

# CATHOLIC EDUCATION COMMISSION OF VICTORIA

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IN REPLY PLEASE QUOTE

26 April 2002

The Secretary,
Senate Employment, Workplace Relations
and Education References Committee
SUITE S1.61, Parliament House
CANBERRA ACT 2600

Please find attached a response from the Catholic Education Commission of Victoria for the Senate Inquiry into the Education of Students with Disabilities.

With every best wish,

Yours sincerely,

(Rev. T. M. Doyle) EXECUTIVE DIRECTOR

Enc.

#### Catholic Education Commission of Victoria (CECV)

# Response to Senate Inquiry into the Education of Students with Disabilities



## Background

The 1992 Disability Discrimination Act which took effect from March 1 1993 provided three clear objectives:

- To eliminate as far as possible, discrimination against people on the grounds of disability.
- 2. To ensure that people with disabilities have the same rights before the law as the rest of the community.
- 3. To promote the principle that people with disabilities have the same rights as the rest of the community.

In Victoria, for Catholic Schools the context of acknowledging the rights of children to have access to a school of their choice had been established by the State Government Review of Educational Services for the Disabled in 1985. The review created a funding base which sought to:

- Increase the participation of children with impairments and disabilities in the education programs and social life of regular government schools in which their peers without disabilities participate.
- Provide processes of maintaining the participation off all children in the educational and social life of regular government schools.

The movement of encouraging access to schools in the community rather than specialist facilities was accompanied by a shift in the services provided by health providers from an institutional base to a community base. Schools have responded positively as evidenced by the significant increase in the number of students with disabilities who engage in the curriculum of the local primary and secondary college. The financial implications of the shift from a health/specialist base to a community base has impacted significantly both on a financial level and on a service level for schools in the Catholic sector in Victoria.

## Response to the Inquiry Objectives

- Inquire into the education of students with disabilities, including learning disabilities throughout all levels and sectors of education with particular reference to:
- (a) Whether current policies and programs for students with disabilities are adequate to meet their educational needs, including but not limited to:
  - (i) The criteria used to define disability and to differentiate between levels of handicap

Current Commonwealth guidelines for funding exclude learning disabilities. The inclusion of learning disabilities enables a programmatic focus to be developed in response to student needs and resolves the ambiguity existing between the DDA which includes learning disability and the Commonwealth funding guidelines which exclude learning disabilities.

Currently the Catholic Education Commission of Victoria supplements financially the education program of 2.2% of the Catholic school population who are deemed disabled according to Commonwealth guidelines. To provide adequate support, funds are utilised from Commonwealth SAISO program funds and general recurrent funding sources.

The proportion of Australians with a disability, according to Australian Bureau of Statistics, has been steadily increasing since 1981 (adjusting for age differences) from 15%, to 19% in 1998. Of the numbers of people experiencing disability there has been a steady increase in the numbers of young people identified as having significant behavioural or mental disorders.

The increased identification of disability through ABS data and National Mental Health Plans provides evidence that the criteria for defining disability ranges from 15% - 20% of the school population.

The Performance Measurement and Reporting Taskforce (PMRT) of MCEETYA is seeking to develop consistent definitions to assist schools in the variation of supplementary funding targets. The work of this group is significant in establishing commonality of definitions of disability.

# (ii) The accuracy with which students' disability related needs are assessed

The identification of student disability is occurring throughout a young person's school life. Given the definitional issues previously discussed the concept of disability is also affected by the clinical/medical framework of services provided by psychiatrists, psychologists, speech pathologists, occupational therapists, physiotherapists, paediatricians and general practitioners. The interface between health and education has led schools to be sites of health provision that has been a consequence of de-institutional health provision rather than as a result of an integrated approach to young people's access to health and education services. As a result disparity occurs such as: funding to government and non government schools; access to specialist services; relevance of assessments from a clinical context to an educational context; provision of specialist facilities and aides to assist schools to provide access for disabled students; and the capacity of services to integrate pre school services to school services to post school services.

The establishment of a consistent definition of disability is required to enhance the establishment of an agreed target group for supplementary support. Integrated services that are seamless between pre and post school environments will enable the education sector to develop a more effective role as a core social centre (emphasising the social and community role of schools).

#### (iii) The particular needs of students with disabilities from low socioeconomic, non-English speaking and Indigenous backgrounds and from rural and remote areas

The DDA sets a benchmark for educational authorities and yet the incremental development of service structures for school aged students whether they are in government or non government schools has created disparity in regards to the particular needs of students. The Catholic Education Commission of Victoria has progressively enhanced the funding for students with disabilities from general recurrent grants to accommodate the complexity of need created by factors such as socioeconomic profile, non-English speaking, Indigenous and rural and remote issues.

Targeted contracts with specialist providers continue to also seek to address disparity of access for school aged students to health services. In Victoria continued collaborative arrangements with peak bodies representing Human Services, Health, Community Agencies and Universities seek to establish equity for service distribution. Recent formal arrangements with Scope, Royal Victorian Institute for the Blind, Royal Children's Education Institute, Association of General Practitioners, Yooralla, Australian Psychological Society, Australian Speech Pathology Association and Vic Health are indicators of the Catholic Education Sector's efforts to enhance the health/education interface in a manner that provides equity to quality service provision.

# (iv) The effectiveness and availability of early intervention programs

Structurally the education sector faces challenges in providing an integrated programmatic response to a young person's disability when the pre school services context is variable and optional. For example, the majority of students identified in the early years of schooling have been assessed by services provided in the school years rather than by pre school services. Early identification and case planning is problematic and variable. Students with a language disorder, hearing disorder or intellectual disability are being identified progressively in the first three years of school.

Pre school programs in Victoria are provided by the Department of Human Services. Access to files and protocols of program advice vary significantly across the State. Catholic Education has no formal protocols with pre school services. The effectiveness of early intervention consequently is affected by the variety of approaches, disparity of access to services and difficulties in transferring student information from the pre school sector to the school sector. The attributes of early intervention are negated by the current service structure.

# (v) Access to and adequacy of funding and support in both the public and private sectors

Since 1990 the non-government schools sector has played an increasingly significant role in supporting school aged disabled young people. In Victoria the number of eligible students has trebled and the complexity of disability has continued to escalate. Challenging chronic health and complex physical disabilities are being accommodated in

Catholic Schools. The increased range of significant behavioural disordered students continues to provide challenge. The recent National Mental Health Plan which identified 15% of the population experiencing significant mental disorders provides evidence that schools need support in this area.

Recent evidence from the National Mental Health Plan which suggests the critical role of teachers and General Practitioners indicates that families see school as a core social centre. The response to the complexity of behavioural issues from the Catholic Sector in Victoria has been multi-faceted. Over 500 Catholic Educational Leaders have enrolled in a two year post graduate course in Student Welfare at The University of Melbourne as a means of enhancing capacity to respond to complex behavioural issues of students. The closure of behavioural intervention centres and the difficulties of establishing clear assessment services have compounded the difficulties confronting schools.

# (vi) The nature, extent and funding of programs that provide for full or partial learning opportunities with mainstream students

The DDA in combination with the Victorian Government Program for Students with Disability and Impairment has provided an expectation of access to schools and a funding model for students with disability which is the highest per capita in the OECD for school aged students. The Catholic School Sector has faced the challenge of not having access to a similar funding capacity and has faced comparative disadvantage in regards to meeting the requirements of the DDA. The CECV in response to these factors, as well as an increasing enrolment, has focussed upon establishing a program response to disability rather than a funding model based upon disability need. For students to be engaged in education there is a need to fund a program which:

- Explains the impact the students disability has on his/her ability to access the regular curriculum.
- Builds on the strengths of the students outlining the learning outcomes which will improve participation.
- Outlines the strategies/supports/activities/changes to the regular learning environment for the program to be implemented.

 Outlines how the program will be monitored/assessed and reported upon at a collaborative meeting of parents, specialists and school staff.

The response of the CECV has been a significant contribution by Catholic Schools to the comparative disparity of funding which occurs between the government and non-government sector in Victoria.

# (vii) Teacher training and professional development

The CECV has established a series of partnerships with the University Sector in Victoria. The Australian Research Council has supported evidence-based approaches in the area of student welfare, early literacy intervention, the application of the International Index of Inclusion and the approaches to marginalised youth. Currently the CECV is providing access to 350 Catholic teachers to engage in postgraduate study seeking to enhance contextual learning and to promote capacity of teachers to deal with the complexities confronting schools. The strategy of the CECV is not to focus upon disability which had been the focus of previous university courses, but in partnership with The University of Melbourne, Monash University, Latrobe University and The Australian Catholic University, to provide an evidence based intervention approach seeking to enhance the quality of programs for young people with disabilities.

The willingness of Catholic teachers to engage in post graduate action research study indicates a commitment to the intention of the CECV policy and a recognition of the paucity of offerings in teacher training prior to entering service.

# (viii) The legal implications and resource demands of current Commonwealth and State and Territory legislation

The Catholic School Sector in Victoria in its attempts to respond to the legislative requirements of both Commonwealth and State legislation is also seeking to accommodate the shift of health care provision for school aged children to the school sector.

Both the legal and the service focus on Catholic Schools have not been accompanied by funding increases. The Catholic School Sector in Victoria seeks to encourage the role of a school as a core social centre

for young people and their families through the strategies referred to in the Response to the Senate Inquiry.

The decision by parents to have their child's education at the local Catholic School is now established, however the role of educational authorities is not enhanced by the ambiguities of disability definitions, disparity of funding allocations, variations of access to specialist services, the complexity of the pre school service with problems of information transfer and the complexity of the health/education interface. Increased accountability and legal sanctions need to be reinforced by funding models which enhance the objectives of the DDA. Elizabeth Hastings, the Disability Discrimination Commissioner, said in 1997, "The purpose of ensuring access to education for young people with disabilities, and so for providing funding, is learning, to whatever level is possible; it is no use to have access to 'being present', just sitting in a classroom, if genuine learning is not facilitated."

# (b) What the proper role of the Commonwealth and States and Territories should be in supporting the education of students with Disabilities

The critical role for the Commonwealth, State and Territories is to provide for the educational sector an integrated model of funding which enhances provision of support to students with disabilities. Two major areas of reform need to be developed in the areas of data and funding.

#### <u>Data</u>

To allocated financial resources it is essential to have accurate enrolment and data bout students with disabilities. The historic inequitable allocations that have plagued the education of student with disabilities needs to be researched and should include:

- Centralised data collection to students with disabilities
- Clarification of the eligibility criteria for service provision to students
- Establish consistent processes for verifying special needs
- Develop a mode of profiling student that can allocate specific amounts of funding according to the level of student needs.

#### **Funding**

The funding model for students with disabilities varies significantly between states and sectors. The funding model should focus on factors other than the type and degree of a student's disability.

The recommended focus of allocation of resources should be on

- 1. How a student presents as a learner with issues that appear to impair their capacity to learn.
- 2. Teachers contribute in collaboration with parents to establish a profile of student need.
- 3. The profile be matched to program delivery and type of assistance and support required by the students to achieve learning outcomes.

Total Number of Students with Disabilities attending Victorian Primary and Secondary Catholic Schools

