

Parliamentary Paper
No. 241/1976

The Parliament of the
Commonwealth of Australia

HOUSE OF REPRESENTATIVES
SELECT COMMITTEE ON
SPECIFIC LEARNING
DIFFICULTIES

Report

Learning difficulties in children and adults

*Brought up and ordered to be
printed 14 October 1976*

The Commonwealth Government Printer
Canberra 1977

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ISBN 0 642 02299 2

Printed by Watson Ferguson & Co., Brisbane

Terms of Reference

The Committee is to:

- (a) inquire into the incidence of all forms of specific learning difficulties among Australian children and adults;
- (b) examine measures that are being taken at the present time to overcome such difficulties;
- (c) report on the success that present measures are having in alleviating specific learning difficulties;
- (d) examine the awareness of specific learning difficulties among the community generally and among the medical, health, teaching and social welfare professions in particular;
- (e) examine the extent to which problems associated with the incidence of specific learning difficulties are being researched in Australia at the present time;
- (f) examine the social, emotional and other handicaps that individuals with specific learning difficulties suffer;
- (g) recommend measures that can be taken to heighten community awareness of specific learning difficulties; and
- (h) recommend action that can be taken by the Federal Government or by the Federal Government in co-operation with State and local governments as well as voluntary organisations to alleviate the difficulties and, in particular, to examine the need for widespread screenings of young children to detect the existence of specific learning symptoms so that adequate remedial programs can be recommended from an early age.

Abbreviations

AACRDE	—Australian Advisory Committee on Research and Development in Education
ABC	—Australian Broadcasting Commission
ABCB	— <i>Australian Broadcasting Control Board</i>
ACER	—Australian Council for Educational Research
ACLD	—Association for Children with Learning Disabilities
ACOTAFE	—Australian Committee on Technical and Further Education
ARGC	—Australian Research Grants Committee
BBC	—British Broadcasting Corporation
ECDS	—Early Childhood Development Study
ERDC	—Education Research and Development Committee
FACTS	—Federation of Australian Commercial Television Stations
NCET	—National Committee on English Teaching
NEAT	—National Employment and Training Scheme
SPELD	—Specific Learning Difficulties Association

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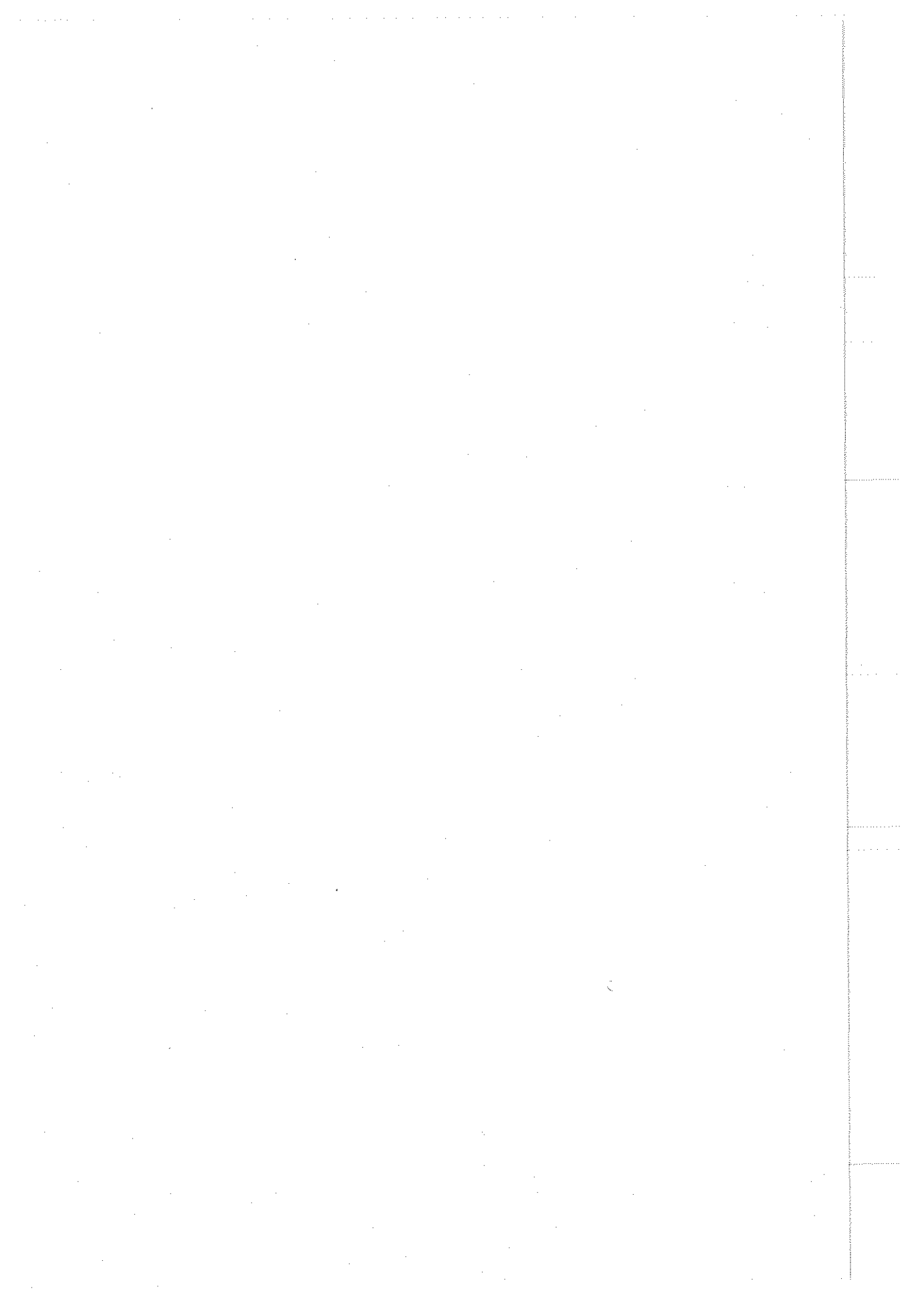
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Foreword

The House of Representatives, on the motion of the then Leader of the Opposition, the Rt Hon. B. M. Snedden, Q.C., M.P., and seconded by the then Prime Minister, the Hon. E. G. Whitlam, Q.C., M.P., appointed the Select Committee on Specific Learning Difficulties on 31 October 1974.

The Committee advertised in national, local and ethnic newspapers to inform the community of the terms of reference and to call on interested persons and parties to make submissions.

In two years the Select Committee received over 400 submissions and took over 4000 pages of evidence. Further information on the Conduct of the Inquiry is at Appendix I.

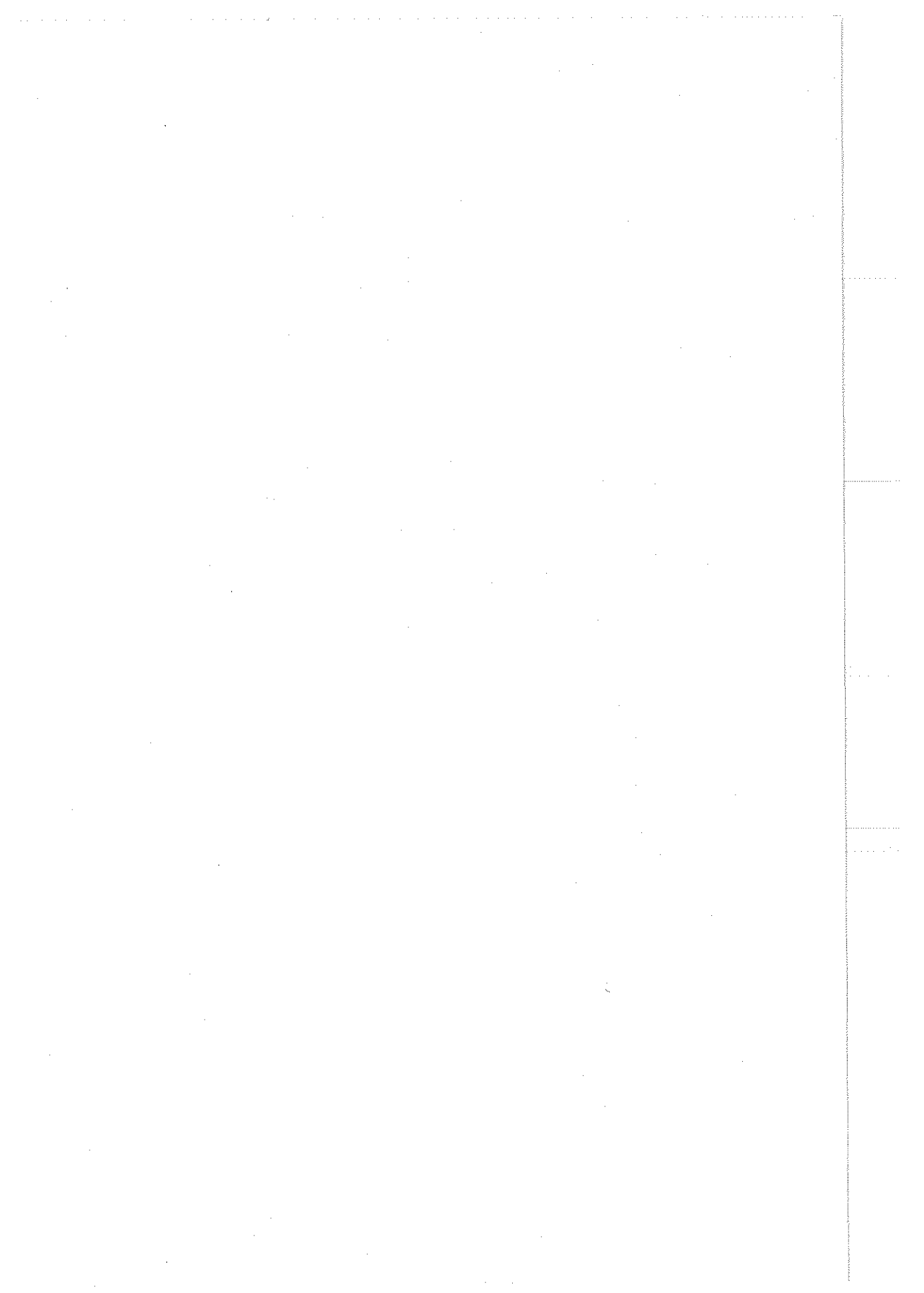
A most striking feature of the Committee's experience was the goodwill and understanding engendered amongst dedicated groups and individuals who often appeared to be working in isolation. They lacked the stimulation of easy communication or contact with like-minded individuals, working in what was thought to be a somewhat narrow field. People engaged in what seemed a lonely battle for the handicapped realised how many others were interested.

The Committee's Report identifies children and adults whose educational attainment causes concern, and makes recommendations for improvements in the delivery of educational services. Some of these recommendations call for priority in the allocation of educational resources in favour of disadvantaged groups.

Equality of achievement, if that were to be the exclusive aim, would allow the individual to call on educational resources irrespective of rate of progress. Such a policy carried to the extreme would consistently divert resources to the poorest achievers. Society accepts an obligation to its weakest members and would not wish them to fall below certain minimums, albeit ill-defined, even though the achievement of these minimums will require greater than equal share of educational resources. It is quite certain that society will also wish to further its own advancement by concentrating resources on a few of its members, particularly at tertiary levels. This aspect of tertiary education is beyond the scope of this Inquiry.

This Inquiry is concerned with the group who do not achieve 'minimum acceptable standards'. It was felt to be undesirable to define these standards with precise measures of literacy and numeracy. However, in general terms, the Committee believes that levels of achievement are acceptable only when they enable the individual to compete in society in such a way that he can, with reasonable effort, obtain for himself reasonable livelihood, dignity, and reasonable social intercourse.

The person who finds difficulty in meeting this level of achievement is entitled to more than equal resources to assist him in meeting these minimum requirements. How much extra effort and investment should be deployed at any one time must be governed by the availability of resources, the extent of the individual's handicap and his chances of success. The reasons for under-achievement in a young child or a person greatly in need cannot set aside his entitlement to extra teaching resources. It should be the aim of our educational system to bring every person to a level where he can be at least a functional member of society. We believe that this objective would be shared by most Australians.



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RECOMMENDATIONS

The Committee recommends that:

Chapter 2

- (a) The incidence of learning difficulties among Australian school children should be determined at regular intervals by a nation-wide survey based on similar principles to the ACER study 'Literacy and Numeracy in Australian Schools'.
- (b) This survey should be developed to include criteria that will measure other competencies shown to be relevant and necessary to enable individuals to be creative and to cope with problems they encounter in everyday life. In the short term the survey should certainly be extended to include mastery of language and oral skills.
- (c) Additional age 'cohorts' should be added to the survey sample as the range of the competencies to be measured is extended.
- (d) This survey should be developed so that it will provide information that can be used by administrators in planning educational services.
- (e) The survey should be developed as a means of evaluating the effectiveness of schooling in Australia so that:
 - the comparative performance of school systems and schools can be assessed;
 - the results from the survey conducted at different times can be compared to establish whether, historically, standards are improving or declining;
 - the comparative performance of Australian schooling with schooling in comparable countries can be determined in relation to basic competencies.
- (f) An organisation, such as ACER, should be funded by the Commonwealth to conduct the survey and that further funds should be provided through ERDC to enable research to aid in the development of the survey techniques.

Chapter 3

- (a) Provisions in the legislation of some States denying the responsibility of education departments to provide educational services to handicapped children be amended, and that education departments provide such services.
- (b) Funding for special education should be undertaken as far as possible through the recurrent grants program. The Committee recognises, in making this recommendation, that:
 - funding for special education will need to continue for those institutions providing services for the very severely handicapped; and
 - special funding will need to continue, at this stage, for some voluntary associations providing for the handicapped and for some State institutions where there are some residential medical or other aspects of care than the purely educational.
- (c) Departments of education make every effort to recruit teachers, preferably from the relevant ethnic groups, who are proficient in minority and migrant languages and place them in those schools having significant numbers of children of the same language group.
- (d) Departments of education responsible for the education of Aboriginal children should give priority to establishing bi-lingual programs to introduce children to literacy through their mother tongues. They should also give priority to programs seeking to involve Aboriginal parents in the education of their children.

Chapter 4

Preparation for Schooling

- (a) Funds be allocated by all levels of government, Federal, State and local, to increase the range of early childhood opportunities, with priority being given to those families in greatest need.
- (b) Grouped services consisting of pre-school, day care centres and health clinics be established in areas where such concentrations provide a needed service. These complexes should be located to be available to those communities shown to be in the greatest need of those services.
- (c) It is essential that those responsible for the administration of health and welfare services and those responsible for pre-school, day care, play groups and family day care should discuss and co-ordinate their activities to ensure that as many children as possible gain full benefit and are assessed at regular intervals so that those at risk can be given constant assistance during the first five years of life.
- (d) Health departments in the States and Territories should investigate the possibility of establishing a system such as in the United Kingdom of health and welfare visitors, in order that parents may be directed to appropriate services where their children are suspected of having medical defects or developmental problems.
- (e) Strategies and projects be devised, aimed at the cognitive development and social adjustment of children likely to be disadvantaged because they belong to cultural and ethnic minorities, or because they are subject to social, cultural or economic deprivation. These projects and strategies should be monitored, evaluated and the results of the evaluation widely disseminated.
- (f) More handicapped and disadvantaged children should be provided with early childhood opportunities. If childhood services are extended at public expense it will be necessary to ensure that the additional places are available to those most in need of them. The right to attend should attach to the child in need. At present some children (e.g. Aboriginals in Western Australia) can have their pre-school fees paid by the State. This procedure where it applies ensures that children who would otherwise be excluded by the necessity to pay fees can attend. It does not always ensure that there is a place for the child, however. Authorities controlling early childhood services should experiment with the issue of entitlements to the parents of needy children so that each of these children can be assured of a place.

Screening, Diagnoses, Assessment and Recording

- (g) Communication and liaison between education, health and welfare authorities in all States must be improved to ensure that schools and teachers obtain information about medical factors likely to affect children's learning, and relevant confidential information about the child's behaviour in schools is received by non-education authorities directly concerned with the child's well-being.
- (h) All education systems should give priority to developing more systematic procedures for the identification, prevention and treatment of learning difficulties.

Supporting Services for the Classroom Teacher

- (i) Supporting services for the classroom teacher, machinery for liaison between institutions which train teachers and those that employ them should be developed and improved to ensure that the supply of teachers will meet the needs of departments in terms of appropriate training and numbers.
- (j) In the long-term, colleges of advanced education and universities should aim to develop the skills of school based teachers so that less emphasis on specially trained remedial teachers will be needed. In the short-term there is a need for departments and training bodies to develop the skills of class teachers through in-service training and development programs.

- (k) Training institutions should endeavour to train more resource or companion teachers to work alongside classroom teachers in the schools to assist those children with learning difficulties.
- (l) Effort should be made to train more speech therapists.

School Organisation

- (m) The trend towards integrating more children with handicaps into regular school and class programs should be preceded by pilot studies. These studies should be designed to provide information as to the effect of the policy on the handicapped children, other children, teachers, parents of handicapped and non-handicapped children.

Chapter 5

- (a) Funds should be made available to the Curriculum Development Centre to enable them to conduct or commission developmental research into material suitable for retarded readers. This should initially be a pilot study with the need for continuing research to be assessed at a later date.

Chapter 6

- (a) Opportunities and facilities for those adults wishing to overcome literacy problems must be more freely available. Those responsible for adult literacy programs should seek out and encourage those who are illiterate to overcome their reticence and participate in remedial programs.
- (b) The TAFE authority in every State should co-ordinate programs designed to alleviate the difficulties of adults with literacy problems.
- (c) The ABC should acquire from the BBC the material used by the BBC in connection with the operation of its adult literacy program, for the purpose of establishing a similar program in Australia.
- (d) Research should be commissioned into the most effective techniques for teaching adults with deficient literacy skills and for the development of suitable material for use in work with such persons.

Chapter 7

- (a) The State departments of education in consultation with teacher organisations examine the implications of further training for the career development of teachers, beginning with an induction program for new teachers.
- (b) Post-graduate courses be established to train specialist staff to service pre-schools and train pre-school teacher educators.
- (c) A series of pilot studies on the establishment of the position of a resource teacher within schools be undertaken.
- (d) The Australian Universities Commission examine the possibility of selected universities being responsible for the training of teacher educators. This is particularly vital in the field of special education.
- (e) The Australian Universities Commission and the Advanced Education Commission investigate the need for rationalising the number of teacher training courses particularly in view of the limited availability of skilled teacher educators.
- (f) State departments of education and teacher training institutions become more involved in decisions about their joint and respective roles in the in-service education of both present and future teachers.
- (g) The Commission on Advanced Education establish, as a matter of priority, a teacher training school within the Community College in Darwin.

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PART I INTRODUCTION

CHAPTER 1

DEFINING THE PROBLEM

1.1 The appointment of this Committee to examine all forms of specific learning difficulties in children and adults arose from concern that, there were within schools a significant group of children who, for a variety of reasons, were failing to acquire competence in reading, writing and numeration; despite 'adequate intelligence'. It is this group of children to whom the classification 'specific learning difficulty' has been attached. Much of the impetus for this concern stems from the belief that opportunities could be improved for these children if they had access to services which would identify, diagnose and remedy the specific cause of their learning difficulty. This implies criticism of the quality of services currently being provided, for it is often claimed that the incidence of children in the schools who could be classified on this basis is as high as 15 to 20 per cent. Another term used to identify this group of children is 'intelligent under-achiever'. Added impetus for the appointment of the Committee was general concern at an apparently high proportion of school leavers who did not appear to have acquired basic skills in reading, writing and numeration after at least ten years of compulsory education in our school systems.

1.2 In the early part of this Inquiry the Committee was much preoccupied with the meaning of the term 'specific learning difficulties'. It released a press statement intended to assist those who wished to contribute to the Inquiry, to prepare their submissions. The statement said:

At its inaugural meeting last week, the Committee agreed that its Inquiry should be concerned with those children who, while having adequate intelligence, fail to achieve literacy in its broadest sense in the present education system. An accepted definition of specific learning difficulties considered by the Committee is 'a disorder of one or more of the basic psychological processes involved in understanding or in using language spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations'.¹

But added that:

The Committee takes the view . . . that its Inquiry also encompasses other specific physical, psychological, emotional, social and environmental difficulties such as poverty, cultural dislocation, unfamiliarity with the English language and inappropriate and inadequate teaching methods.

1.3 The definition included in the press release was chosen because it seemed at the time to reflect an accepted view of what specific learning difficulties were. A broader scope for the Inquiry was, however, indicated to ensure that the Committee obtained the very widest possible range of views on the nature of the problem and its possible solutions.

1.4 In making their submissions many contributors to the Inquiry alluded to the definition advanced by the Committee, or advanced their own definitions. An examination of these contributions is instructive for the light it throws on attitudes to these problems raised by the Inquiry.

Terminology

1.5 A confusing array of different terms, such as dyslexia, dysgraphia and dyscalculia², were presented to the Committee describing various conditions grouped under general headings.

¹ The definition quoted was taken from: *House Reports*, United States Congress, House of Representatives Committee on Education and Labor, Children with Specific Learning Disabilities Act of 1969: Report to accompany HR 13316, 11 Sept. 1969, p. 2.

² See Appendix III for other examples.

1.6 A teacher from Christchurch Grammar School (Western Australia) suggested unification of the terminology:

In discussing the areas of terminology and its use in special education, general education, medical and social welfare and in the community in general, I find myself asking the following questions: What does the term 'learning difficulty' mean? Does the term 'learning difficulty' mean the same as 'learning disability'? How about the term 'dysfunction'? What does the term 'minimal brain dysfunction' mean? Do they all mean the same? Certainly, all these labels are not necessary, or are they? Does labelling a child with learning problems create more problems? It all becomes a bit confusing and I find it more difficult to answer questions from parents and teachers without going into very complex medical jargon. The terminology changes so often, varies from State to State and from country to country.

1.7 In a survey of the literature related to the area of learning difficulties, Mr R. Weiland, Headmaster, Sir James Mitchell School, Western Australia, commented:

Such terms as, specific dyslexia, developmental dyslexia, specific developmental dyslexia, congenital dyslexia, word blindness, specific language disability³, the brain injured and hyperactive child^{4,5}, cerebral dysfunction⁶, minimal cerebral dysfunction⁷, language disabilities⁸, the interjacent child⁹, start to overwhelm. McDonald¹⁰ states that '43 terms had been identified in the current literature, all referring practically to the same group of children'. What McDonald has suggested is to call a halt to the proliferation of medically oriented special education categories.

1.8 Dyslexia is one of the most frequently used terms in submissions to the Inquiry. In the Report of the National Advisory Committee on Dyslexia and Related Reading Disorders (U.S.A.) 1966, it was stated:

Marked differences exist within the scientific and professional community on the meaning of the term 'dyslexia'. Some writers apply the term 'dyslexia' to children who show one or another group of symptoms, but disagree among themselves concerning which symptoms define the 'dyslexic' child. Some maintain that a group of children may be identified who show a characteristic pattern of symptoms (or a 'syndrome') and use the term 'dyslexia' to refer to such a pattern, although there are few research data to support the contention that consistent patterns do occur . . .

By its derivation, the term 'dyslexia' simply means disorder of reading. There has been a widely held view that of the disabled readers there are some with a rather stereotyped group of symptoms whose innate characteristics interfere with learning to read . . .

However, there are many who doubt the existence of such a clear-cut group of disorders, or who question their exclusively constitutional origin, who point to the diversity of symptoms and functional deficits to be observed and to the broad spectrum and range of disorders. To them, it seems inappropriate to select any single subgroup for this specific designation. In view of this wide divergence of opinion the Committee believes that the use of the term 'dyslexia' serves no useful purpose.

3 S. Naidoo, 'Symposium in Reading and Disability, 4, Specific Developmental Dyslexia', *British Journal of Educational Psychology*, Vol. 41, 1, 1971, pp. 19-21.

4 W. M. Cruickshank, F. A. Bentzen, F. H. Ratzburg & M. T. Tannhauser, *A Teaching Method for Brain-injured & Hyperactive Children*, Syracuse, University Press, Syracuse University, 1972.

5 G. Weiss, *et al.*, 'Studies on the Hyperactive Child: Five Year Follow up', *Archives of General Psychiatry*, Vol. 24, 1971, pp. 409-14.

6 L. H. Smith, *The Encyclopedia of Baby and Child Care*, Prentice-Hall Inc., Englewood Cliffs N.J., 1972.

7 S. D. Clements, 'Minimal Brain Dysfunction—The Problem', *Minimal Brain Dysfunction*, National Easter Seal Society for Crippled Children and Adults, Chicago, 1968, pp. 1-12.

8 S. O. Richardson, 'Medical Diagnosis and Evaluation of Language Disabilities', in John V. Irwin & Michael Marge (editors) *Principles of Childhood Language Disabilities*, Appleton-Century-Crofts, 1972, pp. 287-94.

9 E. A. Doll, *Education & the Interjacent Child*, The Vanguard School, 1965.

10 C. W. McDonald, 'Problems Concerning the Classification & Education of Children with Learning Disabilities', in Jerome Helmuth (editor) *Learning Disorders*, Vol. 3, Special Child Publications, 1968, pp. 371-94.

Medical Approaches

1.9 Many submissions assumed that specific learning difficulties meant a relationship between poor school performance and some medical disorder, defect or dysfunction. This is a field of study normally covered by the term 'learning disability' to stress the organic origin of the learning difficulty.

1.10 The Specific Learning Difficulties Association (SPELD) of the A.C.T. stated in relation to definition that:

... it is thought that this disability is associated with a blockage, present since birth, in the connections between certain brain cells.

1.11 Dr Dudley T. Hagger, a witness, who appeared with SPELD (Victoria) submitted:

My own definition of a Specific Learning Difficulty is—an inability to learn with normal ease one or more specific skills, experienced by a child who has adequate intelligence and caused by deviant neurological development.

Other submissions used phrases such as 'perceptually impaired', 'minimal brain dysfunction' or 'minimal cerebral dysfunction' in defining learning difficulties without further clarification.

1.12 Some submissions did not regard the establishment of cause as necessary. The Nursery School Teachers College (N.S.W.) for instance stated:

Any child who shows the behaviour associated with any major pattern of neurological deficit, whether or not a neurological disorder can be demonstrated, will experience difficulty in learning in school.

1.13 Some professional disciplines explained their particular use of terms. The Orthoptic Department, Sydney Eye Hospital, for instance, defined 'visual dyslexia' as 'the incorrect lateralisation in the central binocular field of vision (e.g. crossed dominance—right handed—left eyed)' and stated that 68 per cent of the patients referred to them with learning problems in the last two years were found to have the condition. The Australian Physiotherapy Association explained its use of 'minimal brain dysfunction' as:

... a general diagnostic term applicable to children who, on appropriate examination, reveal in inco-ordination and clumsiness, inability to perform activities with the normal agility expected for their age, and/or neurological signs such as abnormal reflexes and specific sensory and motor response to specific stimulation.

Normal development of postural reflexes and patterns of movement during infancy, provides a basis for normal reception of sensory input, integration, appropriate motor response and normal feedback mechanisms. Any deviation from normal development may therefore influence the child's ability to learn.

Essential to learning experiences, is the maturation of body image, the understanding of the relationship of one's own body to space, and the development of the normal concept of space-time relationships.

1.14 However, the Commonwealth Department of Health in their submission noted difficulties with the minimal brain dysfunction concept:

Since by definition there is no demonstrable damage the preferred term is 'minimal brain dysfunction'. Even this can be criticised as a very loose term. How do we define 'minimal' and how do we define 'dysfunction'? How do we exclude emotional factors? Diagnosis depends on further investigation of the individual. Despite acknowledged problems of definition, the term is useful in practice for describing one common group of cases. The limitations that must be noted are: 1. The term is only descriptive; 2. If the term M.B.D. is used the patient and relatives must be reassured that it does not imply damage. 'Damage' and its connotations of irreversibility can have a disastrous emotional effect, and it is the absence of demonstrable damage that needs to be stressed to all concerned.¹¹

¹¹ Evidence, p. 3666.

1.15 'Hear and Talk', an association of parents in Western Australia for perceptually handicapped children, commented:

... a circular argument develops—'No wonder that child can't read, he's brain-damaged!' when in fact the reason the child was called brain-damaged was that he couldn't read.

1.16 In order to place those submissions proceeding from a medical background in perspective, it is instructive to consider the history of the learning disability movement in the United States of America.

History of the Learning Disability Movement

1.17 In the thirties, special educators became interested in children with severe learning and behaviour problems in whom brain damage was suspected.¹² Then the study of war-injured adults provided an impetus to the study of children with similar behavioural characteristics, such as hyperactivity and communication disorders. Since no actual brain damage could usually be established, terms such as 'minimal cerebral dysfunction' were used to describe children with inadequate learning behaviours.

1.18 The professional interest in learning disabilities which developed within special education was strongly influenced by medically oriented investigators, including physicians, neurologists, ophthalmologists and speech clinicians. One effect of this has been the use of a medical framework which conceptualised learning difficulties as an organic condition within the child, rather than an educational need of the child.

1.19 The Schonell Educational Research Centre noted two disadvantages which resulted from this medical emphasis:

- the focussing of attention upon cause rather than treatment; and
- the examination of the child's problems away from the classroom context by persons who often had only passing familiarity with education.

As a consequence of these problems, parent organisations in the U.S.A., concerned with 'brain-injured' and 'perceptually-handicapped' children, merged in 1963. They accepted the advice of various persons, notably Professor Samuel Kirk, that the term 'learning disabilities' provided a more appropriate focus of attention. The Association for Children with Learning Disabilities (ACLD) was then formed. It has proved to be very active in the U.S.A. in promoting the cause of children now called 'learning disabled'.

1.20 Notwithstanding, they were advised by Professor Kirk:

I have felt for some time that labels we give children are satisfying to us, but of little help to the child himself. We seem to be satisfied if we can give a technical name to a condition. This gives us the satisfaction of closure. We think we know the answer if we can give the child a name or a label—brain injured, schizophrenic, autistic, mentally retarded, aphasic, etc. As indicated before, the term 'brain injured' has little meaning to me from a management or training point of view. It does not tell me whether the child is smart or dull, hyperactive or under-active. It does not give me any clues to management or training. The terms cerebral palsy, brain injured, mentally retarded, aphasic, etc., are actually classification terms. In a sense they are not diagnostic, if by diagnostic we mean an assessment of the child in such a way that leads to some form of treatment, management, or remediation. In addition it is not a basic cause, since the designation of a child as brain injured does not really tell us why the child is brain injured or how he got that way.¹³

1.21 But the formation in the U.S.A. of ACLD did not end rigid categorisation of children with school difficulties. Since funding of programs in the U.S.A. has depended upon a suitable definition for the purpose of state and federal legislation, increasing emphasis has been placed on definitions.

¹² Schonell Educational Research Centre, University of Queensland, evidence, p. 1676.

¹³ S. A. Kirk, 'Behavioural Diagnosis and Remediation of Learning Difficulties', *Proceedings of the Conference on Exploration into the Problems of the Perceptually Handicapped Child*, Chicago, 1963, Perceptually Handicapped Children Inc., pp. 2-3.

1.22 A similar movement developed in Australia with emphasis on identification of 'groups' of children for the purpose of access to special educational facilities. Organisations of parents and persons interested professionally were formed in Australia to press for extension of services and funding for the 'groupings' of children considered to have special needs. Organisations representing the deaf, the blind and the cerebral palsied (spastics) preceded other organisations which emerged as categories of children with special needs proliferated. For instance, the SPELD organisation is a focal point for parents who consider that their children require special assistance but whose children are not in special placement and not receiving special educational services.

Approaches to Defining the Problem

1.23 This has led to a preoccupation with definitions. The attempt to establish a discreet category of specific learning difficulties revealed certain characteristic approaches to defining the problem.

Definition by Exclusion

1.24 Those concerned to establish categories of 'specific learning difficulties' tended to define the term by exclusion as demonstrated by the following quotes from submissions:

... despite conventional instruction, adequate intelligence, and socio-cultural opportunity.

... who have no known primary physical and emotional disabilities contributing to their under-achievement.

... despite normal intelligence, intact senses, conventional teaching, and normal motivations.

... do not include learning problems due primarily to visual, hearing or motor handicaps, to mental retardation, emotional disturbance or to environmental disadvantages.

1.25 The Committee was told by some witnesses that a specific learning difficulty child can be 'pictured' in negatives. Though the child has a learning difficulty it is not due to:

lack of adequate instruction

poor motivation

language difficulties

low intelligence

lack of experience

sensory defects

low 'general ability'

lack of emotional experiences

social deprivation

cultural deprivation

psychiatric disorder

lack of 'conventional' instructions

physical disabilities

absences from school

and so on.

1.26 Dr Desmond L. Gurry, Department of Child Health, University of Western Australia, a paediatrician, said:

Specifically there is no easily identifiable state called 'Specific Learning Disability'; this is a diagnosis validly reached late in the investigation of the individual child with school failure.

1.27 The Australian Psychological Society—Division of Clinical Psychologists, Victorian Section, commented in their submission that 'it is relatively rare to find an instance of learning failure caused by one factor alone. The most common situation is an unlucky interaction of several factors.¹⁴ If this is the case, and it was a point frequently made in evidence, then it is questionable whether particular factors can be excluded with any certainty to establish a particular kind of child. There can be no certainty that the excluded individual's problem was due to the cause which led to his exclusion rather than some 'acceptable' cause. At the same time there can be no certainty that an individual manifesting 'acceptable' symptoms has not been principally affected by one of the 'excluded' factors. Nor does it cover the case of the individual affected by both 'acceptable' and 'excluded' criteria.

Definition by Linked Factors

1.28 Similar difficulties arise from the approach taken in many submissions seeking to establish correlational links for the purpose of bringing particular children within a recognised category. In some instances these correlational factors were treated as causes, although little research evidence for a cause-and-effect relationship was presented. In many instances even evidence for a correlational link was not stated. Many of the correlational factors used by submissions to define and identify the population with learning difficulties are usually grouped as some element of the 'psychological process'.

1.29 The Burwood State College instanced a child being defined as having a 'specific learning difficulty' if he is found to have, for example, a difficulty with such things as: . . . *auditory figure ground; short term memory—visual or auditory; auditory closure—at any level of the linguistic hierarchy; and discrimination, to name but a few. Here the difficulty is specific to one or more of the 'basic psychological processes'.*

The College then went on to comment:

Although this concept of SLD appears to be describing a causative factor for learning difficulty, it may in reality not be the case. There is sufficient documented evidence to suggest the existence of a high correlation between learning difficulties and malfunctioning in one or more of the basic psychological processes; yet there is little evidence to suggest a definitive causal relationship between these factors. There is also considerable debate as to whether or not performance in basic psychological functions can be improved, and to what degree deviance can be attributed to neurological causes.

But, as Dr Gurry observed:

A poor reader may be found to have poor visual perception or left-right appreciation, or motor co-ordination and programs have been built up to correct these defects. (The same defects) can be found, however, in good or excellent readers, so they cannot be causal.

1.30 If single factors, or combinations of symptoms, are used for definitional purposes some conclusive evidence will be needed to support the link and establish that it is either a cause or a contributing cause.

Adequate Intelligence

1.31 Many submissions were content to assume that the mentally retarded child could be readily distinguished from the child with specific learning difficulties so that the mentally retarded were merely excluded without further discussion. Others referred to performance in test scores. Others argued that the mentally retarded could not be excluded because moderate mental retardation could not be distinguished from other handicapping conditions with sufficient certainty.

¹⁴ Evidence, p. 3523.

1.32 It has had to be assumed that those talking of 'normal' or 'average' intelligence were referring to children obtaining an 'Intelligence Quotient' at this level on formal tests of intelligence. This assumption obviously did not hold true in those cases where children were referred to as 'of normal or above intelligence' in spite of 'poor test performance' due to their 'difficulties'. However, it was not made clear how their 'normal' intelligence was determined.

1.33 There is strong support in the submissions both for and against the inclusion of low IQ (or mentally retarded) individuals in any definition of a 'specific learning difficulties' population. A submission that was typical of the view that low IQ should be excluded stated:

... while mental retardation is readily identifiable, the area of specific learning difficulties is so difficult to evaluate ... A specific learning disabled child is very different from the mental retardate since they have basically a normal intelligence with some specifically limited areas of difficulty.

This was contradicted by another witness who stated:

... that this inquiry should be broader based than concerned only with those children who (have) adequate intelligence ... Children with Specific Learning Difficulties fall across the whole range of intelligence quotients. Teachers are concerned that assistance might be given only to those with above average intelligence who are handicapped by Specific Learning Difficulties. Many parents and medical men concerned with this problem blatantly put this theory forward as though there were some special need of children with above average intelligence and Specific Learning Difficulties, or a stigma attached to being saddled with a lower IQ as well as Specific Learning Difficulties.

1.34 Using the criterion of intelligence to differentiate between children for the purposes of special educational provision is questioned. Dr Cliff Judge, a psychiatrist, commented, as did several other submissions:

It is however very difficult, if not absolutely impossible, to differentiate those pupils whose illiteracy is due to improper tuition or disadvantage and those who are actually mildly retarded. This is further complicated by the fact that many mildly retarded and some moderately retarded persons are able to read and write, and can achieve some knowledge of elementary mathematics.¹⁵

He discusses some of the limitations to the IQ approach:

IQ tests are only relatively independent of schooling and cannot measure innate ability.¹⁶ Further there is no such thing as a culture-free intelligence test and a person's performance depends on motivational and situational factors as well as intellectual capacity^{17, 18, 19}.

Rutter and Yule state:

Severe environmental privation (both biological and psychological) can seriously impair intellectual development as represented in the IQ, as well as in other measures ... The IQ reflects a child's genetic endowment, but also it reflects the quality of his nutritional and experiential environment.²⁰

1.35 The use of intelligence as a factor in definition leads into an area of continuing argument. Most submissions discussing intelligence omitted to define one or more aspects. Some spoke of 'average' or 'normal' intelligence without indicating what they

¹⁵ Evidence, p. 3751.

¹⁶ P. E. Vernon, 'Intelligence', *On Intelligence*, (Ed. by Dookrell, W. V.) Methuen, London, 1970.

¹⁷ A. Anastasi, 'Psychological Testing', 3rd Edn. Macmillan, New York, 1968.

¹⁸ G. Tarjan, J. Tizard, M. Rutter, M. Begab *et al*, 'Classification & Mental Retardation; issues arising in the Fifth W. H. O. Seminar on Psychiatric Diagnoses; Classification & Statistics', *Amer. J. Psychiat.* 128, May Suppl., 1972, pp. 34-5.

¹⁹ Evidence, p. 3752.

²⁰ M. Rutter and W. Yule, 'The Concept of Specific Reading Retardation', *Journal of Child Psychology and Psychiatry*, Vol. 16, 1975 (Pergamon), pp. 181-97.

meant. Others indicated that they regarded 'normal' as the score obtained on a standard test. However, the Committee was informed that some children could achieve quite different and contradictory scores on different IQ tests, or on the same test administered at different times. Whether a child with a 'superior' verbal IQ but 'low' general performance IQ is 'average' is open to question; similarly a child with uneven subtest scores ranging well below average to above average (giving an overall low IQ) cannot necessarily be regarded as a child of 'normal' intelligence. This emphasises the difficulty of using terms such as 'normal' or 'average' intelligence as a measure of a person's intellectual capacity. Some submissions that automatically excluded 'retarded' children from their definition indicated that the 'specific learning difficulties' child was of 'normal intelligence' because at least some of his subtest scores were at an average level. The Committee was told that a high percentage of 'retarded' children score in the average range on one or more subtests and that it is not possible to assume that 'mental retardation' is synonymous with a 'flat' test profile. Other submissions saw the specific learning difficulties child as scoring 'low' on IQ tests but having 'normal potential'. Research evidence²¹ that has demonstrated that standard tests cannot predict a child's intrinsic potential, particularly when the distorting factor of earlier specific educational programs intervening in the child's experience, is considered.

A Practical Approach

1.36 The problems caused by attempts to categorise children for special educational purposes led to a movement in education circles to find more practical criteria for determining 'needs'. The Queensland Catholic Education Office submitted that:

The term 'learning disability' should be considered as primarily an education concept and should be focussed on behavioural diagnosis and remediation rather than biological aetiological terms.

1.37 Those who adopt a practical approach in managing learning difficulties in the classroom are concerned about labelling and categorisation. In relation to labelling and categorisation Dr J. Gardner, a psychologist at the University of Queensland, commented:

It is thought necessary to label a child in many parts of Australia today to ensure adequate education. Such labelling is done with the best intentions of helping the child and is necessary if the child is to gain access to special services . . . such labelling can be viewed as a necessary evil of the current practice and policy in many Australian states.

Referring to some of the deleterious effects of labelling, he commented:

The sociologist Merton has referred to the effects of a 'self-fulfilling prophecy' in describing what happens to a person whom others expect to behave in a certain way, and who then lives up to the stereotype.

1.38 Many submissions referred to research into teachers' expectations when teachers are given certain information about their pupils. Some results obtained indicate that different teacher expectations may influence estimates of pupil performance as well as teacher behaviour towards pupils. These estimates may affect actual pupil achievement.²² This unfortunate finding is not limited to the school situation. Rather, it can be all pervasive and extend into all aspects of life. Jaffe²³, for

21 M. Rutter and W. Yule, pp. 181-97.

22 W. V. Beez, 'Influence of biased psychological reports on teacher behavior and pupil performance', *Proceedings of the 76th Annual Convention of the American Psychological Association*, 1968, 3, pp. 605-6.

D. H. Meichenbaum, K. S. Bowers, and R. R. Ross, 'A behavioral analysis of teacher expectancy effect', *Journal of Personality and Social Psychology*, 1969, 13, pp. 306-550.

M. S. Haskett, 'An investigation of the relationship between teacher expectancy and pupil achievement in the special education class', *Dissertation Abstracts*, 1969, 29, pp. 4348-9.

23 J. Jaffe, 'Attitudes of adolescents toward the mentally retarded', *American Journal of Mental Deficiency*, 1966, 70, pp. 907-12.

example, reported that the label 'mentally retarded' can influence the perceptions of others concerning the individual who has thus been labelled.

1.39 Labelling is sometimes necessary and valuable. This will be so where a disability can be identified with precision resulting in appropriate medical and educational intervention. This is the case with such recognised categories of disability and handicaps as deafness, blindness and severe motor disorders such as cerebral palsy. But merely to say a child suffers minimal brain dysfunction will not indicate to teachers or doctors what remedial action should occur. It characterises the child and may lead to negative expectations on the part of parents, teachers and the child himself. This can sometimes result in the teacher merely doing less for the child resulting in the child learning less.

1.40 This has led to the conclusion stated in evidence by the Schonell Educational Research Centre, University of Queensland:

Rather than attempt to devise a definition of specific learning disabilities for Australian needs, and so permit a discussion of the terms of reference of the present Inquiry using a categorical approach, it is submitted that it is more valid and useful to discuss the broadly conceived problem of learning difficulties in children. The reasons for preferring such an approach are:

- (a) *educational procedures to assist children experiencing difficulties with school learning have little dependence upon aetiology per se and should be organised according to educational needs rather than the diagnosed labelling of children;*
- (b) *the search to date for a suitable narrow definition of specific learning disabilities has not been fruitful. In practice it is difficult to decide whether a child's problems relate to intrinsic deficits, instructional inadequacies, or a lack of match between the child and the instruction he has received. In other words, the hypothesis of 'dyspedagogia' as a cause of failure to learn is usually as tenable as that of 'dyslexia', 'minimal brain dysfunction', or other such terms;*
- (c) *in general, the problem of inadequate school learning performance ought to be regarded as indicating an inadequacy and inefficiency of schooling to meet the needs of individual children;*
- (d) *if the Committee confines its Inquiry to issues based on a categorical or narrow definition of specific learning disabilities, it could tend to further perpetuate the use of categories at a time when educational practice seeks to concentrate on the differing educational needs of children, rather than on the assumed characteristics of arbitrary groups.²⁴*

1.41 This is not to underestimate the importance of definitions:

At the present time some rather complex and confusing relationships exist among definition, incidence, identification procedures and test constituents employed. Incidence is clearly a function of definition; operational definitions are sometimes functions of identification procedures; the identification procedures may be related to the availability and characteristics of tests; and the development of tests is partially a function of definition in use (Report of U.S. Department of H.E.W.—Educational Identification, Assessment and Evaluation Procedures II—p. 15).

The Report went on to recommend that continuing efforts be directed towards clarification of definition, knowledge of incidence, capacity for identification and the perception of relationships between factors of disability.

1.42 There is evidence that, however the particular learning disability of an individual may be detected and defined, it is to the education system that the individual, his parents and professional advisers look to provide a solution to his 'learning difficulties'. To that extent the Inquiry is an inquiry into the capacity of the

²⁴ Evidence, p. 1677.

education system to cope with learning difficulties. The terms of reference ask the Committee to examine measures that are being taken at present and report on the success of those measures to overcome specific learning difficulties.

Conclusions

1.43 The Committee reached the following conclusions, that:

- (a) Educational definitions in the field of learning difficulties have been characterised by rapid change in fashion, and further change seems inevitable.
- (b) It is evident that the only definitions about which there is current general agreement are those in terms of the observed learning deficiency itself.
- (c) However we choose to define learning difficulties, many children have needs in learning which are not being met at present and which should be met fully in the future.
- (d) Solutions to the problems of children experiencing difficulties in learning should not be impeded by competing definitions of learning difficulties, and may well be facilitated by focussing on the child in his total learning environment.
- (e) Classification of children to determine their access to special educational facilities is an approach in conflict with trends in modern educational thought and practice. Experience from overseas (particularly from North America) indicates some dangers inherent in categorisation, whether for the purposes of placement, funding, or as a guide to the development of future services. As the proliferation of categories classifying children requiring special education occurs, more of the resources available to education are attracted away from general education. This leads to pressures for special services and new claims and, therefore, additional categories.²⁵ Each sub-group argues, in isolation, for programs, placement opportunities and funding, without reference to the multitude of other problems of children with learning difficulties.
- (f) It is questionable whether placement, treatment and funding for children with special needs are really dependent on a definition, particularly as no generally acceptable definition exists. In this Inquiry it was difficult to decide which came first—the bias of the definition deciding the choice of treatment, or the treatment skills of the professional person concerned deciding the definitional bias. There has been a lack of reliable evidence that justifiably ties a particular treatment to a particular group, or conclusively determines the validity of placement of children in one classification category. In the U.S.A. funds for educational programs are frequently directed to particular areas of need by legislation in which the recipient groups are tightly defined. Definition is essential for the purposes of the legislation. This has resulted in a tendency to categorisation because of the need to conform to the requirements of the funding system. This is not a major feature of the procedure whereby educational programs are funded in Australia. However, categories will in fact be the most effective way of identifying some needs in some cases, and an example would be funding for isolated children.
- (g) An approach according to which children are not 'classified' or 'labelled' but grouped for the purposes of most effective teaching in the area of their learning difficulties, once identified, is beginning to gain acceptance. This approach is now favoured by departments of education, and was supported by most of the colleges of advanced education and universities which made submissions to the Inquiry. The Committee considers that departments of education, universities and colleges of advanced education do not necessarily sustain the argument by their own practice. But this does not affect the validity of the policy.

²⁵ Some of the factors and conditions associated with learning difficulties mentioned to the Committee are set out in Appendix III. The list is extensive.

- (h) It should use the term 'learning difficulties' rather than 'specific learning difficulties' in this Report when discussing the general problem posed for the Committee. The aim of most definitions is to specify a particular sub-group in need of special educational services. The process of definition, therefore, tends to exclude other groups from consideration. For the purposes of assisting the children or adults with learning problems it is necessary to identify each individual's problem and to treat it.

CHAPTER 2

OCCURRENCE OF LEARNING DIFFICULTIES

2.1 The terms of reference direct the Committee to establish the incidence of all forms of specific learning difficulties in children and adults. Submissions made to the Inquiry frequently ventured estimates of incidence.¹ Reference was constantly made to the need for better information as to the occurrence of learning difficulties overall and to the incidence of a wide range of particular disorders.

2.2 One-third of the submissions sought to give figures on incidence. Of those not giving figures some said they were unable to do so because of lack of access to relevant data or stated that insufficient research had been carried out or published. Lack of certainty as to what constituted 'specific learning difficulties' was mentioned by others as a problem in determining incidence.

2.3 The incidence figures quoted ranged from guesses or estimates, where no specific research evidence was cited, to reports of detailed surveys and studies. Figures ranged from 0.02 per cent to 50 per cent indicating the confusion as to what constitutes a specific learning difficulty.

2.4 A number of submissions, particularly those from academic institutions and departments of education, pointed to the difficulty of estimating incidence for a problem not precisely defined and noted that estimates would vary considerably depending on how broadly or narrowly the problem was defined. Those giving high figures usually gave definitions that included a greater number of handicaps or included a wider range of handicaps when measuring incidence.

2.5 SPELD defines a 'specific learning difficulty' by excluding many recognised causes of learning difficulties. When reporting incidence, however, it tended to give examples which must include people excluded from its own definition, viz.:

Children who have a disability of obscure cause producing an inability to learn to read without proper facility, or who show poor achievement in spelling or mathematics or areas of language, or combinations of these areas, despite normal intelligence, intact senses, conventional teaching and normal motivation.

But in quoting incidence figures reports:

In 1968, 14.6 per cent of 31 000 children in Victoria when entering a secondary school were reading at Grade 3 level or lower, i.e. they were functionally illiterate.

Much reliance was placed on studies undertaken overseas. These were sometimes quoted as evidence, accompanied by arguments that the estimates would apply in Australia. No convincing evidence to support this assertion was, however, provided.

2.6 Those submissions that related the incidence figure quoted to a narrow group of disorders, produced much lower estimates:

Reports of the frequency of these conditions (dyslexia, dysgraphia, dyscalculia, verbal dysphasia, etc.) vary widely from 3 per cent to 25 per cent in a child population. The more conservative estimate is more likely to be correct, if the diagnoses have been precise. The less conservative estimate has been swollen by inclusion of children who are afflicted with minor handicaps of physical, mental, emotional or social origin, which themselves will impair a child's ability to learn and take advantage of educational opportunities. This

¹ It should be noted that social scientists draw distinctions between incidence and prevalence but there is not full agreement on what the distinction is. One distinction uses 'prevalence' to refer to the total number of active cases in the population during some specified time; and 'incidence' to refer to the occurrence of new cases during some specified time. No submission used 'incidence' in this sense. The other distinction is where 'incidence' refers to a measure of mathematical ratio of occurrence, e.g. 3.5 per cent of the population, and 'prevalence' is the broad measure of occurrence, e.g. nearly a third of the population. Most evidence citing figures fell into one of these last two categories although in some cases it was not clear which one. Because distinctions between incidence and prevalence were not made in the submissions, and because of the conclusions reached about the occurrence figures received, the Committee has simply used the one word 'incidence' to refer to the percentage of the population experiencing learning difficulties, whether it be a precise measurement or a broad estimate.

*latter group is more widespread in the community.*²

Virtually all of the submissions quoting figures gave them only for children. Very few gave figures for the population as a whole.

2.7 Some submissions gave figures comparing the sexes and indicated that approximately four times as many boys experienced learning difficulties as did girls. A difference between the sexes is supported by studies in Australia and other English speaking countries where girls surpass boys on verbal and writing skills.³ The findings on sex differences in performance on numeracy tasks is equivocal.

2.8 The majority of submissions, which gave incidence figures for particular learning difficulties, dealt with reading, spelling and writing rather than other skills, such as numeracy, spatial concepts or motor co-ordination. The few that gave incidence figures for numeracy difficulties generally gave figures for reading difficulties as well and indicated that the problem of numeracy was of a similar magnitude to that of reading.

2.9 Emphasis was given to reading and writing by those quoting incidence and a paucity of figures on numeracy was produced. Most of the incidence figures given were in terms of reading difficulty or retardation and in several submissions 'specific learning difficulties' were equated with reading difficulties.

2.10 Only six submissions included oral language difficulties when providing incidence figures. This is surprising given the emphasis on reading difficulties in the submissions, the relationship between reading skills and language skills, and the dependence of the whole process of classroom instruction on language.

2.11 Very few of those submissions mentioning that children experience difficulties with varying degrees of severity gave a breakdown in terms of the degree of handicap. None discussed the effect on incidence that variations in the severity of condition over time would have. Some submissions recognised that many children had deficiencies in more than one area of skill.

2.12 Almost half of the incidence figures quoted were from studies which were not widely known and whose reliability could not be easily verified. The Geelong Regional Association for Better Reading made a disquieting report:

Out of 500 applications for apprenticeships in the manufacturing industry (mostly Form 4 pupils), 150 (30 per cent) were rejected on grounds that the applicant had not reached a high enough standard in written English.

The Committee could not assess what was regarded as 'a high enough standard'. Another third of the figures were quoted from published surveys and studies, which were about evenly divided in origin between Australia and overseas. The remainder gave no evidence for their figures.

2.13 Nearly all submissions estimating incidence perceived learning difficulties as emanating from within the child; the child himself as having some neurological, sensory, behavioural, maturational or other learning difficulty preventing him from realising his potential in the normal classroom. However, others expressed the opinion that inadequacies in the teaching of children was the main difficulty faced by children with reading and numeracy deficiencies. Many of the submissions not giving incidence also made this claim.

Normative Data

2.14 Normative tests are widely used as a measure of cognitive ability. In establishing

² Professor W. B. MacDonald, Professor of Child Health, University of Western Australia, evidence, p. 2427.

³ However, studies in Germany, India and Nigeria indicate that boys there do better than girls in reading and it would appear the differences are culturally based. J. Downing, *Comparative Reading* (MacMillan 1973). The differences between the sexes found by the ACER survey were insufficient to account for the markedly higher proportion of boys referred with reading difficulties.

the basis on which normative tests are built large numbers of students are given the test and averages for the school grade or chronological age group are derived. Cut off points are then chosen for each age or grade. Children subsequently tested using this standardised test are measured in terms of their deviation from the norm for their age or grade. Virtually all of the evidence quoted in the support of incidence figures was based on normative tests.

2.15 Normative data does not clearly indicate whether a learning problem exists or not as it does not indicate at what rate a student continues to learn. For instance, an eight year old, two years retarded in reading, but who is continuing to learn at a steady rate may be making better progress than an eight year old, one year retarded in reading, whose progress has halted because he has come to dislike reading, the teacher or the school.

2.16 Age or grade equivalent scores are derived from raw scores in a quite arbitrary way. From the same raw score a child might have several different reading ages depending on how the reading age cut-off points were derived from the normative population figures.⁴ Two students with the same reading age on a normative test may have quite different skills and quite different deficiencies.

2.17 The researcher, Cronbach, comments on equivalent scores:

*In the writer's opinion, grade conversions should never be used in reporting on a pupil or a class, or in research. Standard scores or percentiles or raw scores serve better. Age conversions are also likely to be misinterpreted. A six-year-old with mental age nine cannot pass the tests a twelve-year-old with mental age nine passes; the two simply passed about the same fraction of the test tasks. On the whole, however, age equivalents cause less trouble than grade equivalents, if only because the former are not used for policy decisions in education.*⁵

2.18 The common practice of quoting the percentage of children 'x' years retarded in reading as an incidence figure for reading or learning difficulties was questioned by the South Australian Department of Education. They pointed out that from normally distributed reading ages they would expect 30 per cent of students entering high school to be one year or more retarded in reading. The truism that half a given population are above average and half below average is often overlooked in interpretations of normative data. The Tasmanian College of Advanced Education made the only submission to give figures for those reading in advance of their chronological age as well as those retarded. They indicated that 24 per cent of boys and 12 per cent of girls were one year or more retarded in their reading while 24 per cent of boys and 29 per cent of girls were one year or more advanced for their age in reading.

2.19 As there was no set of commonly accepted definitions on which incidence could be estimated the figures given were not comparable. Varying incidence figures were given often for different definitional groups in different populations measured on different tests. Consequently, the Committee was unable to reliably determine the incidence of learning difficulties in the Australian population on the basis of information received in submissions.

2.20 It concluded that incidence figures based on functional definitions were required. The assistance of the Australian Advisory Committee on Research and Development in Education (AACRDE, now the Education Research and Development Committee, ERDC) was sought to commission a survey of literacy and numeracy in school children throughout Australia. A survey was consequently undertaken by the Australian Council for Educational Research (ACER) entitled 'Literacy and Numeracy in Australian Schools'. The study will be completed by the end of 1976. An interim report was published in mid-1976.

4 'How Effective is Schooling', Rand Corporation, 1971, pp. 20-1.

5 L. J. Cronbach, *Essentials of Psychological Testing*, Harper and Row, New York, 1970.

Criterion Referenced Data

2.21 The ACER survey sought what are called criterion referenced data which are data that identify specific tasks that are to be attempted by the pupil. Criterion referenced data are interpreted in relation to the significance of the task rather than to a distribution of performance of comparable individuals. Each item on a criterion referenced test is designed to measure or indicate the accomplishment of a particular skill. The number of items passed is not the important factor, but rather which items are passed. If criterion referenced tests are used in the classroom, they provide a measure of whether a student has mastered a task sufficiently well to proceed to the next stage.

2.22 If used for survey purposes, criterion referenced tests indicate what skills have been acquired and what skills are deficient. Such a survey is not surveying for a particular sort of child, as a child may have several difficulties at different times. The survey assesses the particular kinds of needs that children have. It will indicate a number of needs which children have and these data can then be viewed against other data such as where these children live, e.g. how many 14 year old children living in cities cannot tell the time correctly from a clock face.

The ACER Survey

2.23 The ACER study was designed to ascertain the incidence of learning difficulties using a criterion referenced approach and focusing on difficulties in acquiring reading, writing and number skills. The survey covered government, independent and Catholic schools in all States and Territories of the Commonwealth.

2.24 Accurate information on the levels of literacy of the whole Australian population would be very difficult to obtain. Problems that arise in determining the incidence of illiteracy among adults are discussed in Chapter 6. Fourteen year old students were surveyed by ACER as this is the last year that all students are still at school.⁶ ACER suggested that students who are functionally illiterate after nine years of obligatory education are unlikely to acquire these skills after leaving school. While the estimates for 14 year olds provided by the ACER survey cannot be taken as incidence figures for the adult population they indicate the numbers currently contributed annually by school leavers to the total adult illiteracy figures.

2.25 A normative definition of literacy is often stated as the level of achievement reached by the average child at the beginning of the fourth year of schooling. Such a definition however does not provide unequivocal evidence of whether or not a person can fulfil tasks associated with reading and writing which might be required of him in modern life in a changing society. ACER was guided in defining literacy on a functional basis by the UNESCO 'World Campaign for Universal Literacy' definition: *A person is literate when he has acquired the essential knowledge and skills which enable him to engage in all those activities in which literacy is required for effective functioning in his group and community, and whose attainments in reading, writing and arithmetic make it possible for him to continue to use these skills towards his own and the community's development and for active participation in the life of his country.*⁷

It was regarded as important that the criteria of literacy used in the survey be seen by both the general public and interest groups within the community as being consistent with current usage of the term 'literacy'.

6 Fifteen years is the earliest minimum age at which a student can leave school in Australia. There is some variation in this minimum age between States but 15 years is the earliest.

7 The document 'World Campaign for Universal Literacy' was submitted by UNESCO in response to a request of the United Nations General Assembly at its Sixteenth Session May 1963.

2.26 The aims of the survey were:

- To identify specific tasks and competencies associated with the basic skills of literacy and numeracy which children are expected to possess to enable them to participate successfully in the work of the school and to live and work effectively in Australian society;
- To prepare appropriate performance tests to measure levels of competence in the basic skills of reading, writing and numeration;
- To estimate, with a high level of accuracy for Australia as a whole and for each State in particular, the number of children who are failing to attain basic skills of literacy and numeracy as assessed by the tests of reading, writing and numeration;
- To specify relationships between various other factors (age, grade, type of community, specific learning difficulties, ethnic origin, language of home, socio-educational level and sex) and the attainment of specific levels of competence in the basic skills of reading, writing and numeration.⁸

2.27 The survey did not attempt to assess the practices of the schools which influence educational outcomes.

2.28 In looking at relationships between specific learning difficulties and attainment of basic literacy and numeracy skills, the survey recorded the occurrence of such problems as perceived by teachers of the students in the sample, not the incidence of learning difficulties in schools.

2.29 The test was administered to almost 7000 children at each of two age levels:

- The 10:00 to 10:11 year old group are at the middle primary school level where the basic skills of literacy and numeracy which influence to a major extent all further learning should have been acquired; and
- The 14:00 to 14:11 year old group are at the middle secondary school stage at a level immediately prior to the end of the period of compulsory schooling where *all* students are still at school.⁹

2.30 The survey was designed so that the sample accurately represented the mix of government, Catholic and independent schools in metropolitan and non-metropolitan areas. The samples which were of equal size from the States were then weighted to give a true national figure.

Results of the ACER Survey

2.31 Information was gathered in two ways:

- By group tests of reading, writing and number; and
- By questionnaires completed by each child and for each of the children by their teacher(s).

(i) *Performance on Achievement Tests*

(a) *Reading*

2.32 Performance on a variety of reading tasks showed considerable variability. A very minimal task such as reading simple sentences and selecting an appropriate picture was mastered by 97 per cent of 10 year olds and 99 per cent of 14 year olds. The numbers of students throughout Australia who fail to reach this standard are thus estimated from the survey to be 7500 at 10 years and 2000 at 14 years. In terms relevant to the schoolroom, the survey indicates that one child per classroom of 10 year olds is virtually unable to read and one child in every three or four classrooms of 14 year olds is still unable to read in any independent manner. On more difficult reading tasks, involving comprehension of prose material as found in school texts, at least one-

⁸ *Literacy and Numeracy in Australian Schools—A First Report*, Keesee and Bourke, 1976.

⁹ Legally all children should still be at school but there are some minor exceptions.

quarter of the children were unable to give correct answers to comprehension questions. It is more difficult to interpret this result in a criterion referenced manner.

2.33 Since the same reading comprehension tasks have been used in other countries, comparisons have been made which indicate that the level of performance of both groups is roughly comparable with that of similar age children in the United Kingdom, U.S.A. and New Zealand.

2.34 The survey set tasks associated with reading a newspaper and the performance was again variable. Most students appeared likely to gain some information from newspaper reading but 25–30 per cent revealed significant gaps in performance on particular tasks.

(b) Writing

2.35 Performance on a range of writing tasks was also variable. The task of completing a simple form was reasonably well executed. ACER reported that it considered it doubtful whether such high performance would have been maintained on forms (tax returns, claim forms, application forms) actually required in Australian society. Perhaps this observation says more about the obscure design of forms in common use than about the defective skills of students.

2.36 Very low performance levels in formal writing caused greatest concern. The study reported that only 50 per cent of 14 year olds were able to write an adequate letter applying for a job. A reasonable interpretation is that students have not been taught such writing skills. The 10 year old sample showed very low performance on a transcription passage of 49 words. Only 18 per cent were able to perform without errors in spelling, punctuation and capitalisation or alterations to the text.

(c) Number Work

2.37 The most disturbing finding was that 4 per cent of 14 year olds did not subtract 9 from 17 correctly, 4 per cent did not multiply 7 by 6 correctly and 8 per cent did not divide 56 by 7 correctly. While it might be that not all 10 year olds should be expected to know their number facts, 14 year olds certainly should. An estimated 10 000 students will leave school each year without simple multiplication and subtraction skills and 20 000 without simple division skills. Achievement on more complex number operations was even lower. Australian 14 year olds performed no better than 13 year olds in the U.S.A. This is shown in Table 1.

Table 1 Performance on Use of the Four Operations by Students in Australia and the United States

	% Correct				
	9-Year-Old United States ^(a)	10-Year-Old Australia	13-Year-Old United States	14-Year-Old Australia	
Item 15 ^(b)	38 + 19	79	83	94	94
Item 16	36 - 19	55	74	89	90
Item 17	38 × 9	25	55	83	80
Item 18	125 ÷ 5	15	65	89	90

(a) The USA results were obtained from the *NAEP Newsletter*, Vol. 8, No. 1, January-February 1975.

(b) NAEP Mathematics Tests presented the items in tabular format, e.g. the division item was presented thus: $5 \overline{)125}$.

Source: *Literacy and Numeracy in Australian Schools—A First Report*, Keeves and Bourke, 1976.

2.38 Although most 10-year-old students could calculate simple exercises involving money accurately, many did not know their number facts and could not calculate correctly using the four formal operations. This would seem to indicate that what they learnt outside the school was more effectively mastered than what they learnt within. But the consequences of inadequate mastery of school learning were apparent at the 14-year-old level where substantial numbers (23–36 per cent) of students were unable to perform slightly more complex calculations involving money with success.

(ii) *Teacher Questionnaire*

2.39 Information from a teacher questionnaire was obtained on grade placement, student's racial origin, physical handicap, social behaviour in the classroom and presence of learning difficulties.

2.40 As secondary teachers take many different class groups there were limitations to the information they could supply about students. Consequently for 14 year olds, somewhat higher proportions of missing data occurred than with the test data. Estimates of problems are thus likely to underestimate, since missing data was interpreted as equivalent to 'no problem'.

(a) *Learning Problems*

2.41 Fifteen to 20 per cent of students in normal schooling were seen by their teachers at both 10 and 14 year old levels to be in need of remedial instruction in reading and number. The data indicating this is recorded in Table 2.

Table 2 Provision of Remedial Instruction for Students in Number Work and Reading at Ages 10 and 14 Years

<i>Provision of Remedial Instruction and Need (%)</i>	<i>10-Year-Olds</i>		<i>14-Year-Olds</i>	
	<i>Number</i>	<i>Reading</i>	<i>Number</i>	<i>Reading</i>
<i>Needs and has received</i>	8.4	12.6	3.5	6.8
<i>Needs and has not received</i>	11.8	7.2	11.5	8.5
<i>Does not need</i>	76.5	77.2	76.3	76.6
<i>Missing data</i>	3.3	3.0	8.7	8.1
Total (N₁₀ = 6628; N₁₄ = 6247)	100.0	100.0	100.0	100.0

Source: Literacy and Numeracy in Australian Schools—A First Report, Keesee and Bourke, 1976.

2.42 These estimates are far in excess of the likely level of education systems' present capabilities of supplying remedial attention on an individual or small group basis. The model of remedial assistance which has commonly operated in the past demands that a substantial proportion of the teaching force be trained as remedial specialists with enormous consequent resource implications.¹⁰

2.43 There is a need for information from the survey as to the percentage of Australian 10 and 14 year olds receiving remedial assistance within each of the school systems. Information is also required concerning the kind of remedial services being provided. This information should indicate whether itinerant teachers, resource teachers based within schools and remedial teachers operating from a guidance branch are used and the extent to which remedial instruction takes place in the child's regular classroom, a special class within the school or at some outside location. It would also

¹⁰ J. Anderson, 'The Role of the Remedial Teacher in Developing Literacy in the Community', Australian Remedial Education Association, Melbourne, 1975.

be helpful to know the kind of criteria used by teachers in determining that a child needed remedial help. The high proportion of children reported to be in need of remedial help could indicate that teachers feel inadequate. Alternatively it could imply a higher expectation of students' performance than the minimum standard set in the survey.

2.44 The teacher questionnaire indicated that approximately 4 per cent of students are seriously disadvantaged in that they do not understand English sufficiently well to cope with normal classroom lessons. The percentage of children who failed in most tasks in the performance tests was usually much higher. Difficulty in understanding English is not therefore a sufficient explanation for these higher figures. This would appear to require some interpretation.

2.45 The interim analyses of the ACER survey do not allow test performance and teacher questionnaire data to be compared. It is hoped that ACER will indicate whether children considered by teachers to have difficulties (see Table 3) actually exhibited such difficulties on the test items.

Table 3 Difficulty with Simple Reading and Writing Tasks for Students Aged 10 and 14 Years Old

<i>Task—% with Difficulty</i>	<i>10-Year-Olds</i>	<i>14-Year-Olds</i>
Has difficulty in using a pen or pencil for writing	7.2	2.2
Has difficulty following verbal instructions	8.7	6.7
Has difficulty copying written work accurately	11.3	8.4
Has difficulty in spelling simple words	16.5	12.0
Has difficulty with reversals in reading ¹¹	6.9	3.8

Source: Literacy and Numeracy in Australian Schools—A First Report, Keeses and Bourke, 1976.

(b) Sensory Handicaps

2.46 The teacher questionnaire indicated 1.7 per cent of 10 year olds and 1.2 per cent of 14 year olds not wearing glasses as suspected or known to have defective vision. Those suspected or known to have hearing defects not wearing hearing aids comprised 1.3 per cent in each of the age groups. These 'defects' are only based on teachers' observations and not verified by medical evidence. ACER was sufficiently concerned, however, to query whether school medical services were adequately provided with staff and facilities.

(c) Other Data

2.47 ACER has yet to analyse data concerning left or right handedness, speech, grade level, racial origin and estimates of students reported as having one or more disabilities. A more detailed study of the data on school attendance would appear to be needed. Data were also supplied by the survey on social acceptance by peers, personal behaviour, physical handicaps and the child's activity level in the classroom. These data will be dealt with by ACER in its final Report on the survey.

Children in Special Classes and Special Schools

2.48 Children attending special schools were not included in the sample. As these students were of particular interest to the Committee further information was sought. A paper was subsequently prepared by ACER on those students omitted from the survey.

¹¹ These children read 'dog' as 'god' and vice versa.

2.49 The tests used in the survey were designed to be administered to groups of students rather than to individuals. This made the tests unsuitable for use with students in schools for handicapped children who would have needed to be tested individually for an accurate assessment of their performance to be made.¹² For a complete picture of student performance across Australia to be presented, it is necessary to estimate as accurately as possible the number of students excluded from the survey because they were in special schools and to estimate the proportion of those retarded in learning.

2.50 It was requested that students in special classes within normal schools be listed for sampling within the schools surveyed in the study. It was also expected that if a child was in a special class this would be mentioned in the teacher questionnaire. In the secondary grade or grade equivalent no children were identified by teachers as being in a special class. Subsequent investigation in N.S.W. and Western Australia indicated that between half and two-thirds of those expected to be sampled from special classes had in fact been tested. Although schools were asked to include all students of a given age, it appeared that some children from special classes were excluded from the sample by some schools.

2.51 In respect of those students not tested an attempt was made to estimate the percentage with learning problems for each of the age levels. Table 4 contains this analysis.

Table 4 Estimates of Students in Special Schools and Classes and Percentages of Age Cohort Excluded

	<i>Special Schools and Classes</i>	<i>Number of Students in Age Cohort</i>	<i>Estimated Proportion in</i>		<i>% of Age Estimated^(b) Cohort Numbers in Excluded Age Cohort Group in Excluded Group</i>	
			<i>Special Schools</i>	<i>Special Classes</i>		
<i>10-Year-Olds</i>						
New South Wales	1 564	82 056	0.3	0.7	1.2	1 020
Victoria	393	67 332	1.0	0	0.6	390
Queensland ^(a)	438	37 089	0.9	0.1	1.2	440
South Australia	322	22 946	0.6	0.4	1.1	250
Western Australia	287	21 363	0.4	0.6	0.9	200
Tasmania	121	7 545	0.8	0.2	1.4	110
A.C.T.	31	3 769	0.5	0.5	0.6	20
Northern Territory ^(a)	198	1 717	1.0	0	11.5	200
Australia	3 344	243 817			1.1	2 630
<i>14-Year-Olds</i>						
New South Wales	1 185	87 416	0.5	0.5	1.0	910
Victoria	471	68 749	1.0	0	0.7	470
Queensland ^(a)	517	38 970	0.9	0.1	1.3	520
South Australia	377	24 469	0.6	0.4	1.2	290
Western Australia	273	22 354	0.4	0.6	0.8	190
Tasmania	57	8 587	0.8	0.2	0.6	50
A.C.T.	28	3 472	0.5	0.5	0.6	20
Northern Territory ^(a)	153	1 312	1.0	0	11.7	150
Australia	3 061	255 329			1.0	2 600

(a) Classified as ungraded presumed in special schools and classes.

(b) All estimated numbers rounded to nearest 10 students.

Source: 'Children in Special Schools', a draft chapter for *Australian Studies in School Performance*, Vol. 3, Bourke and Keeves (in press).

2.52 From the evidence presented in Table 4 it would appear that the upper limit to the estimated number excluded would be slightly more than one per cent or 2630 students at the 10 year old level and one per cent or 2600 students at the 14 year old level. However, not all children in special schools are retarded in their learning. The percentage of these children who could cope adequately with the questionnaire and tests could not be determined with great accuracy but was expected to be small. Consequently, it was estimated that in round figures approximately one per cent of the age levels or 2500 students at each age level tested were likely to have serious problems with learning.

2.53 This number is additional to those whose performance was reported previously by ACER as likely to have serious problems with their learning. This area will be dealt with in detail in the ACER final report.

Conclusions

2.54 The Committee reached the following conclusions, that:

- (a) Apart from information from the ACER Survey there was not available any reliable national data on the overall incidence of learning difficulties, or particular learning difficulties, for either children or adults in Australia.
- (b) The ACER Survey although, confined to 10 and 14 year old students, confirmed that there is a considerable problem in Australian schools, and a significant number of children failing to reach adequate levels of literacy and numeracy.
- (c) Needless anxiety can be caused by reports on the effectiveness of schooling that are based on defective and unscientific surveys administered to very few children in very few schools and publicised without any reference to the shortcomings of the survey.
- (d) There is a need for incidence data on learning difficulties to:
 - (i) assist in establishing goals for the education system; and
 - (ii) provide a tool for evaluating its effectiveness.

Criterion referenced studies will best do this as they can incorporate in their design standards of competence of continuing validity for a variety of tasks for children at certain ages. From these studies it may then be possible to estimate the number of children not achieving these standards. This information will form a basis for making decisions as to how educational policies may need to be adjusted to assist under-achievers.

- (e) It is important in the first instance to focus attention on the kind of learning difficulties children have, rather than the kind of children who have them, or the reasons they have them. Severity of a handicap is not necessarily correlated with severity of a learning difficulty. It may well be found that there are some children with no organic handicapping condition whose learning difficulties are as severe as those with such handicapping conditions.
- (f) The ACER Survey material provides the most useful kind of information by focussing on tasks that can or cannot be performed. This provides a more reliable measure of the effectiveness of schooling than does information stating a percentage of children with particular disorders. Knowledge of the incidence of disorders might not necessarily indicate the kind of learning difficulties resulting from the disorder. Establishing what it is that children cannot do has the most immediate implications for the provision of educational services. Knowing the occurrence of particular disabilities does not necessarily indicate what educational services may be needed.

12 ACER was also constrained by ethical considerations in administering the test to a population in which a large number would be unable to attempt the test and who would be needlessly distressed. The mere gaining of a complete statistical sample did not appear to justify such action.

- (g) Surveys *should* assist in the formulation of policy. Because of its sensitivity to the resistance of education authorities to any survey comparing educational outcomes between schools and systems, ACER did not devise its tests to compare such outcomes. The Committee believes these outcomes should be measured and compared, and resistance is indefensible.
- (h) Necessary as it is to set minimum standards, as in the ACER Survey, there is a need also to measure performance at levels above the minimum. Information should be available to reveal differences in standards of achievement among the best, the average and the least able students in the schools. To do this, further studies should be developed to provide this information on a national basis.
- (i) It was not possible to estimate on the basis of currently available data whether standards of literacy, numeracy, reading and spelling were declining or improving. The available evidence is equivocal.¹³
- (j) It is less important to establish whether or not there has been a decline in standards than to meet needs with competency. The question that should be answered is whether the necessary levels of proficiency being acquired are sufficient to enable children leaving school to be able to meet the demands society will place on them so that they may be useful, contented members of society. This is a minimal goal for an educational outcome. The ACER Survey has taken an important step in this direction by measuring tasks which are competency based for two age groups.
- (k) The ACER Survey would be more useful if it were more comprehensive. The range of skills to be measured should be extended to include the acquisition of oral skills and the mastery of language. From this there follows a need to include more comprehensive testing and wider population samples in future surveys. They should include the measurement of language acquisition at school entry as a tool to predict likely future needs for speech therapy services and for specialist teachers of English to children from non-English speaking backgrounds, or from backgrounds conducive to poor English expression. The information gained from the teacher survey is subjective. Later in this Report it is recommended that classroom teachers assess, monitor and record the progress of children in a systematic way. In time it should be possible to use this data when surveys such as that conducted by ACER are being undertaken to establish relationships between performance on tasks and causes of learning difficulties.

Recommendations

2.55 The Committee recommends that:

- (a) The incidence of learning difficulties among Australian school children should be determined at regular intervals by a nation-wide survey based on similar principles to the ACER study 'Literacy and Numeracy in Australian Schools'.
- (b) This survey should be developed to include criteria that will measure other competencies shown to be relevant and necessary to enable individuals to be creative and to cope with problems they encounter in everyday life. In the short term the survey should certainly be extended to include mastery of language and oral skills.
- (c) Additional age 'cohorts' should be added to the survey sample as the range of the competencies to be measured is extended.
- (d) This survey should be developed so that it will provide information that can be used by administrators in planning educational services.

¹³ E. Burke and E. G. Lewis, 'Standards of Reading', *Educational Research*, Vol. 17, 1975, pp. 163-74.

- (e) The survey should be developed as a means of evaluating the effectiveness of schooling in Australia so that:
- the comparative performance of school systems and schools can be assessed;
 - the results from the survey conducted at different times can be compared to establish whether, historically, standards are improving or declining;
 - the comparative performance of Australian schooling with schooling in comparable countries can be determined in relation to basic competencies.
- (f) An organisation, such as ACER, should be funded by the Commonwealth to conduct the survey and that further funds should be provided through ERDC to enable research to aid in the development of the survey techniques.

**PART II MEASURES BEING TAKEN TO
ALLEVIATE LEARNING DIFFICULTIES**

CHAPTER 3

REVIEW OF EVIDENCE AS TO ADEQUACY OF CURRENT MEASURES

Parents' Views

3.1 Submissions from parents and parent organisations expressed concern at the rapid turnover of school staff. They instanced a child being taught by five and six teachers in one year and by teachers who were either not interested in the child's problems or refused to acknowledge that the child had a problem. There was widespread complaint by parents about the lack of communication between teachers and parents. Many parents complained of a lack of parent counselling or avenues of advice on sources of remedial help for their children.

3.2 As well as the 250 formal submissions, the Committee received numerous letters from parents, concerning their own experience in attempting to obtain assistance for their children. One parent reported that a school psychologist had referred his child to a speech therapist (the psychologist's wife) for special tuition at a fee per hour that the parent could not afford. The high cost of remedial tuition or coaching and the financial burden this placed on parents was a very frequent cause of complaint. Parents who could afford it and who could locate it paid from \$10 to \$20 per hour for private tuition. Some of these submissions were highly critical of the services provided by the departments of education. Others spoke warmly of the help and encouragement they obtained from individual teachers or through the ordinary channels provided by the departments of education. It was apparent that the parents, not satisfied with the services provided or who could not get access to those services, were faced with a confusing variety of alternative avenues of help. Private medical practitioners and other recognised sources of help in the community were frequently consulted by anxious parents. As one parent's letter described it:

I read. Book after book from library shelf and book store and occasionally from a magazine. I wrote to the authors, I wrote to the educational authorities at home and abroad. I received the most courteous and encouraging replies and advice. I thought deeply and covertly watched the boys through new eyes. But I was afraid of my own unskilled assessment. This was too important a thing to tamper with. I consulted our family doctor.

He was most interested and understanding of my suspicions and felt there was sufficient grounds to warrant closer investigation. I was referred to a paediatrician. He agreed with my suspicions in fact, confirmed that they had a basis in firm fact and referred me to a neurologist for a final confirmation. This too verified all my doubts after a series of tests, interviews including an encephalograph.

3.3 Typical of many letters was the following which describes some of the confusion and frustration of a parent seeking help for a child:

There was no remedial class at the school he was attending but I heard of a trained educational department remedial teacher who was prepared to try to help him 3 days a week after school. After a year, using normal department of education remedial methods, there was an improvement in his reading, but it was so slight as to be almost negligible. After a further two years without any help I wrote to members of Parliament, including the Minister for Education. The only suggestion offered was that I take him to the psychology branch of the education department—I had received no help some years earlier with an older child with intellectual and emotional problems; I had been assured by a competent psychologist who had worked with the education department for some years, and a specialist paediatrician, that the disability was physical not psychological or intellectual, and that the type of remedial teaching available in the education department was of no benefit in cases such as his and I had been informed by the headmaster of the school he was attending that there were no facilities available at the school. I finally

managed to get help for him through SPELD by my own efforts, but with the help and co-operation of the headmaster of his school (this co-operation is refused by the headmaster of many State schools). A SPELD (sic) trained teacher came to the school 3 days a week for one hour sessions all last year and at the end of that time there was quite a remarkable improvement both in his attitude towards school and in his reading ability . . .

It is pertinent to note that assistance was provided for this child through the education system and might have been available much sooner.

3.4 There was distressing evidence in similar letters of the vulnerability of parents to misleading suggestions about the nature of the learning problems of their children. One parent, whose children were bad spellers, reported:

Then—by chance—or was it divine benevolence?—late one evening we saw a documentary film from the B.B.C. on the television. And we came to learn of this thing called 'Dyslexia'. To our astonishment we saw other children making all the same kinds of mistakes that had plagued our lives for so long. A whole new world opened to us, the world of the perceptually handicapped!

*We began to have very strong suspicions that we had five such and that in all probability in their case it might be of genetic origin. My mind raced back over the years to my mother-in-law's kitchen. How she had laboured night after night, trying to help my husband's younger brother with his **spelling!** Why even my own husband filled the required format. He too, was, and still is, a poor speller, and he is left handed as too is one of my sons.*

3.5 The greatest concern of parents who wrote to the Committee was for children deficient in their reading ability. The Committee could not but be moved by the plight of small boys and girls whose failure to succeed at school caused them so much misery. As parents described it:

- (a) *When in Grade six he found out he was different to other children and his dream world was not helping him. He started to play truant and get into trouble with the police.*
- (b) *When my eldest son started school (when he was nearly five years old) he soon lost his happy outgoing personality and became emotionally disturbed—his behaviour a constant source of distress and anxiety to the members of his family.*
- (c) *It is in his behaviour, however, that he has become such a problem. To all appearances he does not talk, hear when spoken to, is contrary, sullen and does anything to attract the teacher's attention, preferring an imposition rather than being ignored. Should anyone try to help him with his reading he becomes withdrawn and will not co-operate.*

3.6 There were also reports of teachers who recognised that a problem existed but felt inadequate in the situation:

Our big problem at the moment is that the teacher feels he cannot teach the child because he cannot get through to him by using normal methods and there does not seem to be anywhere at all for a child like this (brain damaged epileptic) in our school systems. I feel a small class for similar children may be the answer providing it is incorporated in a larger school of normal children because my son cannot make friends and a small class would tend to further isolate him—I feel it is unfair to expect a teacher of 30 or more children to cope with even one like my son but what can we do?

3.7 A well known parent organisation is SPELD or the Specific Learning Difficulties Association. It provides a counselling service and acts as a pressure group for parents and is active at all levels of government. Branches of SPELD have been established in all Australian States and Territories and within these areas there are sub-branches that are very active. In all States SPELD offers a range of services. It provides a forum for discussion for parents, teachers and interested professional workers. It brings to Australia notable authorities on learning problems and sends educators overseas to conferences and seminars. It publishes a regular newsletter and seeks to obtain publicity for its view of educational problems.

3.8 The service provided is of an advisory nature and the organisation is not actively involved in remedial work. It strives to direct people to responsible sources of help. As described by SPELD (Queensland) itself, it has worked to:

*Identify the needs of those affected by SLD and their families; advise on the nature of services and facilities available within government departments and by psychologists and remedial teachers in private practice; advise families on how best they may help and encourage a member affected by SLD.*¹

SPELD has brought to the fore issues which were previously unrecognised in the Australian community.

3.9 In their submissions to the Inquiry, the SPELD organisations advocated early screening and preventative measures; improved facilities and incentives for teachers including better pre-service and in-service training; improved status and opportunities for remedial teachers; provision of more remedial teachers and facilities in the schools; improved diagnostic facilities and clinics so that the expertise of a variety of professionals can be brought to bear on the learning difficulties of individual children. The SPELD organisations are concerned to foster an awareness in the community of the nature of 'specific learning difficulties', as perceived by them, in order that improved facilities will be provided and the problems of those with severe literacy problems will be viewed with more sympathy and understanding.

3.10 As noted previously (paragraph 1.22) SPELD's membership is drawn predominantly from parents of children for whom no special educational provision is currently being made. It is concerned therefore to distinguish its interest from that of organisations representing children already recognised as having special needs, e.g. mentally retarded, Aboriginal, immigrant and disadvantaged children.

3.11 The Epilepsy Social Welfare Foundation of Victoria is involved in advocacy on behalf of those suffering from epilepsy. It brings to the notice of people in contact with epileptics the true nature of the condition. It actively intervenes on behalf of epileptic children with their schools and at the point of leaving school assists them to find employment and mediates on their behalf with employers. The Association's submission comments on the deficiencies in the overall provision of services in Victoria and the lack of liaison and poor communication between different responsible authorities. In N.S.W. the Red Cross is active with emotionally disturbed children and intervenes directly with their schools in order to inform the schools. Their submission points to links between learning failure and emotional disturbance. Action on behalf of ethnic communities was also reported to the Committee. The Greek Welfare Association submitted that Greek and other non-English speaking children were disadvantaged in schooling in that their lack of English in some cases masked perceptual problems and made more difficult the identification of the child's particular learning difficulties. In its submission the Association stressed the importance of a bi-lingual approach to language teaching for children from non-English speaking backgrounds—particularly in early childhood. The Committee also received submissions stressing the need for special provision of bi-lingual language instruction for Aboriginal children.

3.12 The Association for Children with Learning Disabilities (ACLD)², an organisation of parents in N.S.W., distinguishes itself from SPELD. The Association is made up of parents whose children are in special placement in N.S.W. schools. These children, broadly characterised as mildly intellectually retarded, are in Opportunity 'A' primary classes and General Activity secondary classes in N.S.W. schools. The Association was critical of aspects of this placement and submitted that there were

¹ Evidence, p. 1384.

² This should not be confused with the U.S.A. Association with same name mentioned in paragraph 1.19.

many children with special needs in regular classrooms who should be placed in special classes. The reason this did not happen was the inadequacy of the services provided by these classes:

The children in the OA type of class are a mixture. Some people refer to them as a form of garbage bin. There are children who are mildly intellectually impaired; there are children who have normal IQ levels. There are children who are emotionally disturbed. There are children who are culturally deprived and we find that many of these children are put into this group with the result that it is difficult for the teacher to cope with such a situation . . . The lack of properly trained teachers is perhaps the main point which we would like to impress on you. The status of the teacher in this area is low. Generally, the teachers are poor quality; there are exceptions—a lot of them are very dedicated, but the basic point is that very few have had any training in this area . . .

We feel that the group of children that we are concerned with have been left out. If they are deaf, if they are blind, if they have a significant physical defect, the people recognise them and they are helped. But this group looks normal, and no-one does anything for them.³

3.13 In relation to special placement the Association submitted that these classes were isolated from other areas of the school, had poor facilities and a stigma applied to both teachers and pupils of these classes in the eyes of the rest of the school. One of the aims of ACLD is for many of these children to be integrated into normal classes, but they asserted one problem is that a normal class teacher is often reluctant to accept these children:

She may already have a big class. We find that this problem of integration involves not only the teachers but also the principals of the schools. We wonder whether perhaps it should be the Department of Special Education that should have more influence in this area for these children rather than the actual school. We find that many of the teachers in these classes are extremely unhappy, but they are scared to rock the boat. They will not complain; they accept the situation, even though they have a lot of criticisms. We find that the whole set up of these classes is probably restricted by finance. We feel that our Department of Special Education should be given the means to develop their services. They should not have to be asking other areas, or other parts of the Department of Education, for money. We feel money should be allotted to them.⁴

3.14 In Western Australia, evidence was presented by an association called 'Hear & Talk', whose members were parents whose children have communication handicaps. This association is divided into two committees, one for deaf children and one for language handicapped and multi-handicapped children. The Association submitted that the kind of problems with which they were concerned were little understood by medical practitioners and that there was a lack of awareness and sympathy in the community. A more positive approach towards children handicapped with a problem of communication and the better training of more medical personnel was needed. The Association was critical of the use of labels applied to children which, in its view, led to an undue stress on supposed medical causes and remedies when they felt the emphasis should be on education strategies to help the children with communication disorders. Children do not get help soon enough so there should be action to ensure that no child is excluded from school, deprived of normal education or excluded from access to advisory services until an attempt has been made to teach him.⁵

3 Evidence, pp. 567–70.

4 Evidence, p. 572.

5 The Committee was informed, independently of this witness, of provisions in the education legislation of some States which denied the obligation of departments of education to provide educational services for some categories of handicapped children and placed such responsibility upon the parents. Section 20 of the *Education Act, 1928–1976*, Western Australia places the primary responsibility for the education of a 'blind, deaf, mute, cerebrally palsied or mentally defective child' on the parent.

3.15 Parent organisations called for improved teacher-student ratios in schools particularly where 'open classrooms' were employed. They also advocated:

- Upgrading of the status of special education by improved career opportunities for 'remedial' teachers;
- Improved basic teacher training and more in-service opportunities for teachers;
- Multi-disciplinary clinics to diagnose and assess children, staffed by professionals from a wide range of disciplines;
- Better assessment and diagnostic services and improved access;
- Better communication between parents and schools; and
- More research into specific aspects of medical dysfunction.

SPELD particularly argued for improved orthoptic and ophthalmological services and improved school medical services.

3.16 Parent organisations stressed the importance of pre-school and early childhood training and called for more facilities to be provided. They recommended early assessment and school entry screening and tests to detect handicaps and problems. The difficulties of rural schools and parents of isolated children were emphasised and better services for remote areas requested. The particular services sought were:

- The provision of mobile remedial vans and itinerant teachers, speech therapists and guidance personnel;
- More boarding facilities; and
- Special clinics in regional centres and towns.

3.17 The Australian Council of State School Organisations placed a comprehensive submission before the Committee in which they saw the problem as one which could best be remedied by improving the schools themselves:

Our concept of education is that schools and systems should be directed towards assisting students towards a sense of competence, a sense of belonging, a sense of usefulness and a sense of power. We believe that there is no way that these aims can be achieved without giving all children access to basic competencies, including literacy, but there is also no way that access to basic skills alone can achieve all these aims.⁶

3.18 This leads the organisation to favour a 'whole school approach' to overcome the problems of literacy and numeracy. The emphasis should not be, therefore, entirely on remediation:

Traditional remedial approaches, where they are available, are usually subject rather than whole-child centred. In other words, they concentrate on verbal skills or numerical skills rather than the way the child responds to the whole school. Therefore, his or her response in a remedial class may well be contradicted by his or her response through the rest of the school, and teachers' response to him or her. In the traditional remedial approach parents have noted that the task of the remedial consultant, whether they be teachers in the school or specialists coming in from the outside, is often an isolated task, cut off from the rest of the classroom teachers. We have also noted that the remedial approach tends to presume that there is something wrong with the child rather than something wrong with what is happening to the child in the classroom. . . . We contend that rather than the segregation that is necessary in specific remediation, even if it is only short-term withdrawal, the whole school approach to language development is what is going to prevent a lot of the more serious problems that are now developing.⁷

Teachers' Views

3.19 The Committee received letters and submissions from individual teachers and approached all industrial organisations representing teachers inviting their participation. Many of the criticisms of current educational services voiced by parents were

6 Evidence, p. 3956.

7 Evidence, pp. 3960-1.

confirmed by teachers. They also stressed the inadequacy of teacher training, the high turnover rate of teachers in schools and organisational deficiencies in the education system. A N.S.W. teacher commenting on the problem in N.S.W. schools talks of the class teacher's plight:

Often there is no senior official to talk to and school counsellors are grossly overburdened with work in many areas of N.S.W. Ultimately it is the District Inspector to whom the teacher must turn for guidance, but since that person is also the person who inspects the teacher for promotion in his primary school, a teacher consults the Inspector at his or her peril.

3.20 Similar criticisms were made to the Committee by teachers working in other States. Teachers identified the problem in the schools as mainly one of inadequate resources. They considered that children came to school inadequately prepared and that pre-school and early childhood experiences should be developed for more children. Most teachers' unions felt that there should be some form of school entry assessment of children. Whilst agreeing that it was the responsibility of the classroom teacher to manage the majority of children's learning difficulties, teacher organisations felt that this could only be done if classes were smaller, if teachers were better prepared in their initial training and if they were supported by a wide range of specialist support services. They wanted better equipment and well equipped resource rooms; more remedial teachers and rooms; and wider involvement of the school staff in the problems of learning difficulties rather than the problems being seen as one for particular teachers. The unions pointed to the lack of availability of specialist support services in rural areas and for isolated schools and their teachers. This led to recommendations for itinerant specialists and mobile remedial vans. Most teacher organisations submitted that teachers were not equipped to cope with many of the problems and requested more intensive 'in-service courses'. Another frequent request was for more help in the classroom in the form of teachers aides. There was some support for the notion of parental involvement and better communication and liaison with parents particularly of children with learning difficulties. There was also dissatisfaction with medical services and with the school medical services in particular.

3.21 Teacher organisations stressed the shortage of specialists. The Queensland Teachers' Union submitted:

At the present time in Queensland schools there is an attempt to help these students with reading problems, by providing remedial reading teachers. However, the numbers provided are woefully inadequate. For example, one remedial teacher may be supplied to a school of 1200 students. If one assumes the relevancy of the American statistics in an average school one might expect 150-200 students with reading problems alone. Since small classes are the most efficient way of teaching these students, it is obvious that one teacher cannot help 150 students.

3.22 School organisation was seen as an impediment to the management of learning difficulties. The Queensland Teachers' Union recommended that a committee be appointed in each State to study the organisation of schools with a view to recommending methods of increasing curriculum and organisation flexibility. The career structure for special education was also seen as a deterrent to teachers. Being a special teacher is seen as a dead end: it does not lead to other avenues of promotion.

3.23 Universities, colleges of advanced education, other teacher training institutions and teachers themselves made comprehensive submissions on most aspects of the Inquiry. There was universal support for the proposition that the classroom teacher was the key to coping with learning difficulties and that improved teacher training was the main priority. It was agreed that special children should be retained in the normal classroom wherever possible as children withdrawn from normal classes are isolated from their normal peers and often, as a consequence, lack a model of normal

behaviour. Some colleges of advanced education and universities involved in training teachers have asserted that their pre-service educational program for teachers has been based on retaining these children in the normal classroom. Some others made no submission to the Committee to indicate their policy in this respect. The aim of many teacher training bodies is to provide all teachers with introductory training to cope with children with special needs so that in future teachers will be better prepared to work with advisory teachers who have a more specialised kind of training. Colleges reported to the Committee on their in-service and post-graduate courses for teachers and the special facilities which many of them have developed.

3.24 Many academic institutions have established special clinics and learning difficulties centres where pilot projects in special education are conducted as demonstration units for trainee teachers and teachers. In some cases these provide a model for State education systems to adopt.

3.25 The learning difficulty problems confronting the secondary schools were stressed by a number of witnesses. Mr J. LeMaitre was responsible for an action-based research study on alternative curricula for secondary school children known as the WIMS Project. The impetus for the study came from the realisation by Mr LeMaitre and some of his colleagues at Windsor High School (N.S.W.) that the school offered very little to adolescents placed in General Activities classes, i.e. those streamed as of lesser academic potential. Given the interests and expectations of the students, these staff members were struck by the irrelevance of the curriculum offered by the school to the needs of the students. The students responded to the irrelevance of the curriculum with hostile behaviour and their hostility and resentment began to affect the atmosphere of the whole school. It was considered that curricula could be developed which would stress remediation in basic areas of learning skill and education for life. The project funded under ERDC reported considerable success in terms of improved attitudes to the school and inter-personal relations as well as measurable success in areas of basic educational achievement (see Appendix IX).

3.26 The desirability of flexibility in curriculum development was stressed in evidence from the other submissions. Some argued that compulsory education was a factor contributing to the problem and that there should be a shift from a chronological age level as a minimum criterion for leaving school to an emphasis on minimum standards of achievement in basic areas such as reading and numeration. This point of view was supported by the Victorian Department of Social Welfare who submitted:

The experience of officers of the Department indicates that a minimum school leaving age is counter-productive when effective learning has ceased some years prior to it and there is insufficient remedial education available. The complete inability to understand what is going on at school leads in many instances to boredom, trouble, truancy and delinquency, as well as to poor self-esteem and limited social functioning. Those adolescents who are isolated and function poorly at school tend also to be isolated and function poorly in other areas, especially those in which competition and/or authority are features, e.g. sporting and youth clubs of a formal nature. This has led to the oft-repeated observation that the creation of formal activity programs for adolescents attracts those whose functioning is already at a satisfactory level and deters those who would most benefit from positive social experiences. The child who is alienated at school is alienated in the community and is more likely to offend than the child whose relationships in this area are satisfactory.⁸

3.27 Witnesses from the Schools Commission indicated some despair for the prospect of action at the secondary school level:

In the secondary school, of course, it would have really colossal organisational implications if you are talking about taking each child forward at an individual pace. So I

8 Evidence, p. 4042.

an emphasising two things. The first is the very great importance of the primary level because for those children who are not able to read at the end of their primary schooling that situation, by and large, is not going to be retrieved in the secondary school. It is not just a matter of not being able to read but that they have behind them a record of continuous failure which gives them a view about themselves. So we feel that the emphasis in any improved school funding should be at primary level.⁹

3.28 The Schonell Educational Research Centre in its submission commented:

Many of the problems experienced by learning handicapped children, whatever the underlying determinants of their handicapping condition, are exacerbated by the attempts of educational institutions to conform to the social value systems of the community by setting standards of proficiency which are socially rather than individually prescribed. . . . A solution to the problem of making education 'more relevant' for all may be to incorporate an emphasis on the development of personal effectiveness skills, the skills of daily living, into the curriculum. This would not solve the problem of dealing with the educational needs of learning disabled children but it may increase the effectiveness of such intervention programs by minimizing the negative effects of poor self-esteem and frustration, which are the products of the present curricula emphases.

An advantage of this approach is that it stresses the guidance function of all teachers. At present the classroom teacher has neither the time nor the training to cope with the emotional needs of students. This responsibility is delegated to personnel with a specific guidance-counsellor function. Unfortunately, limited resources in the guidance field make the guidance officer's task an almost impossible one. The best solution, however, is not just to increase specialist guidance personnel. This would be expensive and inefficient. If the requirements of time and training were met, the classroom teacher must surely be the most effective guidance agent. He has the advantage of continuity of contact and breadth of knowledge about individual students which are vital components in Counselling relationships.¹⁰

State Departments of Education's Views

The Classroom Teacher

3.29 In evidence, the N.S.W. Department of Education stated:

One of the errors of the past has been to make too many children too special, to the point where the normal classroom teacher may begin to feel that if he has a problem he should get him out. So we would prefer to see a system whereby when a child is known to have some problem, the teacher can refer the child to a resource teacher on the school premises—a full professional member of staff if you like, not professionally isolated in the way in which the O.L. and the O.P.¹¹ teacher tend to become. On occasion the resource teacher can work with the normal classroom teacher in the normal classroom setting. . . . One does not want to get to a stage where the normal classroom teacher puts his or her hand up every time there is a child who does not quite perform as one would expect he would, and say that he has a problem and he must get him out because he is not his responsibility. Hence we go back to that original comment about the need for all teachers in teacher preparation programs to be fully aware of the fact that many children will have mild to moderate problems which ought to be contained and sustained within the classroom.¹²

3.30 The Department concluded that the main emphasis in preventive and remedial education must remain with the regular classroom teacher, supported where necessary by specially trained resource personnel:

⁹ Evidence, p. 3597.

¹⁰ Evidence, pp. 1684-5.

¹¹ Opportunity classes for the child who has some language or perceptual impairment.

¹² Evidence, pp. 1310-1.

*Reduction in class size in New South Wales during the present decade and an increase in basic teacher training from two to three years are positive steps contributing to an improved teaching/learning process.*¹³

3.31 The Committee was told that the Victorian Department's policy on special education is to take a service to the child rather than remove the child from the classroom to a more clinical setting except where absolutely necessary. It was also policy to integrate the child in the normal school stream wherever possible. The Victorian *Education (Handicapped Children) Act 1973*, in seeking to avoid categorisation of the child, defines a handicapped child as 'A child of school age handicapped to an extent likely to affect his educational progress unless he is supported by special educational provisions'.¹⁴ The Department recognises the need to involve the parents of children so handicapped and to take proper note of their wishes and interests.

3.32 In Queensland the Department of Education submitted that it considered: *A substantial number of learning disabled children can be educated within the ordinary classroom. Where teachers are equipped to recognise the symptoms of learning disability and where flexible, developmental programs are being designed to cater for differences not only between but within individuals, many children can be salvaged who, in lock-step programs*¹⁵, *would inevitably develop major learning and behavioural disorders.*¹⁶

3.33 All State departments of education expressed similar views to the Committee but were careful in each case to point out that such a policy must be implemented with the adequacy of current resources in mind. The submission of the Queensland Department of Education is representative on this question:

*It would be unrealistic to claim that all teachers can identify learning disabled children. It would be equally unrealistic to claim that all schools provide programs which meet the needs of the learning disabled. There is still a tendency to call for specialist assistance before trying appropriate school based programs. In some cases this is due to sheer lack of knowledge of the characteristics of the learning disabled to begin with, and then either lack of knowledge of appropriate teaching and management strategies or lack of confidence in carrying these out. It may also be that some teachers are influenced by the varying claims by 'experts' and concerned parents or community organisations of the incidence and complexity of learning disability problems to the point where they believe that they could not cope with such problems and therefore want to leave their solution to specialist teachers.*¹⁷

3.34 In Western Australia the policy on *remedial education* is that remedial or corrective teaching is part of the grade teacher's job and as far as possible special needs should be catered for within the school. This does not include children who have severe learning difficulties and need a special program or those children so grossly retarded educationally that they cannot profit from any academic work (i.e. a 12 year old child who cannot read at all).

3.35 The South Australian Department of Education reported that it had moved towards a policy of integrated education:

*Future developments in special education in South Australia will be almost exclusively in the direction of providing supporting specialist staff to assist classroom teachers in each child's neighbourhood school. We do not intend to abandon existing facilities but to expand, as we are able, in the directions indicated.*¹⁸

3.36 In Tasmania the Department believes firmly in the principle of integration. Children should be helped in the classroom and not taken out unless necessary. To

13 Evidence, p. 1253.

14 Evidence, p. 7830.

15 In lock-step programs, children are promoted in group as a class.

16 Evidence, p. 1718.

17 Evidence, p. 1718.

18 Evidence, p. 2074.

implement a policy based on the regular classroom it is necessary to reduce overall class size.

3.37 Improved teacher training, however, was the central issue for all departments of education. The departments emphasise the need for teachers to be trained in the techniques of individualised instruction and recognised that this approach places considerable responsibility on the classroom teacher. For example, the Victorian Department notes:

*It is sometimes said, with some justification . . . that the range in any particular area will be as broad as the grade level. In grade 3 you have children with a three or four year range in reading ability; in grade 5 it is 5 years—they are going out of the primary school with a very broad range indeed. That means the grade 4 teacher is dealing with a 4-year range of abilities in mathematics; he is not teaching a grade 4 syllabus to all children. If he is to cater for the differences between those children he must be operating over a broad band. For that reason, curriculum guides in mathematics—in all subject areas—are not graded courses, but rather sequential in nature.*¹⁹

3.38 Individualised instruction, involving as it does the notion of teaching each child on the basis of his particular skills and pace of learning, has implications for:

- Class size (how many children can the teacher manage?);
- The range of handicapped conditions which the classroom teacher should be able to manage; and
- The nature of supporting staff, both in terms of aides in the classroom and specialists to consult and advise the teacher.

Much reliance is therefore being placed on the training of resource teachers to provide the classroom teacher with an accessible source of support in individualised instruction. The Queensland Department of Education notes:

*The provision of remedial services to children . . . is essentially a second best procedure. The recognition at the appropriate stage of the learning situation that difficulties are being experienced or are likely to be experienced and immediate action to modify the teaching and learning process is obviously to be favoured. For this to become the rule rather than the exception, teachers need to be more knowledgeable concerning the nature and incidence of learning difficulties, their recognition, and methods of assisting children to overcome such difficulties.*²⁰

3.39 Each department of education drew attention to the problems it would face in implementing this overall strategy and presented evidence on the particular difficulties faced in its state.

Support Services

3.40 The Commonwealth Department of Education reported on serious learning problems for children in the Northern Territory exacerbated by the remoteness of the Territory and the wide distribution of its small population:

In establishing priorities it is necessary to understand that the Northern Territory possesses an extremely high proportion of children . . . who have general rather than specific learning disabilities. This proportion is much greater than in any other State system. Such children fall into three subtypes. The first are the culturally disadvantaged. This category would include a large proportion of the Aboriginal children attending school, the migrant children and the transient overseas children. The second group are the socially handicapped. Children in this category would include children in welfare homes, children from broken homes, children of itinerant workers and children living in sub-standard homes. The third category are those suffering from various forms of

¹⁹ Evidence, p. 948.

²⁰ Evidence, p. 1758.

*discontinuities. This category would include children who are victims of extremely high rates of family mobility, children who experience difficulties as a result of variations in interstate curriculum and children who experience lags in developmental rates. Children who . . . (are in the category of) the visibly handicapped, are only beginning to be identified. The provision of special services to such children has had to take priority at a time of scarce human resources. It is unfortunate that the few specifically disabled are so greatly outnumbered by those with grosser and in many instances more crippling disorders. For example, there are approximately 1000 Aboriginal children who have educationally significant hearing losses.*²¹

3.41 In 1975, 30 per cent of children in Northern Territory schools were Aboriginal children. They numbered 6428 out of a total of 22 460. That number had some 120 different languages as mother tongues. The Department employs 20 teachers for migrant education which the parent bodies claim is too small. The migrant population is constantly changing and there has been a recent influx of people from Timor. There is a large Greek population. It was estimated that in Darwin there would be in the order of 400 children who are experiencing difficulties with English because they are migrants.

3.42 Although provision has been made for the employment of a variety of specialists on the establishment of the Department, it reported there has been difficulty in attracting qualified persons to fill the positions. There are positions for four reading diagnosticians, only two of which have been filled. There are 18 positions for advisory teachers of the deaf, only two of which have been filled. There is provision for the employment of social workers, speech therapists and psychologists but the Department has been unable to fill any of these positions. There are eight vacancies in the 13 positions for guidance officers. The ratio of guidance officers to children is 1 to 4500 compared to a ratio of 1 to 850 in the A.C.T. The Departmental officers said in evidence:

*We would like to have at least one clinic service in the Territory, but this would not be very helpful to people in isolated regions, which means we have to think in terms of portable guidance services that can equalise opportunity. That is very difficult to manage with so few people responding to advertisements.*²²

3.43 The Tasmanian Department of Education submitted that it is essential that the classroom teacher be supported by adequate back-up services. Currently there is a shortage in Tasmania of guidance officers, social workers, speech therapists and specialists in motor development. The Department estimated that over the triennium 1976–1978 there will be a need for three special teachers per 1000 primary school children and two special teachers per 1000 high school children.

3.44 The Tasmanian Department nominated improved teacher training and provision of support staff as its chief priorities. On the question of support for the classroom teacher the Department submitted:

We have a large number of teachers who need to teach a wide range of children a lot of information, and we cannot expect all our classroom teachers to become really specialist in this very delineated small group of children. That being a fact of life, we have to have support staff who will use these specialists in this group, who will work with the teacher in this one area to support her in what she has to do, support by helping with programs. With specific learning disability children especially, you work out a fantastic program at the assessment centre that looks like it should work but in fact it does not, so we want somebody in our assessment centre now to be able to go to the school and say 'That did not work, so try this' and give her both emotional support and straight out professional support in what she is doing. We need psychologists to do assessment more thoroughly.

²¹ Evidence, pp. 4105–6.

²² Evidence, p. 4137.

*We desperately need speech therapists because, as I see it, general oral language is the basis of written language.*²³

3.45 The Western Australian Department of Education in noting the size and sparse population of the State said:

*This is a considerable problem, and one to which we pay a lot of attention. We have our Schools of the Air, and they maintain a teacher-student relationship. Children in remote areas are brought to an annual camp. This may be in a city or it may be in a country centre . . . We are about to start an isolated schools matriculation program.*²⁴

3.46 Departments of education in all states pointed to serious problems in providing services for isolated areas.

3.47 The Victorian Department of Education expressed a view shared by all departments that there were serious learning problems in the secondary schools:

There is a steady and constant stream of children, entering state secondary schools, without the necessary communication skills to participate or succeed in secondary school curriculum. Many schools throughout the state have identified reading and communication problems among their new pupils. Moreover, for many children, these problems do not appear to be overcome by normal secondary curriculum, but linger until the children leave school.

*However, it is essential to define the problem more specifically and operationally than simply in general terms of reading and communication difficulty. Many schools have used a variety of screen and diagnostic tests to discover the extent and nature of the problem among their pupils. Unfortunately, many secondary teachers, discovering that some children are not reading at a level expected of their chronological age, are inclined to label these children as having 'specific learning disability' or, worse, 'dyslexic'. Such labels are often an excuse for unwillingness to change existing curriculum content, methodology or organisation.*²⁵

Or as the South Australian Department of Education put it:

*. . . increasing numbers of children are coming into the schools on age rather than any kind of grade attainment in the old sense of the word. In other words, the old academic barriers we used to have, hurdles that had to be jumped, are no longer in evidence or as obviously in evidence today as they used to be. So the child comes through to a secondary school which unfortunately has not changed vastly since the institution of secondary education in Australia. They are still academic, and the public insists upon this for political reasons, and the public examinations of course have been the major goals of the schools, almost the raison d'être, although of course they are fading from the scene now.*²⁶

3.48 The inability to provide adequate speech therapy services for children with communication handicaps was noted by the education departments. More speech therapists, occupational therapists and physiotherapists would be employed by education departments if more trained personnel were available. Most departments continue to place considerable reliance on school psychologists. The Department of Education of Western Australia, when asked to list its priorities, nominated more psychologists:

*I think we need more psychologists in the primary section of the Department. Traditionally, in the very early days of psychology in this State, we put the psychologists in the secondary system. We have to change our promotional system in order to encourage more to go into primary school. I think I would put recommendations in this order: teachers, teacher training, back-up personnel, then aids and equipment and facilities in the building.*²⁷

23 Evidence, pp. 3031-2.

24 Evidence, p. 2622.

25 Evidence, p. 2622.

26 Evidence, p. 2125.

27 Evidence, p. 2648.

The Views of Catholic Schools

3.49 Before discussing the views of Catholic schools it is worthwhile noting the distinction made in the Karmel Report:

*Within Catholic schools, there is a clear division between the schools owned and operated by religious orders and those belonging to dioceses, including parochial primary schools and diocesan and regional high schools. The order-controlled schools are, by and large, autonomous. The diocesan schools constitute a loose system not dissimilar in some respects to government systems in that they are under the supervision of a central authority and have certain administrative and advisory services provided by offices of education.*²⁸

It is the diocesan schools, rather than the independent Catholic schools, whose views are discussed here.

3.50 Information available to the Committee indicates that Catholic schools:

- have a less favourable ratio of teachers to pupils than do the government schools;²⁹
- that the schools are not as well supported by specialist staff;
- that teachers in Catholic schools have fewer formal qualifications than teachers in government schools;
- Catholic schools have a high proportion of immigrant children and children from families whose language of origin is not English;³⁰
- the Catholic system also makes a major contribution in the education of Aboriginal children through its missions and primary schools.

3.51 The Committee notes, however, that these comparative disadvantages are not reflected in the standards attained by the children in the basic areas of reading and number. In the results of the ACER Survey, children at Catholic schools performed better than students at government schools at reading but less well than pupils at non-Catholic-non-government schools. Their performance in numeracy was higher, however, than either government or non-Catholic-non-government schools.

3.52 Witnesses appeared before the Committee to present the views of the Catholic Education Office or Commission in Sydney, Brisbane and Melbourne. The particular problems that the systemic schools experience are:

- a shortage of school psychologists, guidance officers and counselling personnel. The Catholic schools have access to the psychological and guidance facilities managed by the State education departments but are affected by the pressure on these services from the State school system. They take last place in the queue. They have access to facilities of Catholic family welfare bureaux in their States consisting of psychologists, guidance and counselling personnel and social workers. Their own resources are extremely limited. In Melbourne at the time of the Committee's hearing of the Catholic Education Office³¹ there was only one part-time psychologist servicing six schools in the inner area of Melbourne comprising between 800 and 1000 children.³² Country areas do not have any such services provided by the Church in Victoria. In Queensland there are only three guidance officers servicing the entire Catholic system in the State. One guidance officer assisted by two remedial teachers and three resource teachers serve 25 000 primary children in the city of Brisbane;

28 *Schools in Australia*, Report by the Interim Committee for the Australian Schools Commission, May 1973, p. 30.

29 In 1974 student-teacher ratios were:

	Government	Catholic
Primary grades	24.2:1	28.4:1
Secondary grades	14.8:1	20.3:1
All grades	19.7:1	24.9:1

Source: Schools Commission Report for the Triennium 1976-1978, June 1975, p. 47, Table 4.7.

30 Evidence, p. 461.

31 29 April 1975.

32 Evidence, p. 692.

- the awareness of children's learning difficulties is high in all States and there is demand for places on in-service courses from teachers. In Victoria an in-service course conducted by the Department is attended by an average of two Catholic teachers a year. At the moment there are twelve Catholic school teachers doing the trained teachers' special course.

The witness representing the Catholic Education Office of Victoria commented:

Until 1970 I think that you applied to the State Department and two people were often fortunate. If there was sufficient room on course, they would take two of our people; otherwise, if they got the numbers without us, we just did not have representation on course. This year . . . 12 people come out of schools, and when they finish that course a number of them will go back to the schools that they came from and certainly would have a very limited circulation. They are just working within the school, often as a class teacher, and are not being used as fully trained special teachers.³³

3.53 Recommendations to the Committee from Catholic schools were for additional places on in-service courses and for strengthening the capacity of the Church to provide specialist support for its schools.

Broader Environmental Issues

3.54 The Committee's terms of reference do not cover a sociological survey of every conceivable factor which may lead to a learning disability, and the Committee has to a large extent confined itself to advocating changes in the educational facilities available to children in need—structural and staffing changes in the main.

3.55 The Committee received evidence of the influence of deeper causes of some educational disadvantage, and the Committee itself specifically advocates, for instance, that facilities of pre-school and day care establishments should be extended to enable them to admit more handicapped and socially and culturally disadvantaged children.

3.56 The Committee cannot prescribe the remedy for every social and cultural deficiency in the community, and does not believe that any educational procedure or institution is the remedy for these deficiencies. Other action than educational action is needed to deal with the ramification of poverty, for instance.

3.57 Evidence was also given to the Committee of such non-institutional factors in educational under-achievement as cultural and linguistic differences, basic housing defects and health problems in the domestic environment, the pattern of alcoholic consumption, and the problems of frequent family movement as far as cultural and linguistic differences are concerned. These problems must be tackled, but they are beyond the Committee's terms of reference. They involve action by health and housing authorities, social services departments and departments of Aboriginal affairs.

3.58 The Committee would like to be sure that departments of education made great efforts to recruit teachers, preferably from the relevant ethnic groups, who were proficient in minority and migrant languages, who could converse with school children from ethnic minorities in their own languages and with understanding of their backgrounds.

3.59 At bank counters, for instance, notices informing customers that Greek, Italian or Yugoslav languages are spoken by bank officers, who can help clients handle their banking affairs if the customers can effectively converse only in those languages. A similar intelligent concern for the child as an educational client would lead to teachers with such language skills being assigned to schools with significant numbers of pupils or students for whom some language other than English is the mother tongue. This

³³ Evidence, p. 693.

action is obviously vital for a migrant or Aboriginal child with a learning disability so as not to compound his language difficulty.³⁴

3.60 Apart from in-service training of teachers, there should be workshops and seminars for teachers, other professionals and parents on the needs, methodology and problems of migrant and Aboriginal education.

3.61 In the case of some minorities there is also usually a need for parent education and adult education if the home is to operate effectively as a secure base for the child's educational advance.

3.62 In this connection the Committee notes these comments in the Report 'Access to Education—An Evaluation of the Aboriginal Secondary Grants Scheme' by Professor B. H. Watts. Writing with reference to Aboriginal and Islander education Professor Watts declares:

There is consistent testimony to the importance of the parents and simultaneously to the fairly widespread existence of a situation in which Aboriginals and Islander parents lack knowledge of many aspects of their children's lives as students, including the academic aspects, have no or little contact with the schools or teachers and do not provide support for their student sons and daughters in the shape of an informed and active interest . . . It is doubtful if (a) improving access to education and providing support through a scheme such as the Aboriginal Secondary Grants Scheme and (b) improving the schools attended by these students will have major outcomes for large numbers of students if, at the same time, their parents continue to be excluded, and to exclude themselves, from the educational process. Havighurst³⁵ has written of an implicit contract between home and school:

"The parents contract to prepare their child for school entrance, both cognitively and effectively. They further contract to keep him in school and to make home conditions appropriate for his success in school. The school contracts to receive the child, teach him as well as it can, taking account of his strengths and weaknesses and the ways in which he can learn most effectively.

Very little of this contract is put into legal codes, but the education of the child is successful only when both parties carry out their obligations."^{36,37}

After listing matters she feels Aboriginal parents need to understand, Professor Watts asserts:

*Such understandings, too, are a prerequisite to the next step, which I see as a critical step: the step when parents know the educational system well enough to be able to interact with it in such a way as to ensure that it is responsive to them and their children in ways that they desire. At present, in general, Aboriginal and Islander parents accept the education that is offered and the manner of its offering, not because they are content but rather because they are not in a position to see alternatives. With greater knowledge and understanding, they would be in a better position to shape education to their ends, to have an influence in bringing about the changes they desire."*³⁸

34 The Committee is aware that a special bridging course for migrants with overseas qualifications or practical experience as teachers began at the State College of Victoria, Toorak in July 1975, with 29 students enrolled in the first course. The course consists of six months intensive English language instruction followed by a special one-year teacher training course. Students who successfully complete the course will be eligible for the Diploma of Teaching (Primary) qualifying them to teach in Victorian Primary schools.

The course was funded by the former Department of Labor and Immigration and the Department of Education. The students (apart from one private student) received National Employment and Training (NEAT) Scheme allowances. With their knowledge of the language and cultural backgrounds of migrant children, the newly qualified teachers will make an important contribution in schools with high migrant enrolments and the upgrading of their qualifications is consistent with the need to develop greater awareness in the schools of the multi-cultural nature of present-day Australian society.

35 R. J. Havighurst, 'Minority sub-cultures and the law of effect', *American Psychologist*, 25, 4, (1970), pp. 313-22.

36 Havighurst, p. 314.

37 B. H. Watts, *Access to Education—An Evaluation of the Aboriginal Secondary Grants Scheme*, Commonwealth Department of Education, A.G.P.S., Canberra, 1976, p. 237.

38 Watts, p. 238.

3.63 Professor Watts calls for community education advisers to be appointed, and for Aboriginal parents to have assistance from 'a person resident on the local scene, a person who is accepted and respected, a person who is available to help parents gradually and meaningfully to extend their understandings and to extend their parenting role'. These ideas—community education advisers and local parent assistants—could fruitfully be extended to assist migrant parents who may be imprisoned within a wall of language and cut off from effective understanding of the community in which their children live. It could also be effectively extended to assist parents who have to cope with unexpected, and isolating, special problems arising from the learning problems of their children.

3.64 Factors of alcoholism in the home, factors of malnutrition in the family through ignorance or poverty, and sometimes consequent brain damage, factors of broken homes or the problems of single parent homes, cannot be dealt with by the schools alone and require social, economic, psychiatric, financial, medical and environmental action beyond the competence of this Committee as matters for comment. The Committee does urge an attack on these problems by governmental and community action and affirms that there are educational consequences from these defects which will remain unsolved without wider social action. The Committee, however, cannot recommend total social programs.

Conclusions

3.65 The Committee reached the following conclusions, that:

- (a) There is a strong advocacy in the community for improved services to overcome the problems of children with learning difficulties.
- (b) The problem for those providing the services is to assess real needs and meet them within the limits of resources, human, material and financial.
- (c) There is a need for improved teacher preparation and in-service development to enable more classroom teachers to manage a wider range of learning difficulties in the classroom. This is seen as eventually removing some of the pressure from specialist services provided by Departments of Special Education.
- (d) In general 'difficult' or 'slow' classes have received a disproportionate share of inexperienced and/or 'temporary' teachers, and are viewed as positions to be avoided. Even the recent trend to 'resource rooms' and 'withdrawal classes' can mean interested or extra staff, but not necessarily specially trained staff.
- (e) There is a need for improved measures to identify as early as possible those children experiencing learning difficulties or with handicaps which are likely to result in learning difficulties. Detection of these children must be followed by remedial programs which meet their specific needs.
- (f) There is an immediate need to provide more remedial and specialist support staff to assist classroom teachers to ensure that more children obtain individual help. Such measures are likely to effect the greatest improvement in the short-term.
- (g) Many children entering school are likely to be at a disadvantage which will reduce the benefit they receive from primary schooling. The reasons for this will vary, but will include undiagnosed and untreated medical defects, perceptual and physical coordination problems, and language problems caused by psychological, organic or environmental factors.
- (h) Unless a child's needs are identified and the child helped by an adequately trained teacher early in his school career, his future prospects are bleak. The chances of the child getting the help he needs decrease with each higher grade he moves into.
- (i) In future, the main emphasis should be on the primary area of education where the basic skills are developed. Unless children acquire basic skills at this level they will not be able to profit from opportunities available to them later.

- (j) Primary schooling has been downgraded, and that the greatest need for improvement and development is in that sector. One of the most urgent needs in education is for a totally new assessment of the paramount significance of primary education.
- (k) Children with learning difficulties in secondary schools quite obviously require remedial help. It ceases to be so much a matter of enabling the person to benefit from later educational opportunities as of acquiring basic skills to enable them to obtain employment, and skills needed for employment and to manage their affairs.
- (l) Although the existence of special needs has been clearly established, these needs will not be effectively met by attempting to classify children according to narrow definitions for the purposes of access to educational facilities. It is also perfectly evident that this is the view of those responsible for the administration of education in Australia. It is hoped that this is not just a fashion to subscribe to these views but a conviction on the part of those responsible for educational administration.
- (m) Departments of education should endeavour to recruit teachers who can help Aboriginal or immigrant children with their learning because they have a common background and language. Teachers with such language skills should be assigned to schools with significant numbers of pupils or students whose mother tongue is other than English. This action is obviously vital for an immigrant or Aboriginal child with a learning disability so as not to compound his language difficulty.
- (n) Programs aimed at developing language skills in Aboriginal children by using their mother tongues are conducive to the acquisition of literacy by those children. The Committee welcomes initiatives being taken in bi-lingual Aboriginal education and considers that every effort should be made to foster this development.
- (o) The particular problems of the Northern Territory require special attention. Many of the problems about which the Commonwealth Department of Education informed the Committee relate to the need for teachers specially trained for the teaching problems peculiar to the Territory. The Commonwealth Teaching Service should ensure that it takes this into account when recruiting teachers for the Territory. Decisive influence on recruitment of teachers for the Territory should be vested in the *Director for Education in the Northern Territory* and consideration should be given to amendments to the *Commonwealth Teaching Service Act 1972* to ensure that the Commissioner of the Commonwealth Teaching Service acts on the advice of the Director of Education. The responsibility of the Northern Territory for determining its own policies in regard to education should be recognised at least to the extent that the Director for Education of the Northern Territory reports directly to the Commonwealth Minister for Education. Steps should immediately be taken to enable the Community College in Darwin to be established as a college to train teachers to work in the Territory. Funds should be directed to this object as a matter of priority by the Commission on Advanced Education

Recommendations

3.66 The Committee recommends that:

- (a) Provisions in the legislation of some States denying the responsibility of education departments to provide educational services to handicapped children be amended, and that education departments provide such services.
- (b) Funding for special education should be undertaken as far as possible through the recurrent grants program. The Committee recognises, in making this recommendation, that:
 - funding for special education will need to continue for those institutions

- providing services for the very severely handicapped; and
- special funding will need to continue, at this stage, for some voluntary associations providing for the handicapped and for some State institutions where there are some residential medical or other aspects of care than the purely educational.
- (c) Departments of education make every effort to recruit teachers, preferably from the relevant ethnic groups, who are proficient in minority and migrant languages and place them in those schools having significant numbers of children of the same language group.
- (d) Departments of education responsible for the education of Aboriginal children should give priority to establishing bi-lingual programs to introduce children to literacy through their mother tongues. They should also give priority to programs seeking to involve Aboriginal parents in the education of their children.

CHAPTER 4

SUCCESS OF CURRENT MEASURES

4.1 Education departments and educationists now appear to agree that the learning difficulties of children, whatever the cause, should be coped with by the classroom teacher in the regular classroom to a much greater extent. Programs designed to meet each child's individual needs should be devised by the classroom teacher and the children grouped according to their needs within classrooms rather than placed on general criteria into separate classrooms according to judgments about their overall ability. Help for children experiencing difficulties with their learning should be provided initially by the classroom teacher supported by specialists coming from within or outside the school. But withdrawal to special placement should happen only in exceptional cases. The community in general and parents in particular need to be convinced that adoption of any new policies in education will result in improved learning experiences for all children likely to be affected. Some fears were expressed that those children presently performing well in the classroom might be held back by the inclusion of more children with handicapping conditions. The Committee was informed, however, that gifted children would benefit from teaching related to individual needs and would receive instruction more appropriate to their abilities than they do at present.

4.2 The general philosophy involved was put to the Committee by the witnesses from the Schools Commission:

The evidence is very strong that it is the classroom teacher who is the most important teacher in the act and that the extent to which we have to withdraw children from teaching by the classroom teacher is in a sense a judgment on the capacity of the teacher. I think it would be silly to say that that was not sometimes necessary, and for short periods, but the evidence, as you are no doubt aware, is that when children are put into withdrawal remedial classes it very often happens that the teacher they have there is not well qualified, has no special capacity for dealing with the problem; and if the child's problem has some origin in the atmosphere of the classroom, and in the way of assisted learning in the classroom itself, when the child goes back into the classroom and faces that situation unchanged, the effects of the remedial assistance will pretty quickly fade away. That is why we feel that classroom teachers need every form of support both specialised and general, that we can give them. But they need that support in the situation where they are.¹

4.3 Arguments in favour of these emerging trends in Australian education are:

- that the integrated approach is the way to ensure that all children experiencing learning difficulties will receive help; and
- that the classroom teacher can provide the administrative focus for the provision of support and specialist personnel.

4.4 The success of this policy will depend on:

- Teacher Training—the ability of the institutions which educate teachers to produce classroom teachers and specialists trained adequately for teaching across the whole range of ability (Chapter 7).
- Preparation for Schooling—the number of children coming forward to the infant and primary school teacher with disabilities needs to be reduced by a policy which will tackle problems at the earliest possible age. This can be done by providing access to a wider range of early childhood programs for more children.
- Screening, Diagnoses, Assessment and Recording—development of procedures which the classroom teacher can use for identifying the learning difficulties of each child.

¹ Evidence, p. 3593-4.

- Supporting Services for the Classroom Teacher—provide within the school and outside it a range of specialist support services and resources for the classroom teacher.
- School Organisation—organisation of learning within classrooms and schools to enable the classroom teacher to develop for each child a program that will meet the needs of that child. Therefore, class sizes must be manageable and teachers adequately supported by 'teachers aides' and appropriate materials and equipment.
- Special Schools and Special Classes—it is essential that the range of problems confronting the classroom teachers are not beyond their capacity to manage. This raises questions as to which children should be withdrawn from classrooms into special schools or institutions or withdrawn for specialised remediation, and which children with handicaps should be 'integrated'.

Preparation for Schooling

4.5 A serious problem for schools is the number of children entering with undiagnosed medical defects, perceptual handicaps and disabilities, speech disorders, problems involving physical co-ordination and lagging cognitive development due to their environmental background. The extent to which it is possible to reduce the number of children reaching school with disadvantages and disabilities will determine the extent to which more children with learning difficulties can be effectively coped with by the classroom teacher.

4.6 Controlled research studies in the U.S.A.² and action research projects in the United Kingdom³ have contributed to greater knowledge and understanding of the potential of educational intervention programs to effect educational change. In Australia research and intervention programs have been developing for some years. Research work has now defined more clearly the diagnostic instruments, assessment criteria and techniques that can be employed in educationally directed change processes. Action research programs provide an empirical basis for the further development of new methods.

4.7 Research establishes certain factors as being crucial in the success of intervention programs aimed at improving life chances. These are:

- the home is the most important influence on a child so that educational intervention at any level has to take this into account;⁴
- programs which focus solely on the child (to the exclusion of parents) will have limited value in the preparation for formal schooling;
- the earlier in a child's life that educational and social programs are introduced, the more effective and far reaching they will be, particularly if parents are partners in a program;
- any program devised will need to be administered with sensitivity to the characteristics of the particular locality where it is introduced, and local resources should be used as much as possible;
- the approach should be bi-cultural and bi-lingual where the children involved are likely to be disadvantaged because they are outside the cultural mainstream. But the outcome will be limited if parents are not involved as participants in the program.

4.8 The overseas research distinguishes between 'socially depressed' and 'grossly deprived' families. The former are able to respond to imaginative day care and pre-

2 U. Brofenbrenner, 'Is Early Intervention Effective?', A report on longitudinal evaluation of preschool programmes, Vol. 2 an O.H.D. publication, U.S. Dept of Health, Education and Welfare, 1975.

3 A. H. Halsey, ed., *Educational Priority: Vol. 1. Education Priority Areas; Problems and Policies*, Report of a research project sponsored by the Department of Education and Science and the Social Science Research Council, London: H.M.S.O., 1972.

4 Halsey, 1972; Brofenbrenner, 1975.

school programs particularly where parents are involved. But in the case of 'grossly deprived' families, intervention will not be effective unless supported by appropriate services designed for the whole family.⁵

Medical Assessment

4.9 Evidence to the Committee stressed the importance of early detection of medical defects. This evidence clearly indicated that although medical services were currently available for routine assessment of babies and young children many were missed by the screening because some parents did not take advantage of these services. The Committee was told by the Professor of Child Health at the University of Western Australia, Professor W. B. MacDonald, that:

Children with minor handicaps can be more easily diagnosed and more effectively treated, if they are brought to the attention of skilled personnel in medical, educational or social services before their defects result in irreversible changes. In order that this can be accomplished a screening system is necessary . . . An effective system not only has to be organised but administered by personnel who know what they are doing. It is at the administration level that systems break down. . . . Socially deprived families often do not attend child health centres or doctors of their own free will for routine examinations and health education even when such a service costs them nothing . . . These people come for medical and nursing attention when they have illnesses or injuries and under these circumstances minor handicaps are usually not looked for and not detected. Similarly, socially deprived families do not tend to send their children to pre-school centres even when they are free.⁶

4.10 The Social Welfare Commission in its Report on early childhood services⁷ also considered that emphasis on pre-school education would not benefit under-privileged children. Their parents would not take advantage of the opportunity. Benefits would go to pre-school children from well educated families with a knowledge of the advantages of education. Professor MacDonald endorsed these conclusions:

There is less incentive for under-privileged families to send their children to centres where there is trained staff. Sometimes there appears to be a cultural block, compounded by other factors such as family instability and mobility. Often language barriers compound a lack of knowledge of the facilities which are available. It appears that those who most need services whether they be medical, educational or social, are less inclined to come forward for these services for whatever the reason, than those who need these services the least but whose background and upbringing are such as to enable them to take advantage of these services.⁸

4.11 It thus becomes important to develop procedures to ensure that more children come within the scope of the early assessment system.

Identification

4.12 The problem then is to provide services so that they are used by those most likely to need them. Many submissions advocated universal screening of young children to identify those potentially 'at risk' for learning difficulties. Some called for the establishment of 'at risk' registers for universal screening to ensure comprehensive coverage without superficial assessment. It is also essential that if a problem is identified appropriate steps for treatment or remediation will follow.

⁵ These findings are supported in Australia: M. Liffman, 'The Family Centre—A Second Overview, a Study of the Second Year of the Family Centre Project', Brotherhood of St Laurence, 1975; and Social Welfare Commission, *Project Care: Children, Parents, Community*, Parliamentary Paper, No. 91, 1975.

⁶ Evidence, p. 2428–31.

⁷ Parliamentary Paper No. 91, 1975.

⁸ Evidence, p. 2431.

4.13 The Division of Clinical Psychologists of the Australian Psychological Society, Victorian Branch, argued strongly against universal screening:

*The first reason is that there really is no method that is scientifically validated and which is reliable for screening. Any method that exists would throw up many children who in fact would learn quite satisfactorily, although they would be labelled as having difficulty, and a large number of children who would later have difficulty, would slip through on existing tests. Tests that do exist, and which can give us a good guide, require two or three hours to administer individually to a child and his family by very competently trained professional hands. This is obviously out of the question on a mass scale.*⁹

4.14 Most evidence available to the Committee did not favour procedures such as 'at risk' registers. Where such procedures had been implemented it was found that either the procedure was so comprehensive that half the population screened were indicated to be at risk or the screening was not sufficiently comprehensive so that many children at risk were not identified. Any procedure identifying the groups at risk requires to be supported by follow-up procedures that lead to appropriate intervention.

4.15 Mass identification programs also tie-up professional workers so that they are not available for remedial treatment by other means. There is a screening process in use in the A.C.T. which attempts no more than to identify the children seriously at risk so that intervention can occur. This was described by the Commonwealth Department of Health:

Here in the A.C.T. there is a screening test which takes place at the age of 9 months at the Infant Welfare Section of the Department of Health. At 9 months it is possible to pick up such things as deaf and hearing loss, poor eye-sight and other lags in development which may or may not be serious. The children are then screened again at 3 years which is about the time they may be going into pre-school. In order to facilitate our early intervention program the children, if there is any noticeable developmental lag or handicap, are immediately placed in a pre-school so that the education intervention can take place along with the medical, the physical, physiotherapy, speech therapy, or whatever it is the child needs.

4.16 This program has been effective in the A.C.T. but it should be noted that the size of the population and availability of trained personnel are more favourable, and pre-school and other early childhood opportunities are also more accessible than elsewhere.

4.17 Unless identification of the symptoms by screening and confirmation of the conditions by assessment is followed by the necessary treatment then not only will the resources spent on screening be wasted but unnecessary anxiety for the individual will be created and exposure to discrimination may result. Dr Maddocks of the Child Health Project (S.A.) stated:

*The Project appreciates the problem inherent in 'labelling', and sees confidentiality as something which should be more between professional person and client than between professionals themselves. Otherwise, in this context, 'adjudged to be downward-bound from childhood, you proceed to fulfil society's negative expectations of you, and you never know why' (Susan Brownmiller (1975) reviewing 'Dossier' by A. Neier, in the New York Times Book Review, 80 no. 4,4).*¹¹

4.18 A point stressed by witnesses appearing on behalf of State and Federal departments and instrumentalities was the importance of the co-ordination of services. The Queensland Department of Education stated:

One of the major obstacles to effective recognition, diagnosis and treatment is the lack of communications and liaison between all agencies: social, medical and educational, who

⁹ Evidence, p. 3531.

¹⁰ Evidence, p. 3651.

¹¹ Evidence, p. 2299.

work with the child experiencing problems. The Committee could well look at ways of facilitating co-operation between the various agencies. There are some good models of multi-diagnostic facilities available.¹²

Screening, Diagnoses, Assessment and Recording

4.19 If the classroom teacher is to be responsible for the educational performance of a range of children including the handicapped and for taking children through 'individualised' programs, that person will have to be equipped with techniques to assess children's strengths and weaknesses.

4.20 When the child enters school there is a need for an assessment of that child before teaching can begin. Where the child has been observed at pre-school then the teacher may be provided with information that will assist her. But as the Western Australian Department of Education noted:

*Screening at the pre-school level is important but it is likely that many will be missed because they do not attend a centre or are not referred to any other agency.*¹³

4.21 Teachers will have to make their own assessment. Some evidence submitted to the Inquiry favoured screening at school entry and the attention of the Committee has been drawn to tests designed for that purpose.¹⁴ Opinion varies as to the age that children should be screened. The best evidence available to the Committee, however, indicates that the optimum time for a full assessment is at the end of the first or the beginning of the second year of conventional instruction.¹⁵ Predictive screening at pre-school or at school entry is not generally favoured as it is argued that if the child is assessed too early there will be assumptions made about his potential abilities rather than true assessment of his actual abilities. Evidence available to the Committee tended to favour individual evaluations of each child by the teacher and careful recording from this point of progress. The Bullock Committee, for instance, commented:

*We believe the most important part of the procedure is careful observation and recording. Of course, every good infant teacher sees this as a vital part of her normal work. She is continually observing her pupils and noting their difficulties, and she is often responsible for the first step in referring children to the educational psychologist, the school health service doctor, the speech therapist, or the social worker. The question is whether such practice should be systematised, so that a checklist ensuring consistency of observation is completed by every teacher and becomes part of the screening profile.*¹⁶

4.22 That inquiry concluded that some such procedure was desirable as it could not be assumed that all class teachers had the necessary skills to diagnose and record accurately. Check lists should therefore be developed to ensure consistency in the factors to be measured. The Bullock Committee expressed reservations about the use of 'at risk' educational registers:

The experience of local health authorities who have used 'at risk registers' has not proved entirely satisfactory. As the authors of 'From Birth to Seven' point out: 'The Registers have tended to become too large for practical use and substantial numbers of handicaps have been missed in low risk children who were not on the register'. This seems to us a serious limitation, and there is every reason to believe that the same criticism would apply to registers used as a sole means of identifying children who might need special help with reading and language. The essential is that no child who is for any reason missed should continue to be missed. More reliable and productive would be a detailed profile of every*

12 Evidence, p. 1760.

13 Evidence, p. 2607.

14 Marlene Sheppard, *A Teachers School Entry Screening Test*, 1972.

15 M. M. Clay, *The Early Detection of Reading Difficulties: A Diagnostic Survey*, Heinemann (Educational) Auckland, N.Z.

16 Bullock Report (1975), *A Language for Life*, Report of the Committee of Inquiry appointed by the Secretary of State for Education and Science, under the Chairmanship of Sir Alan Bullock, H.M.S.O., London, pp. 247-8.

child's strengths and weaknesses, and this should be used to plan an appropriate learning programme. (R. Davie, N. Butler and H. Goldstein, 'From Birth to Seven: A Report of the National Child Development Study', Longmans, London, 1972.)¹⁷*

4.23 In those States in Australia where there is a policy it appears to be proceeding along the lines of providing check lists which can be administered by classroom teachers. These constitute an administrative device which can be used to co-ordinate the various services upon which the teacher can call that apply to children with difficulties.

4.24 The Committee was informed of the work of the Early Childhood Development Study in Victoria. The broad aim of the Early Childhood Development Study is to investigate the possibility of the early detection of children who are 'at risk' educationally for a variety of reasons, and also to investigate the feasibility of intervention.

4.25 The specific aims of the program are to devise means of detecting children 'at risk', of helping them, and of evaluating the effectiveness of the procedures used to help them. If soundly based on research and evaluation this approach appears to be one likely to be of the greatest assistance to teachers.

4.26 Identification techniques and procedures are skills that should be developed through in-service training programs. Where the procedure reveals a condition that should be investigated, or where it establishes the existence of learning difficulties, a basis is provided for the classroom teacher to seek expert assistance with the problem. If a 'screening' procedure is employed it is of course essential that identification be followed by a remedial program.

4.27 The extent to which the results of assessment should be made available to parents or at their direction is a sensitive issue. The Committee believes that 'secret' assessment can be of very little value. The purpose should be to create specific programs of assistance to the child. The parents of children should be fully informed of what is proposed as far as the child's education is concerned and their co-operation should be sought. The initial screening should lead to the recording and regular assessment of the characteristics which are disclosed, and subsequent progress should be monitored. The records should be transferable with the child from school to school or inter-State, and made available on confidential terms to other professional persons concerned with the child's welfare. The Committee assumes that professional ethics protects the confidentiality of records.

Supporting Services for the Classroom Teacher

4.28 In an approach which centres on the classroom teacher it is essential that the teacher be adequately supported. This is particularly the case where it is proposed to increase the range of handicaps with which the classroom teacher is expected to cope. The Committee examined:

- supporting services within the school; and
- supporting services available to the teacher outside the school.

4.29 In all States there is a shift away from a system reliant on remedial teachers withdrawing children for special attention to one of providing resource teachers to work closely with the teacher in the classroom.

4.30 The distinction drawn in Queensland between remedial and resource teachers is that remedial teachers are highly trained specialists servicing a number of schools giving intensive instruction to selected children withdrawn to special classes or to learning disability centres. Resource teachers, on the other hand, work within schools as permanent members of staff and provide support to the class teacher by helping with

¹⁷ Bullock Report (1975), pp. 248-9.

the development of appropriate learning programs for children. Children are sometimes assisted in their own classroom and some are withdrawn for special, one-to-one or small group attention. Resource teachers operate from resource rooms within schools equipped with materials that can be used within the school.

4.31 A resource teacher is in turn supported by special services provided by the education department including remedial teachers, guidance officers and school psychologists. Where resource teachers are worried about the progress and adjustment of pupils they can call on these support services.

4.32 In South Australia the Department of Education is also moving towards this approach although currently the provision of remedial teachers who work with children on a withdrawal basis is still the common practice. The Department stressed that the change to school based resource teachers could not be brought about overnight. Remedial teaching on a withdrawal basis would continue to be a feature of South Australian education for the foreseeable future:

What we have said is that there should be, first of all, no increase in separate special classes in primary schools, a small increase in the number of remedial classes, and that the increase, where it occurs and our resources make possible, will be in what we call resource teachers or companion teachers.¹⁷

4.33 In Western Australia the notion of resource teachers appears to be understood differently. The policy of the Department of Education, which in keeping with most others, places the main responsibility on the classroom teacher, is the employment of supernumeraries who can take the class while the classroom teacher works intensively with those with learning difficulties. The classroom teacher is assisted by a resource teacher to advise on methods and materials who is termed an 'advisory teacher'.

4.34 Part of the advisory teacher's time is spent in providing specialised programs for children with severe difficulties. Part of the time is spent in acting as a resource person assisting and counselling grade teachers nearby who are attempting remedial work with the less severe cases.

4.35 All departments of education reported, however, that their ability to implement an effective remedial program depended on obtaining the services of enough appropriately trained teachers. The policy they acknowledged to be needed could not be implemented fully for a number of years.

4.36 The Committee noted a comment of the Schools Commission concerning support for the teacher from outside the school as understood in the past:

Within the ordinary school the main form of external assistance to teachers faced with behavioural or learning problems among children has been the guidance officer with psychological training. Such personnel have been and remain scarce. The pattern of their use has often been of limited assistance to teachers, students or parents. Visiting the school, the psychologist would concentrate on the child rather than on the school or classroom setting. The 'problem' was thus transferred to the child and attributes of his ability and personality. The resultant profile of the child was passed to the teacher, but little assistance was provided to assist the teacher to provide appropriate assistance to the child or to vary classroom practice and attitudes or provide a more encouraging and successful experience.¹⁸

4.37 Evidence from departments of education indicates that this criticism has been accepted and recognised as valid. Accordingly, new approaches to providing special educational services are under consideration. In the long-term the resource teacher will be available to the classroom teacher as a point of first referral. In the meantime the school psychologist and personnel from the guidance office will continue to play an important role in the diagnoses of children suspected of having learning difficulties.

¹⁷ Evidence, p. 2177.

¹⁸ Schools Commission, *Report for the Triennium 1976-1978*, Parliamentary Paper, No. 240, 1975, p. 238.

The inability of the classroom teacher to cope with many of the difficulties which arise means that guidance services in all States are under strong pressure. There are waiting lists for psychology and guidance services, and there is little assurance that remedial help will be available for all those identified as having problems.

4.38 Psychologists in most States are supported by remedial teachers, sometimes operating out of the guidance service and sometimes located in selected schools providing services to surrounding schools. In Queensland the Department of Education is building Special Education Centres to provide a service for exceptional children. These Centres are staffed by guidance officers, a remedial teacher, a speech therapist and in some cases containing full-time learning disability classes. Where personnel are available, a social worker and an occupational therapist are among the staff. They are, in effect, multi-disciplinary diagnostic and treatment centres. Two of these Centres are already functioning and others are planned for the future.

4.39 In Victoria the classroom teacher is supported by in-service training facilities for regular classroom teachers such as demonstration units and special education units. The services of specialist reading consultants are provided for schools and teachers. Specialist treatment centres provide tutorial help for students in persistent cases of failure. It is proposed to establish multi-disciplinary diagnostic and treatment clinics to serve the Department of Education. These clinics will conduct research as part of their activities. The Reading Research and Treatment Centre, Carlton, an example of such a facility, was described in the following terms:

*The approach taken is multi-disciplinary, with workers from many fields operating under the Director of the Centre. With co-operation between the Department of Health and the Education Department, the major fields include psychology, medicine, education, social work, physical education, occupational therapy and speech therapy together with other consultants as required.*¹⁹

4.40 The Special Education Centre at Macquarie University operates on the basis of referrals from the Department of Education of N.S.W. and accepts children with severe learning difficulties for an intensive twelve week period of remediation. At the end of this time, the teacher, supported by highly trained staff of the Centre, is expected to carry on the program developed for the child. The location of the Centre in a teacher training institution enables the resources to be available to assist in both pre-service and in-service training of teachers. This would appear to the Committee an economic use of resources. The Committee was similarly impressed by the Reading Development Centre in Adelaide and the Reading Treatment Research Centre in Melbourne. To the Committee the most impressive feature of these initiatives was the flexibility that permitted the simultaneous involvement and development of children, teachers, parents and specialists.

4.41 In South Australia similar facilities in the field of reading have been established. Support is provided for the classroom teachers in South Australia through the Reading Development Centre. The Centre is concerned with providing in-service education to assist teachers and schools to meet the needs of children in reading.

4.42 The Centre provides services for teachers of the following kind:

- in-service training in reading carried out at the Centre and within schools. Teachers are allowed time from work to attend courses at the Centre and are assisted in their schools by advisory teachers from the Centre;
- displays of reading material and diagnostic and testing material;
- the Centre acts as a source of advice to schools on reading;
- 'certain schools' are selected within districts for block intensive in-service training by the Centre so that the selected schools may become resource centres in the areas;
- services are provided for parents to assist them to help their children with reading.

¹⁹ Evidence, p. 785.

4.43 In the A.C.T. the Interim Authority encourages innovatory programs, for example three A.C.T. primary schools have set up 'learning centres', which are designed to prevent children 'at risk' from experiencing failure at school. All teachers in these centres have completed special education courses. The age/grade concept is not applied in these classes, which are limited to nine or ten children who are given individual programs suited to their particular needs. Children are returned to their normal classes for tasks they can master. The time children spend in the normal classroom is thus gradually increased.

4.44 Teachers in the schools are also supported by services in curriculum development. In Victoria emphasis is being placed on the development of appropriate curricula and curriculum guides to assist teachers in the task of developing appropriate 'individualised' programs for children. These guides are backed up by curriculum consultants and 5-day regional in-service programs for school principals and vice-principals to ensure understanding of the program. Demonstration units are being established in selected schools to enable teachers to observe the programs.

4.45 Reliance is placed by schools and by departments of education on the services of speech therapists of whom there is a serious shortage in Australia. This is particularly acute in Western Australia. All States experience difficulty in providing speech therapy and other special services to remote areas.

4.46 Provision of support services to teachers present particular problems in those States with large areas and sparse populations. The Department of Education in Western Australia provided the Committee with information about schemes in use in Alberta, Canada, since 1973:

One of the schemes, a Learning Assistance Centre, was set up in Grande Prairie. The Director of the Centre had a team of approximately five education consultants to assist him. The consultants and a social worker would travel as a group from school to school. Comprehensive diagnoses would be made of each child recommended to the group and remedial programs for the child would be designed by the group in consultation with the teacher.

The second scheme, the Learning Assistance Field Service Project, which was based in Red Deer, operated differently in that four education consultants were stationed in different centres throughout central Alberta. These consultants could call on the services of a speech therapist, a psychologist, a reading materials specialist and a mathematics specialist all of whom were based in Red Deer. The consultants also enlisted the assistance of specialist personnel in the community.

A key feature of the Learning Assistance Field Service Project was the follow-up activity conducted by the consultants. After a remedial program had been prepared for a child, the consultant would return in approximately three weeks to see whether or not the program was proving effective. If no progress was evident a new program would be designed. If progress was being shown the program was extended.²⁰

4.47 Greater use is also being made of occupational therapists and most departments employ social workers particularly to serve disadvantaged schools. Social workers can play a significant role in establishing contact between schools and the community and in involving parents in programs.

4.48 Problems of recruiting, to staff remedial services in the Northern Territory were reported by the Commonwealth Department of Education. The Department submitted evidence of an urgent need for all teachers in Northern Territory schools to have a background in anthropology and to be trained to teach English as a second language.

4.49 The Department in the Territory is entirely reliant in its recruitment program on teachers recruited from outside the Territory. It was submitted that the Community

²⁰ Evidence, p. 2597.

College in Darwin should be developed as a college to train teachers to meet the special needs of the Territory. The Community College would also take the responsibility for training Aboriginal teaching aides to work in schools in their own communities.

4.50 In paragraph 3.42 the Commonwealth Department of Education's acute problems of appointing specialists to existing positions and retaining them in service were noted.

School Organisation

4.51 In its Report for the Triennium 1976–1978 the Schools Commission commented:

The main emphasis in ordinary schools should be on adapting the procedures in the ordinary classroom to individual differences among a wider range of children. This will often involve substantial organisational changes which group children and teachers and other staff flexibly over the whole school and allow specialist teachers to assist ordinary ones in the normal learning setting. Sometimes such specialists work with particular children; sometimes they assist the teacher in devising specific programs for particular children. Ideally, the whole notion of grade levels should be dissolved in ways which enable students to move forward at their own pace within a framework of increasingly demanding challenges which are within their reach. The movements in this direction, particularly in open space schools, tend to transform the old notion of "special" into the more fruitful one of assisting teachers more successfully to cope with individual differences.²¹

4.52 If a wide range of learning difficulties are to be effectively managed in the ordinary school classroom by the regular class teacher some adaptation of traditional classroom and school organisation is necessary.

4.53 The discussion of this topic has been confused by the debate about the comparative virtues of traditional and modern methods in education. This is a failure to recognise that teaching is effective for a particular child or it is not. That is the real issue. The objective is to make teaching effective.

Classroom Organisation

4.54 The ideas underlying the new directions in education is to ensure that all children proceed with learning at their own pace and according to programs developed to meet their individual needs. Although individual instruction is regarded as a new development an argument to the contrary has been stated:

And yet ironically, Australian teachers have demonstrated over the past seventy years or so that they can individualise teaching to some extent. The absurdity of class teaching in the one-teacher school made individualised programs virtually automatic.²²

4.55 The essence of individualised instruction is that the classroom teacher becomes less of a supplier of information and more of a facilitator of each child's learning. The problem is to ensure that along with appropriate programs and materials there are sufficient teachers and teachers aides in the classroom so that no child's needs are neglected. The extent to which such organisational structure is successful will depend on:

- the training, ability and conscientiousness of the classroom teacher; and
- the supply of teachers with the appropriate range of skills and resources.

4.56 The difficulties for the classroom teacher involved in the new approach are not to be underestimated:

To implement effectively a program of individualised instructions requires a teacher to be able to think and work in a particular curriculum area over at least a five-year age span

21 Schools Commission, (1975), p. 241.

22 K. B. Start, 'Teaching and the Quality of Education', *Essays on Quality in Education*, Edited by B. S. Crittenden and J. V. D' Cruz, Primary Education (Publishing) Pty. Ltd., Richmond, Vic., 1976, pp. 104.

*concurrently. Within seconds, as she moves from Jack to Jill, she may have to change gear from the curriculum suitable for a child achieving at a Grade 2 level to that appropriate at Grade 6. Hence these curricula have to be at instant recall. There are relatively few areas in which she can be so versatile, certainly fewer than the number she can manage if teaching a whole class. Also her record-keeping must become a focal point of her procedures. To know where every child in her class is in every subject at every stage in time is more than she could hold at instant accurate recall. Yet such knowledge is crucial if each child is to program at his own pace. Furthermore, the intensity of this method of teaching is little appreciated, for it is very draining, emotionally and intellectually. But the real challenge is to accept the **range** of ability one meets. It is far greater than it is currently socially acceptable to admit.²³*

Class Size

4.57 In many submissions it was argued that 'individual' instruction could only become an achievable objective if class sizes were reduced. Recommendations to this effect came particularly from teachers and their organisations. In some submissions static ratios of so many children to a teacher were nominated as being necessary. The effect of a reduction in the class sizes on pupil achievement is inconclusive. The call for a reduction in class sizes was based perhaps on the commonsense view that a teacher with large numbers of children in his or her classes will find teaching tasks more difficult to administer effectively than if the numbers were smaller. The Committee was told that there is much that can be achieved within present class sizes if teachers are better trained and supported in working with learning difficulties. While a reduction in class sizes may have advantages it is of dubious value if not accompanied by an upgrading of the teachers' skills. The suggestion was made that a mere reduction in class sizes alone can represent an inefficient use of resources. Teachers salaries account for more than 80 per cent²⁴ of the recurrent expenditure on schooling. Any increase in the number of teachers will, therefore, profoundly affect costs. More classes mean the provision of more learning space also adding to the costs.

4.58 The appropriate teacher/pupil ratio will vary depending on the range of learning difficulties contained in any given learning situation. This means that there is no convenient prescription of so many teachers to so many children.

4.59 In some localities where the living and social conditions are more favourable the staffing ratio would not need to be as high as where circumstances predisposed children to learning problems. There are many schools in Australia where there is a high proportion of children whose learning needs could not be met except by highly specialised help. For this reason it would not be helpful to specify a static ratio of teacher to pupils. Such inflexibility could only lead to a staff placement in favour of those already better favoured in terms of environment.

School Administration

4.60 Evidence indicates that other forms of organisation of the classroom are equally important and that management of the schools must be flexible enough to facilitate the interaction of classroom and resource teachers, outside specialists and school administration.

4.61 It is essential also that the school should define clearly what its aims and objectives are for the whole range of ability levels. The principal should communicate specific and defensible levels of attainment that should be achieved. There is no reason why a policy to achieve these aims should not be administered flexibly and with the full

²³ Start, pp. 104.

²⁴ Schools Commission, (1975), p. 63, Table 4.17.

co-operation of the staff of the school. The minimum goals for each child should then be stated pursuant to the teacher's assessment of his ability. These specific individual goals should be made known to parents. This is particularly important where the child's parents and the school have different expectations for the child.

4.62 It is essential that principals, teachers, specialist teachers and other professionals should be fully accountable to parents. Where the responsibility for decisions taken concerning a child is not the responsibility of the school or an individual within the school, then it is necessary that responsibility be accepted by the actual decision maker involved. Those responsible for making decisions should be easily accessible to the parents of the child affected by a decision and the decision making professional should be responsible for explaining the reasons for the decision taken.

4.63 Decisive for the child is the motivation gained from the home, and teachers are often either compensating for deficiencies in background or building on inspiration given to the child from the family. Some information was given to the Committee of a recent investigation in Britain, as yet unpublished and not yet fully assessed, which clearly indicated that reading skill, for instance, in general seemed to be proportionate to parental interest in the child's proficiency. In the late stages of primary school the children with the highest reading skills were those who read regularly to their parents now. The next highest group were those who read occasionally to their parents now. Third were those who had read regularly to their parents in infants grades but did not do so now. Fourth were those who had read occasionally to their parents in infants grades but not now. Fifth were those who had never read to their parents at any time.

4.64 Evidence to this Inquiry too often indicates that parents are frightened and confused in their relationship with schools and departments of education. The appropriate channel for redress is frequently not clear to a parent who has a grievance. Responsibility can frequently be shuttled between central office and the school so that it becomes impossible to locate the official responsible for decision making.

4.65 It is important that schools develop curricula relevant to the needs of all children designed to equip each child for life. This implies that for many children the content of the curriculum should be less academic than for others. It is distressing if schools, particularly at the secondary level, fail to provide relevant education for children who are not academically gifted or who lack intellectual interests. The need is that the school should open itself more to the community and should ensure that necessary experiences are available to the children—experiences relevant to the lives they will lead after school.

Secondary School

4.66 The evidence given by departments of education indicates that reform is easier to bring about in the primary than in the secondary schools. In secondary schools teachers are more highly specialised in subject areas. They tend not to know the students so well personally as they see them only in relation to their subject. Nor is there generally the same assumption that each teacher in the secondary school should take responsibility for the basic education of students. A common failure in secondary education is that within the secondary school there is often not a particular teacher who can be held accountable for a child's general progress and more particularly for his pastoral care. There is no class teacher in the same sense as in the primary school where teachers are generally responsible for pupils.

4.67 The Victorian Department of Education noted this defect in its impact on children with deficient basic skills:

There is little doubt that most teachers need to pay greater attention to language as the

*basic instrument for promoting or withholding learning. There are forms of oral language used by teachers which are just as unintelligible to pupils as written language is to non-readers. Classroom consultants who can perceive this and diplomatically and delicately mediate for pupils and teachers can do much to overcome this cause of failure. There is also little doubt that behind this smokescreen of failure caused by inappropriate curriculum lie other causes. Until each school has at least one well trained consultant to work as outlined above, and who can refer pupils to specifically trained specialists such as medical doctors, psychologists, speech therapists and so on, to support hypothetical diagnoses, it is unlikely that every child will be properly catered for.*²⁵

4.68 Where the skills required by students are shown to be deficient, subject teachers should be responsible for improving those skills within their subject areas. There should be no assumption that the responsibility for general remediation belongs always to others.

4.69 The Queensland Department of Education commented that this situation was exacerbated by the way text books were written:

*... most content area text books are written with little regard for readability.*²⁶

4.70 The Bullock Committee put forward the notion of the development of language across the curriculum. The relevant recommendations were:

Every school should devise a systematic policy for the development of reading competence in pupils of all ages and ability levels.

Each school should have an organised policy for language across the curriculum, establishing every teacher's involvement in language and reading development throughout the years of schooling.

*Every school should have a suitably qualified teacher with responsibility for advising and supporting his colleagues in language and the teaching of reading.*²⁷

4.71 The Reading Development Centre, Adelaide, and the Reading Development and Treatment Centre, Melbourne, are implementing the spirit of these recommendations by their policy of promoting *reading in the 'content area'*. Less able readers should be provided with reading material in the content area of subjects at a suitable level of readability and the recognition of teachers of content subjects that they need to teach the language content of their subjects.

Special Schools and Special Classes

4.72 The evidence of departments of education indicated the long-term aim of integrating a wider range of handicapped children in the regular school. In the short-term, however, departments saw a need to retain special schools for very severely handicapped children and to provide facilities for intensive remediation on a withdrawal basis. If the argument is accepted that management of a much wider range of learning difficulties and handicaps at the level of the regular school is desirable two questions require an answer:

- What are the parameters of a policy of integration?; and
- At what pace should departments proceed to implement the policy?

4.73 The arguments for greater integration of handicapped children in the school have been developed overseas. The American educationist, Dunn, for instance, argues that:

Discrete disability labels have excluded from special education services many children with fairly serious learning problems who did not fall neatly into one of the traditional categories. The most apparent omission has been children formerly said to have 'minimal brain dysfunction' and now called children with 'specific learning disabilities'. These

25 Evidence, p. 815.

26 Evidence, p. 1735.

27 Bullock Report (1975), p. 514.

*pupils do not fall into any one of the traditional areas yet have rather severe reading and other school problems . . . the increased number of children with multiple handicaps has made barriers between the various areas of exceptionality even more indefinable than in the past. As will be pointed out time and again, disabilities are generally multiple. Dividing a field into narrow, discrete areas often denies such children a comprehensive special education program . . . discrete categories have tended to create attitudinal problems among some narrowly trained specialists who feel capable of serving only pupils who have the one disability in which they have their preparation, a condition which seldom exists.*²⁸

4.74 Mr Wood, headmaster of St Michael's special school in Launceston appeared with the Schools Commission. He stated that historically special schools were regarded as dumping grounds and that the teachers working within them did not have any special training. He recognised the need for special placement in the case of severely handicapped children:

*But I am concerned about special schools like the one that I have, which is a very well equipped place, but which exists mainly because classroom teachers do not have the expertise necessary to deal with children who have learning problems, problems in the area of reading particularly, and, as a consequence, these kids do sit there for four or five years and, when they reach the stage at which they feel like throwing things, then they are put out into special schools like mine.*²⁹

4.75 The evidence of parents of handicapped children to the effect that special placement does not necessarily lead to special opportunities for the children who have been so placed is noted earlier in the Report. The concern of parents in their evidence to the Committee was to obtain the best possible educational opportunities for the child given the child's handicap. The notion that these opportunities can be created if some special provision is deliberately made, persisted in the evidence to the Inquiry. The Association for Children with Learning Disabilities (ACLD) stated that although they would prefer that children be integrated in regular schools it was to be doubted whether classroom teachers currently in the schools were equipped to meet the needs of these children.

4.76 Much evidence submitted took the form of requests for special placement in clinical situations. The argument here was that a multi-disciplinary approach to problems was needed. In this view the child should have access to the skills of a variety of professional medical workers and teachers trained in special education operating out of special clinics. That there is a demand for such facilities was made evident by submissions which discussed special withdrawal centres, special schools and special services provided privately. These services include assessment by educational psychologists, speech therapists and occupational therapists practising privately to multi-disciplinary clinics that provide a resource to independent schools. Some independent schools are provided specifically for children with perceptual handicaps—Currajong, a school in Melbourne, for instance, describes itself as a school for the 'intelligent under-achiever'. Teachers in these schools are often dedicated and highly trained. They meet a community demand and need, as do the community services which offer remediation during the week-end in a clinic-setting. Correspondence from parents indicated widespread resort to private tutors and remedial reading teachers.

4.77 Integration is not without its sceptical observers:

*A situation is developing in general and special education which is impregnated at the most with the reality of failures; at the least with dangers to the children who are purported to be served. Suddenly, for a variety of reasons, the educational watchword is **integration**. A*

28 L. M. Dunn, ed., *Exceptional Children in the Schools—Special Education in Transition*, Holt, Rinehart & Winston (2nd Edition), 1973, p. 549.

29 Evidence, p. 3607–8.

movement is developing against the utilisation of the special class. Just as special classes were the solution to all of an administrator's educational problems a decade past, now, with equally as little or no thought, the same school officials are advocating that most exceptional children be assimilated into the regular grades.³⁰

4.78 Concern has also been expressed recently in Australia that departments might embark on a policy of integration without adequately researching the local situation.

4.79 The Professor of Special Education at Queensland University stated in a recent article:

Many exceptional children are vulnerable children. The overwhelming moral imperative then, in my view, is to contain and limit the risks they will encounter (but not, of course, to overprotect them). Will these risks be greater or less in an integrated than in a segregated setting? I suggest there is, or should be, no simplistic answer to this question.

At the pragmatic level, how well pleased can the regular schools be with their performance to date in catering for the needs of those not labelled and segregated? For some indeed, it is a sorry record. If we adopt the goal of integration, we must at least offer the hope of realization of the expectations it arouses. Can we do this?

Before attempting to decide in what organizational setting the mildly mentally handicapped child will be best and most positively served by education, research must provide the answers to questions relating to the child, the parents, the teachers and the system. The pattern of answers to these questions would help policy makers to decide whether morals and ethics would best be served by integrated or segregated provisions, and whether idealism positively informed their decision or led them to a decision blind to realities and foredoomed to failure.³¹

4.80 It would appear that the State departments of education are well aware of their limitations in terms of resources to implement fully an integrated approach to schooling. Their qualifications are of the following kinds:

- Recognition of the fact that the preparation of many teachers currently in employment does not equip them to manage the problems of children with severe disabilities without considerable specialist support from outside the classroom;
- The need to continue withdrawal classes to provide remedial attention for severely disabled learners;
- The need, in some cases, for a better pupil/teacher ratio to reduce the stress on classroom teachers; and
- The need for more specially trained teachers to act as resource teachers within the schools.

4.81 The current mood is therefore:

- To prevent the creation of new categories whilst slowly proceeding with integration of more children with less severe handicaps into regular classrooms. Increasing the skills of class teachers must occur simultaneously with this movement;
- To modernise the organisation and administration of schools and to educate teachers to accept the new role expected of them;
- To ensure that where a child is withdrawn for special help the classroom teacher does not cease to be involved and is assisted to continue remediation when the child is returned to the classroom;
- To recognise the need for more in-service programs for existing teachers; and
- To encourage all specialist non-teaching personnel to work with and through the classroom teacher.

4.82 Such voices that have been raised in criticism of 'integration' have not in the main argued for a return to special placement but have pointed to the dangers of

30 W. M. Cruickshank, 'The False Hope of Integration', *The Slow Learning Child*, 1975, 21(2), pp. 67-83.

31 B. H. Watts, 'Special Education in the Seventies: Promises and Problems', *The Slow Learning Child*, July 1975, 22(2), p. 76.

proceeding too rapidly with a major social change when it is not at all clear:

- That the resources currently available are adequate to implement the new approach;
- That the evidence upon which decisions are being made (mainly from North America) has not been fully validated in Australian conditions by researchers; and
- Whether the glibness inherent in such phrases as 'individualised instruction' and 'taking the child from where he is at' masks the realities of the situation in the regular classroom where in practice the teacher neither has the training nor the necessary support to implement the strategies that are required.

Conclusions

4.83 The Committee reached the following conclusions, that:

Preparation for Schooling

- (a) There is an urgent need to identify children likely to experience learning problems to ensure that action to meet their needs is taken. The child with language problems, whether attributable to organic, ethnic or environmental causes; the child who comes from a home where language is limited; the child with physical co-ordination problems; the child seriously disadvantaged because of his background and home environment; as well as the child with sight and hearing loss; and the child with indications of mental retardation, should all be directed to appropriate remedial programs.
- (b) If early childhood opportunities were more widely available, the ideal situation would be to use them as a basis for screening and remedial services. Those caring for the children in centres would then be able to identify children with apparent disabilities. The attention of medical and other specialists visiting the centre could then be directed to the children causing concern. It would be possible, administratively, to arrange for a variety of specialists to include all such centres in their regular visits. As a minority of Australian children are attending pre-schools, or are in other forms of day care, such screening as does or can occur on this basis is not by any means comprehensive.
- (c) more emphasis should be placed on strengthening existing medical and para-medical services, and ensuring that more children are assessed and receive help where the need is indicated, than on trying to develop universal procedures to screen babies and children on a population-wide basis.
- (d) In view of the evidence that children from economically and socially disadvantaged families are more likely to be the ones missed by the present medical and developmental assessment procedures and evidence that they tend not to take advantage of pre-school, day care and other early childhood opportunities, positive inducements should be provided to those families to make use of facilities designed to improve educational opportunities for their children. This was argued by Professor MacDonald:

Working mothers who from disadvantaged social conditions might not be motivated to bring their children for routine checks and health education or to send their children to pre-school centres. They might be motivated, however, to put their children into some form of child care centre whilst they go to work to earn money. One should then take advantage of this situation and ensure that the particular services whose trained staffs can detect minor handicaps and suspect potential education defects have access to these centres. If some system like this is not devised children who are disadvantaged will remain disadvantaged for the whole of their life span.³²

32 Evidence, p. 2432.

Screening, Diagnoses, Assessment and Recording

- (e) In the light of present knowledge, screening tests presumed to be predictive, administered at pre-school or school entry are not favoured as an educational instrument. The Committee noted research taking place into the development of more effective instruments for the purpose of prediction.³³
- (f) There is benefit in 'screening' procedures in which check lists proceeding from research and evaluation are used and include guidance for the teachers as to what to do when a particular difficulty is identified.
- (g) Systematic observations and recording of each child's progress by the classroom teacher should be the principal form of screening and should take place in every school. This should lead to a detailed profile of each child's strengths and weaknesses and should be used to plan an appropriate educational program.
- (h) Systematised observations should lead to selective diagnostic testing of those children whose learning performance causes concern.
- (i) The extent to which the results of assessment should be made available to parents or at their direction is a sensitive issue. The Committee believes that 'secret' assessment can be of very little value. The purpose should be to create specific programs of assistance to the child. The parents of children should be fully informed of what is proposed as far as the child's education is concerned and their co-operation should be sought. The initial screening should lead to the recording and regular assessment of the characteristics which are disclosed, and subsequent progress should be monitored.
- (j) The records referred to in (g) should be transferable with the child from school to school or inter-State, and made available on confidential terms to other professional persons concerned with the child's welfare. The Committee assumes that professional ethics protects the confidentiality of records.

Supporting Services for the Classroom Teacher

- (k) The Committee accepts the evidence of departments of education that the resources available to support the classroom teacher are stretched to their capacity. Provision of more trained personnel is needed to support the classroom teacher.
- (l) Remedial teaching on a withdrawal basis is likely to remain a feature of all education systems for the foreseeable future. Resources to sustain remedial teaching on a withdrawal basis are also not adequate. But, there is a realisation that withdrawal teaching should be intensive and of short duration. The aim should be to restore the child as quickly as possible to the classroom and to involve the child's classroom teacher in the remedial program.
- (m) For the foreseeable future the classroom teacher will continue to need supporting teachers and services, and will always need the support of specialist services. The current trend is for school psychologists and guidance personnel to work through resource or advisory teachers located within schools rather than on a basis of referral by class teachers. The resource teacher is thus becoming the important link in the chain of services. Training and deployment of resource teachers, in the Committee's view, is a policy to be encouraged. Is it too optimistic to hope that as classroom teachers develop specialist skills, priority given to the specialist remedial area will decline?
- (n) Those responsible for training and employing teachers will be faced with a dilemma in estimating future needs for staff. There is an anticipated decline in

³³ Dyslexia Research Foundation (W.A.)—is being funded to undertake research on the 'SATZ' program by ERDC (See Appendix IX).

primary enrolments. Current indications are that training institutions will be graduating greater numbers of trained teachers in the 1980's than at present. Reports³⁴ suggest that there may be an overproduction of teachers. One consequence of this should be that more teachers will be able to be released for special training. Another is that departments of education will be more selective in their recruitment.

- (o) Resources which assist in the development of teachers' skills should be given priority by those responsible for providing educational services. In-service training, resource centres, reading development centres and demonstration units are among means of assistance.

School Organisation

- (p) There is no one form of organisation of schools, or of classes within schools, to suit all situations. Organisation should be based upon the educational needs of children, strengths and weaknesses of the teachers and upon the quality of the other resources, material and human, both inside the school and out.
- (q) The desirable ratio of pupils to teacher should be considered in relation to the environment of each particular school.
- (r) The forms of classroom organisation best suited to 'individual instruction' are flexible ones in which independent work by individuals and small groups can occur.
- (s) Careful planning should precede any organisational change and new ways of working should not be introduced until the staff has been prepared for them. Principals have a vitally important role. They should fulfil this role by:
- ensuring the careful objective evaluation of new ideas and approaches in learning and teaching. Head teachers may need advice on evaluation techniques;
 - encouraging their staff to have positive attitudes to and expectations of every child;
 - ensuring that staff maintain careful records of learning progress for each child;
 - ensuring that responsibility for remedial and corrective teaching is spread throughout the school within all subject areas;
 - encouraging in-service training and ensuring that the benefits from attendance at outside courses are absorbed by the whole staff;
 - working alongside their colleagues in the classroom; and,
 - developing definite policy objectives understood by the school staff that certain skills must be acquired by students. The headmaster and school staff should ensure that these schools' objectives are achieved.
- (t) In endorsing the notion that classroom arrangements should be flexible the Committee does not wish to be taken as endorsing any particular form of classroom organisation. It took note of the comment made by many witnesses that classroom organisation is a matter of the style that suits particular students and teachers and the propriety of different approaches varies from school to school and from class to class within schools:

*The open plan school is seen as producing the opportunity for self-paced, non-authoritarian teaching and learning. Yet the phrase 'open plan' has come to mean all things to all people. Certainly an open plan building is not axiomatic with open plan education. Individualised programs for children do not arise from architecture or out of pious statements, beliefs or even hopes about individual differences.*³⁵

34 Schools Commission Report, Triennium 1977-79, Parliamentary Paper, No. 202, 1976.

35 Start, p. 130.

What is essential is that teachers be trained to make the most effective use of open plan classrooms and all other teaching/learning environments that they will encounter in practice. This point is often missed by those debating the so called virtues and vices of open and traditional class organisation.

Special Schools and Special Classes

- (u) Educational policy should in future emphasise the importance of the school and the teacher meeting special needs in the classroom rather than emphasise special placement by classification of children with learning difficulties.
- (v) There can be unfortunate implications for funding in an approach which categorises the child with specific disabilities to attract finance and services. It is preferable to develop existing services and increase their flexibility so that they can be made available to as wide a range of children with learning difficulties as possible.
- (w) Integration of more handicapped children in regular education is a desirable goal. Evidence, however, suggests that the resources of the education systems are not adequate to proceed towards this goal any more rapidly than they appear to be doing. Research evidence is necessary to establish the feasibility of extending the range of education to be included within classes in regular schools.
- (x) There would also appear to be a need for education departments and schools to ensure that these changes are carefully explained to parents and widely publicised in the community.
- (y) Parents should be encouraged to take greater interest in the school and more responsibility for their children's success at school. At the same time definite measures to help parents and involve them in the education of their children should be taken. This would appear to be one way to ensure the acceptance and thereby facilitate success of new policies and initiatives such as the shift towards more integrated classrooms. Means of helping and involving parents, and establishing the positive contributions that they can make to the education of their own and other people's children, should be investigated. To this end pilot programs should be commenced, carefully evaluated and the findings publicised.
- (z) Quite crucial to the success of a policy of integrating a wider range of handicaps in regular education is that teachers are adequately prepared. They should be supported during service by programs to develop their skills and by access to the skills of a range of specialists. To this extent it is essential that teachers be involved in discussions about proposed integration policy.
- (aa) Special schools will continue to occupy an important place in all education systems providing for the severely handicapped. Independent special schools providing for children with milder handicaps will undoubtedly remain a feature of education in most Australian capital cities. It is important that the experience of these schools be available for consideration by educational administrators, and to this end work done should be evaluated and published.
- (bb) It is most important that there should be a definite policy by departments of education of carefully evaluating new initiatives in educational method. It is equally important that new policies such as integration and their consequences should be monitored. The results should be made widely available so that others can profit from the experience elsewhere of those working in new fields.

Recommendations

4.84 The Committee recommends that:

Preparation for Schooling

- (a) Funds be allocated by all levels of government, Federal, State and local, to increase the range of early childhood opportunities, with priority being given to those families in greatest need.
- (b) Grouped services consisting of pre-school, day care centres and health clinics be established in areas where such concentrations provide a needed service. These complexes should be located to be available to those communities shown to be in the greatest need of those services.
- (c) It is essential that those responsible for the administration of health and welfare services and those responsible for pre-school, day care, play groups and family day care should discuss and co-ordinate their activities to ensure that as many children as possible gain full benefit and are assessed at regular intervals so that those at risk can be given constant assistance during the first five years of life.
- (d) Health departments in the States and Territories should investigate the possibility of establishing a system such as in the United Kingdom of health and welfare visitors, in order that parents may be directed to appropriate services where their children are suspected of having medical defects or developmental problems.
- (e) Strategies and projects be devised, aimed at the cognitive development and social adjustment of children likely to be disadvantaged because they belong to cultural and ethnic minorities, or because they are subject to social, cultural or economic deprivation. These projects and strategies should be monitored, evaluated and the results of the evaluation widely disseminated.
- (f) More handicapped and disadvantaged children should be provided with early childhood opportunities. If childhood services are extended at public expense it will be necessary to ensure that the additional places are available to those most in need of them. The right to attend should attach to the child in need. At present some children (e.g. Aborigines in Western Australia) can have their pre-school fees paid by the State. This procedure where it applies ensures that children who would otherwise be excluded by the necessity to pay fees can attend. It does not always ensure that there is a place for the child, however. Authorities controlling early childhood services should experiment with the issue of entitlements to the parents of needy children so that each of these children can be assured of a place.

Screening, Diagnoses, Assessment and Recording

- (g) Communication and liaison between education, health and welfare authorities in all States must be improved to ensure that schools and teachers obtain information about medical factors likely to affect children's learning, and relevant confidential information about the child's behaviour in schools is received by non-education authorities directly concerned with the child's well-being.
- (h) All education systems should give priority to developing more systematic procedures for the identification, prevention and treatment of learning difficulties.

Supporting Services for the Classroom Teacher

- (i) Supporting services for the classroom teacher, machinery for liaison between institutions which train teachers and those that employ them should be developed and improved to ensure that the supply of teachers will meet the needs of departments in terms of appropriate training and numbers.
- (j) In the long-term, colleges of advanced education and universities should aim to

develop the skills of school based teachers so that less emphasis on specially trained remedial teachers will be needed. In the short-term there is a need for departments and training bodies to develop the skills of class teachers through in-service training and development programs.

- (k) Training institutions should endeavour to train more resource or companion teachers to work alongside classroom teachers in the schools to assist those children with learning difficulties.
- (l) Effort should be made to train more speech therapists.

School Organisation

- (m) The trend towards integrating more children with handicaps into regular school and class programs and should be preceded by pilot studies. These studies should be designed to provide information as to the effect of the policy on the handicapped children, other children, teachers, parents of handicapped and non-handicapped children.

CHAPTER 5

RESOURCES EXTERNAL TO THE SCHOOL

5.1 The school is supported by a variety of services offered by government and private organisations. Many submissions received from medical personnel described the role played by particular disciplines in alleviating learning difficulties. Submissions concerning special schools run privately and educational services conducted on a commercial basis were also received. It is also convenient to discuss broadcasting, library resources for children and adults with learning disabilities, and children's books in the context of resources external to the school.

Community Services

Medical

5.2 Children born in hospitals are examined at birth by the delivering doctor. The child health sister visits mothers after the child's birth and clinics are available to provide advice during the infancy of children. Gross medical disorders and dysfunctions will often be noted and the mother directed to a hospital clinic. Once the child reaches school he should come under the supervision of adequate school health services. These services are now being extended to pre-schools and day care centres. In most parts of Australia early childhood services have not yet been developed to the point that they can serve more than a small proportion of the population. For this reason many children do not receive a routine medical examination until the second year of primary school. By then some defects, which if detected sooner might have been remedied, may have become irreversible.

5.3 School medical services are an important resource for the school. Insufficient attention to the importance of trained medical and para-medical staff has led to a situation where these services are not available to an adequate extent. A frequently repeated recommendation to the Committee, from all branches of the medical profession, was that a multi-disciplinary approach should be adopted to diagnose and treat children with learning disabilities. This request was supported in many cases by teachers who saw a need for para-medical services to be more readily available. Parents also saw multi-disciplinary assessment clinics, where children could be taken initially for diagnoses and then for treatment, as a means of obtaining expert help for the child. In some cases clinics providing medical and educational services in the one location were advocated as a means of coping with children with learning difficulties. This evidence conflicted to some extent with other evidence which indicated that the procedure of withdrawal and learning in a clinical setting have an emotionally harmful effect on the child as well as being of dubious educational benefit. This evidence was to the effect that the medical services should be school based and integrated into other aspects of a total educational management program for the child.

5.4 The argument for a multi-disciplinary approach proceeds in part from the need for greater communication and co-ordination between professionals dealing with the child. This is sometimes expressed as a need for more awareness of the contribution that can be made to the development of the whole child by different professionals. These essential services for the child can then be organised and co-ordinated to ensure the most effective deployment of professional resources. The assumption by parents that a medical approach will lead to educational improvement is sometimes resented by teachers. Medical personnel in their turn resent educators assuming that within the educator's knowledge and competence they have the means whereby all manner of problems can be resolved by educational procedures alone, ignoring medical factors.

5.5 Parents often appeared confused as to whether a particular child's problem required a medical or an educational solution, or both. This led the Committee to

conclude that professionals providing services should co-operate to ensure that children are directed to the most appropriate sources of help. Where the services are provided as public services there should be procedures to ensure that this happens.

5.6 The Department of Child Health Service, Western Australia, described the medical role:

*Following the screening medical examination a program of management will need to be arranged. Obviously any physical or sensory deficit will need further medical attention. Where these factors are not present the medical role is to give a full explanation to the parents or teachers as to the child's medical status listing either aspects which are contributing to his learning problem or stating that no detectable physical or developmental factor is contributing. There is therefore not a denial of the problem but a placing of the problem within its appropriate context which, generally speaking, is in the area of educational management.*¹

5.7 Apart from medical workers functioning in institutional settings there was evidence that private medical practitioners were frequently consulted by parents concerned about the learning difficulties of children. The Professor of Child Health at the University of Western Australia commented:

*Most medical graduates and registered nurses have not had this special training (to identify learning related disorders) . . . In other words, a routine medical examination by a doctor or nurse is usually not sufficient to detect specific learning defects . . .*²

He concluded that the chain of referral should be from pre-school teacher, child care supervisor or pre-school health nurse to an assessment centre with highly trained expert staffs of paediatricians with special training in child development, developmental and educational psychologists, speech therapists and audiometrists, equipped with facilities for testing the special senses relating to learning.³ There was evidence that such staff teams are now being established under the auspices of departments of health or departments of education.

5.8 There is no disputing the need for such facilities. Their existence will provide doctors in private practice with an assurance of expert assessment of children brought to them with suspected disabilities related to their ability to learn.

5.9 There was also evidence about clinics operating from hospitals where groups of interested professionals were investigating particular aspects of physiological, psychological and learning processes. At the Royal Newcastle Hospital research work related to defects of vision and hearing received special attention. The Optic Department of the Sydney Eye Hospital conducts clinical services for children and there are teams of medical workers in children's hospitals and public hospitals throughout Australia conducting interdisciplinary research into the functioning of children. Most of these submissions were concerned to ensure that particular aspects of physiological, psychological and learning processes with which they were concerned were taken into account in any assessment of a child where learning difficulties are hard to identify.

5.10 Some evidence claimed that a multi-disciplinary approach would appear to be the most fruitful means of providing help for children with multiple handicaps and to determine the most appropriate program of management for children with obscure learning 'disabilities'. There is some scepticism, however, as to whether or not the multi-disciplinary approach dictates that specialists should be located together in a multi-disciplinary clinic to which the children are withdrawn from ordinary schooling. Some submissions advocate the setting up of such clinics, elaborately staffed, including provision for schooling. In some cases withdrawal to the clinic on a limited and

1 Evidence, p. 2860.

2 Evidence, p. 2430.

3 Evidence, p. 2431.

intensive basis is advocated. In others, placement is advocated on a more or less permanent basis.

5.11 American experience where multi-disciplinary clinics have been established has led to some criticism. L. M. Dunn in *Exceptional Children in the Schools* says of the interdisciplinary team model:

*At least three factors dictated against this strategy: (1) it was very costly in terms of dollars and manpower; (2) professions outside of education were making educational decisions; and (3) the emphasis was on finding weaknesses and speculating on their possible causes.*⁴

Welfare Services

5.12 In all States, departments of social welfare or their equivalents provide services which impinge on the activities of the schools. All departments were invited to make submissions to the Inquiry and most responded.

5.13 Some departments provide educational services to inmates of corrective establishments in the States. There are special schools in each State where children with severe emotional and behavioural problems can be referred by officers of the departments of welfare.

5.14 Departmental officers in all States come into contact with adolescents through youth programs that they conduct. Responsibility for young offenders and the operation of corrective establishments brings them into contact with many young people who have experienced failure and rejection in the education system.

5.15 In keeping with a tendency already noted in this Report for all forms of learning difficulties to be managed by the class teacher in a regular school there is a drift away from the establishment of special schools. There has been a move in some States to have the schools which exist within institutions caring for juvenile delinquents staffed by the department of education rather than the department of welfare which operates the institution. Evidence received from some of the departments of welfare noted that while improvement in behaviour and cognitive performance in special placement occurred, these gains were not sustained upon return to the regular school. This led the witness from one department to comment:

I do not believe in institutional schools—full stop. Therefore I would rather a child did not go to an institutional school. That does not mean I think he should go back to the school from which he came. It may be that he should remain living in a welfare institution but go to one of the local schools. I think then the breakdown that is talked about probably would not occur.

5.16 This view on the educational need for integration coincides with other educational evidence received by the Committee. However, the integration of these children into normal schools has ramifications well beyond the scope of this Inquiry and further investigation into these aspects by the relevant authorities would be necessary before any such action is taken.

5.17 The departments of welfare provided the Committee with information concerning the problems of both adolescents and adults with learning difficulties which are discussed elsewhere in the Report.

5.18 Departments of welfare did not support the notion that there was some correlation between specific learning difficulties in the sense of perceptual handicaps and criminality. Their evidence was to the effect that there was a high correlation between criminality and poor school performance but both were attributable to environmental factors. For instance the Department of Community Welfare in

⁴ L. M. Dunn, ed., *Exceptional Children in the Schools—Special Education in Transition*, Holt, Rinehart and Winston (2nd Edition), 1973, p. 549.

Western Australia surveying the cognitive performance of children placed in Longmore, a remand and assessment centre for adolescents, concluded that: *None of the children was given any assessment procedure to look for 'specific learning disabilities'. Some behaviours that are often said to be 'associated with' specific learning disabilities (e.g. distractibility, failure to establish lateral dominance, clumsiness) were noted in the general behavioural reports. In every case of low scholastic achievement there were present more obvious 'explanatory' features. These children had often failed to attend school, were often of limited intellectual potential, and very often had strongly negative attitudes to school as well as to other 'establishment' agencies. None had had any planned remedial reading teaching.*⁵

Services Offered Privately

5.19 The existence of private remedial teaching services was cited as evidence of inadequacies in the present school system. The Committee was advised that private teachers were unable to cope with the demand for their services. Private remediation is sought by parents when their children are failing to achieve at an expected level and the school appears unable to overcome this failure. Often schools themselves have suggested private remediation to parents as the demand within the schools for remedial teachers also exceeds supply.

5.20 Private remedial teachers may be trained teachers who have left teaching in schools for private practice or who do remedial work part-time as a second job outside of school hours. Others have come back to teaching as the demand for private teaching has grown. But quite a number of those offering private remediation do not have any specialist training.

5.21 Two district school counsellors with the N.S.W. Department of Education, in correspondence to the Committee, claimed:

... parents are now being offered from private sources psychological assessment of learning difficulties at a fee ranging from \$50 to \$150, and private establishments offer treatment for similar lucrative fees. There is in fact no professional control over such facilities, and educational advice and treatment can be given without any guarantee of evidence of competence. Anxious parents of disabled children are extremely vulnerable.

5.22 Parents are usually not in a position when seeking help for their child to assess the quality of the help available. Submissions from both parents and teachers sought registration to enforce minimum standards for these persons and organisations offering private educational services. The Victorian Branch of the Australian Remedial Education Association said they were sometimes consulted by parents about particular persons offering remedial services and while they were in no position to give an assessment of the individual's teaching ability, they were able to say whether the person was qualified as a remedial teacher or not.

5.23 Evidence was also received from some organisations providing, on a commercial basis, multi-disciplinary and remedial teaching services outside school hours. Some independent schools made use of such services on a referral basis. Other independent schools provide clinics and units for intensive remediation in areas of basic skills. As already noted there are a number of special schools, run privately, which cater specifically for the needs of children with perceptual handicaps or severe educational retardation. There are usually waiting lists for placement in such schools.

5.24 Also available to parents are programs with a strong medical bias for which substantial claims are made. The Committee was informed of the work of Doman and Delacato, described by a paediatrician, Dr D. Fraser, in the following terms:

⁵ Evidence, p. 2841.

The patterning method has been developed by Doman and Delacarto and is now practiced at the Institutes for the Achievement of Human Potential in Philadelphia . . . The basic theory behind this method seems to be that if a growing animal is deprived of stimulation then the brain does not develop through its usual developmental stages. The deduction that they draw from this is that therefore a brain which has not developed normally can be improved by increasing the stimulation to that brain. In this method of treatment the stimuli are provided with greater than normal intensity and frequency and as well, in severe cases they undertake passive movements of the body which would have been the response to the brain development had it not been injured. For the more severely handicapped children this program will mean up to twelve hours a day involving a number of different therapists each day for the child . . . As well as the methods mentioned, this form of treatment as proposed by Doman includes rebreathing of expired air for 5 minutes every hour (allegedly to increase blood flow to the brain), a decrease in salt and water intake, cessation of all anti-epileptic medicine and indeed no treatment of any fits which may last less than one hour in duration, and the newest of all their forms of treatment is negative pressure ventilation, in a device rather like an iron lung to take over the child's breathing. This is done for increasing lengths of time each day during the period of treatment, to allow the child the sensation of deep breathing. These methods of treatment are claimed by the promoters to produce astonishing results to both mildly and severely brain damaged children.

5.25 The Committee questioned a number of witnesses concerning the validity of these methods of treatment. The consensus was that the claims for the treatment have not been established. For example, Dr Andrews of the Schonell Educational Research Centre tendered as an exhibit a published paper on these programs. He concluded, with regard to the program, that:

At most the Doman-Delacato program must be regarded as experimental, and a radical approach to treatment of the handicapped. Proper evaluation, the responsibility of the promoters, is long overdue. Most objections to the program centre on the theory and assessment procedures on which it is based, the unsupported claims made for success, the high cost of participation, frequently a great financial strain on the family, and the promotional methods used. Parents' feelings can too easily be the trading point; the parent of a handicapped child can be expected to be willing to try any treatment that is held out with the hope of finding a 'cure' for their child's condition. If they don't try it, after absorbing the promoters material, guilt feelings are readily aroused. Because they are the ones responsible for the treatment guilt can be intensified if they undertake the program but progress is not made by the child, with questions of doubt arising about their own dedication and ability to carry out the treatment prescribed. And lack of success can too readily be attributed to failure by the parents. This situation is obviously one of extreme concern, but as with the value of the program to the child, the effects on family relationships after treatment in cases of little or no success have not been adequately evaluated to date.⁶

5.26 A statement issued in 1967 by the American Academy of Pediatrics and the American Academy of Neurology reported that there were no controlled studies available to support the greater value claimed for the program as compared with conventional, or other recent treatment procedures.⁷ The comments made on these programs suggest that carefully controlled studies should be carried out with equal publicity given to their results as has been given in recent years to claims made for these

6 R. J. Andrews, 'The Doman-Delacato Program: Review and Comment', *The Exceptional Child*, Vol. 73, 1976, pp. 61-9.

7 Andrews, p. 64; and P. O'Connor, J. Goyen and A. Maggs, 'A Critical Look at Dyslexia', *Education News*, April 1973, p. 10.

programs by the proponents. The Doman-Delacato claims are important and should be independently evaluated.

5.27 Other programs purport to offer remedial education using perceptual training or motor co-ordination programs. A review of the research on the effects of visual-perceptual training on reading and visual perception concluded, after reviewing 42 research studies, that little correlation existed between measures of visual perception and tests of reading comprehension.⁸ The same review also concluded that training visual perception skills, using currently available programs, has no positive effect on reading and possibly none on visual perception. Any improvement in learning that does occur is secondary to improvement in other areas such as motor skills and emotional behaviour. A child who has been under pressure from both parents and teachers to achieve in an environment where he is unable to achieve will experience beneficial effects if the adverse pressure from both sources is removed and he is placed in an environment where he can achieve something.⁹ Dr D. Fraser, a Brisbane paediatrician, in a submission to the Inquiry, said of perceptual training:

In recent years there has been an upswing in the role of optometry in children who have learning problems. I think we would all accept that ophthalmologists and optometrists clearly have a role in these children in terms of diagnosis and correction of visual problems. These techniques include the prescription of corrective glasses and the use of conventional orthoptic techniques. There is another view however amongst some optometrists and orthoptists. They have the so called 'developmental vision' point of view. 'They feel that learning in general and reading in particular are primarily visual perceptual tasks'. They point out that visual perceptual processes are related to sensory motor co-ordination of the child, and employ a wide diversity of educational and sensory motor perceptual training techniques in an attempt to correct educational problems. It is this group that prompted the Academy of Pediatrics and the American Academy of Ophthalmology to issue a joint statement critical of this approach. They stated amongst other things, 'there is no known scientific evidence that supports claims for improving the academic ability of learning disabled or dyslexic children with treatment based solely on (a) visual training (b) neurological organisational training, (laterality training, balance, sports, perceptual training)'. They also stated, what is my view in this area, and that is 'learning disability requires a multi disciplinary approach from medicine, education and psychology in diagnosis and treatment. Eye care should never be instituted in isolation when a patient has a reading problem'.

5.28 Psychological testing in private practice has increased in recent years because of the long delays often associated with school counselling waiting lists and the brevity and lack of educational usefulness of the reports to both teachers and parents.

Community Support Services

5.29 The Committee was told of a number of services provided from within the community which were relevant to children with special needs. The Noah's Ark Toy Library explained the purpose of this facility in the following terms:

The function of the Noah's Ark Toy Library is to provide a tension-free happy, non-clinical atmosphere in which parents and their children may receive guidance, support and acceptance. Communication between parents, among parents and professional personnel is therefore of major importance.

In order to carry out this major function then the toy library is a central resource and advisory centre to:

- *Parents and their children;*
- *Educational bodies;*

⁸ D. Hammill, 'Training Visual Perceptual Processes', *Journal of Learning Disabilities*, 5, 10, 1972, pp. 39-46.

⁹ Evidence, pp. 2708 and 2874.

- *Professional personnel; and*
- *Community groups.*

5.30 Children who live in remote areas who need to leave home to obtain help for their special need must have somewhere to stay. The Isolated Children's Parents Association submitted that there was a need for boarding establishments to accommodate children who had to leave home to receive help with their learning difficulties. The Association referred to a need for other facilities to help isolated parents with learning disabled children. They suggested mobile diagnostic units and mobile remedial teacher units to serve outlying areas.

5.31 SPELD in some States and a number of other organisations run holiday camps for children with learning difficulties where remedial assistance is provided in a congenial setting.

Libraries

5.32 The Library Association of Australia submitted that Australian libraries, particularly public libraries, are uniquely placed to collaborate in remedial education programs. For many years there have been library based literacy programs operating overseas, particularly in the U.S.A. and Great Britain. These have been well documented and have included a variety of approaches.

5.33 At present, Australian public library involvement in remedial education is minimal, though interest is growing rapidly. Some libraries hold remedial classes or offer accommodation to classes organised by other agencies.

5.34 The Association suggested ways in which libraries could be used to assist literacy programs. It mentioned that many, if not most, public libraries in Australia had a variety of materials of potential use in remedial programs. Given the necessary incentive and funding, these collections could most usefully be expanded to effectively complement community literacy programs.

5.35 Useful materials which libraries offer include children's picture books and 'easy readers'; series specially designed to assist the beginning reader, slow reader or newly literate; large print books; and to a limited extent records, tapes, films and slides. However, the Association noted that these materials are not commonly held in multiple sets as is standard practice in many libraries overseas.

5.36 Also, library activities such as storytelling, children's art and drama groups, and holiday clubs can all contribute to the development of skills in children that make for reading readiness and the ability to communicate, e.g. visual perception, co-ordination of psychological and motor functioning, the understanding of words as symbols. These activities are important cognitive and language experiences, and as a result can assist the child's acquisition of literacy.

5.37 Staff in most public libraries constitute a valuable resource:

- Some librarians are themselves tutoring illiterates or slow readers;
- Existing staff-community contacts are seen as important links in the process of developing public awareness; and
- A skilled librarian can provide the 'bridge' whereby the newly-literate person can obtain access to books and other communications media, maintaining and developing the newly-acquired skills. Some existing remedial programs appear not to have considered this problem.

Children's Literature

5.38 The Committee wrote to publishers of children's books. Publishers replied providing information on:

- The supply of children's literature in Australia;
- Research;

- Liaison with schools, educational authorities and libraries; and
- Production of texts designed for use by those retarded in reading ability.

The Supply of Children's Literature in Australia

5.39 About 30 per cent of children's books sold are Australian and 70 per cent are imported. Australian children have access to a considerable volume of books written in English or translated into English so they are fortunate in the range of material that is available. Publishers noted, however, that the system was balanced to favour importing material and against books written and produced locally. The reason for the high level of imports appears to be that books cannot be produced locally to compete in price. Publishers themselves expressed concern about the price of children's books. One publisher commented that many children's books are becoming uneconomic to publish. Standard story books now cost so much to print that the cost of retailing them has doubled. Standard picture story books and children's novels have quadrupled in price. This cost structure leads to the rejection of many manuscripts suitable for publication that would have once been accepted. Another publisher commented:

We are reluctant to take the risk of entering any new field of general children's literature as the risks associated with such a venture are higher than those associated with other types of general literature . . .

5.40 Comment was made on the fact that there had been a reaction against what were seen as trivial and shoddily produced children's books. This led to a quest by publishers for quality with the establishment of juries to assess the annual output and award prizes. It was commented that this had led to an over-emphasis in the other direction so that writing for children and book production now tended to take place in an academic and self-consciously 'creative' atmosphere. It also meant that the books being written were becoming increasingly costly to produce. As one publisher noted:

Thus the present day children's books of quality represents, in general terms, a swing of the pendulum from 'cheap and nasty' to 'expensive and literary'.

5.41 The swing is associated with a shift from the private individual buyer to the public institutional buyer. In this sense the quality of children's books is subsidised by libraries and educational institutions. This publisher commented that the pendulum had possibly swung too far:

With the result that we are tending to foster in our society an exclusive minority of literary book readers, and to ignore the needs of the less intelligent, less skilled, but not necessarily less enthusiastic reader . . . Even to the point where potential young readers sometimes reject the possibility of reading for pleasure altogether.

This has led to a situation where the range of literature available to children is limited to the quality end of the market so that young readers are expected to maintain a higher and more consistent standard of reading than their elders. A possible way of overcoming this problem would be for more children's magazines and material in 'newspaper' format to contain stories and articles of more topical interest and written in a less oppressive way. Good examples of such publications are available from overseas. The Xerox corporation in the U.S.A., for instance, produces material specifically for slow readers in a newspaper format available in class-sets. However, there is an equal need to provide more light material for good and average readers.

Research

5.42 Some publishers frankly admitted that their research was mainly market research and to this end they were more concerned with the potential purchaser—the mother, the school or the library—than with the consumer—the child. Other thoughtful publishers regretted the need for the market to depend on overseas

publications and saw a need for material that would be readily related to the actual environment and interests of Australian children. They noted that there was still a tendency for the themes of stories and reading material to be rural when the experience of most children in Australia was urban or suburban. Few story themes dealt with life in high rise apartments or other environments familiar to Australian children. This angle should not be excessively stressed as children have their other experiences on holidays and travels. Furthermore the Committee received no evidence that a child's interest is sustained with material which falls within his everyday experience rather than that which stimulates his imagination. There was also a tendency for plots to be set in ideal family circumstances, suggesting that this narrowed the range of experience offered in children's literature. This could tend to exclude or cut-off children whose experience was very different emotionally and socially. The Committee does not suggest that it is the function of children's literature to harass children with problems or that there is no place for literature dealing with ideals or imagination.

5.43 One publisher commented that the industry would value better liaison with and information from educational authorities to make the industry aware of inadequacies and improvements that might be made. Most publishers when contemplating publishing a new series first contact key people in education to assess the possible demand for the material. Once the demand and the approval of the school systems are confirmed, authors are commissioned. The material is tested in selected classrooms seeking information on matters such as the suitability of language and themes for the various age levels. Content and presentation including illustrations are also assessed.

Liaison with Schools, Educational Authorities and Libraries

5.44 A number of organisations exist to facilitate the exchange of information between publishers and schools. These include the Australian Book Publishing Association, the National Book Council, Australian Library Promotion Council and the Curriculum Development Centre. A further publisher commented:

How effective such bodies are in communicating with each other I simply don't know. I do know however that each year educational publishers continue to produce books that schools don't buy and that libraries are full of books that children don't read.

This publisher estimated 20 per cent of books in libraries account for 90 per cent of the reading. Other publishers claimed that liaison was generally unsatisfactory because of red tape which made it difficult to get behind the official spokesmen to the person in the field with valuable direct experience.

5.45 Another publisher commented that, although liaison with authorities had been unsatisfactory in the past, matters had improved. Departments of education are encouraging publishers to liaise with departmental experts.

Texts for Retarded Readers

5.46 The majority of publishers reported that they did not produce books especially for retarded readers. The reason appears from the comment of one publisher:

We have explored the possibility of producing material designed specifically for use by children retarded in reading ability, but have found it to be uneconomic to produce books which serve only this section of the community, because sales are insufficient to cover costs.

They went on to recommend:

The only way such specialised books can be produced is for the government:

- *to provide money to assist in meeting the cost of preparing such books; and*
- *to provide grants to schools for buying such books.*

5.47 However, other publishers do provide for readers in this category. An instance is

McGregor Pty Ltd who retails the 'McGregor Motivation Series' which they have endeavoured to design specifically for children with reading problems. First marketed in 1975, twenty titles have been produced.

5.48 Cheshire publish the series of *Trend* readers for junior secondary remedial readers. It is understood that several Australian publishers are planning to produce similar books.

5.49 The Committee's attention was drawn to a weekly newspaper produced for retarded readers in the U.S.A. by the Xerox company which contains material of current interest rewritten from newspaper items.

Broadcasting

5.50 Submissions from parents and from organisations such as the Australian Children's Television Action Committee and the Council for Children's Film and Television expressed concern about the effects of media, in particular television, on the educational performance of children. This led the Committee to seek evidence from organisations in Australia responsible for providing media services. The Committee wrote to the Australian Broadcasting Commission (ABC), the Federation of Australian Commercial Television Stations (FACTS), the Australian Broadcasting Control Board (ABCB) and the School of Film and Television, for submissions. It consulted organisations and also held discussions with associations of parents and professional workers in the field of children's creative arts.

5.51 It emerged from these discussions that any consideration of television would involve a number of factors. First, there was a general concern about the quality of programs being offered for children. Second, there was the wish to realise the potential of television as an educational medium, particularly its potential to assist those with literacy problems. Finally, there was concern with the impact of the media on children in a general way, apart from education. The Committee wished to discover what the potential of the media was to reinforce the educational process and whether it could motivate children to participate in other activities, improving attitudes to learning and thereby performance at school.

5.52 The quality of programs shown on television for children has become a subject of considerable public debate. In a report such as this it is not possible to treat this subject in more than a superficial way. The Committee considers, however, that children's television is a subject deserving of much fuller attention. Discussions of children's television usually centres on the programs shown between 6.00 a.m. and 8.30 a.m., and 4.00 p.m. and 7.30 p.m. on week days, and between 6.00 a.m. and 7.30 p.m. on Saturdays and Sundays. These periods are known as children and family viewing times. The ABCB, however, published statistics in its Twenty-sixth Annual Report in 1975 indicating that child viewers watched television well into the period designated for adults. The Committee confines its discussion to the quality of programs shown during the designated period which are required to conform with guidelines established by the ABCB.

5.53 Associations representing parents, with which the Committee held discussions, were concerned that:

- the existing guidelines were not adequate to ensure the quality of programs shown during these periods;
- the quality of imported programs was poor and that better programs were available overseas and should be imported;
- that the programs shown on commercial stations were subservient to the requirements of commercial sponsors of the programs rather than attempting to meet the recreational, cultural and emotional needs of the children.

5.54 Among the recommendations frequently made is a request for a total ban on

advertising during the scheduled family viewing periods. Other recommendations were for the ABCB to impose more stringent requirements on the commercial interest to ensure that the quality of programs met the standard indicated by the guidelines.

5.55 The Federation of Australian Commercial Television Stations submitted that it was not possible for all the requirements of parents' groups to be met if they were to fulfil their obligation to the television viewing public as a whole. FACTS assured the Committee that if good quality children's programs were available in Australia they would find a market. Recent relaxation of the ABCB's Australian content requirement has also meant that it would now be possible for more imported children's television programs to be shown.

5.56 The ABC, in discussions with the Committee, stated that its ability to do more in the field was affected by the allocation of resources within the Commission. More resources would need to be made available if more local content material was to be produced by the ABC. It made the point that, whatever it did, the impact was likely to be marginal as the 'rating' established clearly that most child viewers watched the commercial programs. Improvement in the overall quality of television lay very much in the improvement of commercial television.

5.57 Other interested persons with whom the Committee spoke who were familiar with the production side of television and creative arts for children, were strongly of the view that much more could be done to improve the quality of programs being made in Australia for children's viewing. Among the points they made were that:

- Production and performance standards of programs made in Australia for children compared very unfavourably with those made for general viewers;
- The cost structure of the industry worked against any immediate improvement because the money and prestige were not available for children's television; and
- Few opportunities for those interested in children's television existed. The commercial structure of the industry did not provide for the development of children's programs and many good scripts had lapsed for want of interest in their production.

5.58 Dr Ken O'Bryan, Director of Project Research for the Ontario Communication Authority, Canada, stated in evidence to the Committee:

First of all I would say the programs produced in Australia will do very little harm, but they are currently doing very little good. It seems to me that they are entertaining, only that—the type of program slot that the 'Electric Company'⁹ and our read-along program 'Sesame Street' occupied in competition with such programs as 'Gilligan's Island', 'McHales Navy' and others which are action oriented situation comedies. The mistake which would be made is the one we made in Canada 4 years ago. That is to replace entertaining programs with dull talking-head type educational programs. If a program is to be educational it first must be entertaining; its production costs and value must at least equal the production cost and value of its competitor on the straight, flat entertainment field. It would be worse than useless to develop educational television competitive home-viewing type programs which did not have full action, full sound, as much production value as possible.¹⁰

5.59 For the situation to improve a concerted effort is required to establish the resources available. This would include, in the first instance, an assessment of what is available overseas that could be imported. There is also evidence to suggest that more could be done in Australia itself to make more and better programs for children. Some recently established bodies, such as the School of Film and Television, Film Australia and State Film Corporations, have the production facilities and expertise upon which some concerted effort could be based. Funds would need to be made available for this

⁹ Produced by the same organisation which produces 'Sesame Street', but for adolescents.

¹⁰ Evidence, p. 3327.

purpose but this would need to be preceded by a very careful evaluation taking into account the gaps that exist. The Committee was told for instance that the needs of pre-school children and adolescents were catered for better than those of children aged between 6-12 years. As Dr O'Bryan pointed out there is no conflict between meeting recreational needs and incorporating educational values. Educational programs need not be deliberately didactic. In the U.S.A., the Walt Disney organisation has produced, on a commercial basis for commercial stations, outstanding educational and entertainment programs for children.

The Educational Impact of Television

5.60 Television is now recognised as a highly effective educational instrument. Its potential has particularly been revealed by the work of the Children's Television Workshop in New York and the BBC. 'Sesame Street', a program produced by the Children's Television Workshop for pre-school children, is now shown in many countries with television, including some non-English speaking countries. The Children's Television Workshop is required by its funding provisions to devote 25 per cent of its annual budget to evaluative research. This research indicates in relation to 'Sesame Street':

*There is currently very little doubt that the program does teach what it sets out to teach, which is letter recognition, concept formation, number recognition, some ideas about problem solving, recognition patterns of the types of animals, pictures, objects which you are likely to find in a kindergarten or grade 1 classroom.*¹¹

5.61 The success of this program and the 'Electric Company' which is designed for adolescents, and which is directed much more specifically at slow learners and disabled readers, has led to emulation in similar programs elsewhere in the world. Although 'Sesame Street' has obtained wide acceptance the 'Electric Company's' presentation has more specific cultural overtones which makes it less suitable for use outside the U.S.A. This has resulted in the experience, research and evaluation of the program being used as a basis for developing similar programs aiming to be both educational and entertaining in Canada, Japan and a number of European countries.

5.62 The development and evaluation of the programs has also assisted in the production of material designed specifically for use in schools.

5.63 It was pointed out to the Committee that television is also a cost effective way of producing educational material. The initial costs, which will be high if the programs are to be thoroughly researched and mounted with first class production support, will be offset by the ability to distribute the material widely and re-use it over the years.

5.64 Evidence would seem to suggest that the value of material, like the 'Electric Company', for actual instruction lies mainly in the area of motivation. In particular it can stimulate interest and break through the barrier of reading avoidance which is a habit characterising many disabled learners. But to be effective it is essential that the programs are supported by readily available back-up material. Readers and comic books are necessary to reinforce the effect of the program. The ABC commented to the Committee that effectiveness of any program with an educational aim is very dependent on proper follow-up and the provision of kits and books. It was noted that 'campaigns' (i.e. for literacy) often involved large initial expenditure, without any follow through. An expectation of action and of assistance was created which was not forthcoming, resulted in disappointment and a loss of many educational gains made during the campaign.

5.65 It was noted that the resources available within the ABC in terms of money, personnel and equipment were under pressure from different sections of the

¹¹ Evidence, p. 3316.

organisation. It was difficult to obtain priority for educational projects in competition with demands from other sections. A television program designed to help immigrant children learn English was in the process of being created.

Potential of the Medium to Reinforce the Education Process

5.66 The Committee was concerned to obtain answers to the following questions:

- The extent to which television is replacing reading as a recreational activity for children;
- The extent to which parents spend less time in activities related to their children's development because of their own viewing habits; and
- Whether television can promote literacy among children and the extent to which this is a function of special programs for children.

5.67 On the question of the extent to which viewing replaced reading, or failed to stimulate reading, the consensus was that there was no evidence that this was in fact the case. On the contrary, there was some evidence to suggest that television had actually stimulated the desire to read within that group in the community that actually read for pleasure. Children's programs being shown currently met part of the need of children at either end of the spectrum—pre-school children and adolescents. The children badly catered for at present were the group 6-12 years old. Reading may suffer in competition with television because it is a cumbersome and effort-laden process in comparison with watching television. The child who had difficulty reading will, therefore, be distracted to television if it meets his recreational needs.

5.68 Evidence was also given that television may be able to help in making reading a more valued activity in stimulating the child's desire to read by revealing what is available in books. The British Broadcasting Commission (BBC) produced a series where a well-known actor read stories or extracts from stories, the aim of this being to direct the child to the book. Television can reinforce the reading process. Sales of books on television series show this fact. What is being presented on television is not, however, necessarily relevant to what is being taught at school. Television has a potential to create a climate conducive to learning. It can stimulate the intellectual interests of the child. The Children's Television Workshop with its programs 'Sesame Street' and the 'Electric Company' has demonstrated this point.

5.70 The Federation of Australian Commercial Television Stations commented that television has a responsibility to appeal to a very broad cross-section of people and of interests. This means that it cannot deal in depth with much material. Its objective should be to interest people in a topic rather than to inform them in detail on the topic. So, television does not supplant the printed word but establishes an agenda for people's interests so that people can follow-up in greater detail media topics that interest them. This would be equally the aim of entertainment programs for children as distinct from specific educational programs.

5.71 Whilst the potential of television as a means of educating parents about their children's development and needs was recognised, it was apparent that little was being done in Australia.

Conclusions

5.72 The Committee reached the following conclusions, that:

Community Services

- (a) Children should be referred to specialists using a multi-disciplinary approach where the school medical or educational assessment reveals the need. The emphasis in the multi-disciplinary approach should be on co-operation and

- understanding between professions to produce an assessment of learning difficulties in educational terms.
- (b) Special placement will be necessary where educational or medical assessment shows that problems cannot be managed by the classroom teacher supported by the services available to her. There will always be a need for specialised establishments to manage the problems of children who are severely mentally retarded or grossly physically handicapped; establishments where the full range of services are available on a continuous basis.
 - (c) It would be unfortunate if funds were directed towards establishing clinics designed for the withdrawal of children whose learning difficulties or medical disabilities are not so severe as to prevent them remaining within the regular school.
 - (d) Existing resources should be developed to the point where they can cope with the comparatively small proportion of children with very severe handicaps.
 - (e) Funds should be directed towards improving existing services such as the school medical and guidance services in each State, extending their scope and enabling provision within that context for teams capable of intensive assessment for use by those services on a referral basis. If special placement is to be discouraged in education it must not be allowed to reappear under the guise of medical treatment. *In particular there is no case in the Committee's view for education to be provided in a medical setting except for children so seriously disabled as to make such provision essential.*
 - (f) Not all children at school are examined by the school medical service. Consequently there is an urgent need for the school medical services to have the personnel and administrative procedures to ensure that *all* children at school are adequately examined.
 - (g) The trend in funding should be the development of services already in existence rather than the establishment of new clinic-type operations not tied to the existing services.
 - (h) Guidance, medical and therapist staff should be of sufficient number so they can come to know the individual teachers well enough to establish mutual understanding and rapport.
 - (i) Consultative staff from outside the school, and the school's resource teacher, must have insights into the organisation of the school, and into the attitudes of the teachers and into the social setting in which the school operates. They need to work with teachers in the very situation in which difficulties occur, and be available to the teacher for possible further consultation after the teacher has devised and used his or her own programs and materials.

Services Offered Privately

- (j) There is a strong demand for private remedial assistance. Whether this demand reflects a failure on the part of schools or signifies the unreal expectation of some parents for their children was difficult to determine. It was concluded, however, that those providing services privately should be subject to some form of evaluation either at the instance of a parent dissatisfied with the quality of the service or, in the public interest, to ensure that those offering their services privately possessed the skills and competence they professed.

Community Support Services

- (k) The potential role of public libraries and their staff in the acquisition and development of the reading skills should be further explored. The Committee is

aware that there is a fear on the part of people from underprivileged and inarticulate sections of the community in approaching librarians and entering public libraries. The accessibility of these services, including psychological accessibility is important.

Children's Literature

- (m) There is a need in children's literature for more Australian material of general interest for young readers. This is not to suggest that stories from abroad and traditional stories are not suitable material for children. Quality of the text material is the criterion wherever published.
- (n) The price of children's books is a cause for serious concern as the cost of even the simplest books for children places such books beyond the resources of most families. The cost structure of the industry seems to have led in Australia to the supply of expensively produced books of high prestige value. The production of cheaper, lighter reading material possibly in a magazine format should be explored as should the production of topical material in a newspaper format. This format is particularly needed for retarded readers if, as publishers claim, the price of books produced especially for them would be prohibitive.
- (o) There would appear to be room for more research into what interests children and more particularly what might provide motivation for retarded readers to read.
- (p) The Curriculum Development Centre should attempt to foster relations between publishers and educators and parent organisations and in particular should disseminate information derived from research into reading difficulties so that reading material may be produced which is appropriate to the needs of a wide range of children.

Broadcasting

- (q) It is truism that there is a need to improve the overall quality of recreational and educational programs on television for children and to this end there should be a preparedness to draw upon the most skilled producers in the world.
- (r) Discussion of quality of programs available involved extremely subjective judgments. Evidence points strongly to the fact that television viewing absorbs a major portion of recreational time of children in Australia and that children will select the programs for entertainment regardless of quality judgments of parents. But it should be noted that the formation of taste in cultural matters, given the potency and accessibility of television, is a responsibility film makers and programmers must be prepared to accept. To whom then should they be accountable in discharging this responsibility? If it is to their own artistic conscience, then this conscience may need to be more sensitive and enlightened.
- (s) The problems involved in improving the overall quality of children's television lay on the fringe of the Committee's terms of reference. The issue is too important to be cursorily dealt with and that a comprehensive solution would require a full inquiry encompassing all aspects of broadcasting. The answer, however, probably lies in the structure of the industry, in the policies of the ABC and particularly in the licensing system which does not provide sufficient incentives and disincentives to motivate programmers to improve the quality of children's programs.
- (t) Resources are available in Australia to produce 'quality' programs for children. These resources could be applied both in relation to recreational programs and to those with a specific cognitive objective. Research and material from overseas (particularly the Children's Television Workshop) should form the basis for the development of programs to meet Australian needs. Institutions and facilities exist

in Australia which could be funded both to administer and produce these programs such as the School of Film and Television, Film Australia and the South Australian Film Corporation in the public sector, and Crawford Productions in the private sector.

- (u) Television must be accepted as a fact of life and one whose influence for good or ill is more likely to increase than diminish. There is conflicting evidence as to whether television is replacing reading as a recreational pursuit. There is evidence that television, if used constructively, can be beneficial in helping and motivating more people to read and also can be used in community education programs. Children are in fact very dependent on the concern and the artistic merit of a very select group who are in the position to produce material for them.
- (v) As some imported children's programs may now be counted as Australian content for quota purposes, it is hoped more of the high quality overseas material is presented by commercial broadcasters.

Recommendations

5.73 The Committee recommends that:

- (a) Funds should be made available to the Curriculum Development Centre to enable them to conduct or commission developmental research into material suitable for retarded readers. This should initially be a pilot study with the need for continuing research to be assessed at a later date.