in all states/territories except South Australia, where large institutions were the most used service type (54.4%). All clients resided in group homes in the two territories. Across jurisdictions, hostels were most utilised in Tasmania (15.2%) while small institutions were most utilised in Queensland (28.3%).

Table 10.2: CSTDA-funded residential service users with a psychiatric disability, by residential service type, states and territories^(a), 2006–07

Residential service type	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)	Total (per cent)
Large institutions	432	70	43	26	223	21	0	0	815	24.0
Small institutions	8	0	54	29	6	2	0	0	99	2.9
Hostels	22	38	0	11	13	27	0	0	111	3.3
Group homes	860	914	99	129	177	128	83	18	2,408	70.9
Total ^(c)	1,304	1,018	191	195	410	178	83	18	3,397	
Rate (per 100,000 population) ^(d)	19.0	19.7	4.6	9.4	26.0	36.2	24.7	8.5	16.3	

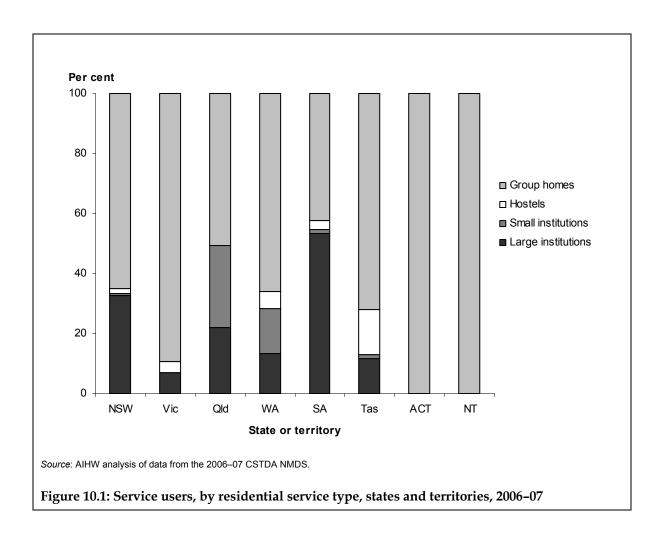
⁽a) Service type outlet response rates varied across state/territory jurisdictions. Information relating to state/territory service user counts should be interpreted with reference to jurisdictional response rates (AIHW 2008b). See also Appendix 1.

⁽b) The number of service users may not sum to the total because users may have accessed services from more than one state and/or territory.

⁽c) The number of service users may not sum to the total because users may have accessed services from more than one residential service type.

⁽d) Crude rate based on the Australian estimated resident population as at 31 December 2006.

^{..} Not applicable.



Profile of residential service users

As shown in Table 10.3, the most common primary disability of residential service users with a psychiatric disability for 2006–07 was intellectual disability, with a relatively small proportion of users having a primary psychiatric disability (10%).

Table 10.3: CSTDA-funded residential service users with a psychiatric disability, by primary disability group, 2006–07

Primary disability group	Service users (number)	Service users (per cent)
Intellectual	2,687	79.1
Psychiatric	339	10.0
Acquired brain injury	111	3.3
Physical	93	2.7
Autism	83	2.4
Neurological	64	1.9
Other disability ^(a)	20	0.6
Total	3,397	100.0

⁽a) Includes the following disability groups: specific learning/attention-deficit disorder, sensory; speech; and developmental delay.

Source: AIHW analysis of data from the 2006–07 Commonwealth State/Territory Disability Agreement NMDS.

Table 10.4 shows the demographic and geographic distribution of residential service users with a psychiatric disability in 2006–07.

There were more male users (58.2%) of CSTDA-funded residential services than females (41.8%) and the majority of residential users were aged 35–54 years (55.2%).

Aboriginal and Torres Strait Islander peoples made up a small proportion of CSTDA-funded residential service users. However, when their age structure and population size were taken into account, Indigenous Australians were relatively more likely than other Australians to utilise these services (317 and 157 per million population, respectively).

The majority of residential service users were born in Australia (93.0%). When relative population sizes and age structures are considered, there was an under-representation of residential service users who were born overseas (43 per million population for overseas-born compared with 216 per million population for Australian-born). Within the overseas-born population there were differences in the rates of usage of CSTDA-funded residential services, with migrants born in countries in the lowest English Proficiency Country Group (EP country group 4) (see Appendix 3 for details) having higher rates of usage (Table 10.4).

Most residential service users accessed CSTDA-funded services in *Major cities* (71.4%), followed by *Inner regional* areas (23.1%). However, *Inner regional* areas had the highest rate of usage. *Outer regional* and *Remote and very remote* areas had considerably lower numbers and rates of service use.

Almost all CSTDA-funded residential service users resided in some form of supported accommodation facility and/or were on Disability Support Pensions as shown in Table 10.5.

Table 10.4: Demographic characteristics of CSTDA-funded residential service users with a psychiatric disability, 2006–07

Service user demographics	Number of service users ^(a)	Per cent of service users ^(b)	Rate (per 1,000,000 population) ^(c)
Age group			
Less than 15 years	12	0.4	3
15–24 years	180	5.3	62
25–34 years	513	15.1	177
35–44 years	929	27.3	303
45–54 years	948	27.9	329
55-64 years	599	17.6	261
65+ years	216	6.4	79
Sex			
Male	1,975	58.2	189
Female	1,421	41.8	133
Indigenous status ^(d)			
Indigenous Australians	120	3.6	317
Other Australians	3,248	96.4	157
Country of birth			
Australia	3,140	93.0	216
Overseas	238	7.0	43
Overseas-born ^(e)			
EP country group 1	84	2.5	41
EP country group 2	66	2.0	43
EP country group 3	71	2.1	44
EP country group 4	17	0.5	67
Remoteness area of usual residence ^(f)			
Major cities	2,397	71.4	166
Inner regional	775	23.1	191
Outer regional	176	5.2	90
Remote and very remote	7	0.2	12
Total	3,397	100.0	161

⁽a) The number of service users for each demographic variable may not sum to the total due to missing and/or not reported data.

⁽b) The percentages shown do not include those service users for whom the demographic information was missing and/or not reported.

⁽c) Rates were directly age-standardised, with the exception of age which is a crude rate, as detailed in Appendix 2.

⁽d) These data should be interpreted with caution due to likely under-identification of Indigenous Australians.

⁽e) For definition of the English Proficiency (EP) Country Groups see Appendix 3.

⁽f) The number of service users in each remoteness area (RA) were estimated based on service users' residential postcodes. Some postcode areas were split between two or more RAs. Where this was the case, the data were weighted according to the proportion of the population of the postcode area in each RA.

Table 10.5: CSTDA-funded residential service users with a psychiatric disability, by usual residential setting, living arrangement and income source, 2006–07

	Service users (number) ^(a)	Service users (per cent) ^(b)
Usual residential setting		
Private residence	108	3.2
Domestic-scale supported living facility	1,961	57.9
Supported accommodation facility	1,195	35.3
Residential aged care facility	43	1.3
Psychiatric/mental health community care facility	37	1.1
Other ^(c)	43	1.3
Living arrangement		
Lives alone	98	2.9
Lives with family	57	1.7
Lives with others	3,235	95.4
Income source (adult 16+ years) ^(d)		
Disability Support Pension	3,107	92.6
Compensation income	183	5.5
Other pension or benefit	44	1.3
Paid employment	6	0.2
Other income sources	9	0.3
No income	8	0.2
Total	3,397	100.0

⁽a) The number of service users for each data item may not sum to the total due to missing and/or not reported data.

Source: AIHW analysis of data from the 2006–07 Commonwealth State/Territory Disability Agreement NMDS.

10.4 Non-residential services

A range of non-residential CSTDA-funded services are provided to service users, defined under the following broad *service group* headings:

- Accommodation support involves support with the basic needs of living, assisting the
 individual to remain within their current living arrangement. It includes personal care
 by an attendant, in-home living support, alternative placement (such as shared-care
 arrangements and host family placements) and crisis accommodation support.
- Community support provides services to assist with non-institutionalised living arrangements, such as specialised therapeutic services, early childhood intervention, behaviour and/or specialist intervention, counselling and case management.

⁽b) The percentages shown do not include those services for which information was missing and/or not reported.

⁽c) Other includes the following CSTDA NMDS categories: residence within an Aboriginal/Torres Strait Islander community; boarding house/private hotel; independent living unit within a retirement village; hospital; short-term crisis, emergency or transitional accommodation; and other accommodation type.

⁽d) A total of 3,380 of the residential service users with a psychiatric disability were aged 16 years or more. Each user can have more than one income source.

- Community access services are designed to provide opportunities for people with a disability to gain and use their abilities to enjoy their full potential for social independence. They include learning and life skills development, and recreation and holiday programs.
- Respite services provide a short-term and time-limited break for caregivers of people with a disability and include services such as those provided in the individual's home, in centres, in respite homes and with host families. Although respite is provided to both the person with a disability and their caregiver, in this report the person with the disability is regarded as the client, and numbers presented in tables reflect this definition.
- *Employment* support services include providing assistance in obtaining and/or retaining paid employment in both the open labour market and specialised and supported environments.
- Advocacy, information and print disability and other support include services such as
 advocacy, information, referral, mutual support, self-help groups, research, evaluation,
 training and development. (Note that no service user counts are collected for these
 services.)

There was considerable variation between jurisdictions in the number of people with a psychiatric disability accessing the different non-residential service groups in 2006–07, as shown in Table 10.6. Nationally, employment services had the greatest number of users (52.9%), with respite services having the least (8.8%). Employment services had the greatest number of people accessing services in most states and territories with the exception of Victoria, where community access had the greatest number of users, and the Australian Capital Territory, where community support had the greatest.

Table 10.6: CSTDA-funded non-residential service users with a psychiatric disability, by service group, states and territories^(a), 2006–07

Service group	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total ^(b)	Total (per cent)
Accommodation support	454	6,703	1,344	156	358	84	25	7	8,853	18.9
Community support	1,296	2,906	1,411	681	974	246	324	5	6,587	14.1
Community access	1,947	10,024	1,771	262	657	331	79	20	14,385	30.7
Respite	448	3,146	624	113	129	27	110	7	4,139	8.8
Employment	7,447	7,932	4,828	2,002	1,937	553	321	123	24,795	52.9
Total ^(c)	9,726	22,671	7,574	2,584	2,814	937	535	147	46,848	
Rate (per 100,000 population) ^(d)	141.9	439.0	183.3	124.2	178.6	190.6	159.1	69.2	224.7	

⁽a) Service type outlet response rates varied across state/territory jurisdictions. Information relating to state/territory service user counts should be interpreted with reference to jurisdictional response rates (AIHW 2008b). See also Appendix 1.

⁽b) Row totals may not equate to the sum of components because service users may receive services from more than one state/territory during the reporting period.

⁽c) Column totals may not equate to the sum of components because service users may receive more than one service group during the reporting period.

⁽d) Crude rate based on the Australian estimated resident population as at 31 December 2006.

^{..} Not applicable.

Profile of non-residential service users

In contrast to the users of residential services, the 75.6% of CSTDA-funded non-residential service users who had a psychiatric disability reported this psychiatric disability as their primary disability (Table 10.7).

Table 10.7: CSTDA-funded non-residential service users with a psychiatric disability, by primary disability group, 2006–07

Primary disability group	Service users (number)	Service users (per cent)
Psychiatric	35,414	75.6
Intellectual	6,343	13.5
Physical	1,984	4.2
Acquired brain injury	1,153	2.5
Autism	561	1.2
Neurological	561	1.2
Specific learning/attention-deficit disorder	459	1.0
Sensory	348	0.7
Other disability ^(a)	25	0.1
Total	46,848	100.0

⁽a) Includes the disability groups Speech and Developmental delay.

Source: AIHW analysis of data from the 2006-07 Commonwealth State/Territory Disability Agreement NMDS.

Table 10.8 shows the demographic and geographic distribution of non-residential service users with a psychiatric disability in 2006–07.

There were more male users (57.6%) of CSTDA-funded non-residential services than females (42.4%), which was almost the same as for users of residential services. The majority of non-residential users were aged 25–54 years.

Although Aboriginal and Torres Strait Islander peoples made up a small proportion of users, when the relative age structures and population sizes were taken into account, Indigenous Australians were almost twice as likely as other Australians to have utilised non-residential CSTDA-funded services (4,125 and 2,114 per million population, respectively).

As was the case for the residential service users, most non-residential service users were born in Australia (83.1%). Those who were born overseas were relatively less likely than their Australian-born counterparts to have used these services (1,303 and 2,512 per million population, respectively). Similar to residential services, the highest rate of usage for non-residential services in the overseas-born group was the group of migrants born in countries within the lowest English Proficiency Country Group (EP country group 4; 1,990 per million population).

Approximately two-thirds of non-residential service users accessed CSTDA-funded services in *Major cities*, about a quarter in *Inner regional* areas and much lower numbers in *Outer regional* and *Remote and very remote* areas. *Inner regional* had the highest usage rate, and *Remote and very remote* areas had the lowest, when relative age structures and population sizes were taken into account.

Table 10.8: Demographic characteristics of CSTDA-funded non-residential service users with a psychiatric disability, 2006–07

Service user demographics	Number of service users ^(a)	Per cent of service users ^(b)	Rate (per 1,000,000 population) ^(c)
Age group			
Less than 15 years	637	1.4	157
15–24 years	5,909	12.6	2,032
25–34 years	10,977	23.4	3,781
35–44 years	11,916	25.4	3,881
45–54 years	10,354	22.1	3,593
55–64 years	5,125	10.9	2,231
65+ years	1,919	4.1	704
Sex			
Male	26,951	57.6	2,607
Female	19,852	42.4	1,890
Indigenous status ^{(d)(e)}			
Indigenous Australians	1,692	3.8	4,125
Other Australians	43,089	96.2	2,114
Country of birth ^(e)			
Australia	37,240	83.1	2,512
Overseas	7,563	16.9	1,303
Overseas-born ^(f)			
EP country group 1	2,626	5.9	1,194
EP country group 2	1,720	3.8	1,125
EP country group 3	2,511	5.6	1,496
EP country group 4	706	1.6	1,990
Remoteness area of usual residence ^(g)			
Major cities	30,665	66.1	2,126
Inner regional	11,152	24.1	2,927
Outer regional	4,115	8.9	2,191
Remote and very remote	434	0.9	867
Total	46,848	100.0	2,251

⁽a) The number of service users for each demographic variable may not sum to the total due to missing and/or not reported data.

⁽b) The percentages shown do not include those service users for whom the demographic information was missing and/or not reported.

⁽c) Rates were directly age-standardised, with the exception of age which is a crude rate, as detailed in Appendix 2.

⁽d) These data should be interpreted with caution due to likely under-identification of Indigenous Australians.

⁽e) Information on this data element was missing or not reported for more than 4% of service users.

⁽f) For definition of the English Proficiency (EP) Country Groups see Appendix 3.

⁽g) The number of service users in each remoteness area (RA) were estimated based on service users' residential postcodes. Some postcode areas were split between two or more RAs. Where this was the case, the data were weighted according to the proportion of the population of the postcode area in each RA.

In contrast with users of residential services, 77.3% of non-residential service users usually lived in a private residential setting (Table 10.9), with more than a quarter living with family. Income source also contrasted greatly with residential users. Over half (62.5%) of all non-residential service users were dependent on a disability support pension, however this was well below the 92.6% (Table 10.5) of residential service users on this type of pension.

Table 10.9: CSTDA-funded non-residential service users with a psychiatric disability, by residential setting, living arrangement and income source, 2006–07

	Service users (number) ^(a)	Service users (per cent) ^(b)
Residential setting		
Private residence	33,846	77.3
Domestic-scale supported living facility	2,214	5.1
Supported accommodation facility	2,598	5.9
Psychiatric/mental health community care facility	1,137	2.6
Residence within an Aboriginal/Torres Strait Islander community	124	0.3
Boarding house/private hotel	2,114	4.8
Independent living unit within a retirement village	55	0.1
Residential aged care facility	241	0.6
Hospital	70	0.2
Short-term crisis, emergency or transitional accommodation	671	1.5
Public place/temporary shelter	89	0.2
Other	626	1.4
Living arrangement		
Lives alone	14,001	33.6
Lives with family	12,830	30.8
Lives with others	14,859	35.6
Income source (adult 16+ years) ^(c)		
Disability Support Pension	26,320	62.5
Other pension/benefit	10,073	23.9
Paid employment	1,644	3.9
Compensation income	638	1.5
Other income	3,022	7.2
No income	429	1.0
Total	46,848	100.0

⁽a) The number of service users for each data item may not sum to the total due to missing and/or not reported data.

⁽b) The percentages shown do not include those services for which information was missing and/or not reported.

⁽c) A total of 46,114 of the non-residential service users with a psychiatric disability were aged 16 years or more. Each user can have more than one income source.