



Australian Associations of Christian Schools

Incorporated in ACT

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Submission to:

**THE SENATE EMPLOYMENT, WORKPLACE
RELATIONS AND EDUCATION
COMMITTEE**

on

**THE EDUCATION OF STUDENTS
WITH DISABILITIES**

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EXECUTIVE SUMMARY

The Commonwealth Departments of Health and Education in consultation with their State and Territory counterparts should establish, define and agree on differentiated levels of disability.

Assessment procedures, while initiated by either parents or the school, should be carried out by qualified health professionals. Assessment procedures conducted by qualified health professionals should be available to all families via their Medicare card and bulk billing.

Commonwealth and State health authorities should have mobile health clinics that are freely accessible to students in both Government and non-Government schools. These clinics should be staffed by appropriately trained and qualified para/medical professionals who can identify students with disabilities and arrange for their further assessment and/or treatment.

The work of health professionals and educators in collaboration with parents should begin as soon as the child is presented for education.

All students with disabilities should receive the same additional funding regardless of whether they are attending a Government or non-Government school.

All approved teacher education courses in Australia should include compulsory units for the education of students with disabilities.

The Commonwealth government should re-introduce professional development inservice programs for mainstream teachers educating students with disabilities.

For disability discrimination legislation to be fair and effective, education authorities in both the Government and non-Government sectors should be resourced by government to meet the additional needs of students with disabilities.

The additional funding for students with disabilities in both Government and non-Government schools should be the same and shared between Commonwealth and State/Territory governments.

(1) THE AUSTRALIAN ASSOCIATIONS OF CHRISTIAN SCHOOLS (AACCS)

AACCS is an Association of **253** Protestant Christian **schools** across Australia. These primary and secondary schools educate over **72,000 students** and employ nearly **5,000 teachers**. The schools are to be found in every Australian State and Territory.

Protestant Christian schools that are members of AACCS **serve largely middle and working class Australian families and communities**. This is borne out by the SES scores of the schools. Increasingly, these schools in urban, regional, rural and remote communities are reaching out to the disadvantaged. Increasing emphasis is being placed on the education of indigenous students and the mainstream education of students with disabilities.

This submission was authorised by the Council of the Australian Associations of Christian Schools (AACCS).

(2) THE INQUIRY

The Terms of Reference of the Inquiry refer specifically to the education of two groups of students. The first group are those designated "students with disabilities". The second group are students with "learning disabilities". It is important to differentiate between the two groups. Students with disabilities are often identified in terms of a medical condition that results in a physical manifestation of disability, eg. mobility, sight, hearing. Learning disabilities may result from a physical disability but not necessarily.

The Inquiry focuses on all levels and sectors of education. This submission will focus on school level education, ie. pre-Year 1 to Year 12. This submission will also focus its main attention on the **non-Government sector**. Christian schools represented by AACCS belong to this sector.

This submission will also address, in the main, the Terms of Reference in the context of **students with disabilities seeking mainstream education** in schools like those in membership with AACCS.

Since the International Year of the Disabled in the early 1980s, significant developments have taken place in mainstream society to enhance the opportunities for disabled people to lead a fully independent social and economic life. At the same time, education authorities in both the Government and non-Government sectors have sought, wherever possible and appropriate, to offer mainstream education to students with disabilities. Formerly, these students were isolated from their peers and educated in separate institutions.

These developments have resulted in education authorities making significant physical and curricula adjustments to schools. These developments have represented both challenges and achievements for the education sector and society as a whole.

Following UNESCO's World Conference in Education in 1990 and the World Conference on Special Needs Education in 1994, the Education for All Movement resulted in the Dakar Education Forum. This forum and its Framework for Action benchmarked education for students with disabilities throughout the international community.

(3) TERMS OF REFERENCE: *the criteria used to define disability and to differentiate between levels of handicap.*

The six Australian States and two Territories use **different criteria** to define and differentiate disability. This is then further compounded by Commonwealth attempts, particularly in the non-Government sector, to use State/Territory criteria for Commonwealth funding purposes.

For example, a student with a hearing disability in one jurisdiction may be defined as moderately handicapped. The same student in another jurisdiction will be defined as mildly handicapped. The definition and differentiation results in different levels of funding from the Commonwealth to support the educational needs of that student.

As early as 1980, WHO published an International Classification of Impairments, Disabilities and Handicaps. This classification has had increasing significance in deciding how societies and governments might act and fund programs supporting people with disabilities. Noticeably, the impact has been most felt in the health sector. Unfortunately, educators have not

given the same attention to the WHO classification despite the needs of both the students and their teachers.

Essentially, the WHO classification distinguish between impairment (abnormality), disability (limitation) and handicap (disadvantage). Handicap was defined in the context of how people could readily manipulate their environment. Therefore, a ramp for the physically disabled resulted from the handicap imposed on them by a steps only approach to access or egress.

There is, therefore, an urgent need for the Commonwealth, States and Territories to agree on definitions and differentiation. Essentially, students might be classified as severely and multiply handicapped, moderately handicapped or mildly handicapped. Within these bands, there are other levels of disability identified by various jurisdictions. The problem for the education sector is that **definition and differentiation is essentially an issue for health professionals and clinicians**. The Commonwealth Government through the Department of Health along with its counterparts in the States and Territories needs to arrive at common definitions that are agreed upon and applicable to the education sector.

RECOMMENDATION

The Commonwealth Departments of Health and Education in consultation with their State and Territory counterparts should establish, define and agree on differentiated levels of disability.

(4) TERMS OF REFERENCE: *the accuracy with which students' disability-related needs are being assessed.*

Currently there are three areas from which assessment can be initiated. Firstly, **parents** may notice some abnormality and seek advice or assessment. Secondly, **educators** may perceive learning problems that require further assessment. Thirdly, the full range of **health professionals** may diagnose a particular disability or a range of disabilities resulting from sickness, accident or simply a consultation.

Obviously, this **random assessment methodology can have unfortunate and unintended outcomes for the child**. For example, parents may notice a

visual or auditory problem and hope that it may go away. A teacher may be unaware of the hearing difficulties experienced by a student who they teach at best once a day for 40 minutes in a class of 25 other students.

Alternatively, health professionals are specifically trained to recognise, diagnose and recommend treatment or further specialist consultation for abnormalities. In many instances, the health professional needed for assessment requires specialist training, eg. autism, dyslexia.

Problems of assessment are **compounded** particularly for parents and indirectly education authorities **by the costs involved**. In most jurisdictions, students requiring specialist assessment for a suspected disability are, particularly in the non-Government sector, required to meet the specialist fees. These fees can be prohibitive for ordinary Australian families. Often assessment requires more than one or two consultations. Testing procedures are costly and health insurance is not universal.

RECOMMENDATION

Assessment procedures, while initiated by either parents or the school, should be carried out by qualified health professionals. Assessment procedures conducted by qualified health professionals should be available to all families via their Medicare card and bulk billing.

(5) TERMS OF REFERENCE: *the particular needs of students with disabilities from low socio-economic, non-English speaking and Indigenous backgrounds and from rural and remote areas.*

More than 50% of AACS member schools are in regional, rural and remote areas of Australia. Predominantly, AACS schools serve working and middle class Australian families. Increasingly, these schools are reaching out to Indigenous students not only in urban and rural communities, but in remote locations, eg. Northern Territory, Western Australia and Queensland.

There is a significant degree of correlation between socio-economic status and educational outcomes. Benchmarked Literacy and Numeracy tests now undertaken by all schools in both Government and non-Government sectors clearly demonstrate that educational outcomes for students from low socio-economic backgrounds are below those of the average population.

Often, these low socio-economic circumstances are related to our Indigenous population, isolation or a non-English speaking background. In this context, **a student with disabilities will have their educational problems exacerbated by their poor economic circumstances.**

Parents may either be unable to afford assessment and treatment or may not notice the particular disability of their child. Schools serving these communities can be frustrated by the conditions of isolation. This results in limited access to medical and professional support.

Australia has had very successful programs of child immunization and school dental health clinics. The Commonwealth Government through television, radio and print media has made parents aware of the programs and their implementation free of charge through both Government and non-Government schools. This is a significant achievement for the future health of the nation.

RECOMMENDATION

Commonwealth and State health authorities should have mobile health clinics that are freely accessible to students in both Government and non-Government schools. These clinics should be staffed by appropriately trained and qualified para/medical professionals who can identify students with disabilities and arrange for their further assessment and/or treatment.

(6) TERMS OF REFERENCE: *the effectiveness and availability of early intervention programs.*

There are some AACS member schools that have pre-schools/play schools attached to them. Unless the parents or teachers perceive a disability and have it appropriately assessed, then there is very little chance of early intervention.

Similarly, in the infant years of schooling particularly kindergarden or its equivalent, Year 1 and Year 2, there are few programs available for students. A great deal of responsibility for action and intervention understandably resides with the parents. Sometimes, teachers may draw parents' attention to a particular learning disability which they may or may not act on. It is

critical that educators, health professionals and families work collaboratively and co-operatively from pre-school years.

Undetected learning disabilities can result in children adopting anti-social behaviour at school and/or home. This behaviour may result from frustration at their lack of achievement or recognition by their peers or their teachers. If the real cause of their learning difficulties is not detected, their whole learning cycle will be disadvantaged for years to come.

RECOMMENDATION

The work of health professionals and educators in collaboration with parents should begin as soon as the child is presented for education.

(7) TERMS OF REFERENCE: *access to and adequacy of funding and support in both the public and private sectors; and the nature, extent and funding of programs that provide for full or partial learning opportunities with mainstream students.*

It is a well known fact students with disabilities attending non-Government schools attract from Government sources a fraction of the financial support the same students would attract if they attended a Government school. This can be best illustrated by a letter written by a parent to AACCS in 2001.

Dear (AACCS),

(My husband) and I have a child, (Andrew), who is now twelve years old and has entered Year 7 at (XYZ) Christian Community School, the school he has attended since Kindergarten. (Andrew) has Aspergers Syndrome, ADHD and intellectual disabilities. He exhibits many of the signs associated with Aspergers, notably poor social skills and a restricted pattern of behaviour and interests coupled with hyperactivity and an inability to adjust and cope with changes in his routines and environment.

Given these problems, (Andrew) finds it extremely difficult to cope academically and socially in a mainstream class at year seven-age/grade level. Frustration from a lack of understanding and an inability to cope further exacerbates (Andrew's) behavioural problems.

(Andrew) requires a high level of support and recent recommendations from specialists at the Royal Far West Children's Scheme, along with the experiences of the staff at his school and

our own observations suggest (Andrew) requires an STLD. (Andrew's) school is currently unable to provide a full time STLD due to a lack of funding. A part-time aid is available to assist (Andrew) for half a day per week.

An alternative would be to send (Andrew) to (Government) High School, which has a program for children with moderate levels of disabilities, as well as the support resources and staff required. To gain access to the funding and STLD support that (Andrew) needs, it has been suggested that we move (Andrew) to this school.

However, inherent in the child with Asperger's is an inability to cope with change and we and his specialists feel the move would not be beneficial to (Andrew). Coupled with this, (Andrew) would be required to catch two buses each way to (Government High School), a trip fraught with hazards. (Andrew) has already experienced problems catching one bus that goes directly to his current school.

I feel (Andrew) is being disadvantaged by the current funding situation for disabled children in non-Government schools. I know that a disabled child in a Government school will receive a much higher level of funding than a child with the same disability enrolled in a non-Government school.

I would like to see (Andrew) receive the support he requires supplied at our school of choice.

(Andrew's) disability is no more or no less regardless of the school he attends and the support he requires is the same regardless of the school we have chosen for him.

I would like to see the Government understand the plight of families caring for children with disabilities. In particular, I am asking that the Government supply the same level of funding for each disabled child regardless of the school their families have chosen for them. The current system of funding is putting strain on the child, the family and the school he or she attends.

In our case, it is an almost impossible decision. Do we keep him where he is, where (Andrew) is on familiar ground, but limited funding which means limited support available, or do we force him to make a very difficult transition in order to access a higher level of support including an STLD?

We would like freedom of choice in this issue. Currently, our only choice is dependent on the differing levels of support for children with disabilities that exists between Government and non-Government schools. We would like to be able to choose the school for (Andrew). In our case, our choice is (XYZ) Christian Community School, which provides the Christian education we desire for (Andrew) within an environment in which (Andrew) feels safe and familiar.

Yours sincerely,
(Mother)

Another letter received at AACS includes the following:

" We are parents of a severely vision-impaired child who attends a non-Government (Christian school) in (Western Sydney). The Deaf and Blind Children's Centre at North Rocks have been assisting in (Richard's) special academic requirements for the past six years.

The work involved has been quite extensive as (Richard) requires all his textbooks and readers to be reproduced in a large print format. (Richard) needs various vision aids such as large screen computer, binoculars, monocular visulette and slope board. The Deaf and Blind Children's Centre have assessed (Richard's) itinerant support needs as five and a half hours broken up over two days per week.

This is a sample of the font size that (Richard) requires for all his textbooks and readers.

We are very pleased with the support (Richard) has received from his Christian school and the Deaf and Blind Children's Centre.

In Terms 3 and 4 of 2000, the Deaf and Blind Children's Centre charged the Christian school \$892.50 for their services. This year (2001) for Terms 1 and 2, they have charged &1,740 (an agreement has recently been made that the Christian school will only pay 50% of yearly charges). It seems that Government funding has not increased accordingly.

It seems that because we have chosen to send (Richard) to a non-Government school, that he is being severely disadvantaged as opposed to a child attending a Government school.

Shouldn't ALL students with special needs, whether Government or non-Government, receive the same level of funding?

Yours sincerely,
(Mother and Father)

Parents of students with disabilities should be able to choose a non-Government Christian school for their children.

Government schools receive significant (up to \$20,000) additional funds to educate students with disabilities.

Non-Government Christian schools receive only a fraction (5% to 25%) of the additional funds needed to educate students with disabilities.

RECOMMENDATION

All students with disabilities should receive the same additional funding regardless of whether they are attending a Government or non-Government school.

(8) TERMS OF REFERENCE: *teacher training and professional development.*

The Commonwealth government through its professional development programs funded in the 1970s and early 1980s, provided significant inservice teacher training and professional development for those working with students with disabilities. In fact, the Commonwealth was ahead of the mainstream movement for the education of students with disabilities.

With the phasing out of the Commonwealth Professional Development Program, both teacher education and professional development related to students with disabilities took a turn for the worse. This was particularly felt in the non-Government sector. State education authorities may have continued some programs but these were essentially available to Government school teachers only. Increasingly, higher education institutions built special education into their pre-service teacher education options.

Most education authorities, Government and non-Government, recognise that there is a current or at least impending teacher shortage. Many claim that this shortage is only in the areas of Science, Technology and Mathematics. However, many practitioners will identify two areas of significant challenge to teachers. Vocational education and training at the post-compulsory level is a significant challenge to the current cohort of teachers in Australia's schools. Even more challenging to all teachers at all levels and sectors of education is the need to be equipped and able to appropriately engage students with disabilities in the mainstream settings.

Currently funded Commonwealth Targeted Programmes are now broadbanded in a way that provides for welcome flexibility. However, the funds available are insignificant compared to the teacher education needs across Australia. When the demands for Literacy and Numeracy are added to these programmes, little if any provision will be made for professional development of existing teachers.

RECOMMENDATION

All approved teacher education courses in Australia should include compulsory units for the education of students with disabilities.

The Commonwealth government should re-introduce professional development inservice programs for mainstream teachers educating students with disabilities.

(9) TERMS OF REFERENCE: *the legal implications and resource demands of current Commonwealth and State and Territory legislation.*

Legislation cannot of itself prevent discrimination. The Disability Standards for Education document was designed as **"delegated or subordinate legislation."** This is further reinforced by the Australian Government Solicitor's advice that the draft standards "would meet the legal requirements of disability standards under the Disability Discrimination Act".

In having the force of law, they automatically render any contrary unreasonable action illegal. Education providers, including non-Government schools, are often unable to "prevent discrimination" due to financial resources, the actions of fellow students and/or staff and the various roles and responsibilities of "agents" contracted to discharge services on behalf of the education provider.

The Draft Standards and the associated Commonwealth legislation (DDA) emphasize at every point the rights of students with disabilities and/or their associates and the obligations of the education provider.

Specifically, the details provided under enrolment, participation, curriculum development, student support services, harassment and victimization repeat and reinforce these provisions. The education provider is only protected in cases of "unjustified hardship" or where public health is at risk.

The Standards document would invite litigation. It gives the impression that the onus in nearly every instance is on compliance by the education provider (authority). The only sustained exception to this is the requirement that this student or associate provide "timely and relevant advice of the student's individual requirements".

The Act and the related Draft Standards generally require that the provider (education authority) do all that is necessary **"to remove discrimination in the provision of education and training"**.

Legislation and associated Standards assume that all education authorities, both Government and non-Government have access to the required financial resources to meet the obligations, specified and implied, for all levels of need for students with disabilities.

It is a well known fact that students with disabilities attending non-Government schools attract from Government sources a fraction of the financial support the same students would attract if they attended a Government school. Legislation could not apply equally and fairly to both Government and non-Government education authorities with completely different levels of financial support.

A non-Government school unable to provide alternative strategies/resources because of costs would be exposed to litigation. Equally, non-Government schools or, for that matter, Government schools unable to access additional support services required by the student/associate due to location (remote), would be put in an untenable position in meeting its legal obligations.

Non-Government Christian school authorities want parents of students with disabilities to have access to their schools. They also want to ensure that the students receive an education comparable to that of students without disabilities. Given the cost and legal implications of this objective, responsible non-Government Christian school authorities could easily be required to advise parents of alternative education providers more suitable to their students needs and better resourced to address their educational requirements.

RECOMMENDATION

For disability discrimination legislation to be fair and effective, education authorities in both the Government and non-Government sectors should be resourced by government to meet the additional needs of students with disabilities.

(10) TERMS OF REFERENCE: *what the proper role of the Commonwealth and states and territories should be in supporting the education of students with disabilities.*

Currently, in the Government school sector, there is a balance of funding provided by the Commonwealth and State/Territory governments to meet the additional needs of students with disabilities. AACS is not in a position to comment on the detail or appropriateness of this balance.

In the non-Government sector when a disabled child moves from a Government school to a non-Government school, only a fraction of the additional funds follows that child. For example, a student legitimately attracting an additional \$20,000 in a Government school to meet their educational needs is likely to attract at best an additional \$4,000 in a non-Government school. The bulk of this additional money in the non-Government school comes from the Commonwealth government.

This is a cost shifting exercise by State/Territory governments to non-Government school parents and the Commonwealth.

Why should State/Territory governments discriminate in funding students with disabilities on the basis of whether they attend a Government or non-Government school? Is this practice legally defensible in the light of the Disability Discrimination Act and decisions of the Human Rights and Equal Opportunities Commission?

AACS considers that the responsibility for the additional funding for students with disabilities rests with both the Commonwealth and State/Territory governments.

The balance of this funding arrangement is obviously a matter for negotiation between the governments involved. It would seem appropriate that the balance that currently exists in the Government sector should be the same in the non-Government sector.

RECOMMENDATION

The additional funding for students with disabilities in both Government and non-Government schools should be the same and shared between Commonwealth and State/Territory governments.

Aacs\general\disability submission 2002