

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

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# Submission to the NSW Legislative Council Inquiry into the provision of education to students with a disability or special needs.

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

In over forty years of research into the comparative effectiveness of inclusive versus segregated education for children with an intellectual disability, we have not found ANY comparative research article that comes out in favour of segregation. Children with an intellectual disability do better academically and socially when fully included in mainstream classes<sup>1</sup>.

Similarly, the research indicates that children who are fully included do better academically and socially than those who are pulled out for special classes. There is a direct relationship between the amount of time fully included in the regular classroom and academic outcomes.

This means that the traditional models of separate special education schools, special education centres where children are withdrawn for special classes, or the provision of disability specific schools (e.g. schools for children with autism spectrum disorders) are not generally supported by the research literature.

This has major implications for any education system that wishes to work from an evidence-based model. Funding should be directed at the up skilling of mainstream teachers and development of modern approaches to the education of all children such as multilevel teaching and universal design principles. It will involve major work on the curriculum at all levels of schooling so that it is directly accessible by all children from the most gifted to the most delayed.

It should be noted that this issue is much wider than disability. Education systems have moved away from academic streaming (for excellent research-based reasons), so every class will now reflect the normal curve with a mix of students from way above average to way below average. If teachers use the traditional approach of 'teaching to the middle', it is inevitable that only a small proportion of the children will have the lesson targeted at their level. Having children with a disability in the classroom highlights this problem and allows us to look to the need for major shifts in the way that education is conducted.

On the positive side, there is growing evidence that schools that are the best at inclusion also tend to produce the best overall academic results as they learn to modify the curriculum and teaching approaches to cover all children in the school. The best inclusive schools have children physically included in the mainstream classes 100% of the time, fully included in the mainstream curriculum, socially belonging and included in the normal school and class rules. There are several schools in Australia that have achieved this but there is no state or independent system that has yet achieved this level for all or most schools. Most are still using the traditional segregation model or having some level of inclusion as an add-on to business as usual. The research evidence and pure logic indicates that this is not likely to be effective in the long run. National data on literacy and numeracy provide just two examples of how large numbers of children are missing out under the current system and highlight the need for a major rethink of education.

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<sup>1</sup> A comprehensive 'review of reviews' of inclusive education can be downloaded from [www.include.com.au](http://www.include.com.au) or [www.qppd.org.au](http://www.qppd.org.au)

**Terms of Reference 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 a disability.**

It is strongly recommended that funding NOT be linked directly to the child with a disability. In both the cases listed above in the terms of reference, the impetus for teachers and parents is to maximise the child's impairment/behaviour disorder or minimise functioning in order to improve the chances of getting any support or maximising support. This has numerous negative effects:

- Parents have to highlight negative aspects of their children. This is very punishing for parents, as we all like to look to the positive characteristics of our children and minimise the negative.
- Parents almost always have a more positive view of their child's capacity than teachers or other professionals who often do not see the child at their best. The 'capacity approach' forces teachers and parents to focus on inadequacy rather than competence.
- It encourages outright lying. If parents or teachers are in a desperate situation and know that support may only be given to the most difficult/impaired/incompetent children then there is great incentive to overstate the problem.
- There is no incentive to reduce the support in the longer term. As the 'blame' for the difficulty is laid at the door of the child, there is no incentive for the school to highlight gains as this will result in less support with no or minimal credit being given to the teacher.
- It ignores or demeans the professionalism of teachers, principals and other professionals in accurately stating their real needs for support, and does not encourage the design of a pathway to greater independence of the student.
- It highlights difference. All governments in Australia support the inclusion of children with disabilities in mainstream classes both by law and policy. To have a policy where all other children get to share the resources of the school but children with a disability are included on the basis of 'extra' resources highlights difference and images children with a disability as a 'burden'.

An alternative approach is to fund the SCHOOL. All education departments have accurate data on the proportion of children with a disability attending mainstream schools. From this the majority of the available budget can be allocated to schools with the resources under the control of the principal. The principal and teachers then make professional judgements about how the resources are best used.

The small remaining part of the overall budget is used to cater for those schools that really do have additional problems: for example a higher than statistically normal proportion of children with a disability; a school staff which is overly comprised of individuals who need additional training or support; major capital works or equipment needs; or areas where there are other social issues placing short term stresses on the school. To gain access to these additional funds the schools would have to make submissions documenting the additional needs of the SCHOOL rather than the incapacity of the students.

This approach has numerous advantages and is considered 'cutting edge' in the allocation of scarce resources.

- It is inclusive. The school gets an overall budget for all children, including the children with a disability. This is then allocated on the basis of professional educational judgements of the principal and staff as to where the resources can be best allocated to meet the needs of all students.
- Parents are highly aware of comparisons of schools and so would provide an external accountability mechanism to ensure that children with a disability receive a fair allocation of resources. There could also be monitoring regionally within the education system.
- There is an incentive to reduce the support and encourage independence. As the resources will always be less than desired, there will be pressure on individual teachers to move the child to greater independence to free up resources for other teachers in need. Any teacher that was not doing this would be open to pressure from peers. Similarly the principal would have a great incentive to monitor the use of the resources to ensure that all staff were 'pulling their weight'.
- It allows flexibility in the type of resources used. There is a very unfortunate tendency to align inclusion with the provision of an aide, when in many cases an aide can be a barrier to inclusion.<sup>2</sup> The resources or some of them might be better spent on in-service training of staff, use of external consultants, time off for teachers to plan and design multilevel lessons and curricula, additional equipment, or opportunities to work more closely with parents. These sorts of professional decisions can be made if the resources are allocated within the school rather than centrally.
- For segregated schools or segregated centres on the campus of mainstream schools, the same principle would apply. Resources would be allocated on the number of children attending, with the money allocated on the basis of professional decisions by the principal and staff. Again, any additional resources for the SCHOOL would have to be applied for and justified on the basis of unusual difficulties.
- Most important, this approach recognises and encourages the professionalism of the teaching staff. They should be the ones determining what they need in order to be successful teachers, and this will vary across individuals. Some will need high levels of support of an aide and lots of training and support. Others will have the skills and experience to manage the classroom successfully with a child with a disability but will have other professional needs for development. Of course resources will never be sufficient to meet all of these needs, but the approach outlined maximises the use of professional judgements of staff and encourages their development as broad based educators.

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<sup>2</sup> See articles by Michael Giangreco listed at: <http://www.uvm.edu/%7Emgiangre/inclu.html>

**Terms of Reference 3: The level and adequacy of current special education places within the education system.**

As mentioned above the research is unequivocal in the support of full inclusion for children with a disability. Feedback from parents across the country, including NSW, indicates full inclusion is often a continuing struggle with constant pressure for parents to send their child to a segregated centre or school despite the research evidence to the contrary. This is particularly the case in high school where there are even less examples of full inclusion with the most common scenario being inclusion in art and music but segregation for the rest of the academic lessons. As more and more parents exercise their child's rights to a mainstream education it is predicted that the need for segregated special education places will *decrease*. Hence the issue will not be 'places' but level of support available to mainstream schools. It is likely that this need for support will increase in the short run until schools come up to speed with best practice in multilevel teaching and up-skilling of staff. As universities are increasingly preparing new teachers for the inclusive classroom, this level of support needed should level off over time.

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

This is an area where many professional groups such as psychologists and therapists are having to adjust their modus operandi. If specialist professionals withdraw the child from the mainstream classroom for individual therapy sessions, it decreases the child's inclusion and highlights difference. One only needs to think of how one would have felt as a student if one had been pulled out of class for a 'special session'. As a result, a major study in the Netherlands showed *no significant effect* from the provision of such specialist services, despite the ratio apparently being much higher than anywhere in Australia (see literature review referenced above). The best practice model seems to be where the teacher and specialist collaborate on alterations to the curriculum or teaching approach so as to incorporate the needed specialist input. In the best examples, this also applies to the other children in the class – for example, the physiotherapy needs of one child might be incorporated in the physical education lesson which applies to all children.

**Terms of reference 5: The provision of a suitable curriculum for intellectually disabled and conduct disordered students.**

The appropriate curriculum for all students is the mainstream curriculum. This is developed as a consensus document by the society as a whole, as is shown by the interminable arguments in the press about what should be in or out of the curriculum. If we do not include a particular child in this curriculum, we are implying that they do not have the same educational needs to belong in the agreed topics of the society. This is the path to a 'parallel life', which has been the outcome of segregated education for over a century.

The difficulty becomes how to include the child who is many years advanced of her peers as well as the child with considerable impairments in the same lesson. As mentioned above, EVERY class since the end of streaming has a wide range of capacity in the same room so this is not a disability/conduct issue, although they highlight the dilemma.

The history of the curriculum for children with a disability is instructive here. Until about 1980 in Australia (and much of the western world), children with an IQ below fifty *were not allowed to go to school by law*. They attended 'activity-therapy centres' run by voluntary organisations, most of which were established to provide some stimulation to these children. When special schools started to develop a curriculum (which is still not uniform across segregated schools in most states) it was based on a curriculum developed by Edouard Seguin that was designed not to teach but to make students productive members of their community. It involved Social Skills Training, Physical Education and Self Help Training. This is still the basis for the curriculum in many Segregated Schools and Centres, where it is now called 'Life Skills' and commonly involves shopping trips and lessons around the areas listed by Seguin.

We have to ask ourselves – "What has been the outcome of 150 years of segregated education using this type of curriculum? Have people with a disability tended to become productive members of the community, holding down real jobs and living independently like others? The answer is of course that they tend to live a parallel life of group home, sheltered workshop and/or community activity programs such as bowling excursions. This curriculum has been a failure if community inclusion and independence were the goals as is commonly stated.

The current state of the art in curriculum design is multilevel teaching. This is too detailed to explain here<sup>3</sup> but a key element is to restructure the curriculum to draw out the 'big ideas' that are the core concepts of the material covered. Often these are just 3 or 4 items, which makes them accessible to all children, including the most impaired. For children with behaviour disorders a key issue is often failure in school, which becomes a downward cycle as the behaviour commonly results in more and more withdrawal from the class. Again, the 'big ideas' make it possible for these children to succeed in class and start to experience some of the self-esteem growth that comes from such success. For more capable students, the 'big ideas' are taken to greater and greater level of detail with examples, experiments and research topics to stretch the most capable. Thus all children get the core concepts, most will get these expanded out and be given ways to utilise them across a range of situations, and some will have their creativity and independence pushed by challenges at the upper end.

This is the direction of education in the 21<sup>st</sup> century. As stressed, this is not a disability issue, but the challenge for education is to fully include all children and ensure that they all gain at least the core concepts and basic skills such as literacy and numeracy. To not gain these skills in the current world is a recipe for the three 'ps': 'poverty, pensions and (possibly) prison'. That has been the history for people with a disability.

**Terms of reference 6: Student and family access to professional support and services, such as speech therapy, occupational therapy, physiotherapy and school counsellors.**

When talking with families, these are often the key issues that are raised. Parents are very aware that to succeed their child needs communication, basic mobility and fine and gross motor skills. Parents often also need help with problems at home such as difficult behaviour or managing the plethora of issues that are often raised by having a child with a disability.

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<sup>3</sup> A short summary of some major elements can be downloaded from <http://www.include.com.au/resources.html> under 'curricular inclusion notes'.

The difficulty is that the level of individual therapy required to really make a difference is normally 4 sessions per week for a reasonable period, and no system can support the huge cost involved. The ways that systems cope – giving a small amount to each individual child – say one session per week or less – has been shown to have no significant effect when looked at system wide.

Two approaches seem to make a difference. In the US, education starts at birth so the education department becomes involved as soon as significant developmental delay is apparent. This means that resources are used when their impact tends to be greatest (the first five years of life) and can be expected to result in significant cost savings later. This approach is recommended and indeed several governments have early intervention programs to support children with autism spectrum disorders. It has the capacity to also have a significant impact on other children with disabilities, as well as those with conduct issues. It is much better to pick them up early.

The second approach is where the therapists work with families to help them integrate the needed therapy into the normal household routines so that children get the ‘therapy’ through play, chores, and other aspect of family life. Similarly, if teachers and therapists collaborate on ways to incorporate the therapy into the normal classroom, the power of the therapist can be multiplied.

Unfortunately, it is unlikely that this will be satisfactory for most families. The reality is that ‘full on therapy’ is what many families want and undoubtedly that would produce the greatest benefit in most cases. The problem is the cost which society has not yet shown a willingness to contemplate.

**Terms of reference 7: The provision of adequate teacher training, both in terms of pre-service and ongoing professional training.**

I am unable to comment on the individual teacher curriculum at other universities, although the changes occurring at Edith Cowan University seem to be similar to those occurring nationwide.

It is now made apparent to every teacher undergoing teacher training that they will have children with a disability in their classroom and that this is the law and not an issue of choice for teachers or schools. This is a major advance over the last five years and reflects the increasing numbers of children included in mainstream education by parents who are aware of their rights under the law. As a result, student teachers commonly experience a child with a disability in their prac classes in primary school, although high school experience tends to be much less common due to the tendency to segregate as children get older. This is likely to change as more children experience full inclusion right through primary school and parents press for a continuation in high school.

A major change that I have observed is that information that would normally be included at Master degree level (such as multi level teaching) is now much more likely to be included at undergraduate level. This is a huge step and means that new teachers have a much greater grasp of the need to teach to all children and have some skills in how to do this. Overall though, the level of input around the inclusion of children with a disability tends to be insufficient in my opinion. It can be as little as one semester unit in a four-year degree. Similar levels of input may occur with behaviour, even though beginning teachers report difficulties with class control being some of the most trying aspects of starting out as a teacher. In addition, I have seen many



examples of courses on disability that revolve around the definition of different syndromes and description of characteristics. This tends to be of almost no use to teachers as the differences within any individual syndrome can be greater than the differences to the normal population.

We don't want or expect teachers to be experts in disability or behaviour. However we do want them to have basic knowledge of these areas and most important, knowledge of ways to access expert help when they need it. In particular, a major gap that is apparent in talking to teachers is the lack of knowledge of the research in the area of inclusion and behaviour. There is a general belief that 'these children are best taught in segregated settings', even though this is directly contrary to the actual research results. Similarly, decades of research of the difficulty in generalising behaviour gains in segregated 'behaviour schools' is not known or acted on and these schools continue to be built and advocated for. As professionals, teachers should be up to date with key research in their field and so be able to contribute to informed debate on new directions.

While it is critical that all new teachers get this information and experience, the most apparent need is for the teachers who are currently in the system who may well never have experienced a child with a disability and don't see them as 'part of my job'. Again, it is critical that in-service education is available to teachers to set out the research findings and the law in this area so that they do not get themselves caught up in discrimination issues when working with families. Many teachers have found themselves in very unpleasant situations through unknowingly discriminating when they organise placements or activities based on traditional approaches.

It is also going to be very important for current teachers to get access to courses such as multi-level teaching; detailed scaffolding; strategic integration of curriculum areas; pre-priming of topics before teaching, and strategic reviewing of teaching effectiveness. While current teachers commonly have built up a good stock of experience on class control and so have much less difficulty with behaviour than when they first started, it remains an issue for most teachers. There are a range of very useful strategies such as choice theory, positive behaviour change approaches and collaborative ways to problem-solve difficult behaviour that almost all teachers find useful and stimulating and can easily be organised for in-service courses.

A particular approach that is effective is cross-fertilization across schools. When a school has gained experience and success in including children with a disability, it is very powerful for them to be able to share this information with their peers in other schools, and the information is much more likely to be listened to or heeded than if provided by an academic or central bureaucrat. Similarly, allowing for 'teacher swaps' so that teachers can get direct experience in 'beacon schools' can rapidly spread effective approaches and help to inculcate accepting attitudes.

Overall, successful inclusion depends on having both the *will* and the *skill*. *Will* is to a large extent a personal moral issue, but it is influenced by the law, parent wishes, departmental policy and school ethos. Partly this is training, but much depends on leadership at the political, department and school level. Skill however is directly training related.

#### **Terms of Reference 8: Any other related matters.**

The committee may not be aware of the move around Australia towards the inclusion of people with an intellectual disability into university courses. At the moment this is at the level of being

supported by individual lecturers with faculties being aware but not yet developing policy on the area. Of course people with other disabilities have been attending higher education for many years, but Australia is just now starting to catch up with other countries on the inclusion of people with an intellectual disability in mainstream post secondary education. In Alberta Canada, for example, people with very significant impairments have been attending university and other post-secondary education institutions for over two decades<sup>4</sup>.

The implications are obvious. If universities can successfully include students with significant intellectual and multiple impairments, then arguments about the impossibility of including such students in mainstream classes as the 'gap' gets bigger come to be seen for what they are. The 'gap' is a solvable issue with the right will and skill. With a combination of a positive 'can do' attitude (the will), some thought and if necessary outside advice and support, it can happen.

The twenty first century is a time of great stress and pressure on education systems around the world. It is also one of the most exciting times to be in the field since the inclusion of females in classrooms as a matter of course or the development of co-education for boys and girls. These were other examples of great educational change that were incredibly complex and divisive but were managed and resulted in changes to society that few would want reversed. The current changes have similar potential to build a more inclusive society for all.

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<sup>4</sup> A paper on this can be downloaded from <http://www.fedvol.ie/fileupload/Community%20Participation/Inclusive%20Post%20Secondary%20Ed%20-%20Canada%20-%20BOC%20Clare%20-%2024%20Aug%2009.pdf> See also <http://stepsforward.homestead.com/Research.html>