

Jodie Kleinschafer, Felicity Small and Mona Nikidehaghani

Lecture in Marketing¹

Charles Sturt University, jkleinschafer@csu.edu.au +61 2 6338 4851

Associate Head of School

Charles Sturt University, fsmall@csu.edu.au +61 2 6338 4242

Associate Lecturer in Accounting

Charles Sturt University, mniki@csu.edu.au +61 2 6338 6341

Introduction and background

The National Disability Insurance Scheme (NDIS) is a nation-wide government policy designed to support people living with a disability (PWD) and constitutes a significant reform in the provision of disability funding in Australia (Price Waterhouse Coopers 2011). This reform is a rapidly implemented response to the poor living conditions for PWD, as identified in the Australian Productivity Commission's report in 2011. It is founded on the social aim of empowering PWD with choice and control so they can "live an ordinary life" ("About the NDIS" 2017, pg. 2). As such the implementation of this policy could have benefited from the application of social marketing strategy from the beginning, as the intent of this policy is to drive behavioural change for social good. However, the systematic application of marketing processes to achieve this social change (iSMA, ESMA and AASM, 2013) has been largely overlooked. This is evident in the absence of traditional downstream campaigns to engage with end users. Industry experts in service provision in the Western region have been dependent on a few "lynchpin" people to disseminate, often through

¹ Dr Jodie Kleinschafer is a consumer behaviour researcher with an interest in the role of consumer behaviour insights in addressing social issues. She is a researcher in the Faculty of Business, Justice and Behavioural Studies and is member of the Institute of Land, Water and Society (ILWS). She is particularly interested in how decisions are made and how people learn to be consumers in different social contexts. Her areas of research interest include household energy efficiency decisions and the National Disability Insurance Scheme (NDIS) and the unique considerations of consumer behaviour in a regional context.

word of mouth, the constantly evolving details of the implementation of the scheme. In addition to preparing themselves, service providers have also had the responsibility of preparing PWD for the transition.

The reform includes a radical shift to the personalisation of funding, rather than block funding to service organisations and as such has significant implications for both service providers and PWD's. In particular, disability support service providers now have to operate in a competitive marketplace and compete for funds allocated to the participants. People with a disability who were previously recipients of services are now expected to be active participants and need to learn how to become consumers in this new market. We have been conducting research project studying the impacts of the NDIS on both types of stakeholder, the focus of this paper is on the impacts on the midstream stakeholders: the disability support service providers.

In the following discussion we examine how the rapid and dynamic nature of the NDIS implementation process has impacted regional disability support service providers and their ability to be strategic in their response to this change. We discuss three significant challenges arising from the transition for service providers: service provider operations, transport, and planning meetings. We use Rothschild's (1999) *Motivation (internal influences), Opportunity (external influences) and Ability (internal influences) Model (MOA)*, as a framework to explore the impacts of those challenges on disability support service providers as they are both a target of social change as well having a role in facilitating the change for PWD.

Method

These preliminary findings are based on a thematic analysis of 30 semi-structured in-depth interviews with industry experts representing upstream and midstream stakeholder organisations in the Western Region of NSW during the NDIS transition (which began on 1st July 2017). A snowballing technique was used to recruit industry professionals. Thematic analysis was conducted using NVivo. A number of techniques were used to ensure the robustness of the analysis, themes were considered important when they were repeated across interviews and reflected issues previously identified in literature or were considered to identify new areas of concern.

Results

Three aspects of the NDIS challenged the *motivation, opportunity and ability* of service providers during the transition: service provider preparation, transport funding and planning meetings. The preparation of disability support services for the transition was a concern for respondents (e.g., Interview 2, 10, 6, 12). This transition is perhaps most disruptive for service providers as it immediately impacts on their sustainability and funding for day-to-day business activities. Industry experts from upstream organisations expressed difficulties convincing some service providers about the magnitude of the change and the implications this would have for their businesses. At a fundamental level the nature of their business

operations is changing, however some are choosing not to act (Interview 2). This was indicative of a lack of *motivation* by some to engage in the behaviour change required. Further, there were discussions about the *ability* of organisations to survive the transition (Interview 1, Interview 2), their *ability* to afford back-of-house administrative systems and process under the new funding model (Interview 10). In addition, there were reports of redundancies, staff churn, and amalgamations before the roll-out date of the new system (Interview 6, 12), thus limiting *opportunities* for service providers to facilitate and offer services that give PWD the choice and control espoused in the policy.

The transport funding model, which is a capped allowance given directly to the PWD, has also created both challenges and opportunities for service providers. This approach may be seen to jeopardise existing service providers' options because PWD may inadvertently exhaust their funds and thus, limit their ability to travel to service locations (Interview 10). However, there is the potential *motivation* for service providers to re-evaluate the needs of PWD and to be innovative in their offerings (Interview 10). The primary challenge of the new transport funding model which is specific to regional areas, is the cap, regardless of circumstances or geographical location (e.g., regional and remote areas in Western NSW Interview 1, 2). Respondents indicated that this was reflective of assumptions, about access to public transport, (e.g., Interview 1, 2) and the development of policy in urban centres with limited regard to the needs of the rural and remote regions (e.g., Dew *et al.* 2014).

Finally, the implementation of the NDIS requires PWD and carers to attend a planning meeting to discuss their funding needs. The design and delivery of this process requires PWD or their carers to be properly prepared to ensure they are appropriately funded (Interview 4). Preparing PWD was the responsibility of service providers. While *motivated* to facilitate this process and assist PWD, service providers interviewed early in the transition reported that being unfamiliar with the process limited their *ability* to assist (Interview 12), further the *opportunity* to assist was reduced as it was difficult to interpret the information available (Interview 5) especially with constantly changing goal posts (Interview 2). The importance of the role of service providers in preparing PWD was evident in reports of having to ensure vulnerable PWD were not "falling through the cracks" during the process (Interview 13). This manifested in reports of PWD throwing away contact letters and hanging up on assessors (Interview 10) leaving them vulnerable to not participating in a planning meeting and as a result not receiving the funding they needed.

Conclusions and implications

The absence of social marketing considerations in the design and delivery of the NDIS has impacted on the motivations, opportunities and abilities of midstream stakeholders in the reform. Specifically, the change in funding model is an environmental factor that changes the opportunities for service providers. Changes to the nature of funding can limit their ability, as illustrated in the change of transport funding. Further, the design and delivery of the planning meeting, means that funding and the subsequent opportunities are a function

of the PWD/carer's capabilities in the meetings, leaving those with less capabilities vulnerable. Similarly those service providers with less abilities or motivations to change are at risk of not responding to the opportunities presented by market changes and therefore are at risk of going out of business. These challenges highlight the need for social marketing interventions to support regional service providers and participants in the ongoing delivery of the scheme.

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