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National Institute of Labour Studies  
Flinders University, Adelaide, Australia



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# Evaluating the Impact of the NDIS

Disability Employment Australia's Conference  
Brisbane 6–7 September 2017

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# Acknowledgements

The independent evaluation of the trial of the NDIS trial is led by the National Institute of Labour Studies at Flinders University and funded by the Australian Government Department of Social Services (DSS)

Deep thanks go to the thousands of evaluation participants who are sharing their experiences with the research team, to our research partners and the DSS for their strong support, and to my colleagues for their dedication

<http://ndisevaluation.net.au>

# What is the NDIS

- It will cover about 460,000 people with disability, plus their families and carers
- By 2020
- Insurance
- Investment
- Consumer choice and control
- Early intervention and empowerment...  
... and increased funding for achieving these goals

# The NDIS and economic participation

- The NDIS aims to improve social and economic participation and integration
- Persons with disability are empowered in many ways including:
  - To become stronger consumers
  - To pursue their education and training goals
  - To pursue their employment goals
- The aim is to support the creation of as level a playing field as possible, but not to pay for the mainstream cost of the activity (this is left for mainstream providers)

# Evaluating policy

- Every major policy needs to be independently evaluated to safeguard all stakeholders
- This need is becoming increasingly well-understood as the best-practice to be followed in Australian policy
- Evaluations are very evidence-hungry exercises and they need their analysis to be conducted rigorously



# What is the NDIS Evaluation doing?

- It has been following the NDIS roll out closely, to see how well it works and estimate its impacts in terms of
  - Supply and demand of support services
  - The disability support sector and its workforces
  - Choice and control (including self management)
  - Reasonable and necessary supports
  - Participation (social, economic and educational), wellbeing, and Aspirations (goals)
  - Fairness, equity and access
  - Mainstream provisions (including older people and aged care)
  - Rural and remote provision (including the NT roll out in the Barkly)

# What is the NDIS Evaluation doing?

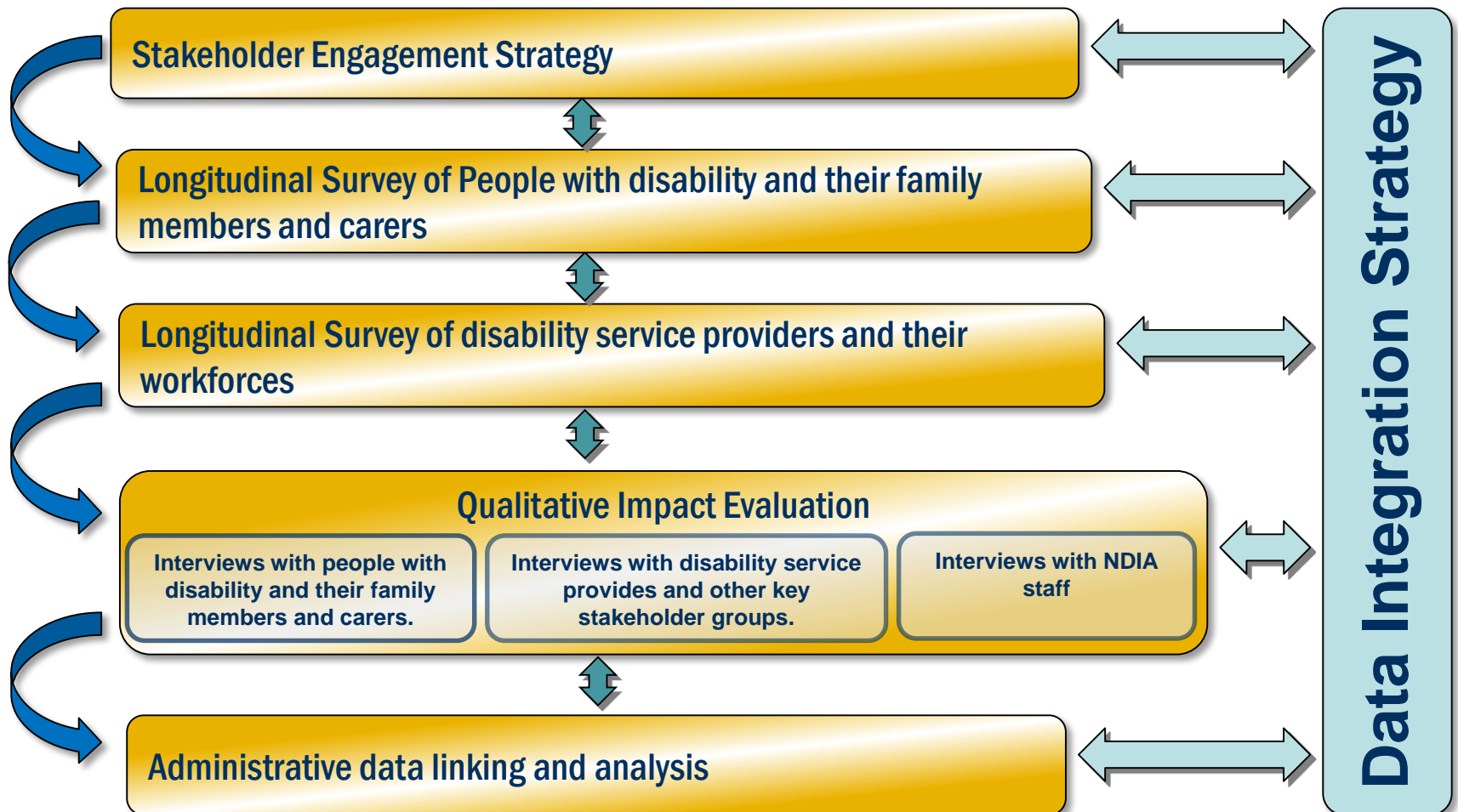
- It has been measuring the impact of the NDIS roll out in all trial areas (except WA and QLD) over the 2013-17 period on stakeholders such as:
  - People with disability and their families and carers
  - The disability sector (employers, workers and self-employed specialists)
  - A broad range of other stakeholders directly or indirectly involved in the NDIS
- It integrates evidence and analysis into a single policy reporting framework



# The NDIS Evaluation Components

- Overarching Stakeholder Engagement Strategy
- Extensive Qualitative Impact Evaluation
- Longitudinal survey of people with disabilities & family members and carers (close to 8,000 interviews in wave 1)
- Longitudinal survey of disability service providers and their workforces (close to 3,000 interviews in wave 1)
- Several other studies (NT; Older People; Mainstream)
- Data integration, linking, econometric impact analysis, and reporting

# Integrating the NDIS Evaluation Components



# Key Evaluation Reporting

- **Initial Report** – describes the first stage of the evaluation, focussing on setting up, ethics, design and methodology  
<https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/national-disability-insurance-scheme/ndis-evaluation-intermediate-report>
- **Intermediate report** – Policy-oriented provides first evidence and discussion <https://www.dss.gov.au/disability-and-carers/programs-services/for-people-with-disability/national-disability-insurance-scheme/ndis-evaluation-intermediate-report>
- **Final Report** – will be delivered end 2017 to complete the 2013 – 2017 evaluation.

Also reporting regularly to DSS and other government bodies on key policy matters (e.g. the Productivity Commission)

# This talk is about:

- Giving an overview on the changes brought by the NDIS and their impacts:
  - **Supply and demand** of support services
  - **Choice and control** (including self-management)
  - **Wellbeing, Participation** (social, economic and educational), and **Aspirations** (goals)
- The talk will finish with a focus on the education and employment of NDIS participants

# Start with supply and demand of support services

# Does supply meet demand?...

- A system that does not produce the required and planned quantity and quality of supports can be challenged
- Many reasons why supply may not meet demand, some temporary and manageable, but some structural, systemic, and long-term
- Whether due to economic, institutional, or mixed nature causes, unmet demand means present and future trouble

The Evaluation collects evidence from many stakeholders to trace and understand unmet demand



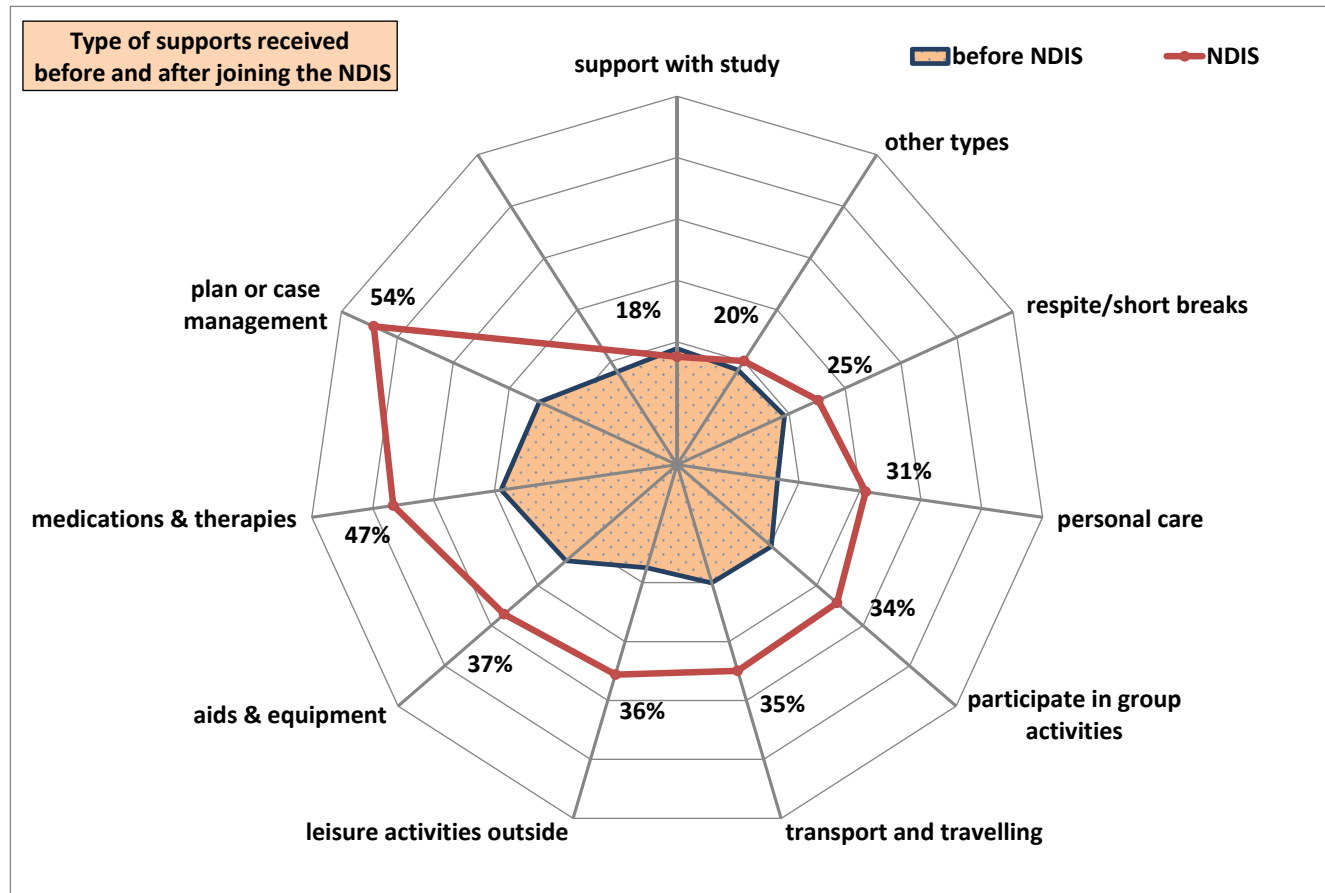
# Supply and demand of support services:

## Selection of Key Evaluation Questions (KEQs)

- KEQ 17: For people with disability who previously received supports, to what extent has the NDIS contributed to changes in their patterns and use of supports?
- KEQ 32: What has been the impact of the NDIS on the overall provision and quality of disability services?
- KEQ 34: What has been the impact of the NDIS on the disability sector, including the relevant government agency in each jurisdiction and advocacy organisations?
- KEQ 35: Consider impacts on workforce (skills, retention rates, capacity, satisfaction, workforce culture, composition and proportion of occupation types).
- KEQ 36: Consider impacts on supply and diversity of disability supports (particularly sustainability, ability to respond to choice and control, and service capacity).
- KEQ 37: To what extent has the supply of disability services responded to demand?

# What additional supports were consumed?

Pre-NDIS (**black line**) and after joining the NDIS (**red line**) types of supports - % of people receiving each type of support



# Consumption increased, but is the market working: **Is supply meeting demand?**

- The previous figure suggested a strong rise in supports consumed
- The question is, whether these additional supports were enough to satisfy the additional demand that the NDIS is generating, or where there shortages?
- Must remember that a rise in demand that is not matched by a commensurate rise in supply is trouble!

# Demand for supports: **Is demand met?**

- Detailed combined qualitative and quantitative evidence from NDIS participants indicate that:
  - Most NDIS participants need assistance on a daily basis, but just **under 1/3<sup>rd</sup> utilise market provisions** for it
  - Most receive **increased supports due to the NDIS** (hours, frequency, more appropriate equipment, wider access)
  - Majority report **increased satisfaction with their supports** after joining the NDIS; (a small minority report lowered satisfaction)
  - For most, the number/variety of supports received has increased (**65% increase in number of support types pre/post NDIS**). But many have remained with the same provider(s) [**61% Trial respondents remained against 78% Comparison respondents**]. Some indication of changing providers once familiar with the system, but is not conclusive as yet

- **Is demand met? [Interpretation of some findings]:**
  - Most NDIS participants need assistance on a daily basis, but just **under 1/3<sup>rd</sup> utilise market provisions** for it **[markets appear to be slow]**
  - Most receive **increased supports due to the NDIS** (hours, frequency, more appropriate equipment, wider access) **[but institutions have responded well by increasing supports]**
  - Majority report **increased satisfaction with their supports** after joining the NDIS; (a small minority report lowered satisfaction) **[a core objective is being achieved: people feel better off after joining the NDIS]**
  - For most, the number/variety of supports received has increased (**65% increase in number of support types pre/post NDIS**). But many have remained with the same provider(s) **[61% Trial respondents remained against 78% Comparison respondents]**. Some indication of changing providers once familiar with the system, but is not conclusive as yet **[more supports are utilized, by most people, both in number and in variety]**

**So, on average, we see a positive picture! BUT,...**

# The devil is in the detail...

The “good” averages (in the overall picture) also include individuals or specific sub-groups who report their outcomes became worse after joining the NDIS. The better averages conceal dissatisfaction:

- Many examples of dissatisfied NDIS participants:
  - Among participants who are unable to effectively **advocate on their own behalf** (fewer supports and poorer outcomes)
  - Participants in **rural and remote** areas (unmet demand)
  - Older or younger (variable for some supports)
  - In **finding** and/or **getting** supports
  - In doing the **necessary paperwork**
  - In **accessing supports** even when funding is in place

**Conclude: Averages conceal the mix of winners and losers**



# Choice and control

(more choice and control is a major policy direction)

# Choice and control: KEQs

- KEQ 4: To what extent has the NDIS enabled people with disability, their families and carers to have increased choice and control over their supports?
- KEQ 5: To what extent did people have increased choice and control over the development and implementation of their plan?
- KEQ 8: How have people responded to increased choice and control?
- KEQ 15: To what extent have people with disability, their families and carers been able to manage their funding on their own, customise creative sets of options for themselves, or find suitable brokers, depending on their preferences?
- KEQ 22: What sort of assistance do people with disability (or their families and carers, if they are managing the care) require to gain more control and navigate the system?

# Choice and Control: NDIS participants like the increase, but are asking for more

- There is a clear desire for more choice and control over supports
  - NDIS participants and their family members and carers desire:
    - More information about available services
    - Help with defining factors on which they can base their choice
    - Improving the NDIA website, often reported to be difficult to navigate, inhibiting access to information.
    - Improving choice and control where it may be restricted by limitations in the number or the capacity of service providers.

**Conclude: Desire for more consumer-directed provision**

# Choice and Control: **powerful consumers?**

- Overall improvement in choice and control over supports, but looking closer we see that:
  - about half indicate that they are **better off** than before the NDIS
  - about one third indicate that they are **about the same**
  - about 15 per cent indicate that they are **worse off**.

**Conclude: We see (as with unmet demand) a minority of people excluded from benefits of the new scheme**

- The pattern is clear: for each C&C question, we get about 50% better off; 35% about the same; 15% worse off. Those worse off show much diversity in their bad outcomes

# Wellbeing, Participation (social, economic and educational), and Aspirations (goals)

# Wellbeing, Participation (social, economic and educational), and Aspirations (goals)

- KEQ 1: To what extent has an NDIS contributed to changes in wellbeing and quality of life for people with disability, their families and carers?
- KEQ 2: To what extent has the NDIS contributed to changes in social and economic participation (including employment, education and the ability to express wishes and have them respected) for people with disability, their families and carers?
- KEQ 3: To what extent has an NDIS enabled people with disability, their families and carers to achieve their goals?
- KEQ 24: To what extent has the NDIS helped people with disability, their families and carers during major life transitions such as starting preschool or school, leaving school, starting tertiary education, starting work, leaving home, leaving state care, leaving the workforce, and entering the aged care system?
- KEQ31: Have there been any other changes, including unintended changes (anticipated and unanticipated, positive and negative), in the experiences of people with disability, their families and carers as a result of the Scheme?



# Very Low levels of Wellbeing

- We use our survey data to calculate the **Personal Wellbeing Index** (PWI) for each respondent
- NDIS participants overall have a **much lower average wellbeing index than the national average** in Australia, but we acknowledge that it is difficult to interpret wellbeing measures as cardinal measures: comparisons are hard
- **Lower levels** of wellbeing are reported especially by:
  - NDIS participants with a **mental health or psychosocial disability**.
  - Those who experience **unmet demand for supports**
  - Those who have **less choice over supports**.

# We find evidence that wellbeing **is improving**

- Indeed, our evidence suggests early indications of improving wellbeing, but
- These are improvements from a very low level, with responses that are unevenly distributed
- This is a difficult, sensitive, and contested area in need of much more research
- We are collecting several wellbeing indicators and we hope to make progress in the near future

# Evidence that social participation **is increasing**

- For many **NDIS participants** social participation has increased. The NDIS is helping them to become:
  - Able to **take part in activities independently** (i.e. without the support of a family member)
  - Able to have **access to support when needed**
  - Able to **follow previously inaccessible interests and social activities**
  - Able to **visit friends and family** or to have people to stay

Increasing social participation can be a precursor of increasing wellbeing as well as economic participation (e.g. in education and work), and it can be part of the investment approach of the NDIS: **a strong indicator that needs to be monitored**

# Social participation is increasing, **but not for all**

- Social participation benefits are not spread evenly, for example:
  - Increases in social participation were **limited** in the case of several NDIS participants, including those with:
    - **mental health** problems,
    - **intellectual disabilities**, or
    - **Autism Spectrum Disorder**

**An important finding... Many people feel left behind...**

# Getting educated and finding a job

# Education (for jobs)

- Education is high on the agenda of people with disability
- Large number of NDIS participants were currently in education/training
- **Mainly to get a job**
- Many of those not in education, would like to be in education, but they report strong barriers stop them
- Although as we will see education barriers are not as prevalent as work barriers, education is needed in order to break through the work barriers!

# Barriers to education

We asked all those who did not reject the wish to study and who were not presently studying, what makes it hard to study:





# Concluding on barriers to education

The diversity of these barriers shows an extensive problem, and indicates the need for multifaceted policy interventions and supports

Each one of these barriers has its own impact and dynamics

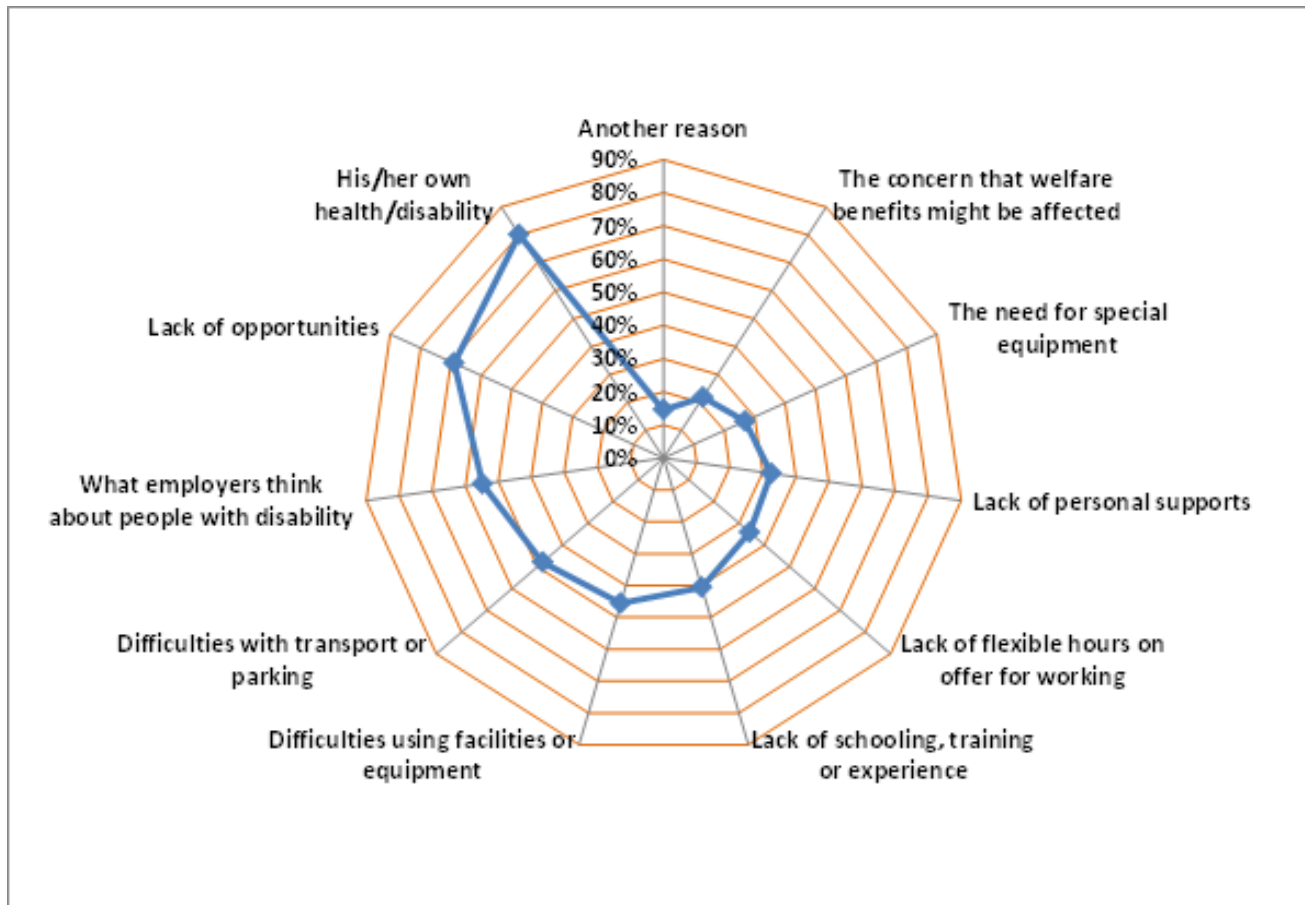
People report that more than one barrier may apply to them... In all policy interventions complex causes of disadvantage are much harder to address!

# Working and getting a job

- Getting a job is high on the agenda of those not in work
- Some 20% of all NDIS participants were currently employed, but their jobs are not stable
- Most liked their jobs, but also liked the idea of changing their jobs: we see aspirational thinking emerging of the type “there is good, but there can also be better”
- Many not working would like a job, but they report strong barriers and they feel excluded for MANY reasons

# Barriers to employment

We asked all those who are not employed, what in their view makes getting a job hard:



# Concluding on barriers to employment

The diversity and prevalence of these barriers shows the size and the depth of the problem, as much as it shows the need for multifaceted policy interventions

The picture looks much worse than with education...

Each one of these barriers have their own big impact and people report that more than one barrier may apply to them... Multiple barriers again...

# Summing up: general NDIS

We find complexity and change

We find most participants are clearly better off, but also many have become worse off after joining the NDIS

The negative impacts appear more often among the more vulnerable people and families

We need to examine the “who, why, and how”

We need to identify the processes and circumstances that contribute to becoming worse off due to the NDIS

There is ongoing work on this front

# Summing up: education, skills, and work

Critical for the success of the NDIS' investment approach

It is widely recognised that education and work experience take time and effort to build, but are worth the effort in the eyes of people with disability

Investing in education and skills is broadly recognised to be working very slowly (unlike other NDIS outputs)

However, several early indicators (social participation, aspirations, general upskilling efforts) are all up and improving, so jobs and work should follow

How soon and of what type, is difficult to tell as yet

# Takeaway lessons

Conventional measuring/monitoring methodologies are often not suitable: much to be learned on data collections

Diversity is massive and, clearly, one-size does not fit all

Some change (eg education and work) will not happen quickly: barriers and disadvantage are deeply embedded

But people are noticing the good change and they love it

At the same time, sizeable minorities already feel left out

Constant and transparent monitoring will be necessary to restore and maintain the notion of inclusion and fairness



# Interactions between DEA and NDIS?

Complementarities: Where one leaves it, the other takes it up

Much to learn about what works and what does not, where, when, and how

Common lessons about the feasibility of certain goals of the two schemes

Similarities in how monitoring and quality assurance can be designed and implemented (also in a cost effective way)

# Interactions between DEA and NDIS (cont.)

Sharing knowledge and experience:

The NDIS could share their extensive knowledge on how to handle the more difficult circumstances at the individual (personal or family) level

DEA could share their extensive knowledge about how to handle the more difficult workplace circumstances (at the institutional and employer level)

Both could join forces in their possible interactions with critical mainstream providers, such as, for example, the education and training providers.

# Thank you!

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