



SUMMARY REPORT

Health and wellbeing of NDIS participants and their families and carers

Based on data collected from the Outcomes Framework questionnaires
(Short Form and Long Form) | Data at 31 December 2020

ndis

This summary report contains:

- **Background**
 - Outcomes framework questionnaires
 - Health and wellbeing outcomes measured by the questionnaires
 - Overview of the analysis and Australian population benchmarks
- **Key messages**
- **Summary by health and wellbeing area**
 - For five areas of health and wellbeing (healthy living, health services, preventative health, mental health, and self-rated health for participants and their families and carers):
 - Comparison of baseline outcomes with Australian population benchmarks (where available)
 - Significant three-year changes
- **Participant and family/carer perceptions of whether the NDIS has helped.**

More detailed results, including analysis by key demographics and other participant characteristics, are contained in a separate report.

01.

Introduction

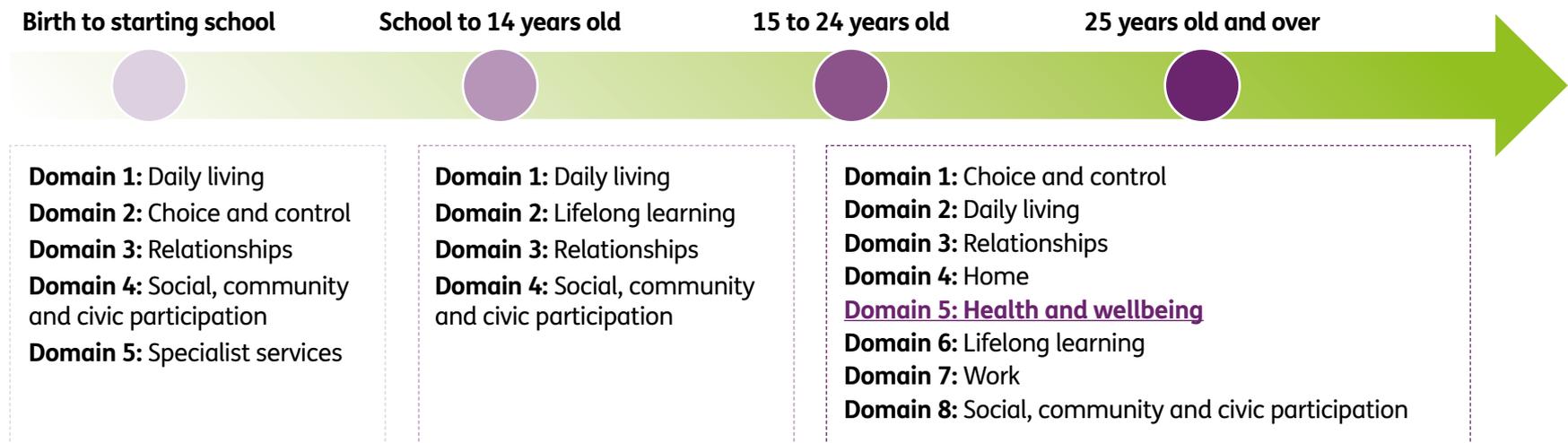
Outcomes framework questionnaires

Outcomes framework

Participants

A lifespan approach to measuring participants' goals and outcomes across main life domains has been used. This report focuses on the health and wellbeing domain.

Lifespan approach: four age-based cohorts



While most domains overlap, goals and outcomes may differ depending on the age group.

This approach facilitates monitoring of participants' progress over time, as well as benchmarking to Australians without disability and to other OECD countries.

Outcomes framework

Families and carers

A lifespan approach to measuring family/carer outcomes across main life domains has also been used. This report focuses on the health and wellbeing domain.

Lifespan approach: three cohorts, based on participant age:



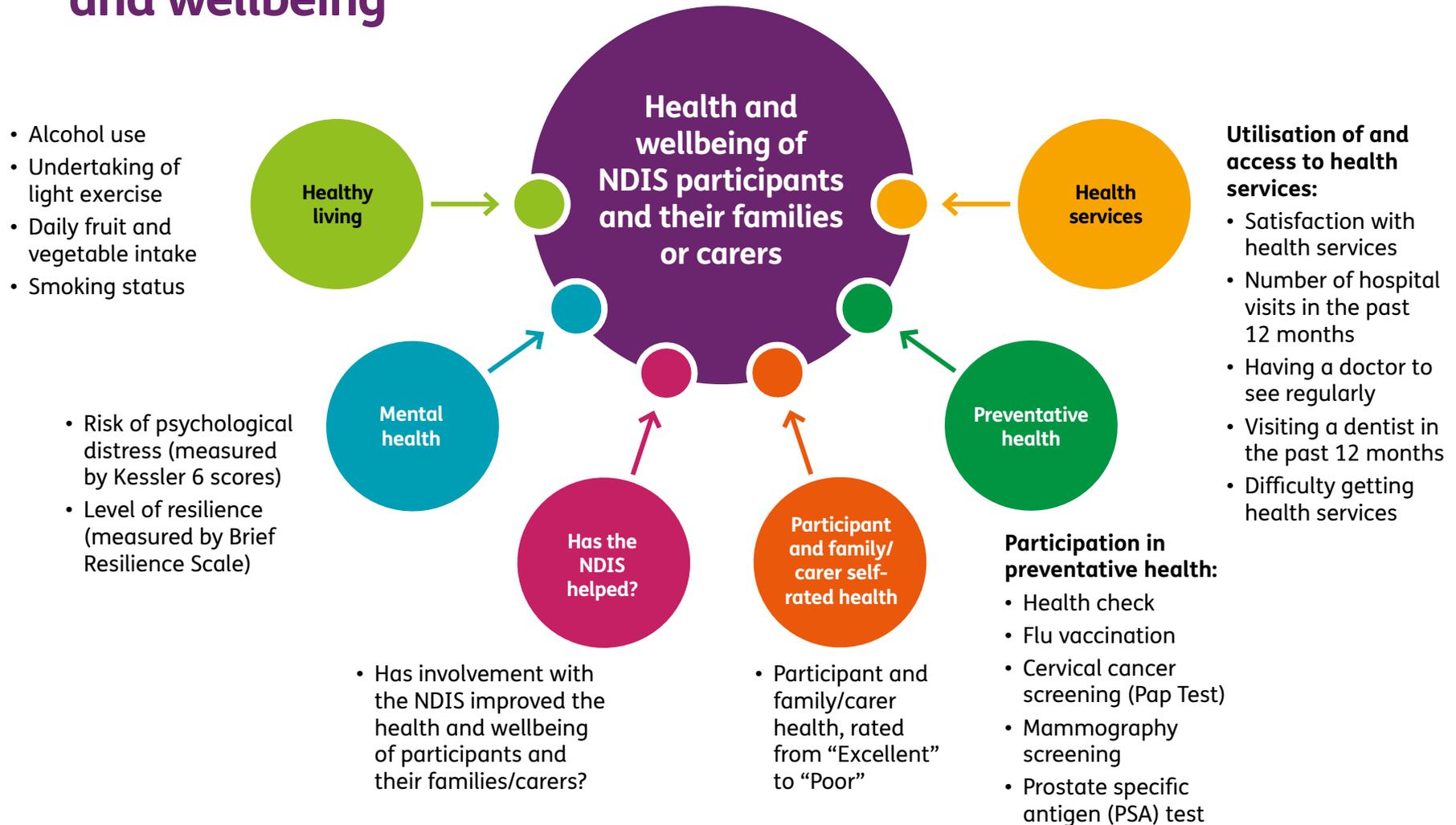
Many of the issues faced by families and carers are similar regardless of participant age (for example, being able to work as much as they want), however there are some differences (for example, families and carers of young children will be focussed on helping their child's early development and learning, whereas families and carers of young adults will want to help their family member to become as independent as possible). As for participants, the approach facilitates monitoring of progress for families/carers, as well as benchmarking, for example, against the Australian population as a whole.

Short Form (SF) and Long Form (LF)

- The SF is completed by all participants and a family member or carer where possible, and contains questions useful for planning as well as key indicators to monitor and benchmark over time.
- The LF is completed for a subset of participants, and includes some additional questions allowing more detailed investigation of participant and family/carer experience, and additional benchmarking.
- For both the SF and the LF, participants are interviewed at baseline (Scheme entry), and are reinterviewed approximately annually, so that within-individual changes in outcomes can be tracked longitudinally over time.
- Baseline modelling by participant characteristics has been undertaken for both SF and LF data.
- Due to the smaller volume of data available for the LF, longitudinal modelling has only been undertaken for the SF data.

Health and wellbeing
outcomes measured by
the questionnaires

Areas of health and wellbeing



Analysis of outcomes

Baseline outcomes (at Scheme entry)



Baseline health and wellbeing outcomes for participants and families/carers are measured at point of Scheme entry. Those baseline outcomes are then compared to the general Australian population where population benchmark data is available.

Health outcomes at Scheme entry	Population benchmarks
Daily fruit intake	National Health Survey (NHS) 2017-18
Daily vegetable intake	
Alcohol use	
Undertaking of light exercise	
Smoking status	
Risk of psychological distress	
Participants' self-rated health	
Families/carers' self-rated health	
Seen a dentist in the last 12 months	Participant Experience in Australia (PEIA) 2019-20
Hospital visits made in the last 12 months	
Had a health check in the last 12 months	Survey of Health Care (SHC) 2016
Have a regular doctor	
Difficulty accessing health services	Survey of Disability, Ageing and Carers (SDAC) 2018
Had a flu shot in the past 12 months	Estimated by News-poll Omnibus in June 2014 on Behalf of Department of Health
Screened for Breast Cancer in the past 12 months	National Cancer Control Indicators (NCCI) 2016-2017
Screened for Cervical Cancer in the past 12 months	

Longitudinal outcomes



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- Success should be measured on how far participants and their families and carers have come since entering the Scheme, acknowledging different starting points.
 - Longitudinal results for participant and family/carer outcome indicators are considered for **participants who have been in the Scheme for three years at 31 December 2020**.
 - The family/carer longitudinal analysis is also restricted to instances where the same person responded at each of the time points being considered.
 - For the regression models which consider factors affecting changes in outcomes (such as improvement or deterioration in self-rated health), the analysis includes changes between Scheme entry and end of 3 years.

The global pandemic that took hold from early 2020 is likely to have had an impact on at least some participant and family/carer outcomes, including health and wellbeing.

To investigate which outcomes may have been affected by the pandemic via quantitative modelling, additional time-related terms were included in the regression models.

These terms allow for:

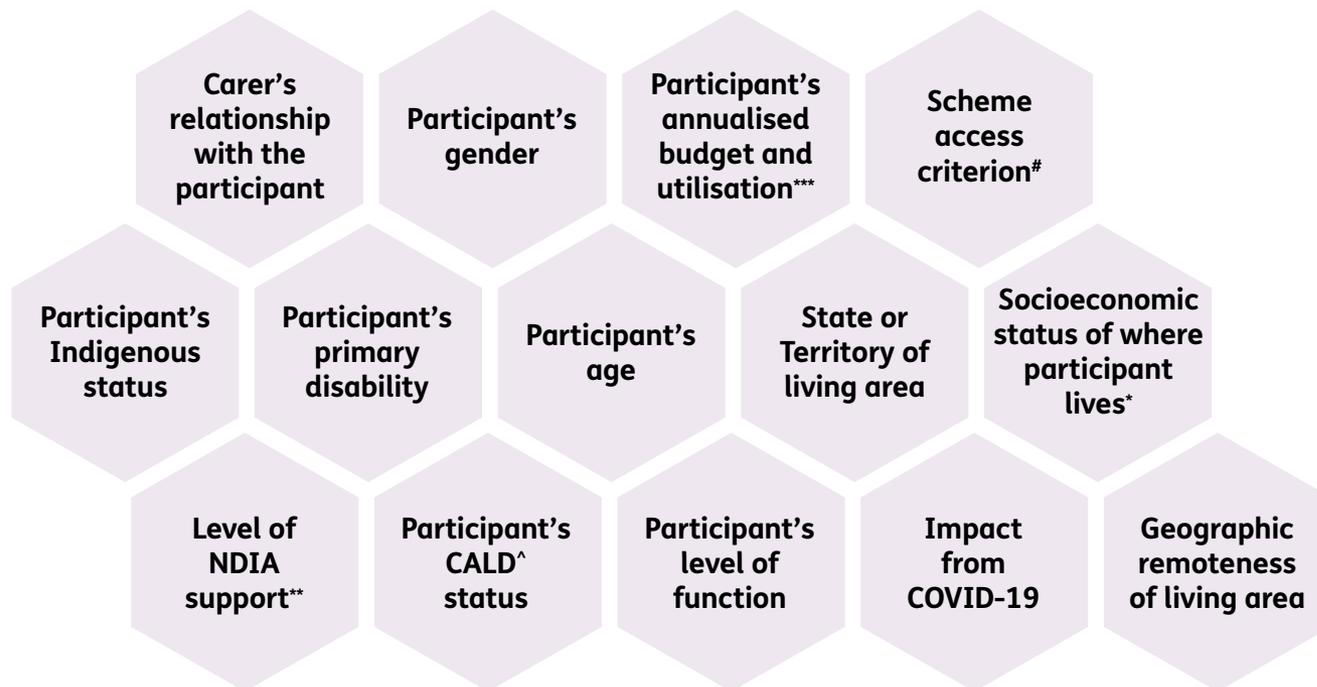
1. A step change in the response probability at the date the pandemic is assumed to start affecting outcomes (23 March 2020 – the date that stronger restrictions were announced by the Prime Minister, such as closure of restaurants and gyms)
2. A general time trend (not related to the pandemic)
3. Different time trends before and after the start of the pandemic.

The analysis identified a number of health and wellbeing indicators potentially impacted by the pandemic, although the effects (some of which were positive and some negative) were generally slight.

The likelihood of saying that the NDIS has helped with health and wellbeing showed a strong increasing trend after the onset of the pandemic, for both participants and their families and carers.

Outcome analysis by participant characteristics

Baseline outcomes and longitudinal outcomes for participants and families/carers could vary by a number of factors (shown below), and multiple regression analysis has been used to identify subgroups of participants with significantly different experiences.



* Socio-economic level of living area is represented by the unemployment rate of the Local Government Area of participant's living area.

** Support required from NDIA by participants to co-ordinate their support, participate in community, reach decisions and develop relationships with their service providers.

[^] Culturally and Linguistically Diverse

[#] Whether a participant enters the Scheme for early intervention (section 25 of the NDIS Act) or due to permanent disability (section 24).

^{***} Longitudinal outcomes only.

02.

Key messages

Key messages

Healthy living



Participant

Significant changes over three years:

- Female participants are eating more servings of fruit daily (+9.1% eating recommended two serves per day).
- Male participants are exercising more often (+8.5% undertaking light exercise weekly or more often).

Comparison with Australian population at Scheme entry:

Fruit and vegetable consumption:

Daily fruit and vegetable consumption of NDIS participants is similar to the Australian population.

Alcohol consumption:

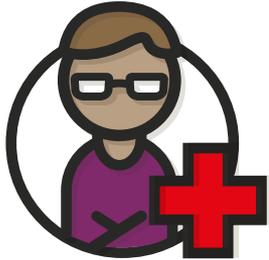
NDIS participants tend to drink less frequently, and consume less when they do drink. The difference between females and males is less pronounced for NDIS participants than for Australians generally.

Smoking:

The proportion of NDIS participants who smoke is similar to the Australian population. 16% of female participants smoke, the same as for Australian females overall. 20% of male participants smoke, slightly less than 23% of Australian males overall.

Key messages

Health services



Participant

Significant changes over three years:

- NDIS participants are becoming more likely to have a doctor they see regularly (+7.4% for females and +8.8% for males).
- NDIS participants are becoming less likely to have visited the hospital in the past 12 months (-7.6% for females and -7.1% for males).

Comparison with Australian population at Scheme entry:

Dentist and hospital visits:

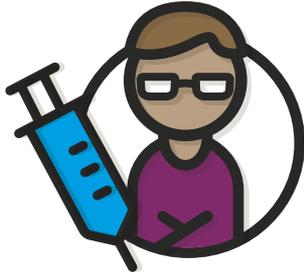
NDIS participants are more likely than the Australian population to have seen a dentist (59% of female participants and 53% of male participants, compared to 54% and 46% of Australian females and males, respectively) or to have visited the hospital (45% of female participants and 39% of male participants, compared to 8% and 7% of Australian females and males, respectively) in the past 12 months.

Regular doctors:

91% of female participants and 89% of male participants have a doctor they see on a regular basis, compared to 81% and 85% for Australian females and males, respectively.

Key messages

Preventative health



Participant

Significant changes over three years:

- NDIS participants receive flu shots at much higher rates (+11.2% for females and +20.2% for males).

Comparison with Australian population at Scheme entry:

Flu vaccination:

NDIS participants are much more likely than the Australian population to get a flu vaccination. 59% of females and 52% of males report to have done so in the 12 months before they enter the Scheme between 2016 and 2020, compared to 34% of the Australian population between age 18 and 64 estimated in 2014*[^].

Breast cancer and cervical cancer screening:

NDIS females are less likely than the Australian population to have been screened for breast cancer (37% compared to 42%) or cervical cancer (34% compared to 60%) in the past 12 months.

* News poll Omnibus survey on flu vaccination conducted on behalf of Department of Health in June 2014.

[^] It has been estimated that the percentage of total Australian population who wanted to get a flu vaccination has increased from 41% in 2019 to 62% in 2020 due to the impact of the pandemic.

Key messages

Mental health, self-rated health and has the NDIS helped



Participant and families or carers

Significant changes over three years:

- Significant reduction in the proportion of participants scoring in the low resilience range based on the Brief Resilience Scale (-14.1% for females and -11.1% for males).
- Female participants are becoming less likely to experience high psychological distress (-8.3%).
- NDIS participants are becoming more likely to say that the NDIS improved their health and wellbeing (+9.9% for females and +10.0% for males).

Comparison with Australian population at Scheme entry:

Mental health (psychological distress):

NDIS participants are more likely than the Australian general population to experience high or very high risk of psychological distress.

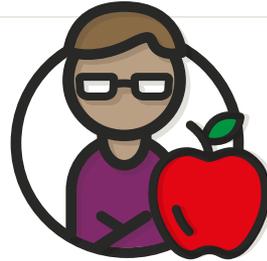
Self-rated health:

NDIS participants and families/carers rate their health less positively than the Australian population. In particular, NDIS participants fall almost 35% short of the Australian population in positive self-rated health.

Key messages

Post-COVID vs Pre-COVID

The impact of COVID-19* on the health and wellbeing of participants and their families or carers



Participant
Healthy lifestyle

- Reduction in daily number of servings of vegetables
- Increase in the number of standard alcoholic drinks consumed per occasion
- Increase in the frequency of light exercise



Participant and families or carers
Self-rated health & Has the NDIS helped?

- Improvement in families or carers' self-rated health
- More participants said their involvement with the NDIS has helped improve their health and wellbeing
- More families or carers said their involvement with the NDIS has helped improve their health and wellbeing



Participant
Health services & preventative health

- Reduction in the percentage who have a regular doctor
- Less have seen a dentist in the 12 months prior to entering the NDIS
- More have difficulty accessing health services in the 12 months prior to entering the NDIS
- Less have had education on sexual health

* The impact of COVID-19 is assessed by comparing the baseline health and wellbeing outcomes of participants and their families and carers who entered the NDIS before the 23rd of March 2020 to those entered on and after the 23rd of March 2020. The significance of the impact is measured through multiple regression modelling and controls for participants' characteristics.

03.

Summary by health and wellbeing area

The table below compares NDIS participants' healthy living outcome indicators with population benchmarks at Scheme entry. Significant* three year changes are also included:

Outcome indicators	Females			Males		
	Scheme entry (Baseline)		3 year change	Scheme entry (Baseline)		3 year change
	NDIS	Australian Population	Scheme entry to Year 3 Review	NDIS	Australian Population	Scheme entry to Year 3 Review
Eating two servings of fruit per day	34%	32%	+9.1%	29%	26%	
Eating five or more servings of vegetables per day	11%	11%		7%	8%	
Drinking weekly or more frequently	16%	34%		18%	49%	
Having two or less standard drinks per occasion	75%	60%		65%	45%	
Currently smoking	16%	16%		20%	23%	
Undertaking light exercise weekly or more frequently	68%	46%		71%	46%	+8.5%

*McNemar test p-value < 0.05

The table below compares NDIS participants' mental health outcome indicators at Scheme entry with population benchmark (where possible). Significant three year changes are also included:

Outcome indicators	Females			Males		
	Baseline		Longitudinal	Baseline		Longitudinal
	NDIS Baseline	Australian Population	Baseline to Year 3 Review	NDIS Baseline	Australian Population	Baseline to Year 3 Review
Low resilience	45%	N/A	-14.1%	39%	N/A	-11.1%
High/very high risk of psychological distress	29%	14%	-8.3%	20%	10%	

Health services

Access, utilisation and satisfaction



The table below compares NDIS participants' health service outcome indicators at Scheme entry with population benchmark (where possible). Significant three year changes are also included:

	Females			Males		
	Baseline		Longitudinal	Baseline		Longitudinal
	NDIS Baseline	Australian Population	Baseline to Year 3 Review	NDIS Baseline	Australian Population	Baseline to Year 3 Review
Satisfied with health services	87%	N/A		88%	N/A	
Did not visit the hospital in the past 12 months	55%	92%	+7.6%	61%	93%	+7.1%
Have a doctor they see regularly	91%	81%	+7.4%	89%	85%	+8.8%
Have no difficulty accessing health services	61%	N/A	+4.5%	67%	N/A	+4.5%
Seen a dentist in the past 12 months	59%	54%		53%	46%	

The table below compares NDIS participants' preventative health service outcome indicators at Scheme entry with population benchmark (where possible). Significant three year changes are also included.

Outcome indicators	Females			Males		
	Baseline		Longitudinal	Baseline		Longitudinal
	NDIS Baseline	Australian Population	Baseline to Year 3 Review	NDIS Baseline	Australian Population	Baseline to Year 3 Review
Had a health check in the past 12 months	91%	94%		87%	88%	
Offered support for sexual health education	31%	N/A		29%	N/A	
Had a flu shot in the past 12 months	59%	34%*	+11.2%	52%	34%*	+20.2%
Screened for cervical cancer in the past 12 months	34%	60%		N/A	N/A	N/A
Screened for breast cancer in the past 12 months	37%	42%		N/A	N/A	N/A
Have been screened for prostate cancer before	N/A	N/A	N/A	59%	N/A	

* Benchmark data on flu shot is not distinguished by gender

Self-rated health



Both participants and their family or carers (who were available) were asked to rate their health on a five-point scale from “Excellent” to “Poor”.

Outcome indicators	Females			Males		
	Baseline		Longitudinal	Baseline		Longitudinal
	NDIS Baseline	Australian Population	Baseline to Year 3 Review	NDIS Baseline	Australian Population	Baseline to Year 3 Review
Participant rating their health as “Excellent”, “Very Good” or “Good”	43%	88%	-4.9%	54%	87%	-4.2%
Family/carer rating their health as “Excellent”, “Very Good” or “Good”	71%	84%	-10.1%	70%	88%	-9.5%

Has the NDIS helped?



Both participants and their families or carers (where available) were asked whether their involvement with the NDIS has improved their health and wellbeing.

	Females			Males		
	First Review		Longitudinal	First Review		Longitudinal
	NDIS First Review	Australian Population	Year 1 to Year 3 Review	NDIS First Review	Australian Population	Year 1 to Year 3 Review
Participant saying the NDIS improved their health and wellbeing	55%	N/A	+9.9%	53%	N/A	+10.0%
Family/Carer saying the NDIS improved their health and wellbeing	41%	N/A	+6.0%	39%	N/A	+2.1%

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