

## **Eating Disorders Queensland.**

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## October 2021

## Eating Disorders Queensland's (EDQ) response to the 2019 review of the *National Disability Insurance Scheme Act 2013* (NDIS Act)

Eating Disorders Queensland (EDQ) is a state-wide community-based not-for-profit organisation which delivers therapeutic and psycho-social treatment support options for individuals living with eating disorders, their carers, families, and key support people.

As Queensland's leading organisation in the eating disorder sector, we work cooperatively to support the provision of information, initiatives, and advocacy as the voice of family members and other carers, as well as those living with eating disorders in Queensland; and to support health care professionals in the eating disorders sector.

EDQ welcomes most of the proposed changes to the NDIS Legislation and believes it is a step in the right direction in making the NDIS more inclusive, particularly for people with psychosocial needs.

As a member organisation of the **Queensland Alliance for Mental Health** we echo concerns regarding:

- EDQ is very concern about proposed changes to the NDIS Act (and Rules), that will allow the CEO of the NDIA to vary an NDIS participant's plan on their own initiative. The exposure draft of the NDIS Act includes the addition of section 47A: Variation of participant's plan by the CEO which states:
  - "(1) The CEO may, in writing, vary a participant's plan (except the participant's statement of goals and aspirations).

## Variation on CEO's own initiative or on request

- (2) The CEO may do so on the CEO's own initiative or on request of the participant."
- Proposed changes to the NDIS Legislation include the implementation of recommendation 8 (b) of the Tune Review, which replaces references to "psychiatric conditions" with "psychosocial disability".





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The term 'disability' is not used in a mental health context, nor will people identify with "psychosocial disability". This language will further exclude individuals with a severe and enduring eating disorder from accessing the scheme. Eating disorders are complex and serious neuropsychiatric disorders. They will affect approximately 9% of the Australian population in their lifetime, with an increase to 15% for females. They have amongst the highest fatality rates of any psychological disorder (National Eating Disorder Collaboration, 2012). Eating disorders have significant impact on individual's functioning and daily life.

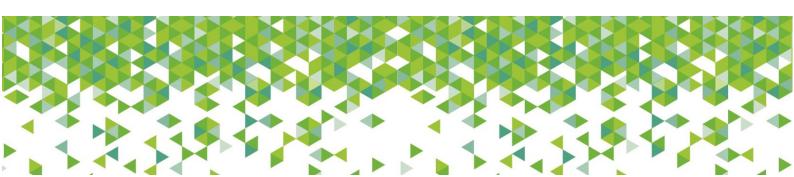
- Further, EDQ notes the ambiguous language in the new NDIS (Becoming a Participant) rules. For example, section 8, subsection 2 states:
   "The impairment may be considered permanent, or likely to be permanent, only if:

   (a) both:
  - (i) the person is undergoing, or has undergone, **appropriate treatment** for the purpose of managing the person's mental, behavioural or emotional condition; and
  - (ii) the treatment has not led to a substantial improvement in the person's functional capacity, after a period of time that is reasonable considering the nature of the impairment (and in particular considering whether the impairment is episodic or fluctuates); or
  - (b) no **appropriate treatment** for the purpose of managing the person's mental, behavioural or emotional condition is **reasonably available** to the person."

Eating Disorder treatment sits in the precarious treatment sphere of Health and psychosocial supports.

Often due to physical health implications, treatment under a hospital health service is deemed most appropriate, by most funding bodies. However, the nature and presentations of a severe and enduring eating disorder, is far more complex than only a health issue. Often what is "reasonably " available to clients with an eating disorder, under a purist health approach, is not "appropriate treatment" for that individual.

Ongoing functional support and treatment comprises of multidisciplinary teams of medical, psychiatric, dietetics, dental, psychological and psychosocial components.





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Families caring for a person with an eating disorder find themselves in a highly stressful and time-consuming process, with implications for the wellbeing of the family.

At present the health system relies on the work of families to implement treatment at home but does not consistently support those families to carry out this vital work. This work is not funded under any hospital and health service.

It is important to note that on average only 20% for individuals with an eating disorder make a full recovery, therefore high likelihood that impairment will be permanent.

As an NDIS provider, EDQ has experienced significant cuts or complete cancelation of client plans. EDQ strongly feels the NDIA's view of eating disorders not being a "psychosocial disability" but rather a health issues, impacts on clients receiving ongoing supports under NDIS.

Warm Regards

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