

# **Information Paper**

# **ABS Sources of Disability Information**

**Australia** 

2003-2008

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2003-2008

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#### INTRODUCTION

#### INTRODUCTION

Disability data is used for several key purposes. Government and private agencies use it primarily to determine how many people have a disability, whether they require support services and where they live. Being able to identify levels of disability is an important aspect of service provision in that it allows agencies to provide services targeted specifically at level of need.

Data is also necessary for assessing the effectiveness of government policy and practice. Australia is a signatory to the UN Convention on the Rights of People with Disabilities and has obligations to ensure its people with disabilities receive every opportunity and assistance to be able to participate fully in society. The Council of Australian Governments (COAG) uses disability data to monitor and assess whether the needs of people with a disability are being met in accordance with these obligations.

Although disability data is available from many sources, the ABS is a key provider of data to government and non-government service agencies. This information paper examines disability from different data sources collected by the Australian Bureau of Statistics. The aim of the paper is to provide guidance for the informed use of data from these sources.

The paper outlines the historical development and broad conceptual framework surrounding each of the major ABS measures of disability and provides analysis of the disability populations identified by surveys in the 2003-2008 reference period. It provides a broad insight into the similarities/differences between them and makes recommendations as to which measures are best fit for purpose.

The 2003-2008 reference period for this paper includes the following surveys:

- 2003 Survey of Disability, Ageing and Carers (SDAC 2003)
- 2005 Survey of Education and Training (SET 2005)
- 2006 General Social Survey (GSS 2006)
- 2006 Time Use Survey (TUS 2006)
- 2006 Census of Population and Housing (CENSUS 2006)
- 2007 Survey of Mental Health and Wellbeing (SMHWB 2007)
- 2007-08 National Health Survey (NHS 2007-08)

Descriptions of these surveys are available in Appendix 1 of the paper.

#### OVERVIEW

OVERVIEW

In Australia, the needs of people with a disability are recognised in legislation under the Commonwealth Disability Discrimination Act 1992. As a consequence, there is demand from many government and private agencies for statistical data on people with disabilities in order to provide targeted support services that effectively meet their needs. Although information on disability is available from many agencies, the ABS is the originator and custodian of some of Australia's key population based surveys.

In recent years, an ageing population and a predicted increase in the overall prevalence of disability have been the cause of much political and social debate with growing demand for disability data on a regular basis. The ABS has responded by ensuring that, apart from the large Survey of Disability, Ageing and Carers that is conducted every six years, disability specific questions have also been included in all recent ABS social surveys. In addition, disability has been included in the 2006 Census.

Discussion in this paper will focus on the disability measures currently available in the ABS from the reference period 2003-2008. It should be noted that although the Survey of Disability, Ageing and Carers 2009 has already been collected, data from this survey is not included in this analysis as processing of results had not reached completion at the time of publishing this paper. This is not expected to impact on the results of analysis in the paper as prevalence rates would not have changed greatly between the 2003 and 2009 SDAC surveys.

The way in which information is collected has direct repercussions on the number of people identified in any given survey as having a disability. In the SDAC, personal interviews are conducted with every member of a household identified as having a long term health condition that restricts their living in some way. Of the surveys using the Disability Module, SET and TUS interviewed all usual residents, the GSS interviewed one adult per household, the NHS interviewed one adult and one child per household and the SMHWB interviewed only those able to respond for themselves. In the Census, information is collected via a paper questionnaire generally completed by one person on behalf of an entire household.

Table 1.1 below provides an outline of the surveys discussed in the paper with a more detailed description of each provided in Appendix 1.

#### **OVERVIEW** continued

# 1.1 SUMMARY OF ABS SURVEYS WITH A DISABILITY INDICATOR

| Collection  | Number<br>of<br>questions<br>related to<br>disability<br>status | core-activity<br>limitation | recommended  | Survey<br>limitations  |
|-------------|---|-----------------------------|--|--|
| SDAC 2003   | 75  | 5.4 ± 0.4 %                 | Prevalence of disability measures. Labour force characteristics by disability severity. Need for, receipt of assistance with activities. Information on older people, people in aged care homes. Conditions associated with age. | No small area data   |
| SET 2005    | 5   | 4.9 ± 0.4 %                 | Barriers to education, transitions to work information for disabled population.  | Incomplete range of disability severity categories.  Age scope 15+ years. No small area data.  |
| GSS 2006    | 10  | $5.3\pm0.6\%$               | Social inclusion/ exclusion analysis of disabled population.   | Age scope 18+ years. No small area data.   |
| TUS 2006    | 10  | 4.7 ± 0.7 %                 | Time Use data for disabled population. Time Use data for families with disabled children or parents. Time Use data by nature of assistance required.   | Being the smallest of the major social surveys (7,000 people surveyed), data are not as robust as from other surveys. No small area data.  |
| CENSUS 2006 | 4   | 3.6%(b)                     | Small area, small population 'need for assistance' data.<br>Comparison of Indigenous and non-Indigenous population.<br>Analysis of Very Remote Areas NT data.  | 6.4% not stated for 'need for assistance' means that there may be some non-response bias. Only one disability measure is available (need for assistance) which is conceptually related to 'Profound/severe core-activity limitation'.  |
| SMHWB 2007  | 10  | 3.1 ± 0.5 %                 | Analysis of relationships between mental health and disability.  | Response rate of 60% means that there may be some non-response bias. Data from this sample of 9,000 people are not as robust as from larger surveys. Age scope 16-85 years. No use of proxy responses reduces number of people surveyed with profound and severe disabilities. |
| NHS 2007-08 | 10  | 4.7 ± 0.5 %                 | Relationship between disability, chronic disease and health risk factors.  | No small area data.  |

Prevalence rates +/- 95% confidence intervals.

(b) Excludes Very Remote Areas and non-private dwellings. Includes not stated.

#### Structure of the paper

- 1. The information paper first discusses some of the challenges of collecting disability data and the constraints on making comparisons between surveys using different methodologies.
- 2. It then provides background information on the three major sources of disability data in the ABS and how they relate to each other:
  - the Survey of Disability, Ageing and Carers (SDAC)
  - the Disability Module designed to be incorporated into all ABS social surveys, and
  - the 'Core need for assistance' information available from Census 2006
- 3. The paper then undertakes detailed analysis of the similarities and differences between the different data sources. There are key considerations underpinning this analysis including:
  - in order to make meaningful comparisons between different surveys conducted in different time periods, it was important to use a measure that was available in each of the surveys that shared the same conceptual basis and was unlikely to change quickly over time.
  - the level of disability a person may experience is critical to understanding what level of assistance they might need in specific areas and is therefore key to analyses of disability data.

#### **OVERVIEW** continued

Structure of the paper continued

- The measure 'severity of disability' provided a tool that could identify levels of disability and was simultaneously available in all surveys except the Census. The analysis in this paper therefore uses this measure to focus on the similarities and differences noted between the different surveys.
- 4. Finally, the paper draws conclusions and makes recommendations to users of ABS disability data as to which measures are most reliable and which have caveats on their use. The main recommendations resulting from this analysis indicate that:
  - the SDAC is the best source of disability data in the ABS. It has a larger sample size and question set than all the other surveys resulting in less bias and more detailed information.
- the Disability Module is a valuable tool for comparing population characteristics of people with/without disability within the particular survey in which it has been used.
- the most useful measures from surveys using the Disability Module are 'Specific limitation or restriction' and 'Profound/severe core activity limitation'.
- while the ABS cautions users of disability data not to use estimates from the Disability Module in surveys other than the SDAC to "update" data in the periods between SDACs, it is possible to compare data between different periods of the same survey e.g. to compare results from GSS 2002 to GSS 2006.
- Census counts should not be used as an indicator of the total number of people with a 'need for assistance with a core activity'. The Census does not identify everyone with severe or profound disability, nor do the Census counts include any adjustment for non-response. However, the Census has the advantage of providing data at small geographic levels and for small demographic groups and this is useful when comparing the characteristics of people with a 'need for assistance' to those without such need.

#### BACKGROUND

#### BACKGROUND

Challenges of collecting disability data

Collecting disability data poses particular challenges because of the complex nature of experiences that affect the physical, social and emotional well-being of individuals with disability and their families. Some difficulties include:

- differing individual perceptions and cultural concepts of what constitutes a difficulty or restriction;
- the subjective and variable nature of some disabilities which may mean that
  responses are affected by factors such as a person's energy levels, optimism, pain or
  depression at the time of the survey;
- the sensitive nature of the topic which may lead to underreporting of conditions such as alcohol and drug-related conditions, mental illness or mental deterioration and the need for help with personal care activities;
- the episodic or seasonal nature of some conditions (e.g. epilepsy, asthma) may
  mean that they are not causing difficulties at the time of interview and are therefore
  not reported as causing restrictions;
- a tendency for older people to compare themselves with other older people. Under reporting can occur when people compare their experiences to those of a similar age and either downplay difficulties they may have in comparison, or attribute these difficulties to the effects of old age rather than to the existence of a limitation or disability;
- over-reporting of disability may occur where people are justifying non-participation in the labour force or feel it will improve their chances of receiving a disability pension;
- the fact that a person may have so completely adapted to their disability that they
  are no longer conscious of an inability to perform certain tasks and therefore fail to
  report limitations associated with the disability;
- trying to ensure that accurate data are collected when respondents answer on behalf of other people in a household. While the person responding on behalf of another person might be more objective in assessing difficulty and the need for help, they may not be aware of all the conditions the person has or how these affect the person's daily living; and
- the use of prompt cards. While prompt cards reduce the repetition of similar questions and lessen the time taken to collect information, they can also lead to responses that differ from a methodology that asks detailed separate questions about each condition (as in the SDAC).

These difficulties increase the variability of disability estimates obtained from the ABS surveys, but every effort is made to minimise the effect. Questionnaires are designed carefully and tested to obtain objective and repeatable responses wherever possible. In particular, terms such as 'disability', which are prone to wide interpretation across the community, are not directly used in questionnaires. Identification of disability is determined from questions that avoid emotive terms and judgements and instead focus on what a person can or cannot do.

Constraints when comparing data across different surveys

■ In the ABS, each collection of disability data is based on methodologies unique to the particular survey in which the data was collected. While these methodologies are expected to contribute to differences between the statistics available from the different sources, it is impractical to determine just how much difference is due solely to the collection methodology inferences about an entire population. As each

Constraints when comparing data across different surveys continued

- survey draws on a different sample, there can be sampling variation between different surveys, even if the target population is the same. A survey with a larger sample size will generally produce estimates with lower sampling variability than those with smaller sample sizes.
- The smaller a population is in proportion to the total population, the higher the relative standard errors. Further disaggregation of data for these small populations produces even higher standard errors proportionately.
  - As an example, in SDAC 2003, 20% of the total population had a disability, including 3%¹ who had a profound core activity limitation. Of this profound population, there were 4,000 people aged 15-24, living in households, who were employed. The 95% confidence interval for this estimate is 4,000 ± 3,000 i.e. we can be 95% sure that in 2003 the actual number of employed people aged 15-24 with a profound core-activity limitation and living in households, lies between 1,000 and 7,000.
  - It should be noted however, that there are stronger estimates for some of the more common measurements. For example, in the scenario above, if the age range were to be widened to include 15-64 year olds, the estimate would be 18,000 people with profound disability who were employed. The confidence interval for this estimate is 18,000 ± 1000 i.e. we can 95% confident that in 2003 the actual number of employed people aged 15-64 with a profound core-activity limitation and living in households, lies between 17,000 and 19,000.
- Although the analysis presented in this paper does not generally rely on such detailed classification of data items that the resulting confidence in the estimates is low, the variability of some of the measures compared is relatively high. For further information on the potential effects of sample survey methodology, please refer to: 'Understanding Statistics' on the ABS website.

ABS sources of disability data

Disability information was first collected as a supplementary topic in the Monthly Population Survey (MPS) of 1967 and twice more in the MPS in the 1970s. Over the years since then, the ABS has developed three major disability collections, each conceptually related to the other but distinct in purpose and output.

#### SURVEY OF DISABILITY AGEING AND CARERS

The most detailed and comprehensive source of disability data in the ABS is the Survey of Disability, Ageing and Carers (SDAC). This survey had its inception as the Survey of Handicapped Persons in 1981 and has been conducted five times in the intervening years. In 1993 it was renamed the Survey of Disability, Ageing and Carers. The SDAC was last conducted in 2009 with published summary results expected in early 2011.

This large, specialist survey was developed specifically to align with international measures of disability as described in the International Classification of Functioning, Disability and Health (ICF). It contains 149 questions designed to provide a wealth of detail on the identification of disability and the underlying conditions causing disability. A large number of these questions are used to establish if a person is restricted by disability and is in need of assistance. This group of questions is designed to exclude people if their need for assistance is not the direct result of disability. The survey also identifies carers, the nature of their caring role, the impact this might have on their lives

<sup>1</sup> Includes total profound population living in households and establishments

ABS sources of disability data continued

#### SURVEY OF DISABILITY AGEING AND CARERS continued

and their access to support. One of the advantages of the survey is its coverage of non-private dwellings, including a separate component to collect information from health establishments.

One of the main purposes of the SDAC is to collect extensive national and state level data on disability and to provide accurate prevalence rates of disability for Australia.

## 2.1 SDAC DISABILITY STATUS PREVALENCE RATES (AUSTRALIA)

|                                       | 1993  | 1998  | 2003  |
|---------------------------------------|-------|-------|-------|
| Profound core-activity limitation     | 2.4%  | 2.9%  | 3.0%  |
| Severe core activity limitation       | 1.7%  | 3.2%  | 3.3%  |
| Moderate core activity limitation     | 2.6%  | 3.5%  | 3.5%  |
| Mild core activity limitation         | 5.3%  | 5.5%  | 5.3%  |
| Education/Employment restriction      | 2.2%  | 1.8%  | 2.0%  |
| No specific limitation or restriction | 3.8%  | 2.4%  | 2.9%  |
| Total                                 | 18.0% | 19.3% | 20.0% |
|                                       |       |       |       |

A comparison of results between the different SDACs indicate that the prevalence of disability generally only changes slowly over time. Because of this, it is possible to compare results from other surveys using different measures of disability against the benchmarks set by the SDAC, even though these other surveys may have been conducted in different time periods and show considerable variation in some of their topics.

#### DISABILITY MODULE

There are many social dimensions to the experience of disability, but the large number of questions in the SDAC to assess disability levels limits the time in which to ask respondents additional questions about the social and economic context of their lives. This is an area of particular interest to users of disability data. As a result, the ABS developed a short disability module in the early 1990s for use in household surveys to investigate disability in relation to social and economic circumstance. Various forms of this module were used from 1992 onwards, with the current standard form of the Disability Module, as it has come to be known, first being used in the 2002 General Social Survey.

The Disability Module is designed to identify the population with disability within any of the social surveys in which the module has been included. For example, the inclusion of the Disability Module in the 2006 General Social Survey, allows for analysis of the social characteristics of people with a disability compared to those without disability. Similarly, the inclusion of the Disability Module in the 2006 Time Use Survey, allows for analysis of how people with disability utilise their time compared to those without disability and the effects of this on the activities of other family members.

ABS sources of disability data continued

#### DISABILITY MODULE continued

The Disability Module applies the same criteria as the SDAC to identify people with a disability and determine their severity of restriction, but uses only 10 questions and a series of prompt cards. The questions used are compatible with the Activities and Participation component of the International Classification of Functioning and are based directly on the questions used in the SDAC.

The resulting 'Severity of Disability' measure that is associated with the Disability Module allows for the following measures to be output and is intended to be broadly comparable to the same concept in the SDAC:



## **2.2** HIERARCHICAL STRUCTURE OF DISABILITY STATUS

Disability or long-term health condition Specific limitation or restriction Core activity limitation Profound core activity limitation Severe core activity limitation Moderate core activity limitation

Education/employment restriction only

Mild core activity limitation

No specific limitation or restriction

No disability or long term health condition

The 'Severity of Disability' measure is described in more detail in the publication Disability Variables, 2006 (cat. no. 1200.0.55.001).

#### Significance of the 'Severity of Disability' measure

Some explanation of the categories in this measure is warranted given that the ABS recommends users of disability data have a thorough understanding of the different sub-populations in the measure and how they relate to each other.

In the module, responses from several combinations of questions have been used to derive differing levels of disability (derivation is a process of combining responses from a number of questions to create new measures). In total, these levels are referred to as the 'severity of disability' measure and this measure allows for the analyses of the following sub categories:

- a) The Disability Module first establishes the presence of any long-term bealth conditions;
- b) It then determines if any of these health conditions cause specific limitations or restrictions. A specific limitation refers to anyone who has either a core activity limitation (see below) or requires extra support for employment (for those aged 15 to 64 years) or education (for those aged 5 to 20 years);
- c) It then ascertains whether any of these restrictions affect a person's ability to care for themselves, to communicate with others or to move around their environs (these three activities are referred to as the 'core activities' of self care, communication and mobility and are deemed to be essential to normal, everyday living);

ABS sources of disability data continued

Significance of the 'Severity of Disability' measure continued

- d) It categorises the extent to which a limitation might impact on a person's ability to perform any of the core activities. A *profound core activity limitation* means that a person always needs help with at least one of the core activities. A *severe core activity limitation* means that a person needs help with at least one of the core activities some of the time. A *moderate core activity limitation* refers to someone who has difficulties with at least one of the core activities, but does not need assistance. A *mild core activity limitation* refers to someone who uses aids but does not have difficulties with any of the core activities (although in the SDAC, several other mobility restrictions are also included in this category);
- e) People who have a disability but are not restricted in their ability to perform the core activities and have no employment/schooling restriction are classified as having *no specific limitation or restriction*;
- f) Finally, the measure includes those with *no disability* or long term health conditions, allowing for the comparison of people with disability to those without disability.

Appendix 2 lists the questions and prompt cards used in the Disability Module and shows how these questions are used to classify people according to the 'Severity of Disability' standard. Even though the same questions are used to measure disability in different social surveys, there are pertinent factors to bear in mind when comparing data across multiple surveys: the number of people interviewed; the placement of the questions within the survey; and the use of proxy interviews (where someone answers on behalf of another person who is unable to answer for themselves) all have subtle effects on the final data collected.

#### POPULATION CENSUS

A key aim of the Census of Population and Housing is to produce regional data to aid in the development and monitoring of local, state and federal government policies and non-government (NGO) programs and to inform the allocation of service delivery to small population groups. The provision of disability services through the different levels of government and the involvement of non-profit and commercial organisations in service provision mean that there is a high level of demand for small area data. Although SDAC can be modelled to provide some small area estimates, the detailed geographic distribution of profoundly/severely disabled people will be more reliable from the Census.

In response to this need for small area data which would allow the ability to examine the characteristics of small populations, a measure of disability was developed for use in the 2006 Census of Population and Housing. It contained 4 questions and was designed to be both conceptually comparable to the SDAC and practical for use in a national Census. It was agreed that the Census questions be based on the SDAC concept of 'Profound or severe core activity limitation', the population for whom service delivery has the most consequence. Testing of the new questions indicated that the data would be of an acceptable quality for use as an indicator of the target population. As a result, the 2006 Census produced the first Census output of information on people with a 'Need for assistance'.

ABS sources of disability data continued

#### POPULATION CENSUS continued

Four questions were asked in the Census to identify people who had need for assistance with one of the core activity areas of self care, communication or mobility because of a disability, long term health condition or the effects of old age. Three of these questions related to the existence of a need for assistance in one of the core activities, and the fourth question identified the reasons as to why this assistance was necessary.

Appendix 3 shows the questions used in the Census and the derivation from these questions to determine whether a person had a need for assistance. Detailed information on the "Core Activity Need for Assistance" data item is included in the information paper Disability Variables, 2006 (cat. no 1200.0.55.001).

ABS collections that include disability measures

Table 2.3 below shows all the ABS collections which have included disability measures. Analysis in this information paper only makes reference to the most recent of these surveys, excluding the Indigenous surveys. This latter exclusion is because Indigenous estimates from SDAC 03 were considered too unreliable for use and the other social surveys do not include sufficient Indigenous people in their sample sizes to support separate comparative analysis of disability measures by Indigenous/non-Indigenous status.

## 2.3 COLLECTIONS THAT INCLUDE DISABILITY MEASURES

| Collection title   | Past/current collections  | Expected<br>future<br>collections |
|--|---|-----------------------------------|
| Survey of Disability, Ageing and Carers (SDAC)                         | 1981 (Survey of<br>Handicapped Persons)<br>1988 (Survey of<br>Disabled and Aged<br>Ppersons 1993,<br>1998, 2003 | 2011                              |
| Time Use Survey (TUS)  | 1992, 1997, 2006  | to be advised                     |
| Survey of Education and Training (SET)                                 | 1993, 1997, 2001,<br>2005   | 2010                              |
| Household Expenditure Survey (HES)                                     | 1993-94, 1998-99  | 2011                              |
| Survey of Employment and Unemployment Patterns (SEUP)                  | 1994-95, 1996-97  | None planned                      |
| Survey of Mental Health and Wellbeing (SMHWB)                          | 1997, 2007  | None planned                      |
| General Social Survey (GSS)  | 2002, 2006  | 2010                              |
| National Aboriginal and Torres Strait Islander Social Survey (NATSISS) | 2002, 2008  | 2014                              |
| Census of Population and Housing                                       | 2006  | 2011                              |
| National Health Survey (NHS)   | 2007-08   | 2011-2012                         |

#### ANALYSIS

#### ANALYSIS

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS

This chapter examines the relationship between the measure 'Severity of disability' (available from all surveys using the Disability Module) and the related SDAC measure. The surveys considered in the analysis have different collection periods. However, as prevalence rates only change slowly over time it is unlikely that this has had a significant impact on the identified disability populations.

The Census 'core activity need for assistance' measure is included in the analysis under the 'Profound or severe core activity limitation' category. This is because the Census measure was specifically designed to capture only this group and not the entire disability population.

In order to ensure maximum comparability between the collections, the analysis excludes non-private dwellings (not all collections include non-private dwellings) and people under the age of 18 (several of the surveys only include 18+ year olds). As disability is strongly related to age, most analysis is presented by age.

#### SEVERITY OF DISABILITY

*Table 3.1* below presents the statistics for severity of disability from the Survey of Disability, Ageing and Carers (SDAC 03), the Survey of Education and Training (SET 05), the General Social Survey (GSS 06), the Time Use Survey (TUS 06), the Census 06, the Survey of Health and Wellbeing (SMHWB 07) and the National Health Survey (NHS 07/08). For the purposes of this analysis, the term 'Disability Module' is used as a cover phrase for all surveys other than the SDAC, as a Disability Module was used in each of these, even though there were sometimes differences between the module used in the different surveys. Where these differences have had an effect on the data, the differences are noted.

The data in Table 3.1 are for people aged 18-85 years living in private dwellings (the 18-85 year age range is common to all of the collections).

## 3.1 SEVERITY OF DISABILITY BY SELECTED ABS SOCIAL SURVEYS, AUSTRALIA

|  | SDAC<br>03  | SET<br>05     | GSS<br>06   | TUS<br>06      | CENSUS<br>06 | SMHWB<br>07 | NHS<br>08      |
|--|-------------|---------------|-------------|----------------|--------------|-------------|----------------|
| Disability or long-term health condition | (a)21.8±0.5 | 33.4±0.7      | 39.1±1.1    | 34.2±1.6       | na           | 36.9±1.4    | 41.7±1.0       |
| Specific limitation or restriction       | 18.5±0.5    | na            | 18.1±1.1    | 15.3±1.2       | na           | 15.7±0.9    | 19.1±0.9       |
| Core activity limitation                 | 16.3±0.6    | na            | 12.3±0.9    | $10.5 \pm 1.1$ | na           | 10.1±0.8    | $11.7 \pm 0.7$ |
| Profound/severe                          | 5.4±0.4     | $4.9 \pm 0.4$ | 5.3±0.6     | $4.7 \pm 0.7$  | (b) 4.1      | 3.1±0.5     | $4.7 \pm 0.5$  |
| Profound                                 | $2.0\pm0.2$ | na            | $2.0\pm0.4$ | 1.8±0.4        | na           | 1.1±0.3     | $2.0\pm0.4$    |
| Severe                                   | 3.4±0.3     | na            | 3.3±0.5     | $2.9 \pm 0.5$  | na           | 2.1±0.3     | 2.7±0.3        |
| Moderate                                 | 4.4±0.3     | 3.20±0.2      | 5.4±0.6     | 4.2±0.6        | na           | 5.4±0.8     | 5.4±0.4        |
| Mild                                     | 6.4±0.3     | na            | 1.8±0.3     | $1.7 \pm 0.4$  | na           | 1.6±0.3     | 1.6±0.3        |
| Education/employment restriction         |             |               |             |                |              |             |                |
| only                                     | 2.2±0.2     | na            | 5.6±0.6     | $4.7 \pm 0.5$  | na           | 5.7±0.7     | 7.4±0.6        |
| No specific limitation or restriction    | 3.4±0.3     | na            | 20.9±1.1    | $19.0 \pm 1.3$ | na           | 21.1±1.1    | 22.6±0.7       |

<sup>(</sup>a) SDAC includes disability only, not long term health condition

 <sup>(</sup>b) Includes not stated and people living in non-private dwellings. Excludes Very Remote Areas

#### **ANALYSIS** continued

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

#### SEVERITY OF DISABILITY continued

Examination of the table indicates that:

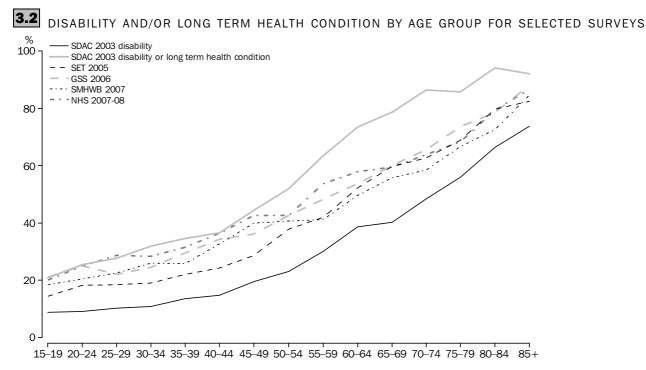
- Surveys using the Disability Module show consistently higher rates of overall disability/long term health conditions than the SDAC
- the SDAC rate for the 'Specific restriction' category is mostly higher than for surveys using the Disability Module
- the SDAC rate for 'Core-activity limitations' is significantly higher than that of the Disability Module with the difference mainly being accounted for by the 'mild' sub-category of core-activity limitations
- the 'profound', 'severe' and 'moderate' rates in the SDAC do not show any significant difference to the corresponding rates in the Disability Module with the exception of the Survey of Mental Health and Wellbeing which has lower rates in the 'profound' and 'severe' categories. The Survey of Mental Health and Wellbeing excluded people unable to respond for themselves, resulting in lower estimates for these categories.
- the SDAC has a markedly lower rate for 'No specific limitation or restriction' than the surveys using the Disability Module

To explain these differences, it is useful to separately examine each of the disability severity measures:

#### Disability or long term health condition

The main disability measure published from social surveys is that of 'total disability'. In the SDAC, this measure is known as 'Disability' or 'All reported disability'. In the Disability Module the broadest measure is known as 'Disability or long-term health condition'.

*Graph 3.2* below shows that the SDAC measure of disability is noticeably lower for all ages compared to the corresponding measures from surveys using the Disability Module. However, when long term health conditions and disability are combined in the SDAC, the measure is consistently higher than the corresponding measures from the other surveys. While some of the estimates from the surveys using the Disability Module approach the proportion of people in the SDAC with a 'disability or long term health condition', the Disability Module appears to include some, but not all, of those with a non-restricting long term health condition.



Source: ABS Survey of Disability, Ageing and Carers 2003, Survey of Education and Training 2005, General Social Survey 2006, Time Use Survey 2006, Survey of Mental Health and Wellbeing 2007 and National Health Survey 2007-08

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

Disability or long term health condition continued

The discrepancy is caused by the fact that:

- in the SDAC, disability is defined by whether a person has a long term health condition that restricts their ability to do normal, everyday activities. The SDAC includes a number of screening questions aimed at differentiating between those who have long term health conditions only and those whose long term health conditions limit their activities (i.e. those with disabilities). Therefore in the SDAC, the broadest measure 'All reported disability' only includes those who have a disability and excludes those whose conditions are non-restricting.
- in the Disability Module, the filters used to differentiate between these populations have been less effective than in the SDAC. It is probable that the sequence and wording of questions in the Disability Module has led to some confusion on the part of respondents and the ABS is currently revising these filters to improve their effectiveness. The broadest measure in the Disability Module therefore incorporates a large proportion of people who have non-restricting health conditions as well as those with disability. The Disability Module output, 'Disability or long term health condition', was chosen deliberately to reflect this mixed population.

Users need to be aware, however, that not all people with long-term health conditions are identified by the Disability Module measure. More accurate information about people with long term health conditions can be obtained from the 2007-08 National Health Survey.

#### **ANALYSIS** continued

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

Disability or long term health condition continued

It should also be noted that the same questions were asked in all the surveys using the Disability Module (with the exception of SET 05 which used only 5 questions). Despite this, there is still some variation between survey results although these are not significantly different. This demonstrates why users should not use disability data estimates produced by the different surveys as a proxy for monitoring disability prevalence over time.

The question remains then - is this measure useful for users of disability data? It is, as it increases the range of data available for the population with disability, as long as users are aware of the limitations of the measure. If the measure is cross-classified with other data items within the same survey, it will produce results that broadly describe the differences and similarities between people with disability and those without disability for that particular characteristic. It is likely that the relationship between disability and the characteristic of interest may be somewhat 'diluted' because of the inclusion of people who were not disabled in the overall measure of disability i.e. differences between the disabled and non-disabled populations will be less marked in surveys using the Disability Module than in the SDAC if using this measure.

In short, it should be noted that the SDAC produces the most conceptually accurate measure of disability and that the Disability Module includes some people who have a long term health condition but who are not disabled in the measure of disability.

#### Specific limitation or restriction

In the SDAC, the sequence of survey questions first determines whether there are people in a household who have conditions which have lasted or are likely to last for at least 6 months. These people are then personally interviewed to determine whether their conditions cause them restrictions in their everyday lives. If they are found to have restricting conditions, they are identified as having disability. They are then asked to identify the level of restriction caused by this disability. If they are found to have a core activity restriction or limitation (i.e. a limitation in their ability to look after themselves, move around freely and communicate with others) or if they are found to have a restriction that affects their schooling or employment capability, they are said to have a "specific restriction". All other people with disabilities who do not have a specific restriction are said to have "no specific restriction or limitation".

*Graph 3.3* shows that, in the category of 'specific restriction', the measure is in reasonable agreement across all the different surveys for people under 60 years of age. However, from 60 years and above, the SDAC measure is noticeably higher than the other surveys. The difference is most likely due to the fact that, as people age, they may experience increasing difficulties with day to day activities, even if in a mild way and the SDAC identifies more people with mild core-activity limitation than the Disability Module (to be discussed further in this chapter).

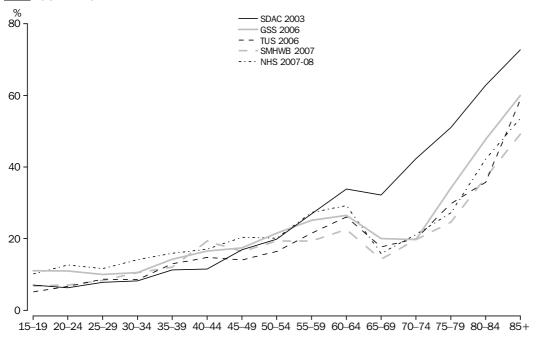
Of interest is the "dip" that occurs in all surveys around 65-74 years. This is a reflection of the contribution that employment restrictions make to the category of 'specific restrictions or limitations'. In surveys using the Disability Module, employment restrictions are only recorded for people aged 15-64 years. Those aged 65 years and over

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

Specific limitation or restriction continued

are sequenced out of the module and therefore not asked the questions on employment restrictions.

# 3.3 PREVALENCE OF SPECIFIC LIMITATION OR RESTRICTION BY AGE GROUP FOR SELECTED SURVEYS



Source: ABS Survey of Disability, Ageing and Carers 2003, General Social Survey 2006, Time Use Survey 2006, Survey of Mental Health and Wellbeing 2007 and National Health Survey 2007-08

#### Core activity limitations

'Core-activity limitation' is classified by the severity of limitation a person may experience in one of the core areas of self care, mobility or communication. In the SDAC:

- 'Profound' means a person always need help;
- 'Severe' means they sometimes needs help;
- 'Moderate' means a person may have difficulties in at least one of the core activities, but needs no help in performing the activity; and
- 'Mild' means the person needs no help and has no difficulty with core activities, but they use aids and/or cannot easily do certain tasks such as walking 200m, negotiating stairs, bending to pick up objects or using public transport.

The Disability Module uses similar definitions to SDAC for the core-activity limitations with the exception of the 'Mild' category. In the SDAC, questions on a range of activities are asked of respondents to determine whether they have a mild limitation. In the Disability Module, the only criterion used to define 'Mild core-activity limitation' is that a person uses aids to assist with tasks.

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

#### Core activity limitations continued

*Graph 3.4* below shows that survey estimates for core activity limitation from the Disability Module relate well to the corresponding SDAC estimates up to 44 years of age, but are lower for 45 years and above. These differences are consistent with the much higher 'Mild core-activity limitation' estimate the SDAC provides over roughly the same age range (please refer to the section on 'Mild core activity limitation' later in this chapter).

Estimates for core activity limitation from surveys using the Disability Module are generally not significantly different to each other

# 

Source: ABS Survey of Disability, Health and Ageing 2003, General Social Survey 2006, Time Use Survey 2006, Survey of Mental Health and Wellbeing 2007 and National Health Survey 2007-08

#### Profound core activity limitation

This is the most severe restriction category and indicates when a person cannot do, or always needs assistance with, one or more of the core activity tasks. This measure is not available from the Census nor the Survey of Education and Training (SET) which only output a measure that reflected combined severe and profound core activity limitation.

#### Severe core activity limitation

A person has a severe core activity limitation when they sometimes need help with a core-activity task, if they have difficulty being understood by family or friends, or when they communicate more easily using sign- language or another non-verbal form of communication.

#### **ANALYSIS** continued

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

3.5

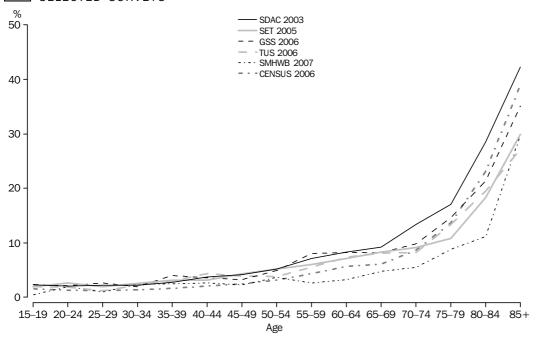
Profound/severe core-activity limitation

The combination of profound and severe core activity limitations is a measure commonly used because it represents the population with the greatest disability and therefore the greatest need for assistance with core activities. The measure is conceptually comparable to the 2006 Census measure "Has need for assistance with core activities" and is available from all the most recent ABS social surveys.

*Graph 3.5* indicates that estimates are reasonably consistent with those of the SDAC for people up to age 70 with the exception of the estimates from the 2007 Survey of Mental Health and Wellbeing (SMHWB) which are consistently lower than SDAC and the other surveys.

The results from SMHWB reflect the fact that proxy interviews were not permitted for people unable to answer for themselves in this survey. As these people were most likely to be amongst those with profound/severe disability and were not included in the SMHWB estimates, this has contributed to lower rates of profound/severe disability in the SMHWB than other surveys using the Disability Module.

# PREVALENCE OF PROFOUND/SEVERE CORE ACTIVITY LIMITATION BY AGE GROUP FOR SELECTED SURVEYS



Source: ABS Survey of Disability, Ageing and Carers 2003, Survey of Education and Training 2005, General Social Survey 2006, Time Use Survey 2006, Census 2006 and Survey of Mental Health and Wellbeing 2007

Both SDAC and the Disability Module are designed to collect data on the full range of disability severity. The Census, however, uses a collapsed question set that specifically targets those with a need for assistance in at least one of the core activity areas. 'Need for assistance' with these activities is conceptually related to the profound/severe end of the disability spectrum in the SDAC and the Disability Module.

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

#### Profound/severe core-activity limitation continued

The more the concept 'Need for assistance' is collapsed into reduced question sets, the fewer the opportunities for people to be identified and correctly categorised, resulting in smaller populations. The Disability Module, with its 10 question set, produces lower estimates of people with profound or severe disability than the SDAC with its 147 question set. Likewise, the Census, with an even more limited 4 question set, results generally in a lower proportion of people being identified as needing assistance than either the SDAC or the Disability Module (with the exception of the SMHWB).

As previously stated in the Overview of this paper, a possible further factor influencing the size of the population identified as needing assistance, is the way in which information is collected. Personal interviews tend to elicit higher response rates than self completion paper questionnaires; similarly, the greater the number of people interviewed, the higher the chance of identifying people who need assistance.

#### Moderate core-activity limitation

A person is defined as having a 'Moderate core activity limitation' if they have difficulty with at least one of the core activities but do not require assistance to be able to manage by themselves. Graph 3.6 indicates that, compared to profound and severe core activity limitations, moderate core activity limitation shows a more linear rise in prevalence as age increases. While there is variation between the different survey estimates of moderate core-activity limitation, there is no consistently significant difference displayed between the results from the Disability Module and the SDAC.



-- TUS 2006 --- SMHWB 2007 --- NHS 2007-08

Source: ABS Survey of Disability, Ageing and Carers 2003, Survey of Education and Training 2005, General Social Survey 2006, Time Use Survey 2006, Survey of Mental Health and Wellbeing 2007 and National Health Survey 2007-08

15-19 20-24 25-29 30-34 35-39 40-44 45-49 50-54 55-59 60-64 65-69 70-74 75-79 80-84 85+

17

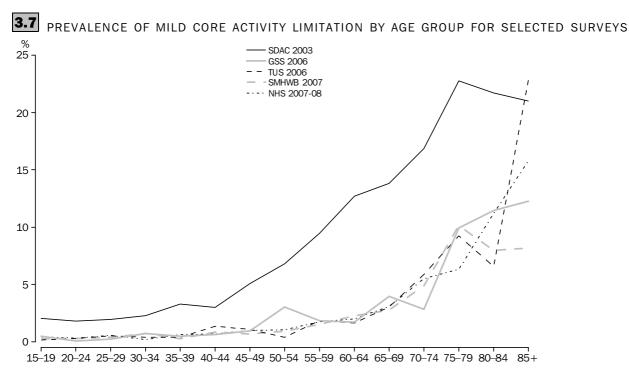
#### **ANALYSIS** continued

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

#### Mild core-activity limitation

The proportion of people identified as having a mild core-activity limitation is significantly lower in surveys using the Disability Module than in the SDAC. A complex set of factors account for the differences noted across all ages. Analysis of the results for mild core activity limitation show that at least some of these differences can be attributed to the fact that fewer questions were asked about this category than in the SDAC. In addition, the way in which questions are asked and the actual choice of questions have affected the data collected. This also accounts for some of the differences observed in the category 'No specific limitation or restriction' (*Graph 3.9*)

In the SDAC, less than half of the people identified as having 'Mild core-activity limitation' used aids of some description (1,057,000 people had mild core activity limitation of whom 494,000 used aids). The SDAC measure also includes those who cannot easily walk long distances, negotiate stairs, bend to retrieve objects or use public transport. The Disability Module, by comparison, simply asks if the person uses aids and therefore does not capture this wider group identified by the SDAC.

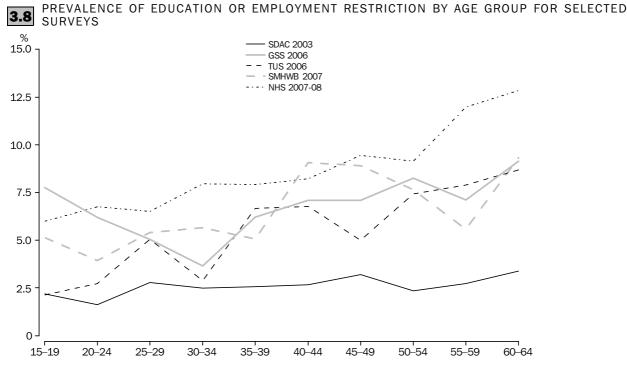


Source: ABS Survey of Disability, Ageing and Carers 2003, General Social Survey 2006, Time Use Survey 2006, Survey of Mental Health and Wellbeing 2007 and National Health Survey 2007-08

#### Education/employment restriction only

The SDAC estimates of 'Education/ employment restriction only' are consistently lower than those collected using the Disability Module. They average 2-3 percent points lower for ages up to 34 years and 4-6 percent points lower for ages of 35 years and older.

It is possible that some of the mild core-activity limitation not identified by the Disability Module is instead identified as an education/employment restriction. It is also possible that the more general wording on the Disability Module prompt cards elicit a higher proportion of positive responses than the equivalent SDAC questions.



Source: ABS Survey of Disability, Ageing and Carers 2003, General Social Survey 2006, Time Use Survey 2006, Survey of Mental Health and Welbeing 2007 and National Health Survey 2007-08

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

No specific limitation or restriction

The major difference between the statistics collected in the SDAC and those from the Disability Module occurs in this category.

This may be due to differences in the first and second questions used in the Disability Module (Appendix 2 lists the complete set of questions):

- The first question asks "Do you have any of these conditions?" The respondent is shown a prompt card (Prompt card 1) which includes a list of conditions that would naturally lead to some form of restriction (e.g. limited use of arms).
- The second question asks "Still thinking of conditions lasting 6 months or more, are you restricted in everyday activities by any of these conditions?" The question is also accompanied by a prompt card, but in this case, the pick list of answers include conditions that are not necessarily restrictive (e.g. asthma).
- It is possible that some people respond to both prompt cards in the same way, using them as a tick list of any conditions they may have, restrictive or not, without noticing that the second question is actually different to the previous one.
  Responding in the affirmative to the second question if they have conditions that are not restrictive would lead to over-reporting of disability.

#### **ANALYSIS** continued

COMPARISON OF
MEASURES FROM THE
SDAC, THE DISABILITY
MODULE AND THE
CENSUS continued

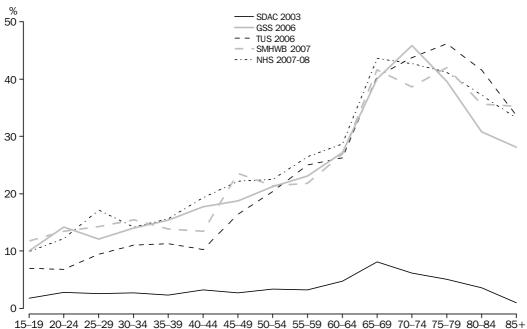
No specific limitation or restriction continued

It is also possible that in surveys using the Disability Module, this category includes some of the people who would have been classified as having 'Mild core activity limitation' in the SDAC. These would have been people who did not have difficulties with any of the core activities nor used aids, but who had problems with walking distances, negotiating stairs, bending to pick up objects or using public transport.

*Graph 3.9* shows the extent of possible over-reporting and how this is most marked for those aged 65 or more. This is a time of life when people may be experiencing the onset of conditions, but not necessarily be restricted by them.

The peak prevalence of 'No specific limitation or restriction' is in the age range 65-74 after which people are more likely to have a defined core-activity limitation.

# PREVALENCE OF NO SPECIFIC LIMITATION OR RESTRICTION BY AGE GROUP FOR SELECTED SURVEYS



Source: ABS Survey of Disability, Ageing and Carers 2003, General Social Survey 2006, Time Use Survey 2006, Survey of Mental Health and Wellbeing 2006 and National Health Survey 2007-08

#### CONCLUSIONS AND RECOMMENDATIONS

CONCLUSIONS AND RECOMMENDATIONS

Disability is an extremely complex and difficult concept to measure. It is especially difficult to capture the full complexity of disability experience and accurately assess the full range of disability severity in a small number of questions. This is precisely why the SDAC, which is the most comprehensive source of disability information in the ABS, has an extensive question set. Since 1992, the Disability Module has been used, in some form in other surveys, to provide insight into aspects of life that the SDAC does not examine. This manages the survey burden on respondents. For many areas of social interest, the Disability Module has been used to demonstrate how the characteristics of people with disability and their families are different from people and families without disability.

Disability rates from the Disability Module in different surveys have varied both between surveys and from the SDAC. It is probable that some of the variability relates to the method of collection, conceptual or wording differences, or to the rapport established between respondents and interviewers in longer interview times. Some disabilities by their nature are variable in their impact on people. Respondents may be struggling personally at the time of interview which may affect their willingness to identify conditions or discuss issues.

In assessing the qualities of SDAC and the Disability Module in other surveys, the following recommendations are made:

- Do not use the Disability Module to update prevalence rates between SDACs. The analysis in this information paper has shown that the total disability population identified by the Disability Module is markedly different to the total disability population identified in the SDAC. The Disability Module identifies a larger disability population by including some people with a long-term health condition without disability. However, when compared to the broader long term health condition identified by the SDAC, the Disability Module identifies neither the whole population with a long term health condition nor the population with a disability, but something between the two. Therefore it is concluded that disability measured in surveys using the Disability Module should not be used to compare or update counts or prevalence rates in the period between SDAC cycles.
- Be aware that differences between the disabled and non-disabled populations in the broadest measures may be underestimated. Another implication for data users is that surveys using the Disability Module will probably show disability population characteristics that are somewhat more like the general population than the disability population as described in SDAC. That is, it is likely the non-SDAC surveys will show higher labour force participation, higher income, higher educational attainment and have a younger age distribution than the SDAC. Thus, if disability is related to a particular characteristic, the broader disability group identified by the Disability Module will display a weaker relationship to that characteristic. There is still sufficient differentiation in the Disability Module between people with disability and those without disability, to be of value to users and to warrant the inclusion of the Disability Module in future surveys, but the differences may be underestimated.

#### CONCLUSIONS AND RECOMMENDATIONS continued

CONCLUSIONS AND RECOMMENDATIONS continued

- The best measures to use are 'Specific limitation or restriction' and the combined 'Profound/severe core activity limitation'. There are some measures available from the Disability Module that are likely to be more comparable with SDAC than others. The measures from the surveys using the Disability Module that most consistently align with those from the SDAC, and thus are best for comparing estimates of people with disability and people without disability, are the 'Specific limitation or restriction' measure for younger people (<60 years) populations and the combined 'Profound/severe core activity limitation' measure.</p>
  - For users with an interest in broad disability populations, the 'Specific limitation or restriction' category will provide a broad and inclusive measure, yet still be comparable to the SDAC. It is preferable to the 'Disability or long term health condition' measure because it does not include large numbers of people with a non-restricting long-term health condition. The 'Specific limitation or restriction' measure identifies a very similar size population across all surveys for all ages up to 60 years. Even though there are differences in the proportion of people 60 years and over identified as having a 'Specific limitation or restriction', the overall (i.e. all ages) population identified by the Disability Module is similar to that of the SDAC.
  - Profound or severe core activity limitation' measure is recommended. The profound and severe categories are of particular value to users because they refer to those people with disabilities who need help with core activities. The most reliable way to analyse the characteristics of these people is to combine the categories into one: 'Profound or severe core-activity limitation'. Within this group, there are generally no major differences between the SDAC and the Disability Module for people under 60 years of age. For people in the Disability Module over 60 years of age, the pattern of higher prevalence with older age is the same even though the population identified is slightly smaller than the SDAC. It should be noted however, that the measure of profound/severe disability in the Survey of Mental Health and Wellbeing is different to the other surveys using the Disability Module. Proxy interviews were not used in this survey and some people who could not answer for themselves will therefore be missing from the estimates.
- Some measures should only be used with caution. Of the 'Severity of Disability' categories available from the Disability Module, there are three categories which should only be used with caution because of significant discrepancies with the comparable data from the SDAC. These are: 'No specific restriction or limitation', 'Education/employment restriction only' and 'Mild core-activity limitation'. The 'No specific restriction or limitation' and 'Education/employment restriction only' measures are significantly overstated compared with the SDAC, and the 'Mild core-activity limitation' is significantly understated compared with the SDAC.

#### CONCLUSIONS AND RECOMMENDATIONS continued

CONCLUSIONS AND RECOMMENDATIONS continued

■ The Disability Module should be modified to better reflect the SDAC in future social surveys. Work is underway to modify the Disability Module so that results for the identification of the population with disability corresponds better to those in the SDAC. This work will require wide consultation with stakeholders and testing of the revised module. Once a revised module is implemented, a similar analysis to that in this paper will be initiated to test its quality and comparability with the gold standard collection, SDAC.

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#### REFERENCES

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Survey 2003 Survey of Disability, Ageing and Carers (SDAC)

Purpose of collection To provide prevalence rates of different severity levels of disability for Australia , the

underlying conditions and causes of disability, the needs of old people for assistance and extent to which need is met with different activities. To also provide characteristics

of carers and the effect of the caring role on their lives, and information on the conditions and disabilities of people living in both private and non-private dwellings

**Previous collections** 1981, 1988, 1993, 1998

Output categories Profound core-activity limitation

Severe core-activity limitation

Moderate core-activity limitation

Mild core-activity limitation

Schooling or employment restriction

Without specific limitations or restrictions

All with reported disability

Long-term health condition

No long-term health condition

Disability identification questions

75

Sample size Household component - 36,200 persons

Cared accommodation component - 5,200 persons

Geographic outputs Australia, States and Territories (excludes Very Remote Areas)

Age scope All ages

**Dwelling scope** All dwellings (excludes goals and correctional institutions)

Number of people selected per

bousebold

Household component - all usual residents of private and non private dwellings other

than cared accommodation institutions

Cared accommodation component - 12 residents selected per selected cared

accommodation establishment

Collection methodology Household component:

- a responsible adult identified carers and people with a disability

- details collected via personal interview

- self enumerated form for identified primary carers

Cared accommodation component:

- question naires completed by a staff member for each selected occupant and mailed  $\,$ 

back

Response rate Household - 89% Cared accommodation - 92%

What's special about this Large sample (41,000 people) provides precise disability national prevalence data (and

survey? for most States/ Territories except NT)

Incorporates separate sample for residential health establishments which allows for

comprehensive data on older people

Detailed data on effects of disability, including information on carers

Comparability with other disability measures

Can be compared with all other surveys – is the conceptual benchmark for all other ABS

disability measures

What's special about this Not useful for comparing disability data between Indigenous and non-Indigenous people survey? continued because of Very Remote Area exclusion

Survey 2005 Survey of Education and Training (SET)

1993, 1997, 2001

Purpose of collection To examine the educational and training experiences of Australians

Previous collections with

disability measures

Output categories for disability status

Disability or long-term health condition

Severe/profound core-activity limitation

Moderate core-activity limitation

Mild or no core-activity limitation

Does not have a disability or long term health condition

Standard Disability module

used?

No. Several variations to the standard module resulted in limited output categories

Disability identification

questions

Sample size 27,600 persons

5

Geographic outputs Australia, States and Territories (excludes Very Remote Areas)

Age scope 15 years and above

Dwelling scope Private dwellings only

 $Number\ of\ people\ selected\ per$ 

bousebold

All usual residents

Collection methodology A responsible adult supplied basic household demographics

Personal interviews were conducted with all persons aged 15 years and over ( people aged 70 years and over were asked a subset of questions which included the questions

on disability)

Response rate 87%

What's special about this

survey?

The Survey of Education and Training offers insight into educational experience as it pertains to effective participation in work life. Of particular interest to disability are

variables that allow for the examination of people's aspirations and perceived barriers to

obtaining training

Comparability with other

disability measures

Disability data from 2005 SET does not have the same range of disability output categories available because of the reduced version of the Disability Module used. In

particular, it is not possible to produce the data item 'Has specific limitation or

restriction'

Survey 2006 General Social Survey (GSS)

Purpose of collection To enable the analysis of inter-relationships between social circumstances and outcomes

on a State/Territory basis

Previous collections with

disability measures

Output categories for

Has profound core-activity limitation

disability status Has severe core-activity limitation

2002

Has moderate core-activity limitation

Has a mild core-activity limitation

Has a schooling/employment restriction only

Has no specific restriction

No disability or long-term health condition

Standard disability module

used?

Disability identification 10

questions

Sample size 13,400 persons

Geographic outputs Australia, States and Territories (excludes Very Remote Areas)

Age scope 18 years and above

Dwelling scope Private dwellings only

Number of people selected per

bousebold

One usual resident

Collection methodology A responsible adult provided basic demographic details, details of relationships and

household information

Personal interviews were conducted with one randomly selected person aged 18 years

and over per household

Response rate 8

What's special about this Sample al

survey?

Sample allocation designed to provide reliable State/Territory estimates

The core GSS topics cover a wide range of areas of wellbeing, allowing studies of multiple disadvantage. GSS also has a flexible component designed to provide additional information on current or emerging topics of particular social concern. In 2006 the flexible component included detailed indicators of a person's 'social capital'

Comparability with other

disability measures

GSS is used to make comparison with Indigenous surveys to calculate differences

between Indigenous and non-Indigenous

Because the survey was designed to produce State/Territory estimates, national

estimates are not as reliable as other surveys this size

Survey 2006 Time Use Survey (TUS)

Purpose of collection To collect detailed information on the daily activity patterns of Australians and allow the

analysis of paid/unpaid work, gender equity, care giving and how people balance their

work/family life commitments

Previous collections with disability measures 1992, 1997

Output categories for disability status Has profound core-activity limitation Has severe core-activity limitation

Has moderate core-activity limitation

Has mild core-activity limitation

Has a schooling/employment restriction only

Has no specific limitations or restrictions

Has no disability or long-term health condition

Standard Disability module

used?

Disability identification

questions

7,000 persons

Sample size

Geographic outputs National estimates (excludes Very Remote Areas)

> Age scope 15 years and above

Yes

10

Private dwellings only Dwelling scope

Number of people selected per

bousebold

All usual residents

Collection methodology Household characteristics and general person data collected by interview with a

responsible adult. A two-day activity diary completed by each person

Response rate 91%

What's special about this

survey?

TUS is the only survey which provides detailed information in minutes per day of

different types of activities

Identifies families with children under 15 years who have a disability and what level of

assistance is required

Provides patterns of daily living and the social and physical context in which they occur

Comparability with other

Because TUS asks a responsible adult in the household questions that identify people disability measures

with a disability, TUS is closer to SDAC in collection methodology than other social

TUS has higher sampling variability which means there is a greater chance of estimates

not reflecting the true population values

Survey 2007 National Survey of Mental Health and Wellbeing (SMHWB)

Purpose of collection To provide information on the prevalence of major mental disorders in Australia, the

> severity of these disorders and the burden these place on families, carers and the community; and to provide information on the demographic and socioeconomic

characteristics of those accessing/not accessing health services

Previous collections with disability measures

None

Output categories for disability status Profound core-activity limitation Severe core-activity limitation

Moderate core-activity limitation

Mild core-activity limitation

Schooling/employment restriction only

No specific limitation or restriction

No disability or long-term health condition

Standard Disability module

used?

Disability identification questions

10

Sample size 8,800 persons

Geographic outputs National estimates (excludes Very Remote Areas)

> Age scope 16-85 years

Dwelling scope Private dwellings only

Number of people selected per

bousebold

One person per household, a responsible adult aged 18 or more, provided basic

One person aged 16-85 was then randomly selected to complete a personal interview

household demographics

Collection methodology Voluntary survey due to the highly sensitive nature of the survey's content

Proxy and foreign language interviews not conducted

People aged 16-24 years and 65-85 years were given a higher chance of selection to improve the reliability of estimates

Special training for interviewers in Composite International Diagnostic Interview (CIDI)

techniques

Extensive analysis undertaken to assess the reliability of the survey estimates because of

the low response rates

60%. As a sensitive and voluntary survey topic, response rates were low compared to Response rate

other ABS surveys. To compensate for differential undercoverage, additional

benchmarks were incorporated into weighting strategies

What's special about this

survey?

Provides an intensely personal and specific insight into the mental health of people with

a disability

Includes variables that allow for the examination of types of mental health conditions,

health risk factors, suicidality, service use and whether needs are met

Comparability with other disability measures The exclusion of non-private dwellings from the survey has a greater effect than other social surveys because the prevalence of mental disorders is higher in hostels, boarding

houses and institutions

The lack of proxy interviews excluded some people with profound or severe disability

from the survey

# APPENDIX 1 COLLECTIONS WITH DISABILITY MEASURES continued

Comparability with other disability measures continued

The SMHWB included a Mini Mental State Exam for people aged 65 and over. People who scored below a given cut off point on a test of cognitive functioning, were excluded from the rest of the survey

#### APPENDIX 1 COLLECTIONS WITH DISABILITY MEASURES continued

Survey 2006 Census of Population and Housing

Purpose of collection To provide complete information about many different aspects of the Australian

population

Previous collections with

disability measures

None

Output categories for

Has need for assistance with core activities

disability status

Does not have need for assistance with core activities

Disability identification

questions

Geographic outputs All Australian Standard Geographic Classification (ASGC) areas

Age scope All persons

Dwelling scope All dwellings

Number of people selected per

bousebold

All people

Collection methodology Self enumerated forms in most areas; special forms used in remote Indigenous

communities

'Need for assistance' was derived from the answers to four questions - three questions asking about the need for help in the core activity areas of self care, mobility and

communication and the 4th question providing a reason for that need

The form used in gaols did not include any questions on need for assistance

Non-response rate 6.4% did not respond to the need for assistance questions. Part of this non-response is

attributable to the 4.1% of persons in dwellings which were occupied on Census Night

but did not return a completed form

What's special about this

collection?

The Census is the only reliable source of information about small areas and about small populations groups. It provides data about the Very Remote Areas not available from the

social surveys

Disability Module

Comparability with other disability measures

The Census uses a short question set which does not attempt to identify disability but rather the people who are affected by disability to the degree that they need assistance. The need for assistance measure is designed to be comparable to the profound or severe core-activity limitation measure available from the SDAC and social surveys using the

Short question sets typically identify fewer people in the population of interest (in this case, people with a need for assistance) than longer question sets (used by the social

surveys)

#### APPENDIX 1 COLLECTIONS WITH DISABILITY MEASURES continued

Survey 2007-08 National Health Survey (NHS)

Purpose of collection To enable the analysis of inter-relationships between long-term illnesses, mental

wellbeing, consultations with doctors and other health professional and other health risk

factors (e.g. smoking, exercise)

Previous collections with

disability measures

Output categories for

Profound core-activity limitation

disability status Severe core-activity limitation

None

Moderate core-activity limitation

Mild core-activity limitation

Schooling/employment restriction only

No specific limitation or restriction

No disability or long-term health condition

Standard disability module

used?

Disability identification

questions

.....

Sample size 20,788 persons

Geographic outputs Australia, States and Territories (excludes Very Remote Areas)

*Age scope* 15 years and above

10

Dwelling scope Private dwellings only

Number of people selected per

bousebold

One usual resident adult and child

Collection methodology A responsible adult supplied basic household demographics

Personal interviews were conducted with selected adults. A parent/guardian of a

selected child was interviewed on their behalf

Response rate 91%

What's special about this

survey?

The National Health Survey offers insight into health risk factors. Of particular interest to disability are variables that allow for the examination of people's access to health services

Comparability with other

disability measures

Can be compared with all other surveys. Not useful for comparing disability data between Indigenous and non-Indigenous population because of Very Remote Area exclusion but is usually compared to NATSIHS in the same way that GSS is compared to

NATSISS

#### APPENDIX 2 SHORT DISABILITY MODULE

DISABILITY MODULE

The Disability Module is a standard set of questions used in a survey to quickly identify whether a person has a disability and the severity of their disability. The module typically takes less than two minutes for an interviewer to administer. The responses to the questions can then be used to classify the person to one of the categories of 'Severity of Disability'.

Questions 1-4 determine the presence or absence of various health conditions, impairments, limitations or restrictions. The next four questions determine whether the person has a core-activity (the activities of self-care, mobility and communication) limitation and the severity of that limitation. Questions 6-8 are on the person's need for assistance and Question 9 is about the person's possible use of aids. The final two questions (Questions 11-12) determine whether the person has an education or employment restriction and are only asked of people aged less than 65 years.

As the questions on the presence of individual health conditions allow for multiple responses to be provided, the Disability Module does not allow the separate identification of particular individual conditions which cause disability.

The Disability Module used in the Survey of Education and Training 2005 only included a subset of the questions below. The sequence used in SET 2005 appears at the end of this Appendix.

Disability Module questions

Q1

I would now like to ask about any conditions you may have that have lasted, or are likely to last, for six months or more.

Do you have any of these conditions?

Interviewer: Show Prompt card 1

Prompt card 1:

- 10 Sight problems not corrected by glasses or contact lenses
- 11 Hearing problems
- 12 Speech problems
- 13 Blackouts, fits or loss of consciousness
- 14 Difficulty learning or understanding things
- 15 Limited use of arms or fingers
- 16 Difficulty gripping things
- 17 Limited use of legs or feet
- 18 Any condition that restricts physical activity or physical work (e.g., back problems, migraines)  $\,$
- 19 Any disfigurement or deformity
- 20 Any mental illness for which help or supervision is required

Yes Go to Q2

No Go to Q3

Q2

Which ones?

Interviewer: Show Prompt card 1. More than one response is allowed

Q

Still thinking of conditions that have lasted 6 months or more, are you restricted in everyday activities by any of these?

Disability Module questions continued

Interviewer: Show Prompt card 2

Prompt card 2:

- 1 Shortness of breath
- 2 Chronic or recurring pain
- 3 A nervous or emotional condition
- 4 Long term effects as a result of a head injury, stroke or other brain damage
- ${\bf 5}$  Any other long term condition that requires treatment or medication
- 6 Any other long term condition such as arthritis, asthma, heart disease, Alzheimer's disease, dementia etc.

Yes Go to Q4

No Go to sequence guide in Q4

*Q4* 

Which ones?

Interviewer: Show Prompt card 2. More than one response is allowed

Sequence guide:

The person is considered to have a disability if the answer to Q1 or Q3 is 'Yes' and is sequenced to Q5.

If the answer to Q1 and Q3 is 'No' then no more questions are asked and the person is sequenced to the end of the module.

Q5

Because of the condition/conditions you have told me about, do you ever need help or supervision with any of these tasks?

Interviewer: Show Prompt card 3

Prompt card 3:

Self care

For example:

- Bathing / showering
- Dressing / undressing
- Eating / feeding
- Going to toilet
- Bladder / bowel control

Mobility

For example:

- Moving around away from home
- Moving around at home
- Getting in or out of a bed or chair

Communication

For example:

- Understanding / being understood by strangers, friends or family, including using sign language / lip reading

Yes Go to Q6

No Go to Q7

06

Do you always need help with any of these tasks?

Interviewer: Show Prompt card 3

Yes Go to sequence guide in Q8

No Go to sequence guide in Q8

Disability Module questions continued

Q7

Because of the condition/conditions you have told me about, do you ever have difficulty with any of these tasks?

Interviewer: Show Prompt card 3

Yes Go to sequence guide in Q8

No Go to Q8

*Q8* 

Even though you can do these self care, mobility and communication tasks without difficulty, do you use any aids to assist with these tasks?

Yes Go to sequence guide below

No Go to sequence guide below

Sequence guide:

If the person is aged less than 65 years, they are sequenced to Q9.

Otherwise (aged 65 years or more), the person is sequenced to the end of the module.

09

Because of the condition/conditions you have told me about, do you have any difficulties with education such as these?

Interviewer: Show Prompt card 4

Prompt card 4:

Examples of difficulties with education

- not attending school/further study due to condition
- need time off school/study
- attend special classes/school
- other related difficulties

Yes Go to Q10

No Go to Q10

Q10

Because of the condition/conditions you have told me about, do you have any difficulties with employment such as these?

Interviewer: Show Prompt card 5

Prompt card 5:

Examples of difficulties with employment

- type of job could do
- number of hours that can be worked
- finding suitable work
- needing time off work
- permanently unable to work

Yes - End

No - End

Classification to Severity of Disability

'Disability or long-term health condition' if Q1='Yes' or Q3='Yes'

'No disability or long-term health condition' if Q1='No' and Q3='No'

'Profound core-activity limitation' if Q6='Yes'

'Severe core-activity limitation' if Q6= 'No'

'Moderate core-activity limitation' if Q7='Yes'

# APPENDIX 2 SHORT DISABILITY MODULE continued

Classification to Severity of Disability continued

'Mild core-activity limitation' if Q8='Yes'

'Education/employment restriction only' if Q8='No and Q9='Yes' and the person is aged 5-20 years, OR Q10='Yes'

'No specific limitation or restriction' if Q8='No' and the person is aged 65 years or more, OR Q9='No' and Q10='No', OR Q9='Yes' and the person is aged 21-64 years

SET questions

The questions in order of appearance were:

Q1

Q3

Q5 - the activities for this question were shortened:

- Personal care
- Mobility
- Understanding or being understood in own language
- None of these

Q7 - the activities for this question included:

- Personal care
- Mobility
- Understanding or being understood in own language
- Education
- Employment
- None of these

# APPENDIX 3 NEED FOR ASSISTANCE IN THE 2006 CENSUS

CENSUS CORE ACTIVITY NEED FOR ASSISTANCE

The following image is from the standard household form and shows exactly how the questions appeared on the paper form. The break indicates that Questions 20, 21 and 22 appeared at the bottom of page 7 and Question 23 appeared at the top of page 8.

|  | -  |
|--|--|
| 20 Does the person ever need someone to help with, or be with them for, self care activities?  • For example: doing everyday activities such as eating, showering, dressing or toileting.  • See page 9 of the Census Guide for more information.  • Remember to mark box like this: | Yes, always Yes, sometimes No  |
| 21 Does the person ever need someone to help with, or be with them for, body movement activities?  • For example: getting out of bed, moving around at home or at places away from home.   | Yes, always Yes, sometimes No  |
| Does the person ever need someone to help with, or be with them for, communication activities?     For example: understanding, or being understood by, others.   | Yes, always Yes, sometimes No  |
| What are the reasons for the need for assistance or supervision shown in questions 20, 21 and 22?  Mark all applicable reasons. Remember to mark boxes like this:  | No need for help or supervision Short-term health condition (lasting less than six months) Long-term health condition (lasting six months or more) Disability (lasting six months or more) Old or young age Difficulty with English language Other cause |

The output data item 'Core activity need for assistance' is derived from these questions in the following way:

Has need for assistance with core activities if:

- the answers to Q20, Q21 or Q22 are 'Yes, always' or 'Yes, sometimes' AND
- the reason is because of a 'Long term health condition', Disability or 'Old or young age' (where the person is older than 40 years).

Does not have need for assistance with core activities if:

- the answers to Q20, Q21 and Q22 are 'No' OR
- Q20, Q21 or Q22 are 'Yes, always', 'Yes sometimes' and Q23 has been answered but does not include 'Long term health condition' or Disability OR
- Q20, Q21 or Q22 are 'Yes, always', 'Yes sometimes' and the reason given is 'Old or young age' (where the person is younger than 40 years)

#### *Not stated* if:

At least one of Q20, Q21 and Q22 = not answered AND none of Q20, Q21 and Q21= {'Yes, always', 'Yes, sometimes'}

DISABILITY IDENTIFICATION QUESTIONS IN THE SURVEY OF DISABILITY, AGEING AND CARERS

Below are the screening questions used to identify disabled people in households of more than one person. Appropriate wording variations and sequence changes are used to accommodate interviewing in one person households.

Q.1 I now have some questions about health conditions that have lasted, or are likely to last, for 6 months or more.

Does anyone in this household have any loss of sight

Yes

No Go to Q.6

- Q.2 Who are they?
- Q.3 Can .... see normally wearing glasses or contact lenses?

Yes

No

Q.4 Does ..... have total loss of sight?

Yes

No

- Q.5 What is the main condition that causes this loss of sight?
- Q.6 Does anyone in this household have any loss of hearing?

Yes

No Go to Q.10

- Q.7 Who are they?
- Q.8 Does ..... have total loss of hearing?

Yes

No

- Q.9 What is the main condition that causes this loss of hearing?
- Q.10 Does anyone in this household have anything wrong with their speech?

Yes

No Go to Q.14

- Q.11 Who are they?
- Q.12 Does ..... have total loss of speech?

Yes

No

- Q.13 What is the main condition that causes this speech difficulty?
- Q.14 Does anyone in this household have shortness of breath or difficulty breathing? Yes

No Go to Q.18

- Q.15 Who are they?
- $Q.16 \quad \text{Is } \ldots \ldots \text{ restricted in everyday activities because of the breathing difficulty?}$

Yes

No

- Q.17 What is the main condition that causes the breathing difficulty?
- Q.18 Does anyone in this household have chronic or recurrent pain or discomfort? Yes

No Go to Q.22

Q.19 Who are they?

DISABILITY IDENTIFICATION
QUESTIONS IN THE SURVEY
OF DISABILITY, AGEING AND
CARERS continued

Q.20  $\,$  Is ..... restricted in everyday activities because of the pain or discomfort? Yes  $\,$  No

- Q.21 What is the main condition that causes this pain or discomfort?
- Q.22 Does anyone in the household have blackouts, fits or loss of consciousness? Yes

No Go to Q.25

- Q.23 Who are they?
- Q.24 What is the main condition that causes .....'s blackouts, fits or loss of consciousness?
- Q.25 Does anyone in this household have difficulty learning or understanding things? Yes

No Go to Q.28

- Q.26 Who are they?
- Q.27 What is the main condition that causes .....'s difficulty in learning or understanding things?
- Q.28 Does everyone in the household have full use of their arms and fingers? Yes

No Go to Q.31

- Q.29 Which members of the household don't have full use of their arms or fingers?
- Q.30 What is the main condition that causes this restriction for .....?
- Q.31 Does anyone in the household have difficulty gripping or holding things? Yes

No Go to Q.34

- Q.32 Who are they?
- Q.33 What is the main condition that causes .....'s difficulty in gripping or holding things?
- Q.34 Does everyone in this household have full use of their feet and legs? Yes

No Go to Q.37

- Q.35 Which members of the household don't have full use of their feet or legs?
- Q.36 What is the main condition that causes this restriction for ....?
- Q.37 Does anyone in the household have a nervous or emotional condition? Yes

No Go to Q.42

- Q.38 Who are they?
- Q.39 Is ..... having treatment for this condition?

Yes

No

Q.40 Is .... restricted in everyday activities because of this condition?

Yes

No

- Q.41 What is the name of the nervous or emotional condition that ..... has?
- Q.42 Is anyone in the household restricted in doing everyday physical activity or physical work?

Yes

No Go to Q.45

DISABILITY IDENTIFICATION
QUESTIONS IN THE SURVEY
OF DISABILITY, AGEING AND
CARERS continued

- Q.43 Who are they?
- Q.44 What is the main condition causing .....'s restriction in physical activity or work?
- Q.45 Does anyone in the household have a disfigurement or deformity?

Yes

No Go to Q.49

- Q.46 Who are they?
- Q.47 Is ..... restricted in everyday activities because of this disfigurement or deformity?

Yes

No

- Q.48 What was the main condition causing .....'s disfigurement or deformity?
- Q.49 Does anyone in the household need to be helped or supervised in doing things because of a mental illness or condition?

Yes

No Go to Q.52

- Q.50 Who are they?
- Q.51 What is the name of the condition .....'s has?
- Q.52 Has anyone in the household ever had a head injury?

Yes

No Go to Q.56

- Q.53 Who are they?
- Q.54 Does ..... have any long-term effects as a result of the head injury, that interfere with (him/her) doing everyday activities?

Yes

No Go to Q.56

- Q.55 What are the long-term effects that the head injury has caused?
- Q.56 Has anyone in the household ever had a stroke?

Yes

No Go to Q.60

- Q.57 Who are they?
- Q.58 Does ..... have any long-term effects as a result of the stroke that interfere with (him/her) doing everyday activities?

Yes

No Go to Q.60

- Q.59 What are the long-term effects that the stroke has caused?
- Q.60 Has anyone in the household ever had any other kind of brain damage? Yes

No Go to Q.65

- Q.61 Who are they?
- Q.62 Does ..... have any long-term effects as a result of this brain damage, that interfere with (him/her) doing everyday activities?

Yes

No Go to Q.64

- Q.63 What are the long-term effects that this brain damage has caused?
- Q.64 What was the cause of this brain damage?

DISABILITY IDENTIFICATION
QUESTIONS IN THE SURVEY
OF DISABILITY, AGEING AND
CARERS continued

Q.65 Is anyone in the household receiving treatment or medication for any long-term conditions or ailments?

Yes

No Go to Q.69

- Q.66 Who are they?
- Q.67 What conditions is ..... receiving treatment or medication for?
- Q.68 Even though .... is being treated, is (he/she) still restricted in everyday activities by (this/any of these) long-term condition(s) you have just mentioned?

Yes

No

Q.69 Does anyone in the household have any of these health conditions, or any other conditions, that have lasted or are likely to last 6 months or more, that you have not already reported?

Yes

No

- Q.70 Who are they?
- Q.71 What other conditions does ..... have?
- Q.72 Is ..... restricted in everyday activities because of (this/any of these) condition(s)?

Yes

No

Q.73 Sequence Guide

If someone in house has a hearing problem (Yes' in Q.6) go to Q.74 Otherwise go to Q.77

Q.74 Does ..... use a hearing aid to assist with hearing?

Yes

No

Q75. Does ..... have a cochlear implant?

Yes

No

Q.76 Does ..... use other aids, such as hearing dogs, light signals, or a tty phone or loop to help compensate for his/her hearing loss?

Yes

No

Q.77 Sequence Guide

If someone in house is disabled go to Q.78

Otherwise no more questions

Q.78 Does ..... ever need help or supervision when going to, or getting around, a place away from home?

Yes

No Go to Q.80

Q.79 Does ..... always, or only sometimes, need help with going to, or getting around, a place away from home?

Always Go to Q.81

Sometimes Go to Q.81

Q.80 Even though ..... does not need help or supervision with going to, or getting around, a place away from home, does he/she find it difficult to do?

Yes

DISABILITY IDENTIFICATION
QUESTIONS IN THE SURVEY
OF DISABILITY, AGEING AND
CARERS continued

```
Q.81 Does ..... ever need help or supervision when moving about the house?
    Yes
    No Go to Q.83
Q.82 Does ..... always, or only sometimes, need help when moving about the house?
    Always Go to Q.84
    Sometimes Go to Q.84
Q.83 Even though ..... does not need help or supervision when moving about the
house, does he/she find it difficult to do?
    Yes
    No
Q.84 Does ..... ever need help or supervision to get in or out of bed or a chair?
    No Go to Q.86
Q.85 Does ..... always, or only sometimes, need help to get in or out of bed or a chair?
    Always Go to Q.87
    Sometimes Go to Q.87
Q.86 Even though ..... does not need help or supervision to get in or out of bed or a
chair, does he/she find it difficult to do?
    Yes
    No
Q.87 Is .... in a wheelchair?
    Yes Go to Q.93
Q.88 Can ..... easily walk 200 metres?
    Yes
    No Go to Q.90
Q.89 Would it take ..... longer than most other people of the same age?
    Yes
    No
Q.90 Can .... walk up and down stairs without a handrail?
    Yes
    No Go to Q.92
Q.91 Can ..... do this without difficulty?
    Yes
    No
Q.92 Can ..... easily bend down and pick up an object from the floor without any
assistance?
    Yes
Q.93 Does ..... ever need help or supervision to shower or bathe?
    Yes
    No Go to Q.95
Q.94 Does ..... always, or only sometimes, need help to shower or bathe?
    Always Go to Q.96
    Sometimes Go to Q.96
Q.95 Even though ..... does not need help or supervision to shower or bathe, does
he/she find it difficult to do?
    Yes
```

DISABILITY IDENTIFICATION
QUESTIONS IN THE SURVEY
OF DISABILITY, AGEING AND
CARERS continued

Q.96 Does ..... ever need help or supervision to dress themselves, for example doing up shoelaces, buttons or zips?

Yes

No Go to Q.98

Q.97 Does ..... always, or only sometimes, need help to dress themselves? Always *Go to Q.99* 

Sometimes Go to Q.99

Q.98 Even though ..... does not need help or supervision to dress themselves, does he/she find it difficult to do?

Yes

No

Q.99 Does ..... ever need help or supervision when eating a meal, for example cutting up food?

Yes

No Go to Q.101

Q.100 Does  $\dots$  always, or only sometimes, need help when eating a meal?

Always Go to Q.102

Sometimes Go to Q.102

Q.101 Even though ..... does not need help or supervision when eating a meal, does he/she find it difficult to do?

Yes

No

Q.102 Does ..... ever need help or supervision using the toilet?

Yes

No *Go to Q.104* 

Q.103 Does ..... always, or only sometimes, need help using the toilet?

Always Go to Q.105

Sometimes Go to Q.105

Q.104 Even though ..... does not need help or supervision using the toilet, does he/she find it difficult to do?

Yes

No

Q.105 Does ..... have any difficulty controlling their bladder or bowel?

Yes

No Go to Q.108

Q.106 Does ..... ever need help in managing this difficulty?

Yes

No Go to Q.108

Q.107 Does ..... always, or only sometimes, need help managing this difficulty?

Always

Sometimes

Q.108 Does .... have any difficulty understanding someone they don't know?

Yes

No Go to Q.112

Q.109 Can he/she understand them at all?

Yes

DISABILITY IDENTIFICATION
QUESTIONS IN THE SURVEY
OF DISABILITY, AGEING AND
CARERS continued

Q.110 Does he/she ever need help with this?

Yes

No Go to Q.112

Q.111 Does he/she always or only sometimes need help with understanding someone they don't know?

Always

Sometimes

Q.112 Does .... have any difficulty understanding family or friends?

Yes

No Go to Q.116

Q.113 Can he/she understand them at all?

Yes

No

Q.114 Does he/she ever need help with this?

Yes

No Go to Q.116

Q.115 Does he/she always or only sometimes need help with understanding family and friends?

Always

Sometimes

Q.116 Does .... have any difficulty being understood by someone they don't know?

Yes

No Go to Q.120

Q.117 Can he/she understand them at all?

Yes

No

Q.118 Does he/she ever need help with this?

Yes

No Go to Q.120

Q.119 Does he/she always or only sometimes need help with being understood by someone they don't know?

Always

Sometimes

Q.120 Does .... have any difficulty being understood by family or friends?

Yes

No *Go to Q.124* 

Q.121 Can he/she understand them at all?

Yes

No

Q.122 Does he/she ever need help with this?

Yes

No Go to Q.124

Q.123 Does he/she always or only sometimes need help with being understood by family and friends?

Always

Sometimes

DISABILITY IDENTIFICATION
QUESTIONS IN THE SURVEY
OF DISABILITY, AGEING AND
CARERS continued

 $Q.124\,$  Is ..... able to communicate more easily with others using any of these non-spoken forms of communication?

Yes

No

Q.125 Does ..... use an aid to help with any of these tasks?

Yes

No

Q.126 Does ..... use any of these aids to help them move around?

Yes

No

Q.127 Does ..... use any medical aids such as these to help manage his/her condition?

Yes

No

Q.128 Does ..... use any non-electronic aids, such as picture boards or symbol boards or large print books to assist with reading or writing?

Yes

No

Q.129 Does ..... use any electronic aids, such as audio tapes, a talking word processor, or special computer software and printout system, to assist with reading or writing?

Yes

No

Q.130 Does ..... use any non-electronic aids, such as picture boards, symbol boards, or letter/word boards, to assist with speaking?

Yes

No

Q.131 Does ..... use any electronic aids, such as digitised, or synthesised speech output systems, to assist with speaking?

Yes

No

Q.132 Does ..... use any type of public transport at all?

Yes

No

Q.133 Is there any form of public transport ..... could use, regardless of whether it is available in their area?

Yes

No Go to Q.137

Q.134 Would ..... be able to use all forms of public transport, including trains, buses, trams and ferries?

Yes

No

Q.135 As a result of ..... conditions, (does/would) ..... ever need help or supervision when using public transport that they (can/could) use?

Yes *Go to Q.137* 

No

Q.136 (Would/Does) ..... find it at all difficult to use (public transport/the public transport that ..... (can/could) use)?

Yes

Q.137 Does ..... currently attend school?

DISABILITY IDENTIFICATION
QUESTIONS IN THE SURVEY
OF DISABILITY, AGEING AND
CARERS continued

```
Yes Go to Q.139
    No
Q.138 What is the main reason ..... does not attend school?
    Conditions (s) prevent school attendance Go to Q.141
    Too young Go to Q.141
    Home schooling/correspondence Go to Q.141
    Finished school Go to Q.141
Q.139 Does ..... go to a special school because of their condition?
    Yes Go to Q.141
    No
Q.140 Does ..... attend special classes because of their condition?
    No
Q.141 Sequence Guide
    If less than 15 yrs of age no more questions
    Otherwise go to Q.142
Q.142 Does ..... condition permanently prevent ..... from working?
    Yes No more questions
Q.143 Does ..... condition restrict the type of job ..... can do?
    Yes
Q.144 Does ..... condition restrict the number of hours ..... can work?
    Yes
    No
Q.145 Does .... condition make it more difficult to change jobs or get a preferred job?
    Yes
    No
Q.146 On average, does ..... need at least one day a week off work because of .....
condition?
    Yes
    No
Q.147 (Does/would) ..... need to be given ongoing assistance or supervision at work
because of .... condition?
    Yes
    No Go to Q.149
Q.148 Has .... employer provided him/her with, or allowed them to have, a special
support person for this?
    Yes
    No
Q.149 (Was it/would it be) necessary for .....'s employer to provide any special
equipment, modify the work environment or make any special arrangements for .....,
because of .... condition?
    Yes
    No
```

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DISABILITY INFORMATION,

AUSTRALIA

INTERNET

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