

NDIS UTILISATION PROJECT

This summary presents the key issues shared by Victorian participants with **psychosocial disability**.

TRANSITION OF MENTAL HEALTH PROGRAMS INTO THE NDIS

- When the NDIS was introduced, many participants experienced changes or losses in the mental health support they had been receiving, including the loss of skilled mental health workers that participants had built trusting relationships with.
- This often disrupted journeys of recovery and made it difficult to find the required help needed to understand about and access the NDIS.
- For those who had received prior supports, some described their mental health workers as instrumental in helping them gain access to and navigate the NDIS.
- Other participants felt lost between the mental health system and the NDIS, with individuals and service providers confused about which system should be providing what supports.
- Significant concern also remained for people who no longer have as much support from their previous mental health programs, and who have not been able to access the NDIS.

"Through the intensive work with the psychologist, I then got to the point where I'm able to leave the house. Then I finally left the house and joined a choir. I know they [NDIS] like social participation but they need to know how people get to that point. It's not just about the availability of a support worker, it's about the hard yards that people put in to get to the point where they can actually get the support worker to take them somewhere".

Study participant

ACCOMMODATING FOR INTER-RELATED AND CO-OCCURRING CONDITIONS

- Participants felt NDIS frontline workers did not always understand the relationships between mental and physical health, or how these relationships can impact on a person's functioning and should therefore be reflected in NDIS plans.
- For example, participants reported that plans did not always allow them to address physical conditions – such as pain, poor sleep – that undermined their mental health and functioning.

- When these issues are not addressed, participants were less able to use other components of their plans, e.g., capacity building

FINDING SUPPORTS THAT MEET DIVERSE NEEDS

- Participants often found it difficult to find skilled 'NDIS ready' mental health services and workers to use their plans with.
- This made it harder for participants to address mental health concerns and/or build their capacity to use their plans in other areas such as social participation.
- Some participants were keen to utilise their plans to engage with recovery coaches when these become more readily available.
- Others were concerned that there was not enough focus on developing the supply of other diverse psychosocial supports, such as trauma-informed services.

"I really did like and appreciate the support I had from [mental health service provider] prior to NDIS ... there was a bit of a grieving process I think with the loss of that support. Given that because it was taken away rather than voluntarily feeling like I was ready to leave the support behind. It felt like a real loss. ... With the NDIS I've got a range of different supports available to me that I didn't previously have access to, but the real one [recovery informed supports] that I really wanted it isn't available yet".

Study participant

CONTACT US.

This research was commissioned by the Victorian Department of Health and Human Services and implemented by researchers from the University of Melbourne's Melbourne Disability Institute and the Melbourne School of Population and Global Health, and Ms Jody Barney, Independent Indigenous Research Consultant.

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For more information contact:

alexandra.devine@unimelb.edu.au
md-i@unimelb.edu.au