

SUBMISSION

**Response to the Occupation Standard Classification for
Australia (OSCA) 2027 Consultation Draft**

Community Mental Health Australia

18 September 2026



Acknowledgement

Community Mental Health Australia acknowledges Aboriginal and Torres Strait Islander peoples and pay our respects to Elders.

We recognise their culture, heritage and right to self-determination.

At Community Mental Health Australia, people of all backgrounds, abilities, identities and lived experience are welcome. You will be respected, understood and supported.

Introduction

The Australia Bureau of Statistics (ABS) publishes the classification of occupations every few years. The current The Occupation Standard Classification for Australia (OSCA) was published in 2024.

In preparation for the next version of OSCA to be published in 2027, the ABS has consulted with experts across industry, government, education and training.

In April 2026, Community Mental Health Australia (CMHA) worked with its member organisation Queensland Alliance for Mental Health (QAMH) to submit a request for OSCA 2027 to better reflect the workers within the community mental health sector, in particular Peer Workers.

That submission has been successful and the draft OSCA was made available for further consultation.

This is the summary of the submission made by CMHA in September 2026.

Submission Summary

Question 8: Which proposed changes are you commenting on?

We are commenting on:

- 441333 Mental Health Worker
- 422131 Disability Services Officer
- 422231 Disability Support Worker

Question 9: What should be corrected or reconsidered before this change is finalised?

The changes to 441333 Mental Health Workers to include Peer Work descriptions, including Aboriginal and Torres Strait Islander Social and Emotional Wellbeing (SEWB), are strongly welcomed.

CMHA supports the ABS working towards a distinct Peer Worker classification in future updates to OSCA. As peer workers have noted, peer work cuts across mental health, alcohol and other drug, homelessness, family and domestic violence, child protection, justice, and many other community and welfare support specialisations. The partnership model is what makes Peer Work distinct: services are provided “with” clients, not “to” or “for” clients. We recognise that a distinct Peer Worker classification is a longer-term objective and would welcome the opportunity to work with the ABS to develop it, as the major national organisation representing service providers in this field.

The proposed classifications 422131 Disability Services Officer and 422231 Disability Support Worker still do not adequately capture community mental health roles that support people with psychosocial disability. In our original submission, CMHA proposed a new classification, "Mental Health Support Worker," to reflect occupations that provide mental health support to people with psychosocial disability. While the core tasks in these roles may

resemble those performed by disability support workers, they carry a stronger focus on psychosocial support aimed at building independence – including liaising with clinical care providers, building capacity to manage day-to-day activities, strengthening social skills, and developing educational and vocational skills.

Similarly, the reference to "managing depression, confusion and grief" (listed as a Main Task under 422231 Disability Support Worker) inadequately captures the nature of psychosocial support work, where the focus is on managing responses to psychiatric symptoms and psychological distress (such as anxiety, mood instability, or disorientation) in ways that support recovery and day-to-day functioning, rather than managing the underlying condition itself.

Alternatively, CMHA would welcome amendments to the 422131 and 422231 classifications that explicitly recognise the support provided to people with psychosocial disability. For example, the Main Tasks could be amended as follows:

- Supports people with disability, including psychosocial disability, with daily activities such as mobility, housekeeping tasks, personal care, medication and meal preparation
- Identifies and facilitates community-based social activities for people with disability, including building social skills and social connection for people with psychosocial disability
- Manages risks and emergencies in a home care setting, including responding to psychosocial crises or episodes of acute distress

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Similarly, the reference to "managing depression, confusion and grief" (listed as a Main Task under 422231 Disability Support Worker) inadequately captures the nature of psychosocial support work, where the focus is on managing responses to psychiatric symptoms/trauma responses and psychological distress (such as anxiety, fluctuating emotional experiences, or disorientation) in trauma-informed ways that support self-agency, are context and needs-adapted, recovery and day-to-day functioning, rather than managing the underlying condition itself.

Alternatively, CMHA would welcome amendments to the 422131 and 422231 classifications that explicitly recognise the support provided to people with psychosocial disability. For example, the Main Tasks could be amended as follows:

- Supports people with disability, including psychosocial disability, with daily activities such as mobility, housekeeping tasks, personal care, medication and meal preparation
- Identifies and facilitates relevant and person-chosen community-based social activities for people with disability, including building social skills, trust and social connection for people with psychosocial disability
- Manages risks and emergencies in a home care setting, including responding to psychosocial crises or episodes of acute distress