1. Introduction

1.1 Background

This report summarises longitudinal outcomes for participants who have been in the Scheme for one year or more at 30 June 2020. A separate report covers baseline results for NDIS participants entering the Scheme during the four year period from 1 July 2016 to 30 June 2020. Two previous reports have covered both baseline and longitudinal experience, as at 30 June 2018 and 30 June 2019.[7]

The purpose of the report is to provide a picture of how participants are progressing under the NDIS, based on information provided by them in interviews conducted using the NDIS outcomes framework questionnaires. The results are intended to provide insight into how the Scheme is making a difference, and point to any areas where improvements may be required.

The present report focusses on results. Readers requiring further background should refer to the previous reports, which contains additional information regarding the broader scope of outcomes measurement within the NDIA, and the development and implementation of the outcomes framework questionnaires.

1.2 Overview

In this year's report, we have mainly concentrated on results from the latest year's experience, during 2019-20. However, for the longitudinal analysis we have also considered overall change from baseline. Results from previous years can be found in earlier reports, and are also summarised in the appendices, which include high level summaries of results for all questions.

The global coronavirus pandemic occurring during 2020 could be expected to impact some of the outcome indicators for NDIS participants, for example those related to employment and community participation, with the impact potentially felt for approximately the last four months of the 2019-20 year. We have attempted to analyse differences occurring during this period using regression models.

The remainder of the report is organised as follows:

- Sections 2 and 3 contain results for participants from birth to before starting school.
- Sections 4 and 5 contain results for participants from starting school to age 14.
- Sections 6 and 7 contain results for young adult participants aged 15 to 24.
- Sections 8 and 9 contain results for adult participants aged 25 and over.

More detailed results contained in the Appendices include:

- Appendix A: Numbers of questionnaires completed by participants
- Appendix B: Long form participation and representativeness analysis
- Appendix C: Variables used in the regression modelling
- Appendix D: Age adjustment methodology
- Appendix E: Participants from birth to before starting school
- Appendix F: Participants from starting school to age 14

---

[7] https://data.ndis.gov.au/reports-and-analyses/outcomes-and-goals/participant-outcomes-report

- Appendix G: Participants aged 15 to 24
- Appendix H: Participants aged 25 and over.

1.3 Questionnaires and domains

Table 1.1 sets out the questionnaire versions, and domains, including letter codes used in the report.

Table 1.1 Participant outcomes framework questionnaire versions and domains

Domain	Children: 0 to before starting school	Children: starting school to age 14	Young adults: 15 to 24	Adults: 25 and over
Daily living (DL)	✓	✓	✓	✓
Choice and control (CC)	✓	✓	✓	✓
Relationships (REL)	✓	✓	✓	✓
Social, community and civic participation (S/CP)	✓	✓	✓	✓
Lifelong learning (LL)		✓	✓	✓
Health and wellbeing (HW)			✓	✓
Home (HM)			✓	✓
Work (WK)			✓	✓
Specialist services assist children to be included in families and community (SPL)	✓			

1.4 Cohorts used in the longitudinal analysis

Results for longitudinal change overall are shown separately for three cohorts of participants:

- Cohort C3: Participants entering the Scheme between 1 July 2016 and 30 June 2017, for whom a record of outcomes is available at Scheme entry (baseline), and approximately three years after Scheme entry (third review). The large majority of these participants also responded at one year and/or two years after Scheme entry (first and/or second review). For this cohort the 2019-20 experience represents changes over participants' third year in the Scheme.

- Cohort C2: Participants entering the Scheme between 1 July 2016 and 30 June 2018, for whom a record of outcomes is available at Scheme entry (baseline), and approximately two years after Scheme entry (second review).[8] The large majority of these participants also responded at one year after Scheme entry (first review). For this cohort, the 2019-20 experience represents changes over their second year in the Scheme.
- Cohort C1: Participants entering the Scheme between 1 July 2016 and 30 June 2019, for whom a record of outcomes is available at Scheme entry (baseline), and approximately one year after Scheme entry (first review).[9] For this cohort, the 2019-20 experience represents changes over their first year in the Scheme.

These three cohorts are distinct (that is, each participant belongs to one cohort only).

For the regression models where we consider factors affecting transitions between states (such as transitioning from not having a paid job to having a paid job), the analysis includes all available transitions from the three cohorts, so as to maximise the amount of data on which the models are based.

1.5 Modelling the impact of COVID-19

The global pandemic that took hold from early 2020 is likely to have had an impact on at least some participant outcomes, such as community participation, and for older age groups, employment.

To investigate which outcomes may have been affected by the pandemic via quantitative modelling, the following terms were added to the regression models for transitions over time:

1. An indicator taking the value 0 for dates up to 23 March 2020 (the announcement of stronger restrictions by the Prime Minister, such as closure of restaurants and gyms), and 1 for later dates.
2. A general time trend.
3. The interaction between 1. and 2.

The first term allows for a step change in the indicator from 23 March 2020. The second term allows for temporal changes in the indicator not related to COVID-19, whereas the third term allows for different time trends before and after 23 March 2020.

The regression models in this report look at changes between two timepoints, either from baseline to first, second or third review, or from an earlier review to a later review. In all cases only the later review can have occurred after the assumed COVID-19 date of 23 March 2020, and the time variables are measured with reference to that later review (for example, the COVID-19 indicator is 1 where the later review occurs during the COVID period).

Results of this analysis should be interpreted with care due to the following limitations:

1. The modelling is based on only about three months of experience during the pandemic, and some of the effects detected are only slight.

---

[8] Most of these participants entered the Scheme between 1 July 2017 and 30 June 2018, however a small number of participants entering between 1 July 2016 and 30 June 2017 who had a response at year 2 but not at year 3 are included in the C2 cohort.

[9] Most of these participants entered the Scheme between 1 July 2018 and 30 June 2019, however a small number of participants entering between 1 July 2016 and 30 June 2018 who had a response at year 1 but not at year 2 or 3 are included in the C1 cohort.

2. Some of the indicators where the pandemic might be thought to have an effect have a time frame specified. For example, for social and community participation, adult participants are asked "Have you been actively involved in a community, cultural or religious group *in the last 12 months*?". At least nine months of this period will be prior to the start of the pandemic.

3. Significance of the COVID indicator and/or the interaction term does not imply causality: it is not possible to say that changes in the indicator were caused by the COVID-19 pandemic.

4. The full impact of the pandemic cannot be evaluated using quantitative methods alone: qualitative research (such as focus groups and interviews with participants) would also be needed. Some qualitative research into economic and social participation outcomes, including the effect of the pandemic, is being undertaken.