Disability Survey 2016

Understanding the Needs of People with Disability in the Victorian Jewish Community







Jewish community of Victoria **Disability Survey 2016**

December 2016

Jewish community of Victoria Disability Survey 2016

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Foreword

The introduction of the National Disability Insurance Scheme (NDIS) is the single most revolutionary change that the Australian disability sector has ever seen, and represents both opportunities and challenges for consumers, families, carers and service providers alike.

It is increasingly important for service providers to have a greater awareness of their community, and in essence, answer three fundamental questions in order to ensure that services are developed and delivered in line with the needs of the community.

- Who are you?
- Where do you live?
- What do you need?

This report by Jewish Care (Victoria) Inc. is informed by a survey that was developed and undertaken in partnership with Access Inc. It represents an important insight into the current and emerging needs of people living with disability in the Jewish community of Victoria. The report covers a broad scope of data to answer the three questions, and will be an important reference point for us, and hopefully other organisations to structure the products and services necessary to meet the needs of people living with disability in our community.

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Acknowledgements

The Jewish community of Victoria Disability Survey (JVDS) was commissioned in partnership by Jewish Care (Victoria) Inc. and Access Inc. and was undertaken by the Research, Quality, Innovation & Policy (RQIP) Unit at Jewish Care.

The survey has benefited from valuable suggestions and expert advice by Steve Lowe (Disability Services Manager, Jewish Care), Vicki Factor (President Access Inc.) and Louisa Gibson (CEO Access Inc.).

Guidance with regards to the structure and promotion of the survey was provided by Simon Jedwab (Manager - Service Development at Jewish Care), Jenna Chaitowitz (Communications and Advertising Officer Jewish Care) and Ayal Tusia (Marketing and Communication Manager at Jewish Care).

We would also like to thank clients of Jewish Care and Access Inc. who helped improve the survey immensely during the pilot testing phase. Special thanks also to members of the Jewish Care Disability Services team, namely Robert Wilson (Manager - Disability Accommodation and Tenancy Support) and Jayson Hurvitz (Coordinator – The Manders Villas) and the staff at Access Inc. who also assisted with facilitating the pilot testing.

Valued support and advice was also provided by the RQIP Unit at Jewish Care, specifically through Stephen Thomas, General Manager Innovation & Quality and the team's volunteer Ms Di Buck.

Special thanks to the Jewish Care (Victoria) Inc. Quality & Services Review Board Subcommittee which endorsed and oversaw the overall scope of the survey project and supported the commitment of internal resources (namely Eveline Nieuwveld, Research Coordinator) to undertake the project.

Executive Summary

Why was the Jewish community of Victoria Disability Survey (JVDS) conducted?

- The postcode data of persons living with a disability is outdated (2011 census)
- Recent data on persons living with a disability is aggregated at national level (SDAC 2015) and not detailed enough for service providers as an evidence base for strategic decisions
- Apart from the 2011 Census "Judaism" data, there is no data available on the Jewish Victorian community living with a disability
- The NDIS means a shift towards person centred care: knowing the needs and aspirations of our clients will be crucial
- The NDIS also means a highly competitive environment: packages will be more portable than ever before
- Therefore, the JVDS represents a significant first step towards better understanding the needs and aspirations of people in the Jewish community living with a disability or caring for someone living with a disability

Demography

ABS Data:

- In Victoria in 2015, 12.5% lives with a reported disability
- In Stonnington, Port Philip and Glen Eira in 2011, between 1 to 1.5% of the population aged 0 to 64 needs assistance with their core activities (self-care, mobility, communication)
- National prevalence of a profound or severe disability (for disability definitions, see appendix 1) is 2% for those aged 0-4, 5% for 5-14 years old, 2.6% for 15-24 years, 2% for 25-34, 3% for 35-44, 3.5% for 45-54, 6% for 55-59 and 7.8% for 60-64 according to the SDAC of 2015

JVDS 2016:

- In proportion to the general population, survey respondents were relatively young (most were between 5 and 34 years old)
- Male and females were approximately equally represented
- The majority of respondents indicated they live with Asperger syndrome or autism
- Almost all respondents indicated their disability to be permanent
- 6 Jewish Care clients answered to have been approached by the NDIS already

Geography & Living Situation

National Data:

- There are an estimated 428 Jewish persons living in the City of Glen Eira that need assistance with their core activities
- There are 63 and 58 such persons living in the City of Port Philip and Stonnington respectively
- The three postcodes 3162, 3161 and 3183 in Melbourne host more than 40,000 persons indicating religion Judaism in the 2011 Census (see appendix 4)
- These postcodes are estimated to have the highest proportion of Jewish persons living with a disability

JVDS 2016:

- Anticipated geography of Jewish persons with disability was confirmed by JVDS: 49% of the respondents live in the three postcodes 3162, 3161 and 3183
- Most respondents indicated they or the person they care for live with their parents
- 25% of all respondents use respite services at least one day a year

Socio-economics

National Data Survey of Disability, Ageing and Carers (SDAC) 2015:

- 63% of persons without a reported disability finish Year 12 compared to only 41% of persons with a disability
- For persons with a profound core activity limitation, only 34% complete Year 12
- Persons without a disability are almost 23 times more likely to receive a salary than persons with a profound core activity limitation
- Those with only a mild core activity limitation are almost half as likely than a person without a disability to receive a salary
- Persons without disability are almost twice as likely as persons with a disability to have a household income in the highest quintile (highest 20%)
- For the lowest quintile income, this trend is opposite: persons with disability are almost twice as likely to be represented compared to those living without a disability
- Of those without a reported disability, only 17.5% are not in the labour force; this can be compared to the overwhelming majority (70.2%) of persons with a profound or severe disability that are not in the labour force, over half (53.1%) of persons with a moderate core activity limitation and slightly less than half (44.6%) of persons with a mild core activity limitation

JVDS 2016:

- More than a third of the respondents (37%) are currently attending school
- Of all those that are currently attending or have attended school, more than half (55%) attended or are attending a mainstream school, compared to slightly less than a third (32%) that indicated they attend a special school
- Almost a third (31%) attended school previously. Of those, 11% indicated they have completed Year 12

- 17% of the total number of respondents answered that they undertook, or are currently undertaking, a course or study; 37% undertakes/undertook their study at University
- 20 persons in the survey obtained a tertiary qualification, 40% of those graduated with a degree
- 11% of respondents indicated their main daily activity was attending a day program
- 21% indicated they do not work, while about 17% performed work with 5% of those being volunteering arrangements

Support Needs

National Data SDAC 2015:

- More than three quarters (76%) of persons with a disability (all ages) in cared accommodation use equipment for eating
- 70% of persons aged 0-64 living with profound core activity limitation needed assistance with self-care, while only 63% actually received this care
- The largest need assistance gap is for property maintenance (3%), followed by health care (2.9%)

JVDS 2016:

- 75% of carers indicated they do not get enough support for their carer role
- 24% of respondents receive one on one support from a support worker
- One-on-one support is mostly received during the day and several times a week but not every day
- Of the support categories, most respondents indicated they receive assistance to prepare meals (25%) and go to the doctor or appointments (24%)
- More than half (54%) do not need home modifications for their disability, 12% need small untailored modifications
- Those living with a genetic condition, cerebral palsy or physical disability were most likely to use equipment or assistive technology

Service Provision Preferences and Feedback for Jewish Care

JVDS 2016:

- 25% disagree or strongly disagree with the statement "I prefer accessing services from one provider only"
- Almost half (41%) somewhat disagree, disagree or strongly disagree with the importance of services provided by Jewish providers only
- 4% strongly agree on the importance of services provided by Jewish providers only, compared to 5% who agree and 18% who agree somewhat
- More than two-thirds (68%) rated Jewish Care's services as either "Excellent" or "Good"
- However, when given the opportunity to provide an open ended response, feedback on Jewish Care's services, staff training and consistency of staff were frequently mentioned (see appendix 5 for the full verbatim responses)

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Introduction

Background

The Jewish community of Victoria Disability Survey (JVDS) represents a significant step towards better understanding the needs and aspirations of people in the community living with a disability or caring for someone living with a disability.

The survey was inspired by the National Disability Insurance Scheme (NDIS) which will be implemented incrementally from 2017 onwards. The NDIS is a reform of the existing national system for people living with a disability. The scheme aims to fundamentally change the direction of care into a person centred planning framework where the person or carer accessing supports is funded directly instead of through service providers.

The NDIS is a great opportunity for people with a disability to obtain the services they need to be able to maximise the potential in their lives. However, the scheme also entails a highly competitive environment for service providers as packages are individualised and portable.

With the implementation of individualised care packages, an evidence base that provides an understanding of the market is vital. Yet, there is an absence of data about people in the community living with a disability. This absence of data causes a gap in the evidence base that informs strategy for Jewish service providers.

The JVDS conducted aims to partly answer three central questions for Jewish Care Victoria while moving into this new landscape to obtain a better understanding of the market:

- Who are our (potential) clients?
- What are their needs and aspirations?
- Which services are most relevant to them now and into the future?

In what follows, the survey methodology will be further explained. After the introduction, five different areas will be reported on in the following sections:

- 1. Demography,
- 2. Living arrangements & geography,
- 3. Support needs,
- 4. Socio-economics, and;
- 5. Service provision preferences.

About the Survey

The survey was initially open to register responses from Friday 4 November until Wednesday 23 November. This report represents data captured in this particular period.

Survey methodology

The survey was developed in collaboration with disability services professionals and piloted with Jewish Care and Access Inc. clients. Expert advice by colleagues and industry partners, and feedback by pilot participants improved the validity and reliability of the survey.

The survey structure was based on the NDIS support categories as documented in

the NDIS price guide. Questions around demographic information were based on previously conducted Jewish Care customer surveys and sometimes adjusted to standardised and tested SurveyMonkey questions. The online tool SurveyMonkey was used to develop and administer the survey.

Three question types were used in the survey: open-ended questions, multiple choice questions and Likert scale questions (strongly agree, agree...etc.).

Versions

The survey consisted of three versions:

- 1. plain English version for a person with a disability,
- 2. plain English version for a carer of a person with a disability and;
- 3. Easy English version with pictures.

Respondents could answer the questions online or via telephone and it took between 10 and 30 minutes to complete.

Survey distribution

The JVDS was distributed via email to Jewish Care's Disability Services email database (115 email-addresses) with a response rate of 45% (52 respondents). The survey was promoted on the Jewish Care website in the banner at the top of the page and distributed via Jewish Care's Facebook, Linkedin and Twitter pages. Furthermore, a radio interview to promote the survey was conducted on the 9th of November at J-Air Radio with Gary Max hosting Steve Lowe, Vicki Factor and Eveline Nieuwveld. Additional platforms used for the distribution were:

- Emmanuel's List newsletter
- Jewish Spectrum Support email to members
- J-Wire website and newsletter
- Friday EXTRA newsletter of Alfred Health
- Southern Melbourne Primary Care Partnership newsletter
- Stonnington Council newsletter
- Jewish Care's volunteer e-newsletter
- Synagogue newsletters
- Access Inc. newsletter and website
- An article in the Australian Jewish News

Recruitment

The data was collected via the online survey tool created in SurveyMonkey. The link to the survey was distributed via email and online media. Some respondents (n=2) preferred a telephone version of the survey and were telephone surveyed by a volunteer who used the online tool to register the response.

Sampling frame

Due to the difficulty of drawing a sample from an unknown population, a nonprobability convenience sampling method was used. Thus, the sample was not random and might be biased towards a particular cohort that is more likely to fill in a survey advertised via Jewish Care's media.

Limitations

The low response rate to the survey may be attributed in part to two factors, those being the limitations of the sampling frame as stated above, and to the desire for some members of the community to remain private about their own disability, or those in their family with a disability.

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However, during the survey period, additional data was released by the Australian Bureau of Statistics (ABS) following their 2015 Survey of Disability, Ageing and Carers (SDAC).

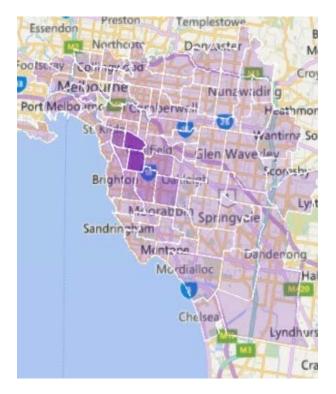
This data was identified as a viable source of additional valid information which could assist to further understand the needs of people with a disability in the Jewish community of Victoria.

Therefore, it was determined that this report be structured in such a way as to present both the Jewish community of Victoria Disability Survey results in tandem with findings derived from the ABS SDAC.

ABS Datasets

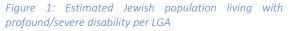
2011 Census Data LGA Level

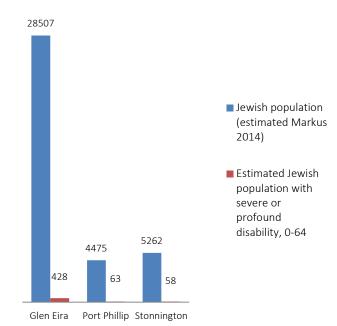
More than half (54.9%) of the Victorian Jewish population live in Glen Eira. A further 20 per cent of the community is concentrated in the two Local Government Areas (LGA) of Stonnington and Port Phillip.



This report starts from the premise that the prevalence of disability in the Victorian Jewish community is similar to the general Victorian population. Therefore, under 65 years of age, it is expected that less than one out of 37 persons in the community (2.7%) lives with a profound or severe disability. More than one in 30 (3.6%) people within the general population living in Glen Eira, Stonnington or Port Phillip have indicated in the 2011 census that they need assistance with core activities. However this includes elderly people above 65 years.

Figure 1 shows an estimate of the number of people living with a severe or profound disability aged 0 to 64, based on the LGA disability prevalence. The prevalence of a severe or profound disability for people aged between 0 and 64 in the three LGA's ranges between 1.1 and 1.5 per cent. For a definition of severe or profound disability, see Appendix 1.





Source: 2011 Census of Population and Housing: Disability, Carers and Need for Assistance Classifications; Markus, A. (2014) *The Jewish population of Victoria: key findings from the 2011 Census.*

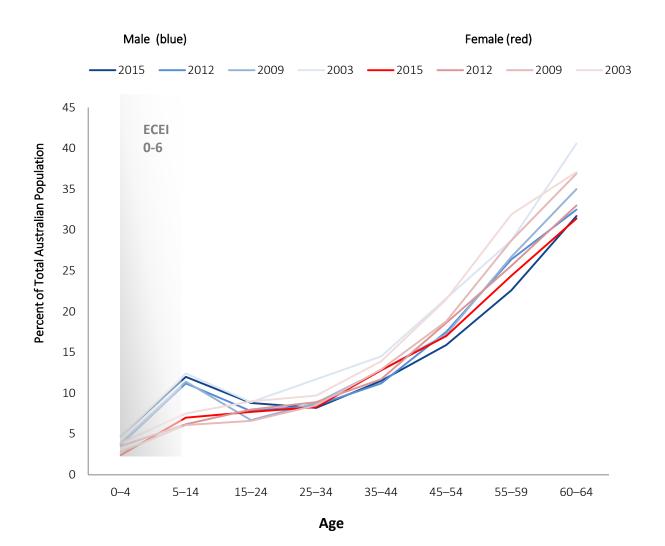
2015 Disability Survey Australian Bureau of Statistics

Age and gender distributions of Australian population living with a disability

Every three years, the Australian Bureau of Statistics (ABS) conducts the Survey of Disability, Ageing and Carers (SDAC). In April 2016, the latest results were released of the 2015 SDAC. The results are aggregated at national level.

Figure 2 provides an overview of the percentage of people living with a reported disability by gender (red and blue) and age on the horizontal axis. Children aged 0-6 are eligible for the Early Childhood Early Intervention (ECEI) of the NDIS. Prevalence of disability among males aged 0-14 is about 5 per cent higher than for females of the same age.





7

Figure 3 provides an overview of the total Australian population by disability status in colours and age on the horizontal axis. The grey area is persons living without a disability or longterm health condition. For definitions of the disability status categories, see appendix 1.

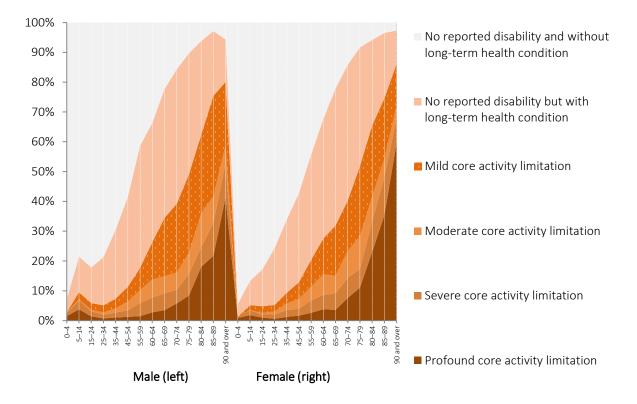


Figure 3: Australian population, percentages by disability status, age and gender, 2015

Figure 4 provides an overview only of those living with a severe or profound disability, by age, between 2003 and 2015 (2006 data was not collected). The prevalence of a severe or profound disability increases by age. However, persons aged between 5 and 14 years, are more likely (+1.5%) to have a severe or profound disability than persons aged between 45 and 54 years.

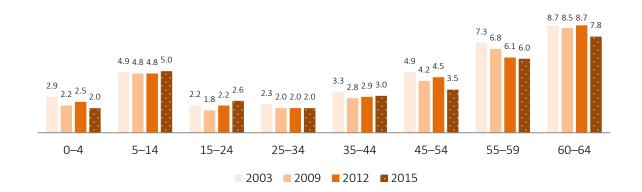
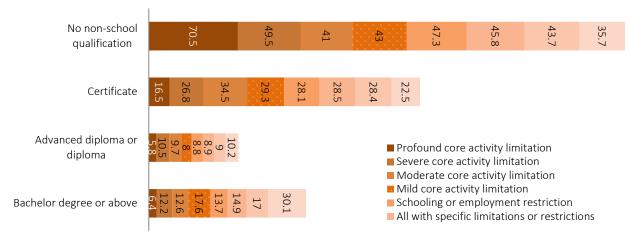


Figure 4: Percentage of the Australian population living with a profound or severe core activity limitation, by age 2003-2015

Employment and education of Australian population living with a disability

About 30 per cent of persons without a reported disability obtain a bachelor degree or above while only 17 per cent of persons with a reported disability achieve this level of qualification. Figure 5 shows that more than 70 per cent (70.5%) of persons with a profound core activity limitation did not obtain a non-school qualification, compared to almost half the proportion (35.7%) of persons without a reported disability.

Figure 5: Percentage Australian population (aged 15-64) by qualification level and disability status 2015 (some categories overlap, therefore percentages might exceed a total of 100%)



The trend of lower education levels among persons with a disability compared to those without a reported disability is already visible in the proportions that finish Year 12. Figure 6 shows that more than two thirds of persons without a reported disability (blue line) finish Year 12 while less than half of persons with a disability (red line) finish Year 12. For persons with a profound core activity limitation, only a third completes Year 12.

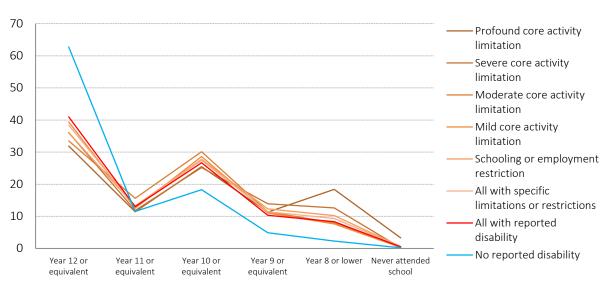
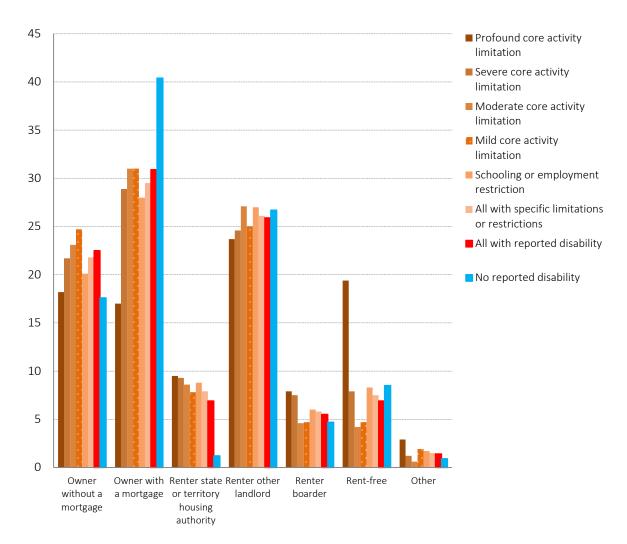


Figure 6: Percent of Australian population (aged 15-64) by highest year of school completed and disability status, 2015

Socio-economics of Australian population living with a disability

The biggest disparity between people aged 15 to 64 with and without a reported disability, when considering housing tenures, is for renters from state/territory housing authorities and owners with a mortgage. As figure 7 shows, those without disability are almost 10 per cent more likely to be an owner with a mortgage. Interestingly, persons with disability are 10 per cent more likely to be an owner without a mortgage compared to people without disability.





In figure 8 the opposite trend for receiving a salary in contrast to an allowance is apparent: persons with a disability are 6 times more likely to be receiving a government pension or allowance. Persons without a disability are almost twice as likely to receive a salary or wage compared to persons with a disability.

The severity of the activity limitation increases this gap even further: persons without a disability are almost 23 times more likely to receive a salary than persons with a profound core activity limitation. Naturally, for a person who always needs assistance with self-care,

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mobility or communication, being part of the labour force comes with real challenges. Nevertheless, those with only a mild core activity limitation are almost half less likely than a person without a disability to receive a salary although they only need equipment or medication and do not need any further assistance with their core activities.

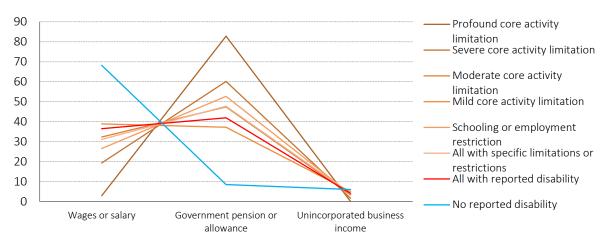


Figure 8: Percent of Australian population (aged 15-64) by main source of income by disability status, 2015

A trend similar to figure 8 is visible in figure 9: persons without disability (blue line) are almost twice as likely as persons with a disability (red line) to have a household income in the highest quintile. For the lowest quintile income, this trend is opposite: persons without disability are almost twice represented compared to those living without a disability. The highest quintile is the 20 per cent highest earners.

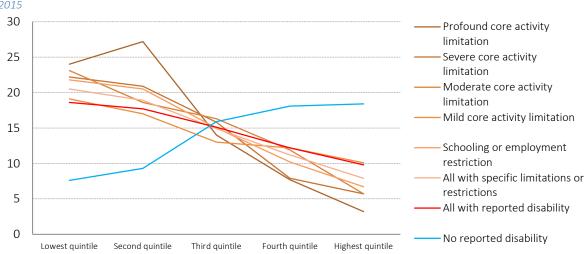




Figure 10 further details the labour force status in full and part-time and unemployment per disability status. More than half (55.2%) of the persons without a reported disability are full-time employed. A further 23 per cent are part-time employed. However, almost three quarters (70.2%) of persons with a profound or severe disability are not in the labour force compared to over half (53.1%) of persons with a moderate core activity limitation and slightly

less than half (44.6%) of persons with a mild core activity limitation. Figure 11 shows occupation type by disability status.



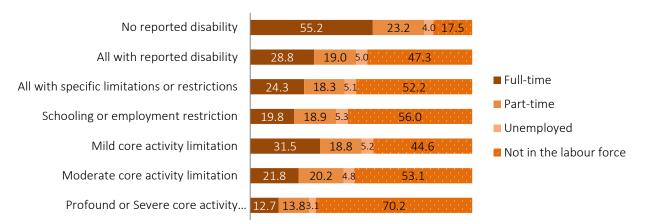
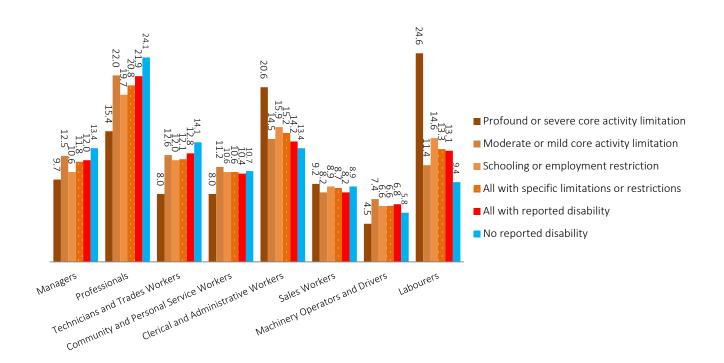


Figure 11: Percent per occupation of main job of Australian population (aged 15-64) by disability status, 2015

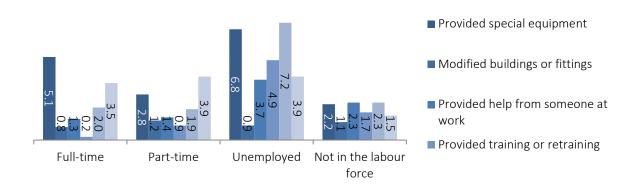


Equipment needs of Australian population living with a disability

Figure 12 shows only those aged 15-64 living with a disability by employment status. Unemployed persons with a disability needed more equipment and/or modifications compared to persons living with a disability who were full or part-time employed. Of the unemployed persons with a disability, 7.2 per cent were allocated different duties due to

their needs while 6.8 per cent were provided with special equipment (these categories are not mutually exclusive).

Figure 12: Percent of Australian population (aged 15-64) living with a disability needing equipment or modifications for employment by employment status, 2015



The use of equipment was most prevalent among persons with a disability living in a cared accommodation as opposed to living in a household alone or with others. Figure 13 shows that more than three quarters (76%) of persons with a disability in cared accommodation use equipment for eating. After eating, most used equipment for this group are respectively moving around in the house (75%), managing incontinence (71%), moving around outside of the house (64%), toileting (63%) and getting in and out of bed (55%). For those living in households, either alone or with others, equipment mostly assisted with communication (40% and 25%) and managing health conditions using medical aids (20% and 19%).

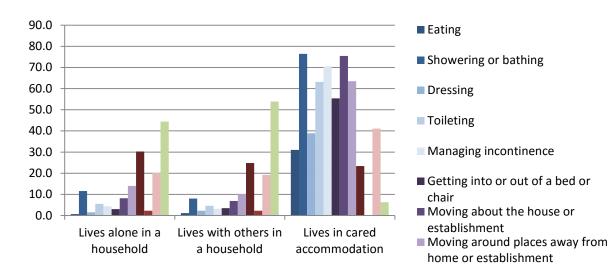
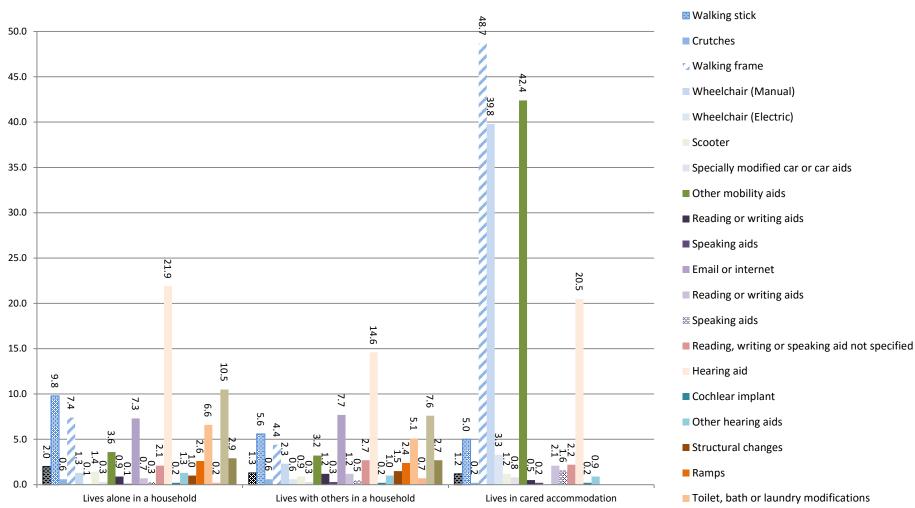


Figure 13: Percent of Australian population living with a disability using aid or equipment by living arrangements, 2015

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Figure 14 on the next page further breaks down the equipment types used by persons in a cared accommodation or living in a household alone or with others, this includes all ages but only persons living with a disability. The aid most used by persons in a cared accommodation is a walking frame while for those in living in a household it is toilet, bath or laundry modifications.

Figure 14: Percent of Australian population living with a disability using mobility or communication aid aids and/or home modifications because of health by living arrangements, 2015



🛚 Cane (Sonar canes, etc.)

15

Other home modifications

Doors widenedHandgrab rails

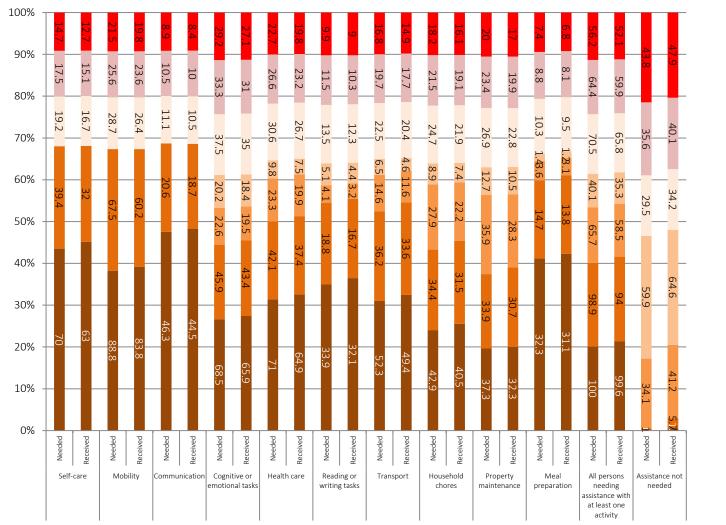


Figure 15: Percent of Australian population living with a disability (aged 0-64) needed and received assistance by disability status, 2015

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- All with specific limitations or restrictions
- Schooling or employment restriction
- Mild core activity limitation
- Moderate core activity limitation
- Severe core activity limitation
- Profound core activity limitation

Support needs and assistance of Australian population living with a disability

Figure 15 (previous page) provides an overview of assistance that was received and needed. Per support category, such as "self-care" or "mobility", two bar charts depict the percentage of persons *needing* assistance with self-care and the percentage of persons *receiving* assistance with self-care. The bar charts are broken down by colour indicating the disability status. For instance, 70 per cent of persons aged 0-64 living with profound core activity limitation needed assistance with self-care, while only 63 per cent actually received this care. Of all those needing assistance with self-care, persons with a profound activity limitation make up about 43 per cent (see the vertical axis).

Figure 16 shows the percentages of assistance received and needed of the Australian population living with a disability aged 0-64. The largest need assistance gap is for property maintenance (3%), followed by health care (2.9%).

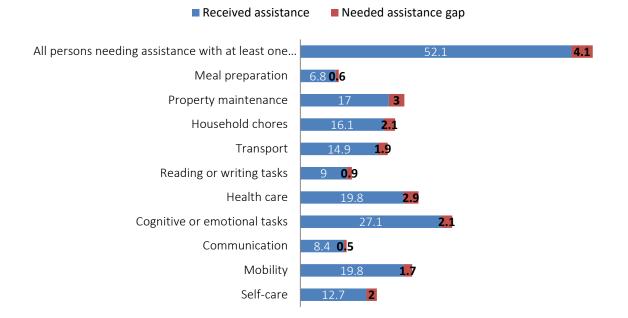
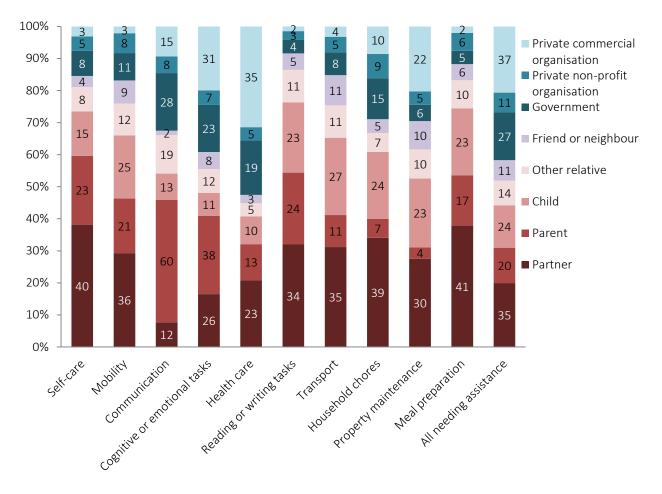


Figure 16: Percent of Australian population with a reported disability (aged 0-64) that received assistance compared to the assistance needed 2015

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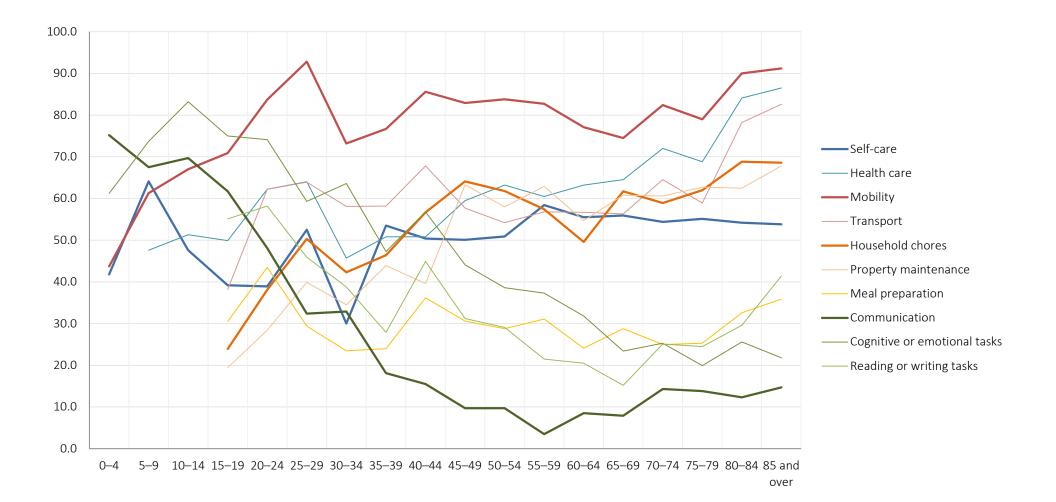
As figure 17 shows, 40 per cent of people with a reported disability indicate they receive assistance with self-care from their partner. In addition; 60 per cent receive assistance with communication from their parent, of all receiving assistance for communication.

The graph therefore shows the provider of the assistance as a proportion compared to other provider types. Because the provider categories are non-exhaustive, caution must be taken and the percentages must be interpreted as proportions in the different sub-groups.

The type of assistance needed by age is presented in figure 18. The need for assistance with mobility goes up by age, while the need for assistance with communication shows an opposite trend.

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Figure 18: Percentage of all persons with a severe or profound disability in Australia by assistance need and age, 2015



2016 JVDS Data

This section provides an overview of the Jewish community of Victoria Disability Survey (JVDS) conducted in 2016.

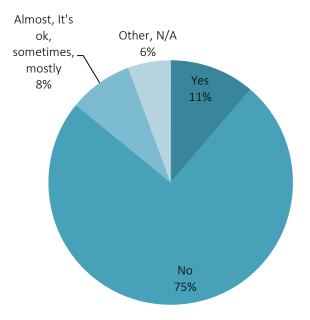
Of the 125 survey responses registered between Friday 4 November and Sunday 27 November, 115 responses were valid. More than one quarter (29%) of these responses were by persons living with a disability themselves and 71 per cent of the survey respondents were carers who filled the survey in on behalf of someone living with a disability. The Easy English picture version captured responses from 19 persons.

Carers

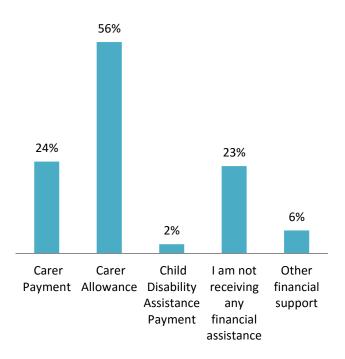
Only two carers indicated that the person with a disability also filled in the survey separately, which means there is an overlap of 2 persons in the dataset. More than 90 per cent of the carers that filled in the survey were a parent of the person with a disability. Other relationship types were sibling (n=3), support worker (n=2), friend (n=1), guardian (n=1) and spouse (n=1).

The average age for carers is 50 years old, with 80 per cent caring for the person since they were born. Three quarters (75%) of the carers indicated that they are not receiving enough support for their carer role and almost a quarter (23%) indicated they do not receive any financial support.

Do you get enough support for your carer role?



Financial assistance



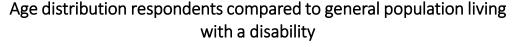
All responses to the JVDS

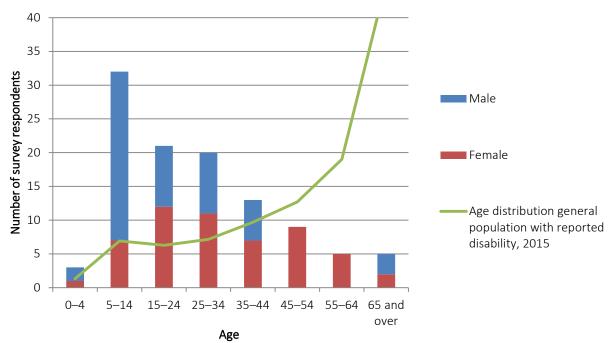
Because the number of responses by persons living with a disability is relatively small, the data reported on represents responses from both persons with a disability and carers.

Age and gender

Compared to the general Australian population of people living with a disability, the JVDS respondents were younger in age. The survey was meant to target people between 0 and 64 years old and therefore differs from the general population distribution which has a higher prevalence of disability among people 64 years and older. The green line in the below graph shows the age distribution of the general population living with a disability in proportion to the survey respondents (in blue and red, divided by gender).

Age respondents	Female	Male
0–4	1	2
5–14	7	25
15–24	12	9
25–34	11	9
35–44	7	6
45–54	9	0
55–64	5	0
65 and over	2	3



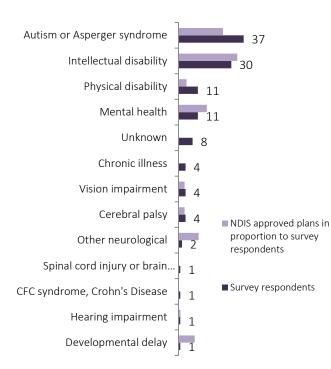


Types of disability

Most respondents (n=37) indicated that they, or the person they are caring for, can be classified as having autism or Asperger syndrome. Intellectual disability was the second largest category (n=30).

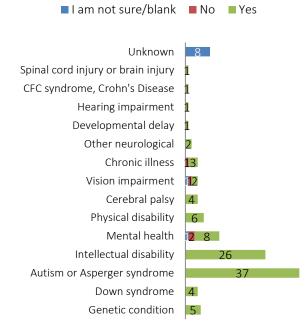
The below graph shows in dark purple the number of survey respondents per disability category. The light purple bars visualises the difference in the proportion of NDIS approved plans in Australia per disability category. In proportion to the NDIS approved plans, the JVDS respondents with autism or Asperger syndrome are overrepresented while people classified under "other neurological" were underrepresented in the survey.

Number of survey respondents by disability category



The majority of respondents indicated the disability to be permanent. Those who disability not to indicated their be permanent are living with conditions relating mental health, vision to impairment or a chronic illness. Of 8 persons answering the survey this information was not captured.

Is your disability permanent?



Have you been approached by the NDIS already?

Not a Jewish Care client

Jewish Care client

52

33
3
6

I am not sure No Yes

Living Arrangements & Geography

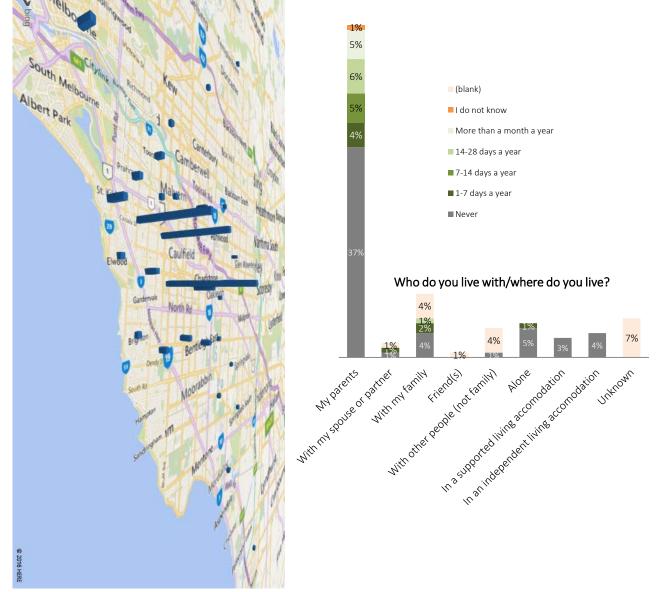
Postcode	% resp
3162	19%
3161	15%
3183	15%
3163	5%
3182	3%
3000	3%
3146	3%
3165	3%
3185	3%
3204	3%
3142	2%
3149	2%
3181	2%
3187	2%

About half (49%) of the JDVS respondents live in the three postcodes 3162, 3161 and 3183. This is also where Jewish Care's disability facilities are located.

Home & Respite

Most of the respondents indicated that they or the person they are caring for live with their parents. More than a third of those living with their parents (37%) indicated they never use respite. Nevertheless, of all living arrangements, those living with their parents were most likely to use respite 1-7 days a year (4%), 7-14 days a year (5%), 14-28 days a year (6%) or even more than a month a year (5%).

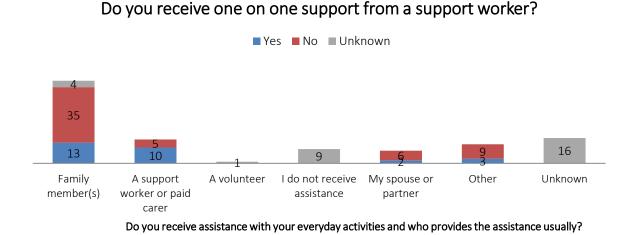
How often per year do you go to respite?



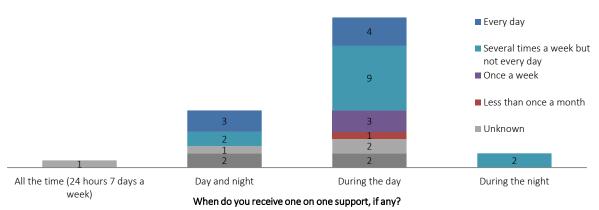
Support Needs

Assistance with everyday activities

Of those receiving assistance with their everyday activities, 55 persons do not receive one on one support while 28 persons receiving assistance did receive one on one support. The below graph provides an overview by the support provider, for instance family members or support workers providing the assistance.



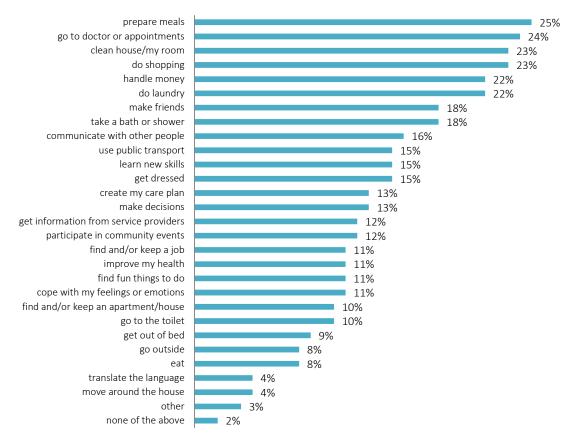
Persons receiving one on one support are visualised in the graph below by time and frequency of support. As the graph shows, most one-on-one support is provided during the day and several times a week but not every day.



How often do you receive one on one support by a support worker?

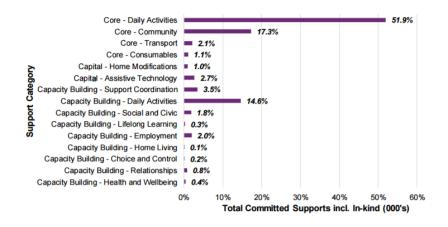
Support Categories

The JVDS also asked respondents for which activities they needed assistance. Preparing meals was most common and was indicated by 25 per cent of the respondents. Preparing meals is followed by going to the doctor or appointments (24%), cleaning the house/room (23%) and shopping (23%).



I receive assistance to...

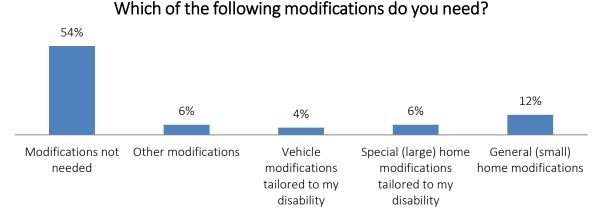
Committed support expected to be provided by support category NDIS October 2016 (COAG report national data)



Assistive Technology

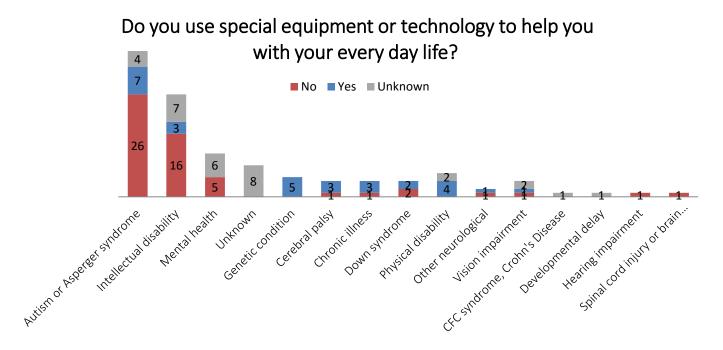
Modifications

More than half (54%) of the respondents answered that they do not need any modifications while 12 per cent indicated to need small home modifications which includes handle bars or other general untailored solutions. Only 6 percent answered that specialised large home modifications were necessary for their disability.



Equipment

The need for special equipment or technology is depicted in the graph below, by disability. The majority of persons living with a genetic condition, physical disability and cerebral palsy responded to use special equipment or technology.



Socio-economics

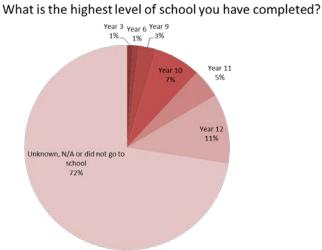
The JVDS asked respondents whether they were still in school, attended school previously, if this is a special or mainstream school and which year they completed. If respondents left school, the survey asked if they undertook a further course of study and if they had already finished this or answered no, the questions about their main daily activity was asked. This last question allowed identification of how many of those who left school and/or were not studying anymore, are currently employed, and if this was a supported or unsupported job.

The results of these questions can again be compared with the SDAC results from the ABS as described in the previous section of this report.

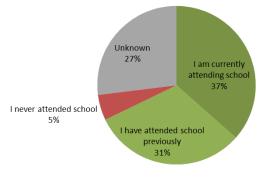
Education - School

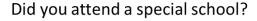
More than a third of the respondents (37%) are currently attending school, this cohort therefore skipped further questions about further studies, which year of school they completed and what their main daily activity is. Of all those that are currently attending or have attended school, more than half (55%) attended or are attending a mainstream school, compared to slightly less than a third (32%) who indicated they attend a special school.

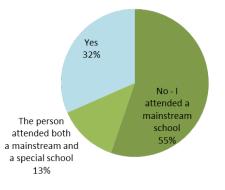
Almost a third (31%) attended school previously. Of those, 11 per cent indicated to have completed Year 12.



Did you or are you currently attending school?





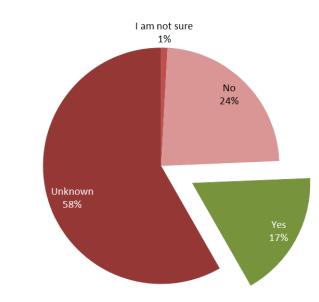


Studies and qualifications

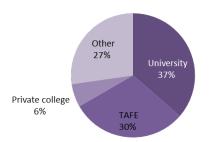
Respondents currently attending school skipped questions about studies and are therefore accounted for in the 58 per cent of "Unknown" in the below pie chart. Some respondents did not answer this question; they are also accounted for in the "Unknown" proportion.

Twenty persons answered that they undertook or are currently undertaking a course or study; this is about 17 per cent of the total. Five persons of the 20 are still studying. However in total twenty persons indicated they have

Did you undertake a course or study (other than at school)?



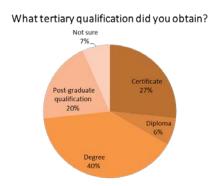
obtained a tertiary qualification already, which means that five persons of the 20 skipped the "did you undertake a course or study?" question and are also accounted for in the "Unknown" proportion.



Where did you undertake studies?

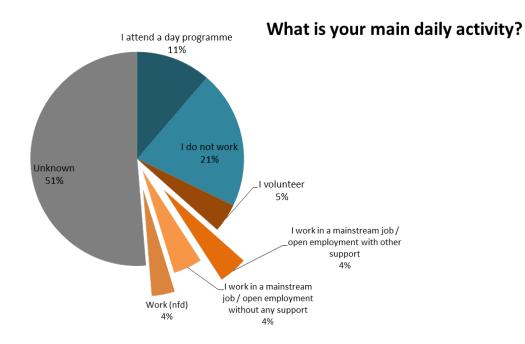
(multiple answers possible)

The majority of those who study or are still studying did so at University (37%). Of the 20 persons obtaining a qualification, 40 per cent graduated with a degree.



Employment

About one in five indicated they perform some form of employment; five per cent of this was a volunteering arrangement. In total, 12 per cent are working in a job, mainstream or not further defined, with or without support.

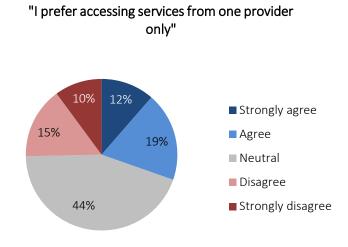


Service Provision Preferences

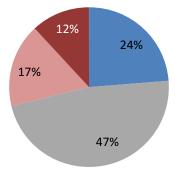
One provider only

Most respondents hold neutral opinions towards having to access one service provider only. However, a quarter disagrees or strongly disagrees with the statement. These respondents will be likely to shop around and compare price between different service providers. On the other hand, slightly more than one quarter agree they would prefer accessing services from one provider only.

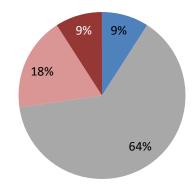
The two pie charts below depict the separate responses of persons with a disability filling in the survey and carers.



Carer responses

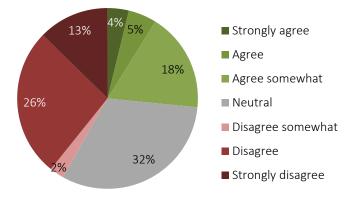


Person with a disability responses

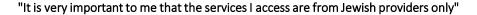


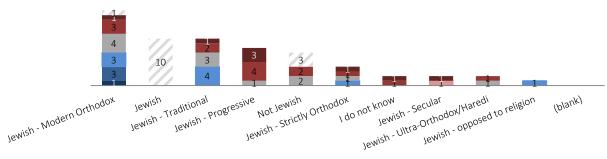
Jewishness of Services

"It is very important to me that the services I access are from Jewish providers only"

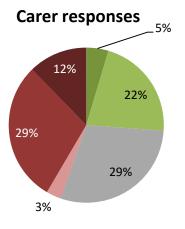


Slightly more than one quarter agree that it is important for them to access services from Jewish providers only. However, almost one third are neutral towards this statement and almost half (41%) somewhat disagree, disagree or strongly disagree with the importance of services provided by Jewish providers only. Jewishness of services is further broken up in the respondents' affiliation (see below).

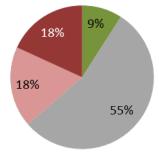




Strongly agree Agree Agree Agree somewhat Neutral Disagree somewhat Disagree Strongly disagree (blank)



Person with a disability responses



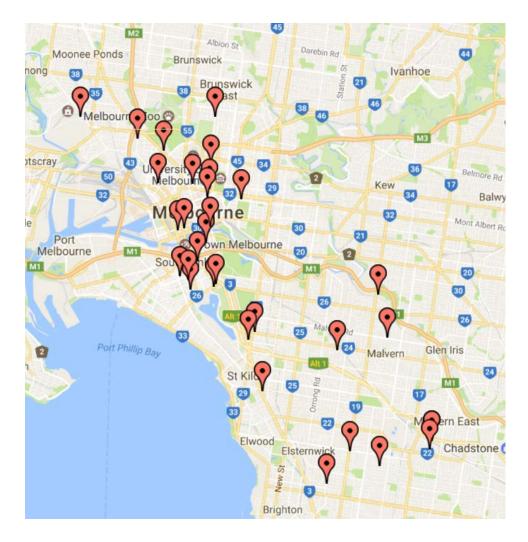
References

Markus, A. 2014: *The Jewish Population of Victoria: Key findings from the 2011 Census,* Monash University Australian Centre for Jewish Civilisation

Australian Bureau of Statistics (ABS). 2015: *Survey of Disability, Ageing and Carers,* <u>http://www.abs.gov.au/ausstats/abs@.nsf/mf/4430.0</u>

Additional Information

Please click <u>here</u> for a map of all disability providers in Melbourne, Port Philip, Glen Eira and Stonnington.



Appendix 1: ABS Disability Definitions

- 1 Profound/severe limitation or restriction (any of 1a 3a)
- 2 Moderate limitation or restriction (NO 1a-3a AND any of 1b-3b)
- 3 Mild limitation or restriction (NO 1a-3b AND any of 1c-3c)
- 4 No limitation or restriction (NO 1a-3c AND ALL of 1d-3d)

	Always / sometimes need help and/or supervision	Have difficulty, but don't need help / supervision	Don't have difficulty, but use aids / equipment / medications	Have no difficulty
Self-care	1a	1b	1c	1d
Mobility	2a	2b	2c	2d
Communication	3a	3b	3c	3d

Appendix 2: NDIS Price Guide as at July 2016 Victoria

Every day activ	ities suppor	t				Price		
Assistance with personal domestic activities				\$40.60	/h			
Specialised hor	ne based as	sistance for	a child			\$42.79	/h	
House and/or y	vard mainter	nance				\$42.05	/h	
House cleaning	and other h	ousehold a	ctivities			\$37.70/h		
Assistance with				ry of meals		\$11.11		
				•				
Assistance with self-care activities or community, social and rec	Group based in a centre	Group bas	ed	1:3 ratio		Individual		
activities	nfd	Normal	High	Normal	High	Normal	High	
Weekdays	\$19.37/h	\$21.39/h	\$28.47/h	\$14.27/h	\$18.98/h	\$42.79/h	\$45.17/h	
Weekday evening	\$21.26/h	\$23.46/h	\$31.24/h	\$15.65/h	\$20.83/h	\$46.93/h	\$49.53/h	
Saturday	\$28.39/h	\$29.68/h	\$39.51/h	\$19.78/h	\$26.34/h	\$59.36/h	\$62.66/h	
Sunday	\$36.31/h	\$37.98/h	\$50.56/h	\$25.32/h	\$33.71/h	\$75.96/h	\$80.17/h	
Public Holidays						\$92.53/h	\$97.68/h	

Coordination of supports	Price
Assistance to strengthen participant's abilities to coordinate supports & participate in the community.	\$56.61/h
Further qualifications/experience required to strengthen a higher needs participant's ability to coordinate their supports & participate in the community.	\$92.27/h
Training in planning and plan management for participants unable to do this independently but who could do all or part of the task with training.	\$55.07/h
Time limited support coordination, within specialist framework necessitated by high risks in participant's situation, to address barriers and reduce complexity in environment, assisting to connect with supports, build capacity and resilience.	\$175.57/h

Improved living arrangements	Price
Assistance with accommodation and tenancy obligations	\$56.61/h

Increased Social and Community participation	Price
Life transition planning including mentoring, peer support and individual skill	\$56.61/h
development.	
Skills development in a group	\$27.54/h
Innovative Community Participation	Varies
Individual skills development and training	\$55.07/h

Improved health and wellbeing	Price
Dietician consultation and diet plan development	\$175.57/h
Dietician group session	\$58.53/h
Exercise physiology	\$142.86/h
Exercise physiology in a group	\$47.62/h
Personal training	\$53.53/h

Improved life choices	Price
Financial and service intermediary activities	\$53.10/h
Financial intermediary - set up costs	\$214.12
Financial intermediary monthly processing	\$96.25 pm

Finding and Keeping a Job	Price
Employment related assessment and counselling	\$175.57/h
Assistance in specialised supported employment Level 1 DMI	\$84.92 pw
Assistance in specialised supported employment Level 2 DMI	\$143.54 pw
Assistance in specialised supported employment Level 3 DMI	\$215.54 pw
Assistance in specialised supported employment Level 4 DMI	\$285.92 pw
Individual employment support	\$55.55 /h
Employment preparation and support in a group	\$18.52/h
Supported employment start-up fee (ADE)	\$622.00

Improved daily living skills	Price
Assistance with decision making, daily planning, budgeting	\$42.79/h
Individual assessment and support by a Nurse	\$93.95/h
Individual skills development & training, includes public transport training & support	\$42.79/h
Training for carers/parents	\$55.07/h
Specialised group early childhood interventions	\$58.53/h
Specialised individual therapy for early childhood	\$175.57/h
Transdisciplinary early childhood intervention	Varies
Counselling group	\$48.98/h
Individual counselling	\$146.95/h
Group therapy	\$58.53/h
Therapy assistant	\$40.92/h
Specialised driver training	\$96.90

Selection and/or manufacture of customised or wearable technology	\$158.45/h
Individual assessment, therapy and/or training (includes assistive technology)	\$175.57/h
Multidisciplinary team	Varies

Improved relationships	Price
Specialist behavioural intervention support	\$192.71/h
Behaviour management plan, training in behaviour management strategies	\$175.57/h
Individual social skills development	\$55.07/h

Improved learning	Price
Transition through school and to further education	\$56.61/h

Appendix 3: Age Distribution by Gender and Disability Status SDAC 2015 (ABS)

Age group (years)	Profound core activity limitation	Severe core activity limitation	Moderate core activity limitation	Mild core activity limitation	Schooling or employment restriction	All with specific limitations or restrictions	All with reported disability	No reported disability but with long- term health condition	No reported disability and without long- term health condition	Total
MALE										
0–4	1.5	1	0.2	0		2.9	4.7	4.4	91.2	100
5–14	3.7	2.9	0.4	2.3	9.8	11.2	12	11.6	76.6	100
15–24	1.4	1.7	0.5	2.1	5.8	7.3	8.8	11.6	79.7	100
25–34	0.7	1.2	0.8	2.3	5	6.4	8.2	15.6	76.1	100
35–44	1	1.6	1.4	3	7.6	9.3	11.5	22.1	66.3	100
45–54	1.2	2.1	2.8	4.7	10.7	13.2	15.9	28.6	55.5	100
55–59	1.4	4.2	4.2	6.9	15.8	19.1	22.6	38.7	39	100
60–64	2.6	4.6	5.7	11.6	18.5	26.7	31.7	37.2	31.4	100
FEMALE										
0–4	0.9	0.4	0	0		1.5	2.4	4.2	93.6	100
5–14	1.8	1.6	0.2	1.5	5.2	6.1	7	8	85	100
15–24	1	1	0.5	2.2	5.1	6.2	7.7	11.9	80.5	100
25–34	0.6	1.4	1	2.1	4.9	6.3	8.3	18.3	73.2	100
35–44	1.2	2.2	2.2	3.4	8.8	11	12.8	23.6	63.7	100
45–54	1.6	2.2	3.2	5.2	11.6	14.6	17	28.5	54.6	100
55–59	2.5	3.9	4.5	8.5	16.5	21.1	24.4	33.6	42.2	100
60–64	3.6	4.6	6.6	11.3	19.7	27.9	31.4	38	30.7	100
Total Population	3.1	2.8	2.6	6.1	8.3	16.0	18.3	22.1	<i>59.5</i>	100.0

Source: ABS (2015) Disability, Ageing and Carers, Australia: Summary of Findings, 2015

Appendix 4: Estimated Persons in the Jewish Community Needing Assistance by Postcode

Table 1 Estimated persons of the Jewish community that need assistance with core activities by postcode (aged 0-64)

Postal Code	Persons that indicated to need assistance aged 0-64 in 2011 Census		
3162	192	6702	95
3161	120	6522	64
3183	228	4205	58
3204	429	2415	42
3165	336	2574	40
3163	367	2233	32
3187	198	1578	25
3185	126	2063	24
3142	71	1413	10
3145	250	710	10
3182	267	592	8
3186	162	846	8
3181	217	555	8
3146	236	575	6
3144	71	746	6
3141	164	602	6
3184	135	560	6
3188	269	290	5
3192	345	250	5
3205	181	228	5
3101	334	298	5
3143	63	527	4
3189	87	212	4
3166	375	199	4
3190	179	186	4
3167	177	163	4
3169	416	144	4
3123	113	353	3
3195	525	179	3
3108	260	158	3
3147	278	121	3
3207	229	132	2
3150	782	136	2
3148	160	94	2
3122	174	234	2
3121	350	144	2
3149	443	120	2
3124	180	191	2
3109	368	124	2
3175	1562	52	2

דסח <mark>chessed</mark> kindness

משפחה <mark>mishpacha</mark> family

דרך ארץ derech eretz respect

צדקה tzedakah charity



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