

Submission
No 53

**INQUIRY INTO THE PROVISION OF EDUCATION TO
STUDENTS WITH A DISABILITY OR SPECIAL NEEDS**

Name: Name Suppressed
Date received: 9/02/2010

Partially Confidential

Attention: GENERAL PURPOSE STANDING COMMITTEE NO. 2

My name is _____ and I am trained as a secondary teacher. I have worked as a teacher for a number of years and then worked as an arts professional.

As a teacher, even though my specialty was secondary, I worked with primary students in youth and community contexts and taught in a university setting. I am also the mother of an eleven month old baby diagnosed with a mild-to-severe hearing loss through the program, who is currently enrolled in early intervention

_____. I also subscribe to a free early intervention service to further develop my skills to work with my son, _____. It provides on-line tutorials.

I have looked at the terms of reference of the **Inquiry into the Education of Children with Special Needs in NSW** and responded as best I could to the terms of reference, albeit from a personal perspective. I couldn't respond to # 5, as I don't think it is a question that fits that well into the other terms. I hope that my personal and professional thoughts are useful and would be happy to answer any questions that you may have pertaining to my submission. Here are my responses:

1. The nature, level and adequacy of funding for the education of children with a disability

I do not have any information that pertains to specific dollar amounts, but will make the following general observations:

Specifically with regard to hearing loss, it would seem that the level of support that is offered is determined by the degree of the loss. This, at least is what I gleaned from a presentation given by those in charge of itinerant support programs for DET, the CEO and the Independent Schools, during 2009. In reality, we know that sometimes, a child with a moderately-severe hearing loss can be more successfully 'functional' in terms of his/her ability to listen, than a child with a mild loss. Why this

happens is difficult to explain, but some early intervention specialists attribute it to the way that the brain will compensate for the hearing loss.

Yet, the rigidity in terms of assessing who needs what in terms of support, remains. And even when a child qualifies for the maximum level of support, it really isn't that much. **A few hours here and there is not going to make a child's overall experience of school adequate, let alone rewarding.**

I was very shocked to discover how little support is available to a child who is being "mainstreamed" in terms of hours and attention in any of the systems. I was also shocked to discover the complacency that exists in mainstream schools, pre-schools and childcare settings, when it comes to the lack of teacher expertise in dealing with the challenges posed by disability. **Particularly when the disability is not an intellectual or developmental disability and the child in question is average, normal or even gifted in every respect but a single and manageable physical disability.**

Given that there is often no good reason for segregating a child who has a disability that is not an intellectual disability and then educating them in a segregated and marginalised context, it would seem that the measures in place to make 'mainstreaming' work as well as it could, are quite inadequate. **In fact, they are almost totally inadequate.**

It begins with teacher education. From the outset, most education diplomas and degrees do not include an adequate component about special needs training even in a general sense, let alone in a specialist capacity. In an area like hearing loss, so much is changing as a result of SWISH, hearing aid technology, cochlear implants and more people choosing to use a contemporary form of auditory-verbal therapy. This sort of thing is barely touched on in teacher training. In order to keep up with the phenomenal changes that are taking place, a teacher who does know something, then requires the necessary resources to back up their initial knowledge, in the form of ongoing, in-service training. This is not happening. Instead, in the area of hearing loss, DET is developing 20 hour on-line modules for teachers to develop skills in working with hearing impairment. Truly, this is laughable, as a solution. **Yes,**

mainstreaming is the right way to go here, but let's not be tokenistic about it by not funding it to succeed.

Again, I address the specific matter of hearing loss: Funding for success means funding for teacher education. It also means funding for an Auslan interpreter for every school and/or Soundfield systems in every classroom. Other acoustic modifications are also necessary to the environment, to allow for some quiet spaces. **Inadequate support in practice translates into low expectations of the child and unfortunately, children often respond to those low expectations. This is a tragedy.**

A lot more could be provided for teachers and schools and a lot more could be demanded of teachers and schools, when it comes to increasing their levels of expertise around such issues.

2. Best practice approaches in determining the allocation of funding to children with a disability, particularly whether allocation should be focused on a student's functioning capacity rather than their disability

I think that we need to be talking about **best practices**, not best practice. Disabilities are so different, special needs are so different, how can there be a one size fits all model for dealing with this issue? A child with a hearing loss is not going to have the same set of needs and concerns as a child with an intellectual disability. A child with multiple disabilities will have far different needs to one that has one specific, physical condition. In the first instance, it needs to be understood that we cannot apply a singular approach this issue. **Allowing for a differentiation of models and approaches in our long day care centres, pre-schools and schools will mean a greater allocation of special needs teachers and itinerant support teachers in each of those contexts.**

Speaking personally, I feel very uncomfortable about the possibility of a child with a physical or sensory disability such as a hearing loss (many of whom are identifiably gifted), being placed in a special needs category within our schools, that has him or her being attended to with children who have extreme behavioural disorders, severe intellectual disabilities,

gross motor skills disorders and the like. This is a really serious matter and needs to be addressed as a matter of urgency. **Schools need the resources to manage radically different needs, with a range of specialists and a range of solutions.**

Best practice will only be possible when we are dealing with a situation that allocates funding for support on a case by case, school by school, basis. Awarding schools support in terms of cash allocation or resource allocation on the basis of population or by region is useless. We need specifically targeted solutions. **Unless funding or support it is in direct relationship with a child with a special and specific need, it is misplaced support. Only when support is provided in such a way that it targets the individual child or clearly identifiable groups of children, will it be useful.**

3. The level and adequacy of current special education places within the education system

I wish to speak of 'adequacy' in terms of level of service provision. I do not know numbers when it comes to places, I can only speak of quality of service.

It is evident from the anecdotal information provided by parents, that teachers and principals discriminate when it comes to dealing with children with a disability/special need. This is evident from the long day care centre to the high school. It is one of the 'first warnings' given in an early intervention context and a major nightmare when it comes to trying to find a place for a child based on proximity to home and/or work. Some schools/centres are just not interested. Others will be actively discouraging. It may be because a principal does not want their particular school to have a stigma attached to disability, or just because they have their own prejudices with regard to how children with special needs should be educated. **On this basis, a solution to generate improvement needs to be developed, whether it means greater accountability with regard to teachers and schools and punitive action if they fail to provide for their communities. It needs to be made obvious to parents that they don't have to put up with prejudice or negligence. Children should not be falling through**

the cracks.

Again, specifically with regard to hearing loss, one only needs to attend a meeting of parents in any community in the state, to hear about instances of ignorance, prejudice and negligence. It's shocking. Stories about teachers that will not take off a chunky necklace that is banging on a lapel microphone connected to an FM device that is going straight into a hearing aid, when they are asked politely by the child to do so. Stories about children with a hearing loss in a primary school setting, who have been placed in classrooms immediately next door to a building or renovation site, because no-one considered the implications. Stories about teachers who know that a child needs to provide them with a lapel microphone, but who couldn't be bothered asking for it, even though they work with self-conscious adolescents. Stories about parents who pay top-dollar to send their children to the best private schools, only to discover that the school 'forgot' to re-locate the Soundfield system during the holidays, so their child is unable to benefit from it, even though the school has one. **One shouldn't have to be a harridan to get a level of service that one is led to believe they can expect. When will child care workers, teachers and principals be held accountable for the provision of the services that we are told they should be providing? The policies speak of 'mainstreaming', 'social inclusion' and 'normalisation', but it is nothing more than rhetoric, when you are a parent faced with a child who is being disadvantaged.**

Of particular concern in the early childhood arena, is the fact that in what might be considered to be more affluent suburbs, there are actually less choices. In the case of hearing loss, if one lives in Western Sydney or South West Sydney, they would probably be able to secure a place for a child in one of the RIDBC or Shepherd Centre pre-schools. There is no such opportunity in the Inner West, the Eastern Suburbs or the Lower or Upper North Shore. It is actually a myth to think that anyone who lives in an apparently affluent suburb can afford to go without this kind of subsidised support. We need more specialist centres at the pre-school level, offering possibilities for children who need to strengthen their skills before entering school proper. Or, we need a generously subsidised transport system or vouchers for these pre-schoolers, so that

they can go to a place like Rocky Woofit pre-school at RIDBC in North Rocks, even if they live in Vacluse or Castlecrag.

I live in the Eastern Suburbs. There is virtually no long day care for a child under two within reasonable proximity of my home that could manage my son's needs. Family day care options have very long waiting lists. There are KU pre-schools, but they are huge and located in dreadful acoustic spaces. (Poor acoustic spaces can actually be physically painful to a child with hearing aids and cause anxiety and distress.) Early intervention specialists frequently refer those of us who live in the Eastern Suburbs to the private Waterford pre-school, but they can't take anyone until they are four because they are overwhelmed with demand.

The next best option is a Montessori pre-school at Balmain or Bondi. They are the ideal because the method of teaching requires a quiet way of operating that makes it much easier for a child with a hearing loss. A number of parents may choose a Montessori pre-school on this basis (again, ones that have been alerted to their appropriateness via early intervention), but it needs to be noted that these pre-schools are excellent but privately run and cost a bomb. They are also not necessarily registered as "approved day care centres", because they are pre-schools as distinct from long day care centres. Montessori would be my first choice, but it will cost me \$1750 to 'place' my child, then \$12000 for his annual fee for an 8.30am until 12.30pm day. I've been told that \$1000 only of this payment would be eligible for the childcare rebate. I would also be up for additional long day care costs or a one-on-one carer (\$30 per hour). And by the way, as I have a child enrolled in the program, I am now also up for a levy of \$2000 per year, because they lost so much of their money as a result of the Global Financial Crisis. **We really need to address this geographical discrepancy in terms of service provision.**

4. The adequacy of integrated support services for children with a disability in mainstream settings, such as school classrooms

If the support is there, it is bound to be adequate, but how often is it there and for what percentage of a child's school time? Based on what we know of allocation for itinerant support, it is pretty poor. In the first instance, greater itinerant support time needs to be allocated. In the

future, perhaps we need to look to technology to provide the solutions, such as voice recognition laptops for older children and the old mantra of having a Soundfield system in **every** classroom.

The primary school environment is perhaps better at integrating support personnel. Younger children are more accepting of such inclusions, whereas high school students are really disadvantaged. Adolescents can be very cruel and this can lead to embarrassment about using itinerant support. Itinerant support needs to be matched by a range of additional supports in each school, such as:

- psychological support for the student to improve and maintain self-esteem
- in-service and other specialist training programs for mainstream teachers that is ongoing
- education for the other students and the school community about what is going on so that general community awareness builds
- measures to deal with bullying and cruelty so that students who have to use assistive devices are not persecuted.

In truth, the physical environments of many state schools leave a lot to be desired. Again, with specific reference to hearing loss, we are talking about acoustic spaces that are noisy and echoic and very over crowded. In the private sector, the physical environments are far superior, but these schools are at greater liberty to be discriminatory so that they can market their reputation for academic achievement.

5. The provision of a suitable curriculum for intellectually disabled and conduct disordered students.

I confess to knowing nothing about this area of practice, but it does point to the fact that these children have very different needs to a child who has no other issue than a single physical or sensory disability.

6. Student and family access to professional support and services, such as speech

therapy, occupational therapy, physiotherapy and school counsellors

As stated previously, itinerant support needs to be matched by a range of additional supports in each school, such as:

- psychological support for the student to improve and maintain self-esteem
- in-service and other specialist training programs for mainstream teachers that is ongoing
- education for the other students and the school community about what is going on, so that general community awareness builds

Other therapeutic inclusions may well be appropriate, but they will only be useful if they are available often enough to make a difference. If specialist sessions of this nature are weekly or even more frequent than weekly, a child would definitely benefit. Five sessions of something per year will not even scratch the surface of a problem.

7. The provision of adequate teaching training, both in terms of pre-service and ongoing professional training

Unless a teacher in training has a particular interest in special needs, it will not be covered in the context of most education qualifications. Even then, in the context of the average Australian-trained teacher, even someone who takes on this challenge is going to know very little about special needs like hearing loss, unless they *choose* to make it a specialty. In the context of the public system, at primary and secondary level, where does this leave the student with a hearing loss? Itinerant support is minimal and from what I have heard at some POD meetings, some teachers resent being advised about how they can make things better for a student with special needs and refuse to do simple things like remove a necklace that is banging on a lapel microphone, so that an FM system will work better. Teachers are quite autonomous in classrooms and students do not feel empowered to be demanding in this context.

At the very early childhood level, there is no adequate 'special needs' training. In the first instance, early childhood teaching it is too easy a

field to get into, given the relative importance of the work. On a personal level, in my own investigation of long day care centres and preschool environments, my greatest concern has been that staff speak of “inclusion”, but that their acceptance of such a policy is not matched by their insight about what it would require of them professionally in their work. In one instance, a parent that I know whose hearing child was in a KU centre, observed to me that there was a child with hearing loss in the 2-3 cohort, who was completely isolated. The staff did not know how to deal with his needs, so they didn't. The children avoided him and he them, so he spent days in care with no attention or interaction whatsoever. As a parent who needs to use a childcare service, this sort of thing is terrifying. This sort of thing has made me delay returning to work, which is financially crippling for my family, but there is no way I am putting my child at risk of such treatment.

How do we go about raising the bar here, so that long day care environments, pre-schools and all schools are required to develop the skills to make social inclusion more than tokenistic? I think that a greater level of carer/teacher accountability is called for and it behooves the state to introduce such measures.