REPORT OF PROCEEDINGS BEFORE

GENERAL PURPOSE STANDING COMMITTEE No. 2

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

At Sydney on Monday 10 May 2010

The Committee met at 9.00 a.m.

PRESENT

The Hon. R. M. Parker (Chair)

The Hon. Tony Catanzariti
The Hon. M. A. Ficarra
Dr John Kaye
The Hon. Shaoquett Moselmane
Reverend the Hon. G. K. M. Moyes
The Hon. C. M. Robertson

STEPHEN GEORGE CLARKE, Chief Executive Officer, Down Syndrome Association of New South Wales and

JILL ALISON O'CONNOR, Information Officer, Down Syndrome Association of New South Wales, affirmed and examined:

CHAIR: This is the third and final public hearing of the Inquiry into the Provision of Education to Students with a Disability or Special Needs by General Purpose Standing Committee No. 2. This inquiry was established in response to concerns raised by teachers and parents about the adequacy of funding for special education places and support services and the assessment process for children with disabilities or special needs attending New South Wales schools. We had two public hearings in March and we will be undertaking site visits as well as part of our inquiry.

Today we are taking evidence from a range of stakeholders, including advocacy organisations within this area, such as Autism Spectrum, Northcott Disability Services, the NSW Parents Council and the NSW Disability Discrimination Legal Centre. Other witnesses include academics from the University of Newcastle, and Speech Pathology Australia. A hearing loop is available in this room for those people who require it and an AUSLAN interpreter will also be available from 9.30 a.m. to 10.00 a.m. to interpret evidence given by the Royal Institute for Deaf and Blind Children. A Braille copy of the terms of reference is available. The full transcript of evidence from today's hearing will be placed on the Committee's website approximately 24 hours after the hearing. In accordance with the Legislative Council's guidelines for the broadcast of proceedings, only Committee members and witnesses may be filmed and recorded. People in the public gallery should not be the primary focus of filming or photos. In the recording of proceedings of this Committee you must take responsibility for what you publish or what interpretation you place on anything that is said before the Committee. Messages for the Committee must be delivered through the Committee staff. I ask everyone to turn off their mobile phones and if they receive data please keep them away from the microphones.

There is a timetable for questions on notice if witnesses agree to provide information. We have set a guideline of 14 days, however if you need more time the Committee will be happy to discuss that with you. I welcome our first witnesses from Down Syndrome NSW. There is an opportunity for you to make a brief opening statement before we ask questions if you would like to do so.

Mr CLARKE: Down Syndrome Association of NSW was established 30 years ago. Our members include parents of children with Down syndrome and individuals with Down syndrome, as well as professional affiliate members. We provide support, information, referral and advocacy services, and professional development opportunities for teachers and schools, including in-services and workshops, and we have a resource library. I have worked in the disability, health and community sectors for the past 18 years and have worked directly with many families and people with disabilities. My colleague Jill O'Connor is a senior staff member of Down Syndrome NSW who has worked with us for over 20 years. Jill has an adult son with Down syndrome. She has worked extensively with parents of children with special needs and people with Down syndrome providing support and guidance to parents on schooling issues and how to access the appropriate classroom support and funding support for their child. Jill has heard firsthand from many parents the difficulties, frustrations and battles they have had with individual schools and the Department of Education to get the appropriate level of classroom support their child needs, and in some cases to get any classroom support at all for their child with Down syndrome.

I will make some brief comments to expand on some of the issues in our submission. Down syndrome, as its name implies, is syndromic in nature. There is not a single deficit that characterises Down syndrome. All children with Down syndrome have some level of intellectual impairment but that level varies widely from individual to individual. Also, they will generally have a combination of other deficits that will vary greatly between individuals; for example, hearing impairment and visual impairment and deficits in social skills, communication skills and expressive language skills in particular. It is these deficits in combination that affect the child's ability to learn and to access the school curriculum.

The disabilities criteria as set down by the Department of Education consist of a series of separate categories, which you would be aware of: language, physical disability, intellectual disability, hearing impairment, vision impairment, deafness, blindness, mental health problems, and autism. As you will note, there is no single box for a child with Down syndrome to tick. Generally the first category that is looked at is intellectual disability and the preferred tool by far to assess intellectual disability is the IQ test. It is very easy and very convenient to administer but generally wholly inadequate to assess the classroom support needs of a child with Down syndrome.

Unlike children with autism, for example, it is often difficult for children with Down Syndrome to get to first base in terms of accessing any level of funding support. When they do get to first base there is a lack of understanding of the typical learning profile of a child with Down syndrome and the syndromic nature of Down syndrome. They are some of the main barriers which children with Down syndrome face to access the appropriate level of funding support or, in some cases, any funding support for the classroom.

CHAIR: I will explore that last statement. The committee has had a lot of discussion about functionality versus categorising children. Indeed, in relation to the autism spectrum some people say it should be on a functional basis and others say a combination of both. Are you asking for a definition or status similar to the autism spectrum, as I understand it, but also to have an assessment based on functionality?

Mr CLARKE: We say if the disability criteria remain in a category format as it is currently then there should be a category for Down syndrome. There is no logical reason or rationale for there being a category for autism, for example, and not one for Down syndrome but we also believe a functional approach could work well if there is a proper understanding of the learning profile of a child with Down syndrome and a proper understanding of the typical combination of learning deficits that a child with Down syndrome has.

CHAIR: Do you say a functional approach of assessment that does not have to be constant because you say there is too much assessment?

Mrs O'CONNOR: Too much inappropriate assessment. What is happening at the moment is that children who have Down syndrome are only assessed on their IQ. If they do not fall into a moderate to severe category they do not even have the opportunity to apply for funding support and if they did they would have a much broader appraisal of what their learning needs are, but they do not even get that far if they have been classified as having a mild disability.

The Hon. MARIE FICARRA: In relation to worthwhile recommendations that you would like from this committee—you have already mentioned a category for Down syndrome and also the nature of the assessment—would you expand on those areas for reform in the assessment of children with disability and special educational needs?

Mrs O'CONNOR: The research about the application of IQ testing for children with Down syndrome is pretty clear, and has been for a very long time, but it tells us not very much that is very useful for the way that children can function in schools, so the emphasis on that could be a lot less than it is.

The Hon. MARIE FICARRA: Have you been consulted on the development of assessment criteria at all?

Mrs O'CONNOR: No.

The Hon. MARIE FICARRA: Is that something that would be useful in the future?

Mrs O'CONNOR: We do not have the expertise in education ourselves. We could certainly help find the excellent and well-established research.

The Hon. MARIE FICARRA: Which has that expertise?

Mr CLARKE: That is right.

The Hon. MARIE FICARRA: Is that the main area for reform that concerns your organisation?

Mrs O'CONNOR: No, it is not the only one. Our members tell us very often that they have great difficulty with having to re-apply for funding and re-establish that their child has a disability, and that is just plainly ridiculous. Education is not alone in doing that sort of thing but it really does seem to be silly. We have one member at the moment whose child has actually been required by the department to undertake an IQ test four years in a row when the professional recommendation on IQ testing is that that is not done more than two years. Yet the department is requiring that that child be tested every year so the results are totally unreliable and that is what her support is based on, and it goes for a year, or most recently she was not awarded any support at all for six months, and that is not sustainable for families or schools, and that should not be allowed to continue.

The Hon. MARIE FICARRA: Do you want any particular reforms to improve class sizes or the operation of education in mainstream schools? Do you think it is ideal to include the education of students with disabilities in mainstream classes in schools? Is that working well? Do you have any comments on those areas?

Mrs O'CONNOR: There are many examples where it does work very well which gives us great encouragement that it can well work everywhere if only we get it right, and if people will learn from those people who do it very well, and we did give an example in our submission of one school that is doing a very, very good job in a remote rural area of New South Wales, which is often regarded as a difficult place to meet these kinds of needs. I do not think there is any evidence that class size beyond the limits that apply now is an enormous issue, it is more the practices that occur within the classroom rather than the number of children who are there, although that is sometimes used as a criterion. A teacher will be very frustrated perhaps by having to meet the needs of a number of different children and they will say, "I have 30 children's needs to meet. I can't give all my time to this child" and nobody is demanding that they should but they should be supported so that they do not feel that they are being asked to give all their time to that child. That could be offered that support in a number of different ways.

Dr JOHN KAYE: I am interested in how often assessment occurs and what sort of assessment should occur. Am I correct in saying that the educational capacities and learning needs of all children, including those with Down's syndrome, change as they progress through school?

Mrs O'CONNOR: Certainly that is true. One of the things that has been a difficulty in the past and still occurs sometimes is that there has been a false belief that children with Down syndrome plateau at some stage, and that plateau is defined by the people who use that term sometimes as they stop learning. So their capacity to learn actually stops at some age, and often that is around 12 when they go to high school. There is absolutely no evidence that that occurs. All the evidence is that their learning capacity continues. It may not accelerate as rapidly as other children, so that the gap between the learning capacity of children of a similar chronological age and a child with Down syndrome will grow, but the child with Down syndrome is still learning.

Dr JOHN KAYE: While their learning continues, and continues at a differentiated rate across students, is there still a need to assess the learning capabilities and educational and support needs of those children? Do you agree that there needs to be ongoing assessment?

Mrs O'CONNOR: Absolutely.

Dr JOHN KAYE: But it needs to be appropriate?

Mr CLARKE: Not on an annual basis.

Mrs O'CONNOR: Not annually, as that is overdoing it.

Dr JOHN KAYE: Your remarks about an annual test were in respect to the IQ test but not in respect to other kinds of assessment?

Mrs O'CONNOR: I think it would be unwieldy for the department to have to do full assessments on an annual basis and allocate funding that perhaps two, three years at a time would actually be more practical and you are not going to see enormous changes in the need for support over that period of time.

Dr JOHN KAYE: On a two to three-year time scale, you see the need for reassessing the functional capacities?

Mrs O'CONNOR: Absolutely, as long as it was used sensibly and not in a way that it sometimes is. Recently a child was found on a frequent assessment to still need the support of the teacher's aide and the judgement that was made about that was we had better take that away so she can become independent. That is clearly stupid. So, as long as it was not used to reduce the support that a child got and it was built-in recognition that the support needs may increase as the demands on the child's learning increased.

Dr JOHN KAYE: Can you briefly comment on teacher training with respect to the specific needs of children with Down syndrome?

Mrs O'CONNOR: Very briefly, yes. There does not seem to be any.

Dr JOHN KAYE: What about the ongoing professional development training, what is called the in-service training? Are there in-service opportunities for teachers with respect to Down syndrome?

Mrs O'CONNOR: We provide in-service opportunities for teachers of children with Down syndrome and we probably educate 300 to 400 teachers a year. That is not all the people who need it. I am not aware of anything that is done by the Department of Education and Training, but we have not had much dialogue with them. In the past, we have offered to be involved, and that offer has not been taken up by the department.

Reverend the Hon. Dr GORDON MOYES: On my visit to public schools I have been calculating the amount of time aides have to give individual attention to students. I am aware of the increasing number of students who need individual attention. Do you have any specific comment on children suffering from Down syndrome?

Mrs O'CONNOR: First of all, we do not refer to children suffering from Down syndrome. Children have Down syndrome; they do not suffer from it.

Reverend the Hon. Dr GORDON MOYES: My apology.

Mrs O'CONNOR: They suffer from the lack of support that they experience every single day of their lives. But, to answer your question, certainly it should not be expected that most children with Down syndrome need individual one-on-one support all of the time. If support is offered in a skilled way, much less time than that can be put into individual support. There may be times when they really do need individual, one-on-one support but there is always a need to balance between giving individual support and supporting their ability to become more independent and a more self-initiating learner or a more peer learner, so they do not become dependent on a particular person offering them one-to-one support. There is also evidence now that children with disabilities who had had one-to-one support at very high levels begin to resent that, so it has an emotional impact on them and it can stop them learning if they have learnt strategies to get the teacher's aide, who is usually the person providing one-on-one support, to do their work for them. Kids with disabilities have lots of skills and that might be one that develops very well.

Reverend the Hon. Dr GORDON MOYES: Mr Clarke, amongst children with other kinds of deficits, I have noticed they have been able to be helped greatly by the provision of various kinds of software. Are you getting specific software provided within the public system to help children with Down syndrome?

Mr CLARKE: It would vary greatly from school to school and whether there may be software there which teachers may not have the opportunity or understanding or the classroom resources to use the software.

Reverend the Hon. Dr GORDON MOYES: Can I just check you? You are saying there are resources there but the teachers do not know how to access that?

Mr CLARKE: In some cases that would be the case, yes. But I cannot comment in a general way across schools. It would vary greatly. You need to have somebody—the software itself is not enough—who fully understands and there needs to be the classroom time for the child to make use of that software.

Reverend the Hon. Dr GORDON MOYES: Apart from what programs your organisation might give for teachers for in-service training, is there sufficient or adequate training for teachers in helping students with Down syndrome?

Mr CLARKE: In a word I would say no. There is certainly a lack of understanding. As I mentioned, the typical learning profile of a child with Down syndrome, the types of aids and resources that are useful to use with a child with Down syndrome, the types of teaching strategies and, as Jill mentioned, the teacher often feels they do not have the time or resources to apply those strategies even if they have a theoretical understanding of what those teaching strategies are.

The Hon. SHAOQUETT MOSELMANE: I wanted to ask a question earlier, which the Hon. Marie Ficarra asked, and in relation to your earlier comments. You said intellectual assessment is inadequate. What in your view is an adequate assessment and what form of assessment are you seeking?

Mrs O'CONNOR: There is a great deal of good quality information, soundly based on research and 30 years experience, which has come from the Down Syndrome Education International body which is based at Portsmouth in the United Kingdom. They have researched early learning needs of children with Down syndrome and school-age children, and they would recommend a more broad-based assessment that takes into account things that we know are part of Down syndrome, and we know that partly from their work. Children need to have language assessments. They need some psychometric type of assessments that are not standard in an IQ test. They need particular assessments of things like short-term auditory memory impairment. I have never seen any evidence of that having been performed for a child in school or even being requested, yet that is the single most impairing characteristic of all children with Down syndrome. So, much more broad-based and based on the developmental profile that is emerging from research and has been most well articulated by Down Syndrome Education International would be our recommendation.

The Hon. SHAOQUETT MOSELMANE: So, no institution in New South Wales has ever applied that sort of assessment?

Mrs O'CONNOR: It may have been done at Macquarie University. It ran a school program. I do not think that program still exists, and there are very few children with Down syndrome in it. It is not applied by the Department of Education and Training to our knowledge.

The Hon. SHAOQUETT MOSELMANE: Macquarie University would recommend that that be applied, would that be the case?

Mrs O'CONNOR: They may not recommend that particular one. They have not been as active in research in working with children with Down syndrome in the last 10 years.

Mr CLARKE: We would certainly support a move towards functional assessment if it is done properly and if the assessors are fully trained and understand what they are assessing.

The Hon. CHRISTINE ROBERTSON: Has your organisation been involved in the school learning support program trial that is occurring in the Illawarra? Was there any consultation with you?

Mrs O'CONNOR: No.

The Hon. CHRISTINE ROBERTSON: Moving to your issue about testing and labelling, is there a potential to lump all Down syndrome children in one place in life if we have a label saying these are Down syndrome persons? Rather than dealing with the disability, that means the Down syndrome person has more struggle in life?

Mrs O'CONNOR: The use of the categorisation would be to give all children with Down syndrome access to the wider appraisal. What it would do under the current system is recognise that they have a disability. That is all it does. It does not say you have to go to a school in a particular place, and we would never support that.

Mr CLARKE: It needs access to some level of funding support, and that would vary from individual to individual with Down syndrome. But all children with Down syndrome need some level of classroom support.

Mrs O'CONNOR: We recognise that we are responsible for some of that label or categorisation because for 30 years we have been saying please look at our children and our loved ones as individuals, and now we are saying but do recognise that they have Down syndrome. It is really not that hard.

The Hon. CHRISTINE ROBERTSON: It is just as incredible balancing trick, is it not?

Mrs O'CONNOR: Yes.

The Hon. CHRISTINE ROBERTSON: It would appear, particularly in recent times, that Down syndrome children have the opportunity to work through school, and go out and get jobs, not like the olden days.

Mrs O'CONNOR: No.

The Hon. CHRISTINE ROBERTSON: So it would be dreadful to block that out with a label.

Mr CLARKE: Yes.

Mrs O'CONNOR: Absolutely.

The Hon. CHRISTINE ROBERTSON: Was the rural school you referred to a central school?

Mrs O'CONNOR: No.

The Hon. CHRISTINE ROBERTSON: I do not want you to label it. It was not a central school?

Mrs O'CONNOR: No, it was a high school.

The Hon. CHRISTINE ROBERTSON: So they have gone through the social issue of moving from a primary school to a high school.

Mrs O'CONNOR: The current principal of the high school moved to that high school about five years ago and found that the children in that town, who were of high school age and who had intellectual disabilities, were all in a support class in the primary school, even though they were sometimes 18, or they went to school many, many miles away and boarded away from home. He worked with the department to see that a number of places in a senior class were moved to the high school so that those children would be with their age peers. Then they developed a program that is very much responsive to individual needs. It was developed in consultation with parents so that they have a special education team in the high school. They have a putative support class, but most of the children spend almost all of the time being supported in mainstream classes for most of the curriculum.

The Hon. CHRISTINE ROBERTSON: So this is with the resources within the school, and he has built it up?

Mrs O'CONNOR: It is all done within the resources that exist now, and applied creatively and very professionally by a very able and experienced special education team. It might have been a unique set of circumstances in that that principal had a deep and personal knowledge of children with disabilities.

The Hon. CHRISTINE ROBERTSON: That sounds very like a basis for the School Learning Support program, although we have not been fully briefed on that yet. Maybe we should not interfere with that.

Mrs O'CONNOR: My impression is that it is a great deal better.

The Hon. CHRISTINE ROBERTSON: Because of the individual?

Mrs O'CONNOR: Because of the way that they have used the resources that were available to them anyway, and did not just stick to what everybody else does.

The Hon. CHRISTINE ROBERTSON: It sounds more like the model for what they are trying to do.

Mrs O'CONNOR: Absolutely.

CHAIR: I am sorry that we have been really rushed for time, but the strength of your submission is excellent. It was easy to read and really focused, and we really appreciate both that submission and your evidence today, which have really put Down syndrome issues on the map for our inquiry. We will certainly take both your submission and your evidence into consideration as we move forward. Please do not forget that this is a two-way communication process: if there is something that you think we need more information on, or some research that you think would be useful for us, please do not hesitate to be in touch with the secretariat. I know that you referred to some research papers, and we would be happy to receive copies of those.

Mrs O'CONNOR: We would be happy to supply that and we will send it to you today.

CHAIR: Thank you for your time today and for the work that you do on behalf of children and adults with Down syndrome, as well as for parents in particular.

Mrs O'CONNOR: Thank you.

Mr CLARKE: Thank you.

(The witnesses withdrew)

CHAIR: For the information of anyone requiring the assistance of an interpreter, the Committee has arranged for an Auslan interpreter to be present. The interpreter now will convey by sign language that interpreter assistance is available during the hearing.

GREGORY ROSS LEIGH, Conjoint Professor, Special Education, and Director, Special Education and Disability Studies, University of Newcastle, and Chair, Professional Education and Research, Royal Institute for Deaf and Blind Children, sworn and examined:

JANICE ELIZABETH NORTH, Director—Children's Services, Royal Institute for Deaf and Blind Children, affirmed and examined:

CHAIR: Apart from your submission, which is excellent, is there anything that you would like to say by way of a brief opening statement before we ask questions?

Professor LEIGH: If that is appropriate, thank you.

CHAIR: Sure.

Professor LEIGH: It is fair to say that recent developments in a range of fields have served to ensure that special education programs, which are required to meet the needs of children who are deaf or hearing impaired or blind or vision impaired, are increasingly more diverse and more complex. For example, in regard to deafness, the introduction of new-born hearing screening and the increasing application of new technologies, including in particular cochlear implants, has resulted in opportunities for deaf children to achieve their potential and to achieve developmental and educational outcomes that are more commensurate with their hearing peers never having been better. Indeed that is the case also for children who have visual impairment.

We are at a point in history when opportunities for more normalised education and developmental outcomes have never been better. In this context it is fair, indeed tempting, to consider that education for these groups has become more normalised and that the need for specialised intervention has somehow diminished. Certainly opportunities for children with sensory disabilities to participate in regular curricular activities alongside their sighted or hearing peers have never been better. However, the nature of education and support structures for these children has never been more complex. It is fair to say that there is a greater range of response capabilities required of educational systems that serve these children and a greater demand upon professional knowledge and skills of the teachers that staff those systems than has ever been the case at any point in our history.

Quite simply, for teachers there is more to be known now about supporting kids with hearing or vision impairment than ever they needed to know previously. For systems, irrespective of whether they are in the public or independent sector, there is a broader range of possible support environments and a broader range of program types than we have ever seen at any point in our history. The fact is that the ones we have known historically have not gone away; we have just added more environments and more needs for different opportunities to that range. For example, for deaf children options, such as special schools and specialised classes, continue to be the most appropriate option for some children, albeit that the number of those children may indeed be diminishing. For others, the availability of specialised and regular support from teaching consultants or itinerant teachers in mainstream environments continues to be the key to supporting their access to a regular curriculum.

We know that for some kids that will be through highly sophisticated technologies that demand highly sophisticated knowledge and support opportunities. For others, particularly deaf and hearing impaired children, that access still will be best achieved by the learning of an alternative language or communication system. For some children, Australian Sign Language, or Auslan, will continue to be what necessarily supports their access to the curriculum and indeed their ongoing access to society as well as all of the opportunities that life has to offer.

The point we wish to make in opening is that the range and complexity of support needs is both complex and broad. For all of these kids, whether they are hearing or vision impaired, the success of intervention rests on the availability of highly specialised and comprehensive early intervention opportunities. In the case of hearing-impaired children, since 2002 in this State that has placed even greater demands on special staff, whether they be teachers of the deaf, speech pathologists, audiologists or whatever, because of course we are now intervening in children's lives from as early as six weeks of age with the advent of newborn hearing screening. For children with vision impairment the story also is just as complex.

I shall conclude these brief remarks by saying that this morning we wish to endorse the submission we put before you and in particular draw attention to the fact that there is no sense and can be no sense in there being a one-size-fits-all response to the provision of support needs for the groups we are talking about. Deaf children and children with vision impairment are not and never have been an homogenous group with one set of support needs that can be met in just one way, whether that be in a mainstream, specialised setting or whatever. In this context, the availability of better-trained teachers in regular classes who are capable of working with children with specialised support needs is certainly pivotal to the ongoing success of programs for this group, but it is not the only answer.

We need to continue to provide the specialised and additional services we have come to know and, indeed, more specialised and additional services. In this regard, our submission has addressed two things: the cost of doing that and the ongoing need to support and resource that multiplicity of support and intervention strategies. In particular, our submission has spoken of the need to ensure that we maintain a highly professional and specialised workforce that is capable of delivering those different types of programs. In particular, we want to stress the notion that if we are relying on a single system of support in mainstream education, we would be missing some very important points of specialised support necessary to gain maximally from the outcomes that are achievable for the groups we are talking about because in the current historical context they are quite extraordinary outcomes to be achieved by these groups, but only with the necessary resourcing and professional and specialised support. In that regard we commend our submission to the inquiry.

CHAIR: Thank you. It will be useful to us. Perhaps at the outset I should have declared a conflict of interest as each of my three children has attended the royal institute facility for three years. However, coming from the Hunter I have another interest in regard to the service in which you are involved at the University of Newcastle. A number of people have said that teacher training is inadequate. What are your views about that and also what contribution have you made to the package that is being rolled out. The Committee will have a demonstration of the online training at a later point in time, but how much contribution have you had to that and what is your view on the adequacy of teacher training and ongoing in-service training?

Professor LEIGH: I will deal with those in order. We have had no involvement with the development of the online training packages. We are particularly interested in that issue, but to this point we have not been engaged or involved.

CHAIR: Neither through the institute nor in your other capacity have you been involved?

Professor LEIGH: No.

CHAIR: That is interesting. What other comments can you make?

Professor LEIGH: As a general comment about teacher education, we hold very strongly to the view that there is a continuing need for specialist skills that go above and beyond the skills required for classroom teachers to successfully accommodate children with broad-based special educational needs in regular environments, but it goes straight to the heart of the support needs that are presented by children both at an early intervention level and at a school-age level in regard to their specific disabilities. In New South Wales, like most other States around the country, those skills can be called upon in a number of different environments. Very particularly, in all States there is a requirement for skills and early intervention level, and the independent sector and the Government education system have responsibility for children in the nought to school-age range. The skills required of teachers in order to adequately provide that specialist support at an early intervention level are just that—highly specialised. Generic training simply will not provide the basis for a successful intervention for children who are particularly profoundly deaf but across the spectrum, or children with vision impairment.

Once we reach school age the potential for children's needs to diversify and for there to be highly specialised support required for children who will be in special resource classes—children who are hearing impaired or vision impaired—who are integrated into regular schools and have itinerant teachers or, as we call them, teacher consultants to provide that support, becomes highly specialised and, of course, the ongoing situation where there are specialist schools for the deaf demands highly specialised skills and, in many cases, highly specialised communication skills.

We note with great interest that in some States considerable resource has been put towards these issues in recent times. In 2007 in Queensland there was a commitment of over $30 million to specialised training for teachers of the deaf and associated personnel in regard to the specialised support needs of children who are deaf.

In last week's Victorian budget the Government committed over four years to more than $9 million to teacher education and training specifically just for teachers of children who are deaf or hearing-impaired, recognising that there is this ongoing need.

As an issue we would identify very strongly the notion that there needs to be targeted training for teachers whose targeted responsibilities are to be supporting children with these particular disabilities. Historically, in this State that has been catered for by having a designated tag associated with employment in those categories. In recent years there has been a softening around that issue of requiring specialist qualifications to be associated with being deployed in those roles. We see that as something that really needs to be reconsidered and addressed and for there to be a strong nexus between deployment in roles to support particularly at the early intervention and early education levels, and the requirement to be employed in supporting children who are deaf or hearing-impaired, blind or vision impaired, and holding appropriate qualifications to do so.

There is a reciprocal issue there. As soon as that nexus is broken, obviously, we see a diminution in the availability of university level training programs. Over the past 15 years in this country we have gone from a situation where we had seven universities involved in the provision of special education in deafness and hearing impairment, blindness and vision impairment, to just two. That nexus really needs to be established and maintained in order to ensure that we have high-quality professional training underpinning the roles in which teachers are being deployed.

Mrs NORTH: I would like to add a very simple analogy to that. Once upon a time if you had a medical issue, you would go to your general practitioner. Then if it was a surgery issue, there were surgeons. Of course, there then became paediatric surgeons to deal with children's issues and perhaps specialists in the paediatric field so that if you had a child with a hand injury, you might then have a paediatric hand specialist or whatever. That is exactly the analogy for where we are with deafness. So, once upon a time regular teachers taught deaf kids. Then we got a special education teacher, but we have gone so far beyond that because of what technology has delivered to us.

The results we get these days for children who are deaf are entirely different from 20 years ago. It is related to two things. Number one is specialist technology alongside specialist teaching methodologies of those people. We have experts in auditory verbal methods, sign language acquisition, children who have hearing impairment and additional disabilities, early childhood et cetera. The specialist nature of what we do is so critical to producing outcomes. If we can do that, a lot of these kids will be really important contributing members to our community. So we are kind of ripping our hair out with the thought that training is becoming generic so what we are doing is, in the medical analogy, sending people back perhaps not to the GP level, in some cases back to the GP level but mainly to the generic surgeon level, and that is not getting people where they need to go. It is not doing the right thing by children.

Reverend the Hon. Dr GORDON MOYES: I will follow up your question by asking Professor Leigh about teacher education and special needs. I acknowledge your Newcastle connection. How much of that teacher training for special needs would take place, for example, at the Ourimbah campus where you have a very big teacher training program?

Professor LEIGH: Of the sort that I am talking about?

Reverend the Hon. Dr GORDON MOYES: Yes.

Professor LEIGH: At the moment, none.

Reverend the Hon. Dr GORDON MOYES: Unfortunately that was my impression.

Professor LEIGH: When I say that we are down to two universities nationally that have a highly specialised interest in vision impairment/hearing impairment, if that is the case on a national level, in regard to the specialised programs we are talking about within this State, it is highly concentrated through the RIDBC Renwick Centre, which operates as a centre at the university for teacher education. Having said that, more than 70 per cent of our student body are engaged through online and remotely delivered educational programs.

Reverend the Hon. Dr GORDON MOYES: So basically it becomes in-service training.

Professor LEIGH: It can be in-service or pre-service. In fact, even amongst our current student body who have never worked in the field but are training to work as specialised teachers of the deaf, more than half of them are doing that from a distance and we have students currently in every State and we have now got graduates through this program from 13 countries.

Dr JOHN KAYE: Thank you for your submission and the level of expertise in it and the information it gave. It is excellent. I take you to 3.2.1 of your submission, which is where you argue that funding should be allocated so that a child with a specific special need in a private school or a non-government school should receive the same support funding as a child with a special need in a public school. Where did you source your information for that? Did you, for example, look at the argument that says that of the $3 billion in recurrent funding going to non-government schools in New South Wales each year from the State and Federal governments, 13 per cent of that or $400 million should be in respect of special needs support because it is on a per capita basis and it was delivered in that fashion? Did you include that money in this analysis?

Professor LEIGH: You are talking about the proportion that is then gathered up in the AGSRC?

Dr JOHN KAYE: Yes, that is correct.

Professor LEIGH: Yes and no. Yes, I believe we have, but can I go to another level? We can talk about the numbers. Frankly, what our submission is endeavouring to do is to argue a situation where it would be ideal from our perspective, given that as an organisation we deal with children right across the sectors—we have children in our services who are in government sectors, we have children in our services who are in non-government sectors. It happens that in our school support services we have picked up the need to support children in the independent sector because that was not there before. If there is a real point in what we are arguing in the submission it is this. An ideal circumstance would be one where all the funding associated with support for children with disabilities was drawn out of the systems and then added as an overlay on top of the funding of the regular education system proportionally and fairly across all of the systems. We make that case purely and simply because at the moment the sort of argument about where funding comes from allows some sectors—talking about the independent sector—perhaps to successfully argue a case under disability discrimination for undue hardship, unfair hardship.

Our view would be that the ideal system would be one where education was funded on whatever basis, whether it is on the basis of supported independent choice with some proportion of funding being met by the taxpayer and other proportions being met by the individual but that support that is required to ensure that there is equity of access for all children regardless of the sector they are in, just as we do in society, regardless of whether you are walking on one side of the street or the other, what is needed to provide your access for that situation. That would be the ideal. If we pulled everything back out, whether it is being spent in the government sector or the independent sector, and then distributed according to need across all of the sectors. I take your point. I think it is a fair point to look at what is overall expended in one and the responsibility in the other sector, but any system that allows any sector to argue that it is an unfair hardship to be providing what is, in my view, a right for a child to access education, wherever they happen to be, should be overlayed as a community resource over the top of all of the systems.

Dr JOHN KAYE: So to some extent your recommendation does not just go to how governments allocate funding but how the Association of Independent Schools and the Catholic Education Commission spend the recurrent funds they receive to ensure that the money that went to them in respect of children with special needs is actually spent on children with special needs?

Professor LEIGH: I am assuming that that is the case. I do not know that I have an argument with them on that front. I would acknowledge—the example that we put in our submission goes to the fact that at the moment, as a charitable organisation, we pick up a sizeable, and happily but whether it is appropriate or otherwise, pick up a significant amount of cost associated with providing support needs for a child with a vision impairment or a hearing impairment in the independent sector. That is done rather than see that not provided. In the absence of our picking up those costs, there would be children who did not have adequate support needs. Regardless of how much the AAS may have as a block grant authority to distribute, we are well aware of the fact that they do not have the resources currently available to them to underpin the cost of what we are doing in the sector and we choose to pick that up. The best case scenario, I will repeat, from our perspective would be where we were able to draw on funding as all other parts of education were able to draw on funding to then apply to the needs of a child wherever they happen to be.

Dr JOHN KAYE: I dispute one of the suppositions in your statement.

The Hon. SHAOQUETT MOSELMANE: Earlier you mentioned that opportunities for normalised education have never been better but the main issue that you have summarised is targeted training for teachers. Is that a requirement to move away from the multiskilling of teachers? Is that what you are saying?

Professor LEIGH: Yes and no. I think the educational system as we currently have it absolutely requires multiskilling of teachers and I would not for a moment argue that children with additional educational needs should be in mainstream environments without some additional skilling of teachers in those environments. Our argument purely and simply is whether or not that is sufficient to support the needs of a child with sensory disabilities. To quote a colleague of mine, it is a necessary but insufficient component. So having teachers who are multiskilled who are capable of supporting the needs of children with special learning needs in regular classes is a necessary condition. It is not sufficient to achieve maximum outcomes. To achieve maximum outcomes for these kids, we need teachers with highly specialised knowledge and skills who are able to provide additional support or, in the case of early intervention, to provide all of their support and to make sure that it is highly targeted, highly specialised.

Let me give you an example. If we were relying exclusively on the generic special educational skills of someone who has done a broad-based degree in special education to support a child in the 0 to 5 year or even the 3-year-old to 6-year-old age range who has a cochlear implant and requires highly specialised intervention to maximum their opportunities for language learning and outcomes with that implant, then we would be doing a disservice to those children and indeed we would be failing to capitalise on what is a substantial public investment through earlier identification through newborn hearing screening. The Government or this State deserves credit for having been the first State to achieve complete rollout of newborn hearing screening on a population basis. That is wonderful. But to then say that somehow those kids will get all of the support they need to develop the skills that they now have the opportunity to develop through earlier identification is not a logical statement. We need more broadly based multiskilled teachers generically but we also need to maintain the workforce of highly specialised support for those children.

The Hon. TONY CATANZARITI: How do you get people to teach the teachers multiskilling? What is the process there?

Professor LEIGH: I think the underpinning of that has to be in initial teacher education. We currently have the one compulsory course in initial teacher education. I would like to see that extended, but of course the curriculum for teacher education is already jam-packed with so much. I know this is not quite your question, but my particular interest is: how do we then get teachers to step up and come back to say, "We want to be highly specialised and work as teachers of potential hearing impairment or vision impairment." There are two short answers to that. One is that we make career prospects more inviting for those people, which means that there is clearly a professional category to which they are employed, there are clearly expectations of what qualifications they hold to fill that category, and that there is some either remuneration or recognition—I do not think teachers are necessarily remuneration-driven as much as recognition-driven—for that category of very important role that they are going to fill. Both of those have been allowed to slip, both in this State and in other States, in recent years. We need to keep that specialised category recognised so that there are people wanting to put their hand up to train in vision impairment or hearing impairment.

Mrs NORTH: I think there are three ways it can happen. A regular classroom teacher needs some pre-service training to deal with the range of kids in any classroom. If they are going to have any understanding of hearing impairment or vision impairment, they need a little bit of that in their undergraduate training. They also need ongoing opportunities for professional development in those fields—in other words, in the government sector, release from face-to-face teaching to do some in-service work and ongoing training. The third thing they need is the expertise of someone who can come in about that particular child's needs in relation to hearing impairment and upskill them in relation to the kids they have in their classroom. For a mainstream teacher to be able to cope, it really is a combination of a number of methods that would gear that mainstream teacher to be able to cater for the child in the classroom. I think that is the same whether it be autism, Down syndrome, or whatever it is: they need three levels of support.

The Hon. CHRISTINE ROBERTSON: Are you asking for specialised classes for hearing- and sight-impaired persons, or are you asking for a special teacher in every school or a special teacher in every class that has such persons? Can we get a handle on what you are proposing?

Professor LEIGH: What we would be arguing for is a system that is highly responsive. I think that is the point of my one-size-does-not-fit-all argument. A highly responsive system would have the potential for there to be specialised classes—and indeed we have that, although the number of those classes is diminishing. It would have the potential for there to be—in the case of deaf children, not in the case of blind children—the possibility of a separate school. Indeed, we continue to have special schools in this State, although not currently in the government sector. It also has the potential for there to be highly specialised support personnel whose role it is to support, on an itinerant or visiting basis, children with those needs in those locations.

The Hon. CHRISTINE ROBERTSON: In the specialist locations?

Professor LEIGH: No; in regular locations. The vast majority of the children who are deaf or hearing-impaired, or blind and vision impaired, will continue, and increasingly so, to be in regular schools. Our point is simply this: Those other options have not gone away, and do not look like going away, and we need to have highly trained and highly skilled people starting them. Support for children in regular environments still requires highly specialised and highly skilled personnel to be able to underpin the delivery of support services, albeit not on an all-day, every-day basis. We are well cognisant of the fact that geography means that there may be individual children in remote locations who require—

The Hon. CHRISTINE ROBERTSON: A few of us are from western New South Wales.

Professor LEIGH: The response to that, we would argue, should not be to support those children with more generically trained personnel to develop systems that put the necessary skills in touch with those skills in those locations. For example, the Royal Institute for Deaf and Blind Children has pioneered the use of remote access technologies through videoconferencing to provide support on what we would typically call an itinerant basis for children in those locations through regular videoconferencing The specialised language development classes and specialised support teachers in those locations, to ensure that they are adequately catering for the needs of the children in those locations, can be delivered by alternative means. It does not need somebody on the ground there, but it does need sitting in behind those highly specialised skills and providing support.

CHAIR: We have reached the conclusion of the time for questions today. We appreciate your submission and your comments. We have taken note of a couple of comments in particular, and they are great recommendations. There may be a need for further clarification, and to that extent further questions may be forwarded to you. If questions on notice are sent to you, the usual time for responding is 14 days. However, if you need longer than that, that his okay; it would be a matter for discussion with the Committee Secretariat. Thank you very much for your advocacy, your submission and your very thoughtful answers today.

(The witnesses withdrew)

PAMELA JOAN LEA, Acting Assistant Director Schools, Autism Spectrum Australia, sworn and examined:

TREVOR RAYMOND CLARK, Executive Director Education and Research, Autism Spectrum Australia, affirmed and examined:

CHAIR: Apart from your submission, which we have found very useful in formulating our report and our questions today, there is an opportunity for a brief opening statement, if you would like, before we ask questions.

Dr CLARK: Thank you for the opportunity to appear before the inquiry today. I will briefly touch on a few points. In terms of Autism Spectrum Australia, we are part of a whole branch of services provided to children and adults with autism spectrum disorder: for very young children, early intervention programs, school programs, all the way up to programs for adults. Today we represent the education program, which services 700 children who are currently enrolled across six of our autism-specific Aspect schools. We have approximately another 700 on our waiting list for the school service.

In the last few years we have become one of the biggest autism-specific educational programs worldwide. In terms of the provision, and the knowledge and skills around education of children with autism, we think we have particular experience and expertise. Our schools have been running for well over 40 years, and that experience has been built up over that time.

In terms of our approach, we believe not in just a segregated autism-specific approach. It is one that is in combination. Currently we operate what we call a comprehensive educational approach that is linked to the New South Wales Board of Studies, the mainstream curriculum. It also serves to include very autism-specific curriculum components, which we believe are essential to progress and move the children forward. The whole emphasis of our program, which is demonstrated by the whole range or continuum of the educational services we provide, is to further inclusion. Our whole aim on a child entering an Aspect school is we work with the children. We have our special schools, our base schools, which are similar in a way to the education department's SSPs [school for specific purposes] but they are only for children with autism and intellectual disability. We have satellite classes in mainstream schools, which are stepping stones to further mainstream education.

We believe that those two services plus an education outreach service that supports children—about 350 per year who are enrolled in mainstream education, government and non-government—is the approach. That is what it takes to move our children forward. We have success. We manage to transition or integrate 80 to 100 students into more inclusive educational environments every school year. That is quite a high success rate. We have attached one of our insight research studies, which is the result of a very small research project following up what is happening to those children when they transition into mainstream. Are they still being maintained in that service? Are they still succeeding, from the school's perspective and the parents?

In terms of the funding issue, which seems to be of keen interest to the group here today, funding is a major issue, as it is for all non-government organisations. In terms of our funding we receive a range of State and Federal funding. However, there is an issue. We are very thankful for the funding we receive from the New South Wales Government through the Supervisor Subsidy Scheme. But we do have an issue with the Australian Government funding that is coming from Department of Education, Employment and Workplace Relations [DEEWR] and is administered by the Association of Independent Schools. That overall bucket of funding under the Literacy and Numeracy and Special Learning Needs Program, other than CPI increases, has not increased since 1991. That means we are now suffering a shortfall in funding. We suffered one two weeks ago with another quarter of a million dollar deficit in our budget this year. The issue with the particular program is that it has not increased to meet the increased number of students with a diagnosed disability. That is Australia wide. Of course, in New South Wales it is now hitting us, as it is a lot of the other independent special schools. That is a major issue.

If we are exploring any change in the funding model, we believe that no child should be worse off. We are very supportive of the Monash study that was done several years ago looking at the portable voucher system. First and foremost, we need to make sure that funding is matched with the child's level of need and support. Funding should be equitable across government and non-government sectors. We are rather concerned about discussions about a voucher model for our organisation. Our experience has been from our early intervention programs, we have been privileged to receive money through the HCWA funding, the Australian Government initiative, Helping Children with Autism, and through the Department of Families, Housing, Community Services and Indigenous Affairs [FaHCSIA] that supports a voucher system for parents of children with autism to access preschool programs. That in itself is great, fantastic for parent choice. But in terms of providing services, because that money does not come with costs to cover infrastructure, our organisation again has suffered major issues in how to manage and how we support that program and do that in a way that has success for the children and their families but also allows us to continue to run the programs, to continue to staff them and to continue to resource them.

I will finish up because I have gone too long. Teacher training is critical to support children with autism, no matter what sector they are in, government or non-government. In our organisation we have specialist teachers whom we train within the organisation. We believe education and knowledge is the key to supporting children. Again, there needs to be a cascade, a whole range, from special education teachers, special education autism-specific services government and non-government, all the way to supporting children in their mainstream classes. I am talking about supporting them adequately so that they are succeeding and hopefully improving their independence and their chances of surviving and being an independent person with an autism spectrum disorder in adult life.

CHAIR: Thank you. We have received evidence about the adequacy or inadequacy of teacher training and ongoing in-service training. Do you think there are ways in which teacher training can be improved? Secondly, there is a pilot program for online training, which we will look at shortly. Were you asked to contribute to that program? Do you have a view about online training?

Dr CLARK: Our organisation has been involved in training and training is very close to our hearts at the moment. We have been involved in the rollout. We are the lead agency for something called the Positive Partnerships teacher and parent carer training program, for which we receive funding from the HCWA program through DEEWR. We are the lead agency for that. Currently it is a national teacher training program. It is reasonably intensive. It offers four days of workshops and then a whole range of online and follow-up training. It is linked to what we call key local professionals so there are educators within every region or sector around the country who have specialist knowledge and experience in autism. We think that is one example of a very successful program. It has an online component. I understand the New South Wales department has also introduced an online teacher program, and we support that. Continuing to follow-up that training and how it is supported back in the classroom following on from the extra delivery of the content is the critical part of training and supporting teachers. I raise the Positive Partnerships as one example where we have been able to do that. We are gathering the evaluations at the moment to see the efficacy of that somewhat more embedded teacher training program.

CHAIR: Is your online training separate to the pilot online teacher training program that has been rolled out by the department?

Dr CLARK: Yes.

CHAIR: Were you involved in the preparation of that online program?

Dr CLARK: Not in the department's online program.

CHAIR: Do you know if the department borrowed anything from your experience?

Dr CLARK: No, I could not comment on that.

CHAIR: They could have picked up on your program?

Dr CLARK: Yes.

Ms LEA: There are people from the department who are part of the positive partnerships teams, so it is a possibility.

The Hon. MARIE FICARRA: Going back to the number of students assessed with an autism spectrum disorder, you made a comment that it is on the increase. Is that as a result of better assessments or better early intervention? Can you give us some background on that?

Dr CLARK: In Australia we did the very first study in 2007 looking at the prevalence. I think I have referred to it—six in 1,000 was the prevalence rate that came out of that particular study. You can look at that in another way, it is actually one in 160. Studies coming out of the United Kingdom put the figure more like one in 100 people are on the autism spectrum. In answer to your question, there has been much better and improved diagnosis, which we believe has had an impact on the prevalence rate. Also, prior to the 1990s we did not fully understand that there was a whole range of autism disorders, that it went all the way up to include children with Asperger's and high functioning autism. There has been a lot of public debate about whether autism is a result of the MMR [measles, mumps and rubella] vaccine. A lot of those vaccines came into play around that particular time, the early 1990s. It was at that time that we realised there was a whole spectrum. Prior to that only children with very severe levels of autism were diagnosed.

Beyond the nineties we were diagnosing the entire spectrum. So we believe that is the major reason for the increase in prevalence rate. Having said that, however, there are international studies looking at other causes, whether they are environmental, genetic causes that might be influencing that rate as well. I guess the bottom line is this particular disability is a challenge, as all disabilities are a challenge to educators, because of the very complex needs of, particularly, children with autism spectrum disorder. We think it takes a very specialist provision to manage them no matter what sector they are in and it is the level of support needs that really make the difference long-term.

The Hon. MARIE FICARRA: It was very impressive to hear of the follow-up that you provide on those students that then go into mainstream schools. Have you been able to gain from that feedback on the follow-up things that we need to target better or things that are operating well? What sort of usefulness has that follow-up provided?

Ms LEA: We get feedback each year from students that have left, that have transitioned on. We get feedback from the current school they are in and the families themselves. I think one of the issues that has arisen, and we are yet to fully address it, is that the year they leave we prepare a school and potentially the teacher that will have that student and that tends to run quite smoothly. It is the following year when they move on to perhaps a new teacher, there are changes in the school setting, that some of the issues may arise again. That is something that we need to be looking at a bit more closely.

However, with our outreach service we have the ability to support the students. But potentially there is something there that we need to ensure that the things that we do to support the child when they move to that setting are able to continue. Whether that is through better in-servicing of the school that they are in or to do with teacher training we are not sure at this point in time.

Dr JOHN KAYE: Thank you for your submission. That is very useful. You just mentioned 700 students in your Aspect schools, across six schools. Is that full-time equivalent students or bodies?

Dr CLARK: That is full-time equivalent.

Ms LEA: Bodies.

Dr JOHN KAYE: I am sorry I am not clear.

Dr CLARK: They are full-time students.

Ms LEA: There are 700 students.

Dr JOHN KAYE: And they are all full-time?

Dr CLARK: Yes.

Dr JOHN KAYE: So it is both?

Dr CLARK: Yes.

Dr JOHN KAYE: That is your DEEWR census figure is it?

Ms LEA: It might be slightly different. We might have said 700 for this year whereas our census might have been a few years before.

Dr JOHN KAYE: How much less was it last year?

Dr CLARK: We have increased quite substantially this year. I think we have enrolled at least another 70 students in 2010.

Dr JOHN KAYE: So it was more like 630 last year?

Dr CLARK: That is correct.

Dr JOHN KAYE: For each of those children do you charge a non-refundable administration fee when they apply to go to an Aspect school?

Dr CLARK: We do.

Dr JOHN KAYE: How big is that fee?

Dr CLARK: $75.

Dr JOHN KAYE: That is not refundable if they do not make it through the waiting list?

Dr CLARK: That is correct.

Dr JOHN KAYE: Can parents find out where they are on the waiting list and how long the waiting list is?

Dr CLARK: They can to a point. This is a major issue you have highlighted. As I said, we now have close to 700 also on the waiting list. So as fast as we can increase our student enrolment, which of course is linked closely to the funding we receive to allow us to do that, the waiting list grows. I guess this highlights the need that although other sectors provide services to children with autism, it is a growing need and a need where families are still coming wanting a particular more intensive, specialised program.

Dr JOHN KAYE: How big is your waiting list?

Dr CLARK: It is exactly as I said: it is almost 700 as we speak.

Dr JOHN KAYE: That is about the size of the service—

Dr CLARK: The size of the service. So as fast as we can increase our student enrolment the wait list continues to grow.

Dr JOHN KAYE: You do not publish where a parent is on the waiting list, so when they are on it they do not know what their chances are of getting through to the other end of it?

Dr CLARK: No, we do not publish because, again, it is a complex issue. Where a space may open up for a student, it may be in a satellite class program, it may be in a satellite class in the Richmond area and the child who is enrolled, for example, in our western school may live at Campbelltown. So we cannot be saying, "You are next on the list but, sorry, the place is in Richmond", because obviously they cannot be transported that far. There is a range of variables.

Dr JOHN KAYE: Are you concerned about the impact that uncertainty has on parents?

Dr CLARK: Absolutely, which is why we are trying to grow our school program as fast as we can. Pam is in charge of where we are currently in development of another two Aspect schools that we hope will open in 2011: one in the Macarthur region that Pam is helping establish at the moment, another one down in Albury to service the Albury Riverina area. We will have eight schools in February next year.

Dr JOHN KAYE: What are the criteria that Aspect uses for assessing the suitability of a child for one of your schools?

Dr CLARK: We have what we call an eligibility committee, and, again, it is very much linked to the funding that we receive through the supervised subsidy scheme provided by the State Government. It is very much linked to the eligibility required for us to receive that funding. A child must have a diagnosis of an autism spectrum disorder that comes under that particular umbrella or else they are not eligible for one of our services.

Dr JOHN KAYE: Does that mean that children with very severe autism are not taken by Aspect?

Dr CLARK: They are taken by Aspect.

Dr JOHN KAYE: There is no limit on the severity of the autism?

Dr CLARK: Absolutely not. It can cross the entire spectrum.

Dr JOHN KAYE: And that does not change the progress of a child through the waiting list?

Ms LEA: No. It is purely on where the vacancy occurs at a particular time.

Dr JOHN KAYE: How often are children turned away? Of that 700 how many children are turned away from your service or do not make it through the service at all?

Ms LEA: I do not think we have done the figures on that. But there are students, particularly ones that have come onto the list later in their schooling years, that may not, purely because the students who are older tend to stay with us longer so there is less opportunity for vacancies to occur.

Dr JOHN KAYE: You talked about your follow-up programs in mainstream schools. You follow-up support for every child who leaves Aspect and goes into a mainstream school?

Dr CLARK: What we do is offer what we call a 12-month transition program. When a child is ready, we believe, to make the next step, which is the whole aim of our entire school program, there is a lot of work, preplanning, work done with the parents, with the receiving school, the host school, whether it is a government or non-government school, and the minute the child makes that next step, and Pam alluded to that as part of the training of the receiving teacher and the school. We offer to run professional development sessions on autism at that receiving school. We have a 12-month guarantee of follow-up and support. If the school needs help in supporting we will be there. If the parents need that help we will support.

However, beyond the 12 months we are not funded and it is very difficult for us to continue that other than our educational outreach service, which is also available. As we said, that sees up to about 350 children a year in the mainstream setting.

Dr JOHN KAYE: That is a fee for service?

Dr CLARK: It is a fee for service, that is correct.

Dr JOHN KAYE: Just with the follow-up, what assessment do you do of the success of your follow-up? Do you track the children's progress through school? How do you do that?

Dr CLARK: We are about to, if we are successful in an Australian Research Council grant working with Macquarie University, answer that question completely. We are engaging in, hopefully, a long-term follow-up study to answer that question: What are the long-term social, academic, emotional outcomes for children who have been through an Aspect school and been through the satellite class?

Dr JOHN KAYE: Hopefully you are successful with the grant application. It sounds very important. Can you provide on notice information about what you currently do to assess the progress of those students?

Ms LEA: We send out questionnaires to both the family and the school twice a year. The questionnaires, which are about one page long, contain specific questions about what sorts of supports are being used, whether they need any follow up, the success of the program and so on. It is entirely up to the school and the family whether they return them.

Dr CLARK: That information is reported back to our board of directors. They are very interested in that question. We have reported for probably the past five years through our Continuous Improvement Committee on that exact issue. Every 12 months we report back on the results of the previous 12 months transition programs across all of our schools. That data is examined, analysed and discussed and we decide where we can make further changes and provide more support through the transition process. That is critical to our work. We do not educate a child through our service and then pass them over. A great deal of work needs to continue to make it a successful process.

Ms LEA: Sometimes the receiving school—

Dr JOHN KAYE: I am really concerned that I am taking the time allocated to Government members.

CHAIR: Perhaps if there is more information you can send it to the Committee.

The Hon. TONY CATANZARITI: My question relates to rural and regional areas. You mentioned Albury. What are you doing, if anything, to expand those services to rural areas?

Dr CLARK: We have classes at Wagga Wagga and Albury. Several months ago we began establishing a new base school site at Albury. We cater to 50 students throughout the Riverina. Pam is in the middle of developing that into a separate school to commence in 2011—the Riverina Aspect School. Another program that is growing on the far North Coast based at Alstonville. We also have three satellite classes up there and a range of early intervention and outreach services. We have a very strong commitment to regional and rural New South Wales. In the west we have a travelling education outreach support worker who works primarily with Catholic independent schools. It is again a funding issue; if we had more funding we would be able to extend our reach. It is very much what we are working towards.

The Hon. TONY CATANZARITI: If you are expanding the services surely funding is coming your way.

Dr CLARK: Not from the Australian Government. We trust that that will be picked up in the new schools funding review that is about to be done across all Australian schools.

The Hon. TONY CATANZARITI: Reference was made to national training issues. How do you monitor the training program?

Dr CLARK: A big evaluation team has been built up to examine how the program is running throughout the country. A team of evaluators came as part of the funding. That team is evaluating the outcomes of the workshops for teachers and parent carers. They are looking at each component and whether there is any impact on outcomes for students as a result of teachers receiving all this training. It is a great program. However, funding runs out at the end 2011. Again, we are exploring ways that a form of this national teacher and parent training program for autism can continue.

The Hon. SHAOQUETT MOSELMANE: The main issue mentioned by the previous group of witnesses was targeting training for teachers. In a nutshell, what is your main issue and what reforms, if any, do you believe should be implemented in the New South Wales system?

Dr CLARK: Was the first one related to teacher training?

The Hon. SHAOQUETT MOSELMANE: That was their main issue. What is your main issue?

Dr CLARK: There is not enough teacher training. Like the previous witnesses, we need specialised teachers. Some of the training needs to be intensive specialised university training at the prevocational level. There are huge numbers of students with autism across both sectors—government and independent. Those numbers also seem to be growing, so we need to improve postgraduate teacher education; for example, the Positive Partnerships national training program.

The Hon. SHAOQUETT MOSELMANE: What should be changed?

Dr CLARK: Overall?

The Hon. SHAOQUETT MOSELMANE: In the education system for disabled kids.

Dr CLARK: There should be a cascade of services, no matter what the disability. Our experience with children with autism suggests that we are successful because we have special schools with intensive periods of programming for those who may have more severe issues, but not always. Children enter our special school and they require time-intensive early support. That requires high levels of funding and then we have a cascade of services that move those children to take the next steps. New South Wales has support units and special education units. We also have the satellite class program that involves 78 classes within mainstream schools. The Department of Education also has its own autism programs. There is that program facilitating the mainstream, but then we need backup. We need itinerant specialised people to provide support where there are complex and challenging needs.

There is a myth about children who have a diagnosis of Asperger's disorder. Many more are being diagnosed every year and a large number of them are in mainstream schools. Asperger's covers children with an average intellect and above. That does not mean that children with Asperger's at the top end of the spectrum are free of challenges and that they do not need specialist support and increased funding—they do. Our outreach team has many examples of children who are in out-of-school placement, home schooling, on part-time placement and school excluded. Many have an Asperger's diagnosis because of their particular challenges and behaviour issues. Many school environments have trouble managing the complex behaviours of that part of the autism population.

There needs to be a full suite of solutions, not only for children with autism; it crosses all disabilities. Surely the aim is independence and a fulfilling adult life. A United Kingdome study found that fewer than two per cent of the adult autistic population are in employment. We do not believe that that is good enough. Again, that applies to all disabilities. They should be independent and have some chance of a vocation later in life.

CHAIR: Committee members would like to ask many more questions. Unfortunately we have run out of time. If you wish to provide further information or if you wish to expand on anything, please feel free to provide it in writing to the Committee secretariat. Members may submit questions on notice. We ask for a 14-day turnaround for answers because of our tight timeframe. However, that is negotiable and the Committee staff will be happy to discuss that with you. Thank you for your work and we appreciate your submission and your attendance today.

(The witnesses withdrew)

CAROL GAYE BERRY, Executive Director, NSW Council for Intellectual Disability, and

AINE MAIREAD HEALY, Project Officer, NSW Council for Intellectual Disability, affirmed and examined:

CHAIR: Welcome to the third hearing day of the Inquiry into the Provision of Education to Students with a Disability or Special Needs. There is an opportunity for you to make a brief opening statement before we ask questions.

Ms BERRY: We will both make some brief introductory remarks. The NSW Council for Intellectual Disability is the peak body representing the rights and interests of people with intellectual disability in the State. Our board is made up of a majority of people with intellectual disability and people with intellectual disability not only inform but drive the work we do. We work with people with intellectual disability in equal partnership.

The experience of education is often something that our members refer to as a defining life experience. Many of our members were raised in institutions and so have experienced society's exclusion and rejection firsthand. Many will argue that their experience of education was a negative one that involved bullying, rejection and fear. Many of our members are adults, however, and are not currently part of the education system so we hope that things are changing. We have spoken with young people who are currently part of the education system and their experiences generally seem to be more positive.

I believe it is useful to recognise that we are in the middle of an important social transformation when it comes to people with intellectual disability and disability generally. Like people of different cultural traditions, women and gay and lesbian communities, the socially excluded and disadvantaged are seeking and gaining recognition as our society becomes more transparent and forward thinking. It is clear that we are witnessing a social revolution of sorts in regard to not only the acceptance but also the celebration of people with disabilities that make up our communities.

The focus of this inquiry is children with disabilities and the submissions to this inquiry have reflected thus far that these children are important and valued members of our community who should be free to enjoy and exercise their human rights to the fullest extent possible. When considered through the prism of rights it is very clear what needs to occur. We need to work towards an education system that celebrates and encourages diversity and that accepts difference and promotes tolerance. The best way to achieve this objective is to create the most inclusive education system that we can possibly achieve. This, of course, is not just naked idealism. Many policymakers around the world have grappled with the resource and ethical dilemmas currently being considered by your Committee.

In regard to inclusive education there are two points that we are keen to highlight: first, that the international trends are moving towards more inclusive education systems not towards more segregated education systems; and, second, the percentage of students with disabilities within mainstream educational environments continues to increase and we can expect this trend to continue. Inclusive education is about embracing everyone and making a commitment to provide each student in the community and each citizen in our democracy with the right to belong. Inclusion assumes that living and learning together benefits everyone, not just people who are labelled as having a difference.

Ms HEALY: I want to explain that the knowledge that has largely informed our submission has come from working with our members who provided us with much information about their experience and aspirations in life and how this has been greatly affected by their school experience, both young people and adults. A key informant is also our information service. We operate a New South Wales-wide information service. We get a couple of hundred phone calls per year and they can be from anyone in the public. Regarding education we largely get phone calls from parents and educators and students in teaching and TAFE positions wanting to know more about educating people with intellectual disabilities. Parents largely are ringing to express their frustrations with the current system. Our experience for this submission has also come from working with young people with intellectual disability in recreational settings and post-school settings, and learning how their school experiences are affecting them into adulthood.

CHAIR: Thank you. As a number of your members are adults I guess it will be some time since they were at school but given your membership base, or the base you support, do you have a view about the number of special education places available? Many of the submissions we have received have said they are inadequate. Do you have a view about mainstreaming as opposed to special classes, the size of those mainstream classes and how inclusive education is currently?

Ms BERRY: That is quite a complex question.

CHAIR: Yes, it is about three questions in one.

Ms BERRY: Please let me know if I do not answer the question. I am sure Aine will pick up anything I miss. The first part of the question in regard to the current adequacy of places is a difficult one for us to answer. I have noted there seems to be some contradictory evidence that has been presented to the Committee both in the department's submissions and also in anecdotal evidence. I have been as confused by that as I am sure you have. In regard to whether mainstream settings are more appropriate settings, which I think is what you are driving at, it is our view that some students probably will always require specialist environments in order to be educated appropriately. Having said that, it could well be that those specialised settings can be located on-site. It is important to recognise that an increasing number of parents are interested in having their children experience mainstream education, for obvious reasons. You would be aware an inquiry is currently being conducted into special education in New Zealand. They are looking at a number of options for their education system. Those options include abolishing special schools, so we will be looking closely at the findings of that inquiry to see if they decide to go down that path.

CHAIR: Is that the New Zealand Government?

Ms BERRY: Yes, the New Zealand Government. One of the models they are considering is how they would use the resources that are currently contained in special schools to inform the mainstream education system if they were to close down special schools. They are looking at setting up special resource centres, which are currently located on-site in special schools. That is an interesting model. I do not think the New South Wales education system is ready for that kind of transition. However, I suppose the beauty of the current time is that we are understanding better and better the needs of students as we learn more about particular disabilities, such as autism, and what each individual student requires to get the most out of their educational experience.

Ms HEALY: With regard to the segregation of students I think it is important to note some of our older members' experiences that the longitudinal impacts of being segregated at a young age have been profound in their lives. Some people are now accessing education at the ages of 50 and 60 and becoming leaders in advocacy and other work and seeking employment. I just wonder about the missed human potential of not having access to those things at that age. For some of our younger members, being put into segregated classes now leads to options of supported employment and segregated post-school options. This has a massive impact educationally as well as socially, which is where our older members have very severe problems. They are isolated and do not have peers or friendship groups because they have largely been in disability associated organisations and supports.

The Hon. MARIE FICARRA: Referring to school curricula other than the new life skills section, does your organisation get any feedback about the lack of specialised curricula for students with specials needs or disabilities? Have you had any feedback from teachers, students or families on that issue? What do you think about the progress of individual education plans?

Ms BERRY: Yes, we have received feedback as to the current adequacy of the curriculum in terms of special educators being able to, I suppose, not only inform their teaching content but also to monitor a child's progress in regard to the curriculum. We would be supportive of further investigation into the adequacy of the current curriculum. We think having all students having to learn under one curriculum is important, and that should be maintained. However, there is a clear need for additional resources within the curriculum in order to support special educators and, indeed, teachers within mainstream settings who are educating children with special needs to ensure that learning content is not something that they need to, kind of, make up on the hop, I suppose. I think that you have received some very good quality evidence in regard to the need to develop the curriculum. The submissions made by a representative of the special schools principals network outlined some of the challenges that some her teachers have in regard to educating students, and feeling that, I suppose, from kindy up there really are not the indicators that really can support teaching in a real world scenario.

Ms HEALY: Evidence as well from many of the teachers who we talked to for the submission that the curriculum in large regards was well sounded and based, but they just did not have adequate time to make it adaptive enough for the particular students. So these are simple things like, as one teacher said, "I would like to have pictorial examples for my students. I get no time for relief from face-to-face teaching just to make simple pictures to make the content more understandable". Also she said, "If I am making those resources I don't have the opportunity to share them with other teachers always in the same school or even in the same district." So the capacity to be able to share resources and ideas on how to make content so that students can actively engage more in the classroom, there is just not enough time to do that.

Ms BERRY: If I can add to that also. I had a look at the submission that was provided by the Department of Education in Western Australia that outlined the way it has addressed some of the curriculum challenges, I suppose, in that jurisdiction. It was interesting. It has not provided a lot of detail but clearly other States and Territories have grappled with this situation. I am sure there are examples out there of ways in which the curriculum has been modified in order to make it more accessible for students and teachers.

Dr JOHN KAYE: I thank you for your submission that contained a lot of really useful information and some quite challenging ideas. On page 12 of your submission you were quite critical of the current way in which teacher's aides are being deployed in integrated classrooms. At one stage you used the expressions "child minding"—I make clear you did not make that as a blanket statement. Will you talk to the problems you see in the way teacher's aides are being used? How do you think teacher's aides should be used? How can we make the transition from where we are now to where you think we should be with teacher's aides?

Ms HEALY: I am not sure I have all of those points. We spoke to a quite a few teacher's aides about the situations that they deal with. Largely they said other teachers in the school environment often did expect that they would be looking after those children full-time, especially when children have behavioural issues and supports. Often the students were spending a large amount of their schooling time with the teacher's aide and not with the teacher so they were not receiving specialist instruction from the teacher, rather they were receiving it from a teacher's aide. So that is problematic in that teacher's aides are often inexperienced and are not always given a large amount of training.

One teacher's aide I interviewed had worked in the same school for 18 years. She at different times had pursued with the principals and leadership in the school whether she could access tertiary education and they said "No, we would not want to lose the teacher's aide". I think there are opportunities for teacher's aides to have stronger professional development and perhaps end up being educators themselves.

Dr JOHN KAYE: The thrust of my question is how do you see teacher's aides being used? At the moment your submission is quite critical of them but how do you see teacher's aides being deployed? What is the role of teacher's aides?

Ms HEALY: The role of a teacher's aide is to support the mainstream teacher so the teacher's aide may be able to support more so the other students in the class that might not need specialist assistance for certain topics. I think also the mainstream teachers are not always educated on the best ways to use their teacher's aide and to use the time of their teacher's aide. Teacher's aides can be utilised to develop resources, to find additional information for the teachers—that is not always the way that it occurs. I think developing time for teachers to work, which they do not often get to work with the teacher's aide on a one-on-one level to provide instruction on how to implement their individual learning plan et cetera. Teacher's aides feel that they are often used as babysitters as students are sent off to them for looking after because mainstream teachers do not ways want them in the classroom.

Dr JOHN KAYE: Is it correct to say to fully utilise teacher's aides we probably need to be talking about giving them more educational skills?

Ms HEALY: I would think definitely more educational skills but I also think more educational skills with the mainstream teachers so that teacher's aides can be utilised for small group settings et cetera and not always just with the child with the special needs which is currently the case.

Dr JOHN KAYE: I refer to the issue of functional analysis versus categorisation. The committee has received a lot of evidence about the need to back off from the current hard boundary categorisation, a medicalised categorisation, and move to a functional analysis in terms of allocating resources and indeed placements. What is the position of your organisation on that issue?

Ms BERRY: We are with the consensus really. I do not think I have read anywhere thus far or in the oral submissions any organisation saying that they support the current way things are being done, so we support the consensus on that, that focussing on functional ability rather than diagnosis would be a much more realistic and helpful way to work out how much support a particular student should access or have behind them, I suppose. But always with these types of questions whatever assessment tool you use, and how you attach dollar to that, I suppose whatever information you get out of that assessment, that is where the rubber hits the road, I suppose. So we would be very interested to see what the committee decides in terms of this question whether you are able to suggest any particular tools. I know that there have been some questions around whether there are tools that exist that include behavioural assessment, and how behaviour can impact upon educational capacity. I think that is a very important question and certainly a very relevant one in terms of the reality of the education system at the moment.

Reverend the Hon. Dr GORDON MOYES: I am interested in the development of assisted technologies. What is the feedback from parents concerning children with intellectual disabilities getting access in the public system to assisted technologies?

Ms BERRY: I would say, and Aine might want to add to this, that certainly from the people I have spoken with the introduction of Smartboards has been highly useful for students with intellectual disabilities in the classroom. I think perhaps there is a variance in terms of how effectively teachers and teacher's aides can utilise that technology so ensuring that I suppose in educational environments educators are able to make the best of those technologies that are available is important.

When it comes to students with intellectual disabilities, particular types of educational aids are relevant. I do not think that those resources are available across the board. I think there could be some improvement of the types of communication devices that could be utilised, for example, in an education setting. I think smart boards is one example of where we could see the use of technology has had a real impact, which I think is positive, and you have received evidence to support that as well from other organisations.

Ms HEALY: I think also some other parents have expressed to us the lengthy waiting lists to get equipment. Teachers have also expressed that parents who are able to advocate more on their child's behalf will get more resources, et cetera. A further problem is that people do not always have access to allied health to advise them what may be useful or give their child assistance. Often parents are not seeing speech therapists when they need to or are not given advice on what they can use in the classrooms. So, some children do miss out just from not having the information at all.

Reverend the Hon. Dr GORDON MOYES: Can you follow that up a little further with the availability of occupational therapists, speech therapists and other professionals?

Ms HEALY: Yes, largely anecdotal from our members and evidence based from people we spoke to. One example was on the Central Coast, a teacher identified that a child may need assistance with learning programs and the waiting list was eight months to see a speech pathologist. In a child's first year of development at school that is missing such a large opportunity for development, especially at that age.

Reverend the Hon. Dr GORDON MOYES: Yes, I am aware of that case.

Ms HEALY: Yes.

The Hon. SHAOQUETT MOSELMANE: Just a quick question in relation to your comments earlier where you mentioned that the education system should be more inclusive and not segregate schoolchildren, disabled kids. I need to get a bit of expansion on that point?

Ms BERRY: On that general point?

The Hon. SHAOQUETT MOSELMANE: Yes please.

Ms BERRY: Yes. I think there has obviously been a tradition in regard to the delivery of education for children with disabilities, and that tradition has been one of segregating children with disabilities, I suppose in order to educate them in particular environments. We can see a change has taken place where you are getting more students being integrated into mainstream environments, which we consider to be very positive.

The Hon. SHAOQUETT MOSELMANE: That is what you called inclusive?

Ms BERRY: Yes.

The Hon. SHAOQUETT MOSELMANE: The reason I ask that is that previous speakers and previous reports we have as well seem to be pushing towards specialised training, therefore specialised classes and therefore segregating disabled kids from the mainstream. So, you are going against the stream, if you like?

Ms BERRY: Yes. It is interesting that you have seen it in that way. I got the distinct impression from previous speakers that they were supportive of the idea that students should be able to transition when they are ready into the mainstream classes and that they are quite supportive of that.

The Hon. SHAOQUETT MOSELMANE: That is when they are ready but not from the start?

Ms BERRY: I think it is difficult to generalise and it is important not to generalise. When it comes to students with disabilities and special needs, you are talking about a broad array of ability and a broad array of need. So, recognising the complexities of the modern students or the modern educative environment, which can have a number of students who require a number of different supports, the point I want to make is I agree with you, some children benefit from specialised environments and being educated in the segregated context, whether that is in a special school or a support unit. However, where a child can transition into the mainstream, and where the parent is keen for the child to be educated in the mainstream, obviously that is an important option and one that should be supported. I think you have received evidence where some organisations are suggesting—in fact, the trend of the evidence you have received is that greater resources and support are required across the board, not only in special schools, but in support units and also in mainstream settings. What seems to be persuasive to me is that in mainstream settings in particular, that is where mainstream teachers really need to get some additional training and support in order to deal with the reality of the modern classroom. At the moment, that burden, if you like—I do not want to use negative language—"falls on the classroom teacher".

The Hon. SHAOQUETT MOSELMANE: That is what we were talking about before?

Ms BERRY: Yes. So, we are very supportive of children with disabilities being educated in mainstream classrooms. However, obviously we can see, along with most other people, that some additional resources need to be dedicated towards making sure that happens in the best way it can.

The Hon. CHRISTINE ROBERTSON: Thank you for the submission and the information. You are a very well-informed couple of people. You talk about the support teacher learning assistants in each school and you realise that a trial is currently underway in New South Wales. Did you have anything to do with the consultation for that?

Ms HEALY: No, we did not.

The Hon. CHRISTINE ROBERTSON: Why are you supportive of the approach?

Ms BERRY: Of the trial that is occurring in the Illawarra?

The Hon. CHRISTINE ROBERTSON: Yes. The approach of having the support teacher learning assistants.

Ms HEALY: It goes to the question you asked before as well about sharing that expertise amongst a whole school environment and having a person at each school who is there at recess time to deal with some problem that has happened at morning tea as opposed to waiting six weeks for the itinerant teacher support to come and advise on that problem.

Dr JOHN KAYE: May I just clarify: You are talking about STLC—we are talking about learning coordinators now, are we?

Mr WYNN: I thought we were talking about the pilot that is occurring in the Illawarra.

The Hon. CHRISTINE ROBERTSON: That is right, and that is the support teacher learning assistants in each school. It is not really about counsellors.

Dr JOHN KAYE: It is learning coordinators?

The Hon. CHRISTINE ROBERTSON: School learning support teachers and school learning support officers.

CHAIR: This is the trial in the Illawarra.

The Hon. CHRISTINE ROBERTSON: So, a lot of what you have been talking about, about teacher aids having extra resources and individual teachers having support on the ground from somebody who has training in that sort of process?

Ms BERRY: We would consider the current pilot sounds very positive and we are looking forward, as much as a lot of other people, to see the evaluation of that pilot to see how effectively mainstream teachers in those schools are getting the benefits in their practice of the expertise that would be located in those schools. There are some questions around how one individual can provide the level of expertise that might be required.

The Hon. CHRISTINE ROBERTSON: It is going to need some—

Ms BERRY: Yes, that is right. But in terms of an initiative by the department to try to address the need for greater expertise within schools, it is a positive development. It will be interesting to see how that pans out, yes.

The Hon. CHRISTINE ROBERTSON: You put in this segment in relation to the difficulty of getting services like speech therapists and the like, and your suggestion is to make a huge multidepartmentally—

Ms HEALY: Like one-stop shops.

The Hon. CHRISTINE ROBERTSON: By pushing for coordinated?

Ms BERRY: That is something that has been considered by the New Zealand inquiry as well and put up as a specific proposal. They are looking at how they might be able to make the delivery of support services to young people with special needs more coordinated. For example, they are talking about having a lead agency, depending on what the needs of the child are, and recognising that where you can develop a team of experts who are familiar with a particular student who can follow through, not only in an education setting but beyond that. So, that is not a new idea, I suppose.

The Hon. CHRISTINE ROBERTSON: Each of those departments have their competing—

Ms BERRY: Sure. But the reality is that many of those departments are assisting the same child and there would be some efficiencies around that, not to mention the benefits to the children and their families along with that. I think also the benefits of having a team approach, not only to teachers but also for families: I suppose many families or parents feel a bit alone in the woods when it comes to advocating for their child. You have received some evidence from parents, and I am sure you would have got a very strong sense of how difficult they are finding the constant need to advocate for their child's welfare and their child's needs is. We encounter that across the board. Recognising that as a systemic problem and seeing how schools or government departments can step up to alleviate that kind of pressure would be a very positive development.

CHAIR: Thank you. Unfortunately we have run out of time this morning.

Dr JOHN KAYE: It has been excellent evidence.

CHAIR: I really appreciate your contribution today and the thoughtful way in which you have answered questions. Obviously you have researched quite extensively and have read a number of submissions that have been sent to the Committee. Some questions on notice may be forwarded to you, if Committee members think of additional things that they would like to have clarified. The normal turnaround is 14 days because we are on a tight timeframe. However, if you need time to be extended, please contact the Committee's secretariat. Thank you for your advocacy, your submission, and your presentation today.

Ms BERRY: Thank you.

Ms HEALY: Thank you.

(The witnesses withdrew)

(Short adjournment)

HEIKE FABIG, President, Association for Children with a Disability New South Wales, affirmed and examined:

CHAIR: I welcome you, Ms Fabig, as a representative of the Association for Children with a Disability. Could you state the capacity in which you appear before the Committee?

Ms FABIG: I am here as the President of the Association for Children with a Disability New South Wales, but I am also the mother of three children, two of whom have a disability. Currently one is in an independent mainstream school and the other child with a disability is in a public special school. Feel free to ask me any questions as a parent, if you have any questions around those issues as well.

CHAIR: Do you have three children each at three different schools?

Ms FABIG: Unfortunately, the middle child—who does not have a disability and dearly wishes he had one so that he could get the same amount of attention sometimes—has followed his brother to the small independent school because the thought and practicality of dropping off three children at three different schools was just beyond my capacity. I am very happy with the small independent school attended by my oldest son, so he went along. That makes a significant dent in our mortgage, but we do what we have to do for our children. At the end of the day, I think that is what you will hear from most parents.

We all have our political opinions. Then you become a parent and then you have to deal with special needs, so you leave your ideology at the door or at the school gate. You just do what you have to do for you child: I had to do the same. I did not want my children to go to an independent school, but that is where I ended up because that is what you do.

CHAIR: Are there remarks you would like to make as an opening statement?

Ms FABIG: I could give a summary of my submission, but you are all intelligent people and you have all read it. It is probably much better if we go straight to questions.

CHAIR: Yes.

Ms FABIG: But there is one general comment, from listening to the people before me, that I want to make with regard to the curriculum. The curriculum is indeed very good, but I think that the biggest problem with the curriculum is that it is set on a child's chronological age. For a lot of our children, it would be better if it was applied to the developmental age of the child. Then you have already dealt with a lot of extra issues, a lot of extra help that may or may not be necessary, just by moving the curriculum a year or two this way or that, thereby dealing with children who have intellectual disabilities, like my son who struggles, but equally with his friend at school who has Asperger's and is highly intelligent, and who can move way ahead on some things of the curriculum and in other things will be behind.

Something that really struck me this morning when we were discussing the curriculum is that, at the moment, children have to adapt to the curriculum; but really the curriculum should adapt to the child, and each and every child, not just the ones with special needs. I believe that every child in New South Wales—really the world, but we will stick to New South Wales for now—should have an individual learning plan made up for them and their specific needs because every child is different, whether they have a disability or not. Some are auditory learners and some are visual learners. In this day and age, with all the technology that we have, I think we have the capacity to do that.

There are some very smart people who came up with a universal design for learning. I know the New South Wales Government is looking at a universal design for buildings: well, the same has been applied to learning. You design a building for all the different stages—the mother with the pram, the young teenager, the older person with a walking frame—and you design one building that four categories of people can use. You can do the same for education, especially with things we have already mentioned, such as smart boards and computers. In this day and age there are a lot of things we can do to make the curriculum more accessible to everyone, if we apply this universal design for learning. That would be my dream—that every child would have access to it.

CHAIR: Are you talking about what I understand currently exists in the United Kingdom, where there is a contractual arrangement with parents about the child's needs over a continuum.

Ms FABIG: Yes.

CHAIR: And then there is a commitment to provide resources for supporting that?

Ms FABIG: Yes, basically.

CHAIR: Therefore, funding for the needs of that child?

Ms FABIG: We have that here. Later this afternoon I have to go to look at the individual learning plan of my young daughter and what we need to do with her studies. We sort of have that, but it does not come with practical things like money or equipment or school choices attached to it.

CHAIR: So it is a wish list, but not necessarily deliverable?

Ms FABIG: Yes. And sometimes it is a general wish list and in some cases it is a list of what we can possibly do with the limited resources at that school.

CHAIR: Earlier you mention that you did not want to send your child to an independent school, but you had, and you have sent two children to the same independent school. Assuming you have a philosophical preference to public education, was it the case that the independent school offered a better product or ability to service your child's needs?

Ms FABIG: Yes, I guess I ideologically believe very strongly that a public school should be there for every child. We have a wonderful system in Australia. Like any other parent I thought that as I lived within walking distance from the local school I would send my children there. Then I came to realise that my child had a disability and in my oldest son's case that was a physical disability and a learning-intellectual disability. We are not quite sure yet. So we took him to the local school, which has 400-plus children, three classrooms at the kindergarten level, 20 kids in a class with one teacher. We were told that we could apply for aid time, and the school would get aid time; that is, the school would get money for aid, and it is at the discretion of the principals how they spend it.

I was told that it would be lovely if that happened, because the school had another kid coming in with special needs who did not qualify under the criteria, and then when we got the money it could be shared with that other family. I said, "Look, I am quite happy to do that, but if it turns out that my child needs more help, can I pay for more aid time so that his needs are met?" I was told, "Oh, no, you cannot do that." For me that was the clenching moment; I had no flexibility to work with the system. So we ended up at a very, very small independent school where the teacher goes with the child for three years. The class has 20 students and they have two teachers in the classroom at all times.

There is a special education teacher at the school who oversees the needs of both the children who are struggling and the children who are very bright. Her job is a little bit like those school learning support coordinators [SLCSs] in the trials. She oversees the children's needs and she has people working with her. She will tell them what to do. They are aids to the special education teacher, rather than to the child. Most importantly, if she identifies that my son needs more I will pay for that. That is a big sacrifice on our part, but at the end of the day I have to do what is right for my child. That is four hours a week, if it is not enough—and in his case it is not enough—he misses an opportunity to an education for really what is inflexibility of the system, whereas at this school I pay for it, and I get it, and he gets it. The results have been outstanding. He was never going to walk or talk. He is not only doing that, he is reading and writing. He just gave a presentation at school on Matthew Flinders. He is in Flinders House, and that was his presentation. People have astounded him. Again we used technology. He has not done a piece of paper with lots of writing; he has done video.

But it is all possible, if the system is a little bit more flexible. Unfortunately, a lot of parents do not have the choice that I had to send my child to a school where I pay for these services. We have 500 members and they are all parents of children with a disability. We often get together. Quite often I heard that school is high quality babysitting, especially high school. That is not only a huge violation of their basic human right to an education, but it is also a waste of opportunity. You could even bring it down to a waste of opportunity for us as taxpayers, because some of those kids one day may well have a job in society and pay their taxes. But that opportunity is often wasted. Sorry, I went on a bit.

CHAIR: Well said.

The Hon. MARIE FICARRA: On the analogy of babysitting, previously the Committee heard that often teachers aides are perhaps used as expensive babysitters. What do you hear about that? Is there scope for better training of our teachers aides to complement special needs education?

Ms FABIG: I will give you the example of the teacher's aide at my son's preschool. She was a local lady who had no qualifications whatsoever. Her children had finished school and she was wondering "What shall I do with my time?" So, she became the aide at preschool. She was a lovely lady, but she had no education as an aide, let alone as an aide to special needs children. We just educated her as we went along. At preschool that is not too much of an issue, but in high school that can be quite an issue if the aide has not been trained. There has been some research in the United Kingdom that actually found that a badly qualified aide is detrimental for the child's education. Even where there are aides, often they are employed in a way that is not the most useful for the child. I know of one case and the mother came to another inquiry here about a year or two ago. Her son is very bright; he has cerebral palsy and very little body control, but he could manage a computer just fine. His aide used to listen to him saying the answer to a question and then would write it down. This young man could write that down for himself if he was given access to a computer. That was not done.

They have since moved to Queensland because they got so fed up with things. He started at a new school with a whole new beginning and, finally, tomorrow I believe he is going to be given his NAPLAN test fully computerised. That took the mother four years to fight for. But these are little things. Why is that aide sitting there ascribing when we have the technology? She should be setting up the smart board or the computer so that he can do it independently and feel like he is doing that test independently and that he is valued for what he does. She then has time to go and do other things. I do not think we are always using them as effectively as we can.

Dr JOHN KAYE: Thank you for your excellent evidence and your opening statement; far from being a waste of time, it was excellent. You made the statement about an ideological blindfold against special settings. On the second page of your document at the top you specifically talk about the Department of Education and Training and you imply that in the department there is institutionalised biased against SSPs and support units.

Ms FABIG: I think it goes a bit further than that. I would not want to single out the department. As a society we have, quite rightly, moved way from the idea that people with a disability should be in a special setting, you know, preferably faraway so we do not have to see them and we do not have to deal with them. Thankfully, that has been well and truly dealt with, but with regards to some issues we may have thrown the baby out with the bathwater a little. Some children have very high specific needs that cannot be met adequately in the mainstream school at the moment. Maybe one day down the track they can be, but at the moment the reality is that they cannot. The children are not receiving a proper education. Some of the other parents are complaining—that autistic kid keeps disrupting the class and my kids are not learning—thus creating tension.

My daughter is at a special school at the moment. I would never have dreamt that I would send my child to a special school, but for her particular needs at this point of time that is the best setting for her. My aim is to send her in two years' time to the same school that her brothers go to. However, I think she now needs a little bit of extra help because she is completely, or almost completely, non-verbal and she is in a wheelchair. She is too isolated from the other children. If I were to send her now to a mainstream school, she would have no friends. She might do well academically, but socially she would not manage very well. Let us not forget that the social aspect is a very big part of school. You need to learn social skills and how to interact and work together with others so that one day you can sit on a committee. That would not work for her.

As a parent you have to make hard decisions sometimes. There is a role for special schools. The ultimate aim should always be inclusion in society at some point. If you send your child to a mainstream school and all they get is babysitting, you do not actually provide them with an education. What will their inclusion be down the track? If that could be met at a special school, by all means let us have special schools.

Dr JOHN KAYE: It is fair to say that all the evidence the Committee has heard thus far acknowledges the role for special schools. Some evidence has pushed more towards inclusion and felt we have gone too far towards keeping kids in special schools. Other evidence, such as yours, says we are going too far the other way and we are over including. Can you advise the Committee on what it should recommend? How should we resolve that competing advice? For example, the evidence given by the group before you specifically said they wanted to think about a totally inclusive education system.

Ms FABIG: I do not actually think that is what they were saying. They may correct to me but I think they were saying there was a study done in New Zealand in providing a completely inclusive education system. I do not fundamentally disagree with what the previous speaker said. As I said, the long-term aim is inclusion. If that may be at a special setting for a little while, then so be it. It is a very careful balancing act. Most parents will prefer to have their children at a mainstream school. We all want our kids to be just one of the kids. As long as we re-evaluate our children's position regularly with the school, they would get that automatically. Again, if you adapt the curriculum to a child's chronological age rather than their developmental age, you would also see a lot of changes.

Dr JOHN KAYE: I think perhaps you meant to the reverse?

Ms FABIG: Sorry, yes. The dichotomy between the special setting and the mainstream setting might change quite a bit, especially if we look at adapting the curriculum for each and every child. At the moment we have classes based on ages and you have to follow along. It is geared towards the majority or the average of that age, but if you have a more flexible system that works with the child's actual developmental age, children may be able to advance into the mainstream at a different rate and things may be completely different. We have not tried that.

Dr JOHN KAYE: I understand where you are coming from, but to some extent are you saying that we should put children with special needs into classes of a lower chronological age? If a child has a learning ability of a 7-year-old but a physical age of a 12-year-old, are you saying we should put that child into year two with the associated social consequences?

Ms FABIG: No. Let us take the example of my son, who is nine. He is now in year three. He was held back. He is in a class with other 8- and 9-year-olds. He is part of that class. He gets a number of things that he learns with his classmates, yet there are a number of things that he learns differently. His teacher will do things differently with him and his special education teacher will take him out of class at certain times and they will do special work. He has his own plan within his class, but he will always follow his class. He is not going to be left behind his peers.

Dr JOHN KAYE: You are asking the teacher in that class to teach a differentiated curriculum to some students?

Ms FABIG: Yes. That is what happens.

Dr JOHN KAYE: To follow logically from what you are saying, you are asking the teacher to teach a differentiated curriculum to all students regardless of whether they have a special need?

Ms FABIG: Within a certain range, yes. That is what happens at that school. That is why we chose that school. The way the school is set up is that children move around a fair bit. A lot of them go to special education either because they are particularly bright or because they have difficulties. The stigma of moving to special education is not like you might expect it to be because some of the other really bright kids go to special education as well. All the kids love going to special education because that is where their needs are being met and where they are being helped along.

The Hon. TONY CATANZARITI: I think you have already answered my question but I was wondering how you get the balance of those ages, given the social aspects of the kids with the habits. I wanted you to expand on it but I think you have covered it in the question of Dr Kaye. Do I get you right that you are not looking for somebody who is an 8-year-old or a 10-year-old being in the same environment or classes as, say, a 16-year-old?

Ms FABIG: No. An 8-year-old with a disability can only learn what a normal 8-year-old would do if they spend time with 8-year-olds. That is the fundamental idea behind the inclusion. My son has learning difficulties. He loves chatting to his mates about such and such movie and such and such game and he does not understand the movie and he does not understand the game, but he talks about it with the other kids because that is what part of the social group is like.

Dr JOHN KAYE: Like me and football.

Ms FABIG: Yes. When it comes to education he has his own program and he follows his own program, sometimes sitting in the class and sometimes not in the classroom but he is with his mates and he will stay with his mates. They are doing complicated long divisions. He can add but he cannot subtract; you cannot ask him to do a division. But he should be with his buddies because he will never learn. His life will be in the mainstream, and thank God it will be in the mainstream. So he needs to learn coping mechanisms as well. One of his big problems at the moment is anxieties around being different and about the other children learning faster, and hard as that is for me as a parent it is something he has to deal with for the rest of his life. For me, that is part of his education that he learns to deal with that because he will always encounter people in daily life who judge him on his disability.

The Hon. TONY CATANZARITI: That is okay from the school part of it. When you have the kids at home and they still have their disability at home, how do you cope with them and how do you balance from one child to the other child in that situation?

Ms FABIG: Do you mean me personally?

The Hon. TONY CATANZARITI: Yes, his mum.

Ms FABIG: It is hard. I do not know. I cannot really answer that question. What I try to do is get up every day and remember that first and foremost I am a mother. I am not a carer, I am not an advocate. Those are all things I do on the side, but first and foremost I am their mother and I just treat them like any other child with whatever their needs are. You will not believe it but there are many days that I forgot that my children have a disability because they just are who they are. People tell me, "It must be hard", and it probably is compared to other parents but you just do what you have to. I do have $300,000 debt trying to organise everything for them but most parents just get on with it. I guess as ACD we feel we are mainly parents and we just want to have choice for our families and for our children. We want them to have the best life and that includes their first and foremost right to an education. However they may get that, they need to have an education, and we somehow potter along.

The Hon. CHRISTINE ROBERTSON: The curriculum issue is very interesting. I am not sure if you were here but we heard earlier an amazing example of how one town decided how to deal with having an 18-year-old in primary school. So they had the appropriate curriculum for the mental age but not for the sociological age. That is very complex. Somebody had tried to deal with what your issue was but in the most bizarre way.

Ms FABIG: Unfortunately I wish I could have a very easy answer to this. I think probably the solution lies somewhere in this idea of universal design for learning.

The Hon. CHRISTINE ROBERTSON: How did you hook onto that? It sells commercial tools.

Ms FABIG: We found out about it mostly through parents spending late nights googling. One of the mothers is building a house and she wants to use universal design for architecture to build her house. There was a small link at the bottom of the page.

The Hon. CHRISTINE ROBERTSON: Google?

Ms FABIG: Yes. She googled "universal design for architecture", came to this website and there was a small link to "universal design for learning". This happens to be the same mother of the child in the power chair who wanted to do his tests and all and homework on a computer. She is very interested in the use of technology so she went, "I'll have a look at that", and there is this whole system of redesigning schools. It is a bit like a virus, it passes on amongst the parent support groups, "Look at this, look at this, here may be a solution". It is an idea and it has been worked out at some university in the US. It is in the submission.

The Hon. CHRISTINE ROBERTSON: Yes, it is all in the submission.

Ms FABIG: It is very much a work in progress but it is an exciting idea. I think for the first time ever in history we are at the point where we could do that because we have the technology to address a lot of these issues that previously would have been impossible. So in that sense it is exciting to think bold and think ahead.

The Hon. CHRISTINE ROBERTSON: Have you had any input or heard about the national curriculum process that is currently being undertaken?

Ms FABIG: About standardising it?

The Hon. CHRISTINE ROBERTSON: Yes. Have you had any input?

Ms FABIG: I myself have not had input but I also belong to an organisation that does some national advocacy for children with a disability. We are going to be launched next week. We will be called Children with Disabilities Australia, and our executive officer there has had a number of talks with the Federal Government.

The Hon. CHRISTINE ROBERTSON: Of course, the State Government is part of that process as well.

Ms FABIG: Yes.

The Hon. CHRISTINE ROBERTSON: So you have had input with your ideas?

Ms FABIG: Not yet but it is on the very long list of things to do.

CHAIR: On behalf of the Committee I thank you once again. Thank you for your advocacy on behalf of other parents and your association, the way you have informed our Committee not only during the PADP inquiry but during this inquiry and for everything you do for your children.

Ms FABIG: I am sure I will be back one day.

CHAIR: We will take on board your comments and certainly use them to inform our responses.

(The witness withdrew)

CHRISTOPHER JAMES CAMPBELL, General Manager, Services, The Spastic Centre of New South Wales, sworn and examined:

CHAIR: Apart from your submission, we will ask you some questions shortly, but there is an opportunity for you to make some brief opening comments.

Mr CAMPBELL: The Spastic Centre of New South Wales very much sees the value and importance of children and young adults receiving an education, and I think consecutive New South Wales governments have identified the importance of engaging students with disabilities within the system, whether that be within the mainstream system or in a special school system. We feel that that has been a very positive process over the last couple of decades. But we also recognise and acknowledge that there is still a long way to go in the provision of a purely inclusive and supportive environment that not only assists students with disabilities to access the curriculum but also be enhanced by the school setting and the social enhancement and social value that they achieve from being with their peers. From our organisation's point of view, we very much welcome this inquiry. With regard to the view I am expressing, I do not in any way see myself as an expert in educational outcomes, but what I do see in my role is that our staff and the families we support provide us with feedback of where they feel the educational system has been advantageous to them, but also a challenge and a barrier to the educational needs of their sons and daughters.

CHAIR: We have had a number of discussions about the way children are assessed, whether it is a functionality or a categorisation. Does your organisation have a view on how assessments should be based?

Mr CAMPBELL: Assessments to access to the curriculum at school?

CHAIR: Yes.

Mr CAMPBELL: We would say that it needs to be around their functional ability, as opposed to categorising it by disability. I would echo the views of Heike before me, that there needs to be a much more individualised and customised way in which the education department is able to respond to the varied needs of the students with disabilities and special needs. As I said in our submission, we do not in any way see ourselves as experts in people with intellectual disabilities or conduct disorder. Our focus is very much around children with cerebral palsy and like conditions, it being the most common physical disability for children. However, having said that, many of the children we support also have additional needs: around their cognitive ability, their executive functioning, their sensory hearing, vision, et cetera. As an organisation we would be aware of the range of complexities that a child will have, and the concerns that their respective parents have, around their entering into the education system.

CHAIR: An overarching question we have asked a number of organisations who have appeared before us is what key reform you think we should recommend with this inquiry. Do you have a view on that?

Mr CAMPBELL: As I alluded to, I think there is still a long way to go. I think the education department has done well. I suppose, if you are scoring them on the NAPLAN test, maybe they are middle to upper on the scale, but they still have a long way to go. However, I think the organisation of the Department of Education and Training is a large beast. It is a large organisation that supports and services the educational needs of tens of thousands of students, across many sites. The unfortunate thing about that is that it is hard to implement responsive approaches in a consistent way across New South Wales, when the structure in itself is very much influenced by the local skill base, personalities, and attitudes of schools and regions.

In the ideal world, I would be looking at a statewide educational service that customises its access to the curriculum for each student, especially each student with a disability, with the appropriate level of support. That support might come in the form of having physical support and access to the schools, through to access of technology, augmentative communication, through to the appropriate teacher aide support that is adding value to the educational experience. So, as Heike adequately put, they are not just scribing; they are actually enhancing the opportunity for their children with disabilities to engage with the curriculum. So it is about physical access, access to appropriate equipment, and access to appropriate support, and those staff to have the appropriate training. In essence, that is what I would see as valuable.

The Hon. MARIE FICARRA: In your submission you pointed to interagency coordination of support services for students with disabilities and their families. Could you expand on that, as to what has been the impact and how we can improve that situation?

Mr CAMPBELL: A lot of agencies are usually involved in supporting a child with disability to access the education system. Usually those services may be initiated via the Department of Education and Training, but many of them are initiated through the family and through their contact with those organisations. As I outlined, the Spastic Centre last year supported 1,660 students within the education system, and the majority of those would be within the State school system. The parents seek out our support because we have an awareness of their sons' and daughters' needs, to then assist them in that transition period into school—whether that be into kindergarten, in the first instance, but then even into high school, which at times can be even more emotionally traumatic for the student and also for the family because it itself is a much larger system and it is not as supportive and usually not as local.

I think it is very much about understanding the roles of each of the agencies within that. Unfortunately, we have found that sometimes the expertise and the opinions of our staff, and the time that they invest in supporting the students, is not necessarily effectively used. As a result, from my point of view—and usually the driver for me, as General Manager Client Services, is how we can respond to families quicker than what we do now—seeing a resource wasted is quite frustrating. It is probably doubly frustrating for families when they are having to wait. It is about understanding the role that each of the agencies will have, depending on what the needs of the child are, and engaging them in an effective, coordinated way.

When that has worked—and it does work, and it does work regularly—the outcomes for the student and for the family, and for the school and obviously indirectly for our staff, are very positive. I suppose that is the ideal; that is what we would like every experience to be. The times when it does not work is where we invest our time and our expertise, and our knowledge and awareness of the families, and that opinion may not necessarily be taken on board, or we put forward suggestions on how to implement a means by which the child can access the curriculum and the report is not implemented at the school. From our point of view, that becomes a bit of a frustration because we feel: Why bother asking us to be involved in the process? If you feel that you need to manage and take control of the decision, so be it, but at the same time do not ask others to invest their energies into that process if you are not going to take it into account.

That is not to say that our opinions and views are 100 per cent right all the time. I would say we batted around 90 per cent correct all the time. The view I have is that if there is a difference of opinion around how something can be implemented, then sit down and work it out. Usually it can be worked out and it is usually a misunderstanding of what we are trying to suggest. The other suggestion is that the education system is not very engaging of families, especially in high schools. The best resource that the education department actually has at times is the knowledge that the parents have of their sons and daughters' needs. In that sense I would be encouraging the system to look at ways of engaging families in the process of their sons and daughters accessing the curriculum and school activities.

Dr JOHN KAYE: You make the observation in item 6 of your report that, "This term of reference is the most relevant and critical within the relationship between the students, parents and school staff." You say it is also an area within which the Spastic Centre is heavily involved.

Mr CAMPBELL: Yes.

Dr JOHN KAYE: It is clear that the relationship is very potent if it works well. What are the barriers to stopping it working well? It clearly does not work well because we have many parents complaining about teachers not listening to them and we have teachers complaining about the massive amount of pressure placed on them by parents to meet their children's needs, to which the teachers feel they simply cannot respond. What is the way out of that logjam?

Mr CAMPBELL: In my view it is a structural and cultural issue within the Department of Education. For the majority of students to access the State school system, the process of forming or developing your knowledge is very much an individual thing for the students and very much students learning to be young adults. For the majority of students that is a viable thing. I have experienced it myself. I have four children and they have been through the State public school system. Two have gone to State high schools and two have gone to private schools, and that was their choice. We actually gave them the choice to do so. The interesting thing, and it is consistent in both the private and State school systems, is that when they hit high school the high schools do not necessarily engage parents. That is because in the majority of cases students are there to learn to grow into young adults, to be more independent and to develop their own opinions.

However, if you have a son or daughter that has additional disabilities, you would think it would be important to engage parents in the process all the way along the line. Most parents do have a level of concern and anxiety about how their son or daughter is going to be integrated into school, whether it be about accessing the educational system or how they integrate and develop their peer support networks. It is actually engaging parents to the level that they feel comfortable that it is going to assist them. I do not know whether that answers your question.

Dr JOHN KAYE: You have addressed the cultural aspects of the barrier.

Mr CAMPBELL: Structurally I would just say that the organisation, the Department of Education, is a very procedurally, administratively based organisation for many reasons, which is quite appropriate. The influence within the local areas of principals can be a very positive impact on the engagement of children with disabilities or it may be not of value. We have experienced both. Our parents will talk to each other about their experiences at various schools.

Dr JOHN KAYE: What about the third leg, the issue of resources and time available for teachers to engage with parents? Do you think that is a barrier?

Mr CAMPBELL: Yes, that definitely is. My experience of the educational staff has been that they are genuinely concerned and would like to do better. They have a desire to get the best results that they possibly can. Sometimes those barriers are there because there is not the level of support, whether it be a teacher's aide or access to the appropriate technology. I remember speaking here last year about the PADP and access to appropriate technology to assist somebody to get on with their life. The same thing applies within the education system. That has always been a bit of a barrier about not only accessing the appropriate equipment but how it is utilised across the students out of school hours. Their learning process usually involves homework, projects, et cetera, and they need access to that outside the 9 to 3 timeslots. There is also the resources to make an environment appropriate for a child with a disability—whether that is a physical disability so their physical environment or for a student with a vision impairment or hearing impairment to ensure that those barriers are not there as well. So it is an investment around the capital in the structure of the Department of Education.

Dr JOHN KAYE: In your suggestions for improvement you talk about "The Department of Education and Training [DET] should review its policies and procedures to identify opportunities to reduce administrative inconsistencies between DET regions." Why is an inconsistency between two DET regions of concern? In some sense, the department may be tailoring its policies to suit the specific needs of that particular region.

Mr CAMPBELL: That is probably from our organisational experience. Depending on the region and the school we will get different levels of engagement and different levels of collaboration occurring. For us that becomes a bit of a frustration in regards to the allocation of our service offer. As a result, we felt that we had to come up with a position paper around the support level that we can offer across the State for State schools and private schools. So the inconsistencies for us are more around how we develop a consistent service offer. I do not mind inconsistencies as long as they are focused on responding to an outcome.

Dr JOHN KAYE: As long as they are rational?

Mr CAMPBELL: They lead to a good outcome for a student with a disability.

Dr JOHN KAYE: The suggestion here is that some of these are irrational.

Mr CAMPBELL: I cannot understand them sometimes.

CHAIR: It is now the Government members' time.

The Hon. SHAOQUETT MOSELMANE: Dr Kaye asked a question that I was about to ask you. You raised an issue about transparency in funding. Do you have an example of lack of transparency? Why did you raise that issue?

Mr CAMPBELL: When I say transparency I am not saying that the Department of Education is trying to hide anything. I think they are limited in the resources that they have for students with disabilities. When I say transparency, it would be good to know the range of things that families can have made available to them and what the expectation is that they can have for their son or daughter, whether it be a modification to the physical environment, access to appropriate technology and augmentative communication, and also appropriate levels of support so that they can access the curriculum. It would be good to have that easily identifiable, is probably the better way of putting it, in regards to what their child may need in kindergarten would be different from when they are in year 3, as it would be in years 7, 10 and 12. It is almost saying, "As they progress through the educational experience, according to their level of ability, these are the things that will be available to support your son or daughter to access the curriculum and to access school activities." That would create a great deal more reassurance for families at present, because sometimes they are second-guessing what is going to happen next year, or next term sometimes.

The Hon. CHRISTINE ROBERTSON: Is the issue for the group of persons you work for compounded by the fact that many children with cerebral palsy have full mental capacity and does the balance between physical need and the possible academic outcome make it a more difficult issue?

Mr CAMPBELL: Children with cerebral palsy, over half will have a mobility issues that will require some assistance, whether it be a walker through to a motorised chair; 60 per cent will have verbal communication issues; almost half there will be a cognitive impact, and that will vary. Unfortunately, with cerebral palsy, and this is probably the point that we would like to focus on, within those 1,660 students that we support each year there would probably be a variety of needs, and there are 1,660 of them; they are not a homogenous group. Also, as Heike pointed out, even within her family the needs of her son and daughter are quite different. So we are aware of the impact of a range of disabilities based on somebody who might have cerebral palsy and that is what our staff respond to.

The Hon. CHRISTINE ROBERTSON: Communication with the school and the parents is a big issue and we have heard about it a lot—and I suppose it is the issue with any service; people always perceive that they are not listened to. Have you heard about the department's trial with the school learning support program?

Mr CAMPBELL: Yes, I have. I think I made reference to it in the submission.

The Hon. CHRISTINE ROBERTSON: I am sorry I do not know the proper name but there is some learning plan that people undertake—do you think the potential of that program to reinforce the learning program with the parents and the teachers might be a solution?

Mr CAMPBELL: I think so. At the end of the day you are wanting to engage the important people in the process, and the parents and the child are always going to be the important people in the process. Our staff are going to be the ancillary supports to that and the education department staff are going to be the people who implement that learning plan. If you can get them together to talk about that without it being a time-consuming process—it needs to be relevant and effective and our staff make sure they are involved in it, especially if they feel that it is going to be an engaging process and a process that leads to an implementation.

The Hon. CHRISTINE ROBERTSON: You can get the parents in at the same time?

Mr CAMPBELL: Yes.

CHAIR: Thank you for your submission and your appearance before us, as we have appreciated your appearance in the past with other inquiries. We may be in touch if there are questions that the committee wants to ask. It is a 14-day turnaround for answers, however, that is negotiable.

Mr CAMPBELL: Good luck. I know the terms of reference are quite broad and it is an extremely wide-ranging issue. It is not easy.

CHAIR: It is complex but we are keen, with our witnesses and the submissions we have received, to make sure we give it our best shot.

Mr CAMPBELL: I am sure you will. Thank you.

(The witness withdrew)

PAUL RAYMOND WHITING, President, Specific Learning Difficulties Association of NSW (SPELD), and

DONALD ROBERT GILLIES, Executive Committee Member, Specific Learning Difficulties Association of NSW (SPELD), sworn and examined:

CHAIR: Obviously we have got some questions to ask you, but there is an opportunity for brief opening remarks if you would like.

Dr WHITING: We would like to do that, if we may. We are grateful for the opportunity of speaking to the inquiry again, as we have to every previous inquiry of this nature, of which there have been a number over the years. Our concern is that the consequences of underachievement because of inadequate reading and language skills in the 7 to 10 per cent of children who experience specific or significant learning difficulties, such as dyslexia, were reported in our submission. These conditions clearly result in a disability, which we hope may be acknowledged by the committee. It is also clear that the long-term personal, societal and economic costs of leaving these children without adequate intervention are enormous. These children have special needs in the educational setting, requiring specialised individual help.

The New South Wales Education Act 1990 has, as one of its objects, assisting each child to achieve his or her educational potential, and in the case of children with specific learning difficulties [SLD] this requires special provisions. Further, the 2008 amendment No. 109 to the New South Wales Education Act 1990 is meant to ensure, or was meant to ensure, that the Minister for Education will provide additional assistance for those with special needs with significant learning difficulties. Students with significant learning difficulties are identified "if a qualified teacher or other qualified educational professional is of the opinion that the child is not, regardless of cause, performing in the basic educational areas of reading, writing, spelling and mathematics in accordance with the child's peer age group and stage of learning".

However, informal reports of discussions with Department of Education and Training bureaucrats suggest that they do not intend to do anything about these new provisions, and I believe the Act is so worded—no doubt deliberately—that they are able to take this stand. Existing Commonwealth and New South Wales disability legislation are meant to ensure that students with disabilities can realise their potential through access and participation in education, with comparable opportunities and choices, on the same basis as those without a disability. Therefore we are urging the committee to recommend the establishment of and adequate funding for an equitable and evidence-based framework of educational services in support of access to early intervention and appropriate assessment and learning assistance; funding programs on the basis of identified functional need, not on the basis of disability incidence in the general population; establishing evidence-based programs such as the whole-school approach; appropriate initial training and ongoing professional development for all teachers; access to evidence-based resources for students and their teachers; access to other relevant professional support for students, such as speech pathologists; and provision for further research into effective resources and teaching models for these children. I think you will find all that is in our submission.

The Hon. MARIE FICARRA: I am interested in all of those good areas for improvement. You used the term "evidence-based" quite a few times. I come from a science background, so I like to hear that. Do you believe that we have a lot of resources, programs and services that are not evidence based and therefore not effective?

Dr WHITING: I do not think we always implement programs on the basis of the best research. The history of the Department of Education and Training is that it has ridden on what is the most popular philosophy in the teaching of reading rather than evidence-based research. I speak from more than 30 years of experience in the teaching of reading, and I can tell you that I was old fashioned for a long time until last year.

The Hon. MARIE FICARRA: It is amazing how times change. You have been appearing before similar inquiries over a number of years and you have probably been stating similar viewpoints. Have you seen any positive initiatives following your previous submissions to similar inquiries? You are still at it, which is good.

Dr WHITING: Yes, we are still at it. SPELD was established 40 years ago in the belief that it would soon be irrelevant because governments would have listened and done what they needed to do for children. In the 1970s SPELD was instrumental in the establishment of the House of Representatives inquiry into specific learning difficulties. That was an excellent result, but we have not seen commensurate progress over the past 30 or 40 years.

The Hon. MARIE FICARRA: Both of you have a lot of expertise, and I am sure your executive is also very experienced. Is there a lot of interaction with organisations that are trying to achieve similar results in improving educational services for children with disabilities? Do you think some people are better at lobbying and therefore get the ear of the departmental bureaucrats and managers and others do not?

Dr WHITING: It depends on the period you are talking about. SPELD used to be very good at lobbying. We have to be very careful now because the Government does not allow public benevolent institutions to lobby. If they do lobby they will not get tax deductibility for donations. We used to be very good at lobbying because we believe it is not the role of private organisations of parents and teachers to provide for these children—it is the role of government to provide a proper education for the citizens of the nation.

The Hon. MARIE FICARRA: We have heard a lot of evidence today about the inappropriateness of the current assessments and the fact that they are carried out annually and take a lot of time of parents and teachers. Do you have any viewpoints on the appropriateness of the current assessment procedures?

Dr WHITING: Our concern is not with assessment, as such, but the appropriateness of the assessment. Our concern is with children who have specific learning difficulties, and they need a special kind of assessment. For example, it is excellent that Best Start now assesses children at the beginning of school. However, it is a great pity that some teachers now regard it as a test and provide the results to parents. My grandson's parents were told in week one of his school life that he was excellent at mathematics but not so good at reading. He had not been taught anything about reading.

Reverend the Hon. Dr GORDON MOYES: It is called very early intervention.

The Hon. MARIE FICARRA: It is inappropriate, too.

Dr WHITING: That is not the point of the assessment. If there were some intervention it would be great. He is actually fantastic at reading after two months in kindergarten. The important thing is what you do with the results. We tend to assess children at the end of kindergarten for success in reading. When I came into the game we did not start teaching reading until the end of first term in first grade. Now we start as soon as they get to school. The academic curriculum has been pushed down into kindergarten. Children may be put into a reading recovery class if they are not succeeding in reading at the end of kindergarten.

The research on reading recovery is very clear. The Australian Temperament Project showed that if we do nothing about children in first grade who are doing poorly in reading in 12 months 30 per cent of them will be doing just fine. Therefore, in theory we are giving reading recovery classes to 30 per cent of children who do not need it. The studies show that another 30 per cent fail reading recovery. That is tremendous—they fail reading recovery! Parents have told me that. Why have they failed? It is because they are dyslexic and reading recovery will not help a dyslexic child. It is not designed for that; it is the wrong kind of teaching. Do not start me on reading recovery. It is a great program for one-third of the children to whom it is targeted. However, it is not economically sensible to target an expensive program at one-third of the client children. I acknowledge that the question is complex. It is what you do with the results of the testing that is important.

The Hon. MARIE FICARRA: A lot has been said about the growing awareness of the level or prevalence of dyslexia and the fact that we have not moved early enough. Do you believe that there are moves within the Department of Education and Training to acknowledge that? Have we made any improvements in the past few years?

Dr WHITING: We have come some way. The Department of Education and Training is now prepared to talk with us. We are currently consulting with the department on the development of its school learning support program and it is prepared to talk to us about dyslexia. Again, look at what is actually happening. This is the biggest disability area—it involves 7 per cent to 10 per cent of the population. However, the wonderful online teacher training program for support teachers does not have a module on dyslexia or the teaching of reading. Why? It is because the program was developed in England, which is 20 years ahead of us in dealing with dyslexia. There are some dyslexic schools and many dyslexic classes in England and schools pay to be assessed and reported privately on the way they provide for dyslexic students. There is no dyslexia module because the Dyslexia Institute and the British Dyslexia Association run extensive training programs for state teachers in England. We do not have, and we are not planning to have, any training program for our teachers.

They are certainly not trained at university. I spent many years training teachers and they are generally not trained to teach reading.

Reverend the Hon. Dr GORDON MOYES: As you know, we took up a number of these concerns and passed an amendment to the Education Act to include dyslexia and other specific learning difficulties. However, you said that some bureaucrats within the Department of Education and Training managed to use that to avoid the issue, particularly with regard to dyslexia. What do we have to do legislatively to slam that door shut?

Dr WHITING: You have to replace the word "may" with the word "will". I am very experienced in negotiations and I know how these things work. Negotiation means that we reach a compromise that pleases you and me. If we do not agree then the compromise will be something that I can interpret my way and you can interpret your way. I think that is what has happened in this case.

Reverend the Hon. Dr GORDON MOYES: You are exactly right. It was a very unfortunate change. That might not be the end of the matter.

Dr WHITING: Good.

Reverend the Hon. Dr GORDON MOYES: You spoke about the training of teachers. Professor Max Coltheart from Macquarie University has been initiating some training of teachers at the university's expense, apart from the replacement cost of the teacher during the training.

Dr WHITING: I have read about that.

Reverend the Hon. Dr GORDON MOYES: Have you anything further to say about the training of teachers specifically? We have noticed during our visits to some of the public schools that they have the equipment and, through the generosity of groups outside the department, they even have the software for teaching dyslexic children. However, the teachers must be taught how to use it.

Dr WHITING: That is the problem. Last year, I think it was, the department mandated that teachers would teach phonics—systematic, explicit teaching of phonics. The trouble is the teachers on the whole have not been trained in how to teach phonics. They do not know how to do it even if they agree that it should be done.

Reverend the Hon. Dr GORDON MOYES: I want to tie this down. What is your recommendation?

Dr WHITING: I am coming to that. Some years ago when Dr Loretta Giocelli was director of special education within the Department of Education and Training she went to every university personally and told them, "Unless you implement a minimum of 30 hours of special education training in your pre-service courses we will not employ your graduates." That is a powerful motivator for universities. Guess what? Everybody got 30 hours of special education training. When Loretta left it all gradually faded away and the content ceased to be monitored, but that is the only lever we really have—if the big Department of Education says, "We will not employ your graduates unless you can show that they have proper training in the teaching of reading and the teaching of phonics."

Reverend the Hon. Dr GORDON MOYES: Yet Professor Leigh from the University of Newcastle indicated this morning that only two universities are specifically giving that education within the course.

Dr WHITING: Sure. It will change overnight if you do not employ their graduates. Students will opt with their feet. Employment is everything.

Dr JOHN KAYE: I would like to go back to your comments about Reading Recovery, and you said not to start you on that, but I would like to start you on Reading Recovery in some senses of that phrase. You say that one-third of students will recover in their reading anyway without intervention, one-third benefit from the program and one-third will not benefit from the program because it does not address their specific needs. You also point out quite correctly that it is a very expensive program to run. Is there something we could be doing at the early stage to perform the triage on those three classes of students?

Dr WHITING: The best thing we can do is train our teachers in how to teach reading properly from the beginning so that all children benefit. We know how to do that; we have known how to do it for years. We just have not done it. We have followed other prevailing philosophies, and there is a lot to be said about that. If we trained our teachers properly and gave them proper in-service courses and encouraged them to do it in the classroom we would have far fewer children appearing to find reading difficult.

Dr JOHN KAYE: That would presumably address one-third or possibly two-thirds of the cohort. It would leave one-third for whom there is still need for further intervention.

Dr WHITING: That is right.

Dr JOHN KAYE: The trick is to identify that one-third as early as possible. I presume your prescription for that would also be at the teacher training level—train teachers to identify—or do we need to be conducting specific tests?

Dr WHITING: I think we need to train teachers to implement simple screening tests to identify those children. We can do that; it is not very difficult. The classroom teacher can do it. Some four or five years ago the Commonwealth funded SPELD to develop a classroom teacher training program and then they funded us to put it online so that teachers could learn how to identify in the classroom a child who has these kinds of needs and then how to modify the curriculum for those children so that they could access it successfully. I do not mean dumb it down but modify the approach to the curriculum so that those children could access it successfully. It is possible to do that. It is not terribly difficult.

Dr JOHN KAYE: And neither NAPLAN nor Best Start identifies those students?

Dr WHITING: No. Best Start will just tell the classroom teacher where the child is up to in their previous knowledge, on the basis that every child learns how to learn before they come to school, from the home and from their experiences at preschool or wherever they might have been. Some children have not learnt how to learn the way schools teach. If you can identify that and then modify your approach to those children so that they learn how to learn appropriately, they can be successful in the classroom from day one.

Dr JOHN KAYE: And NAPLAN happens too late in the process because it starts at year 3 and it is not a fine enough instrument to identify specific learning difficulties.

Dr WHITING: You really need to identify something like dyslexia by the time the child is seven. That is pretty much a cut-off point. If you do not identify it by seven it starts to become entrenched. The research shows that if a child is entering third grade and they are two years behind in their reading progress all that will happen is that they will get further and further behind as they progress through the system.

The Hon. SHAOQUETT MOSELMANE: There seems to have developed a debate about the idea of having a system of inclusion rather than one of segregation. In your submission you ask for special education classes for children with specific learning difficulties. Are you in favour of segregating students so that the benefit of special education teachers can be far greater than in an inclusive class?

Dr GILLIES: I would like to get back to the concept of the whole-school approach as far as inclusion is concerned. I draw the Committee's attention to an article that was published in the *Sydney Morning Herald* education section on 3 May headed "Who cares wins: how to make problem students want to do well". It is all about inclusion. The whole-school approach is about having everybody in the school and outside the school involved in the education process. I had the opportunity of examining a thesis from a student in Hong Kong who was writing about the whole-school approach. The Hong Kong education system introduced it because of their concern about the behaviour of children in that they were getting certain approaches to discipline in the school and the parents' approach was different from the approach that was adopted in the school. They brought in this approach, which was a total cooperative system emanating from the Department of Education and going right through to the communities in which the schools existed. The community surrounding the school also got involved in the education process. It is particularly important with students with learning difficulties because it involves the department, principals, form teachers, classroom teachers and other teachers and, in the example I quoted from Hong Kong, they claimed it also included the janitors because people working in the surrounds of schools see things going on.

As well it also has to be very inclusive of the parents. I want to emphasise the parent part because from my discussion with parents one of the main issues they come up with is the fact that they are not consulted or advised by teachers as to the correct procedures to be adopted for the education of their child who is suffering from learning difficulties. We have to try to create this concept of total involvement of everybody in the system, which might sound pie in the sky, but it is a matter of changing the climate and the culture surrounding the school system, particularly at the school level. I emphasise the fact that it involves what I call instructional leadership. Many school principals are heavily involved in administrative duties and are concerned about finances et cetera and spend an inordinate amount of time on administrative duties, which takes them away from their primary responsibility of instructional leadership, which is looking after the instruction and care of the children at their school. It is a combination of looking at the system systemically, getting everybody involved and having a culture develop through strong instructional leadership.

Dr WHITING: Having said that, there will be some children for whom additional one-to-one instruction will be needed.

The Hon. SHAOQUETT MOSELMANE: So the general direction is inclusiveness, as I understand it?

Dr GILLIES: Yes.

The Hon. SHAOQUETT MOSELMANE: You have raised concern about teacher training. As the national teacher training standards are currently under development what should be in the standards in your view?

Dr WHITING: All teachers need to be able to identify children with disabilities, particularly dyslexia. I emphasise that one because it is just not obvious at first glance. It may be, and very often is, say, a child gets to secondary level, clouded by a behavioural issue. What happens is the teacher then goes in on the level of behaviour whereas they actually need to go in on the level of the failure to learn or failure to be taught really, and resolve the behaviour that way rather than doing behaviour modification programs. That is just an example. We call it the hidden handicap because a child can appear fantastic out in the playground with peers and so on but then just not perform in school and teachers often just do not understand why.

There was some research done years ago on what parents expect from schools, and what it showed was parents have very reasonable expectation of schools They do not expect schools to do miraculous things but they do expect to be consulted, they do expect schools to listen to them, they do expect schools to recognise, be able to recognise, the difficulties their children are having and not simply to say, "Well, it's the child's fault" but to look at why it appears to be the child's fault.

Dr GILLIES: I will comment on the education of teachers. I think we need to also emphasise the fact that it is not just formal education of teachers, it is ongoing education of teachers and continuing professional development is an issue that I believe is a problem, mainly because of the time that teachers have to spend on their teaching duties, et cetera, but there must be encouragement given to teachers to attend professional development sessions. Most of the professions these days have a requirement for their members to attend a certain number of training courses during a year. I believe the same should apply to teachers but not only that I believe there should be encouragement given from the top of the department for teachers to engage in networking.

There should be again a culture developed within the department of teachers wishing to assist other teachers, to share ideas and experiences so that the best practices, and we like to use the term, research-based practise comes to the fore. On that theme I believe that teachers should be encouraged to engage in active research. If there is a problem that they see within their school then teachers should be encouraged to engage in a research process to answer that problem, to solve that problem. This is all a part of the engagement and education of our teaching staff.

CHAIR: Unfortunately we have run out of time for questions today. Members of the committee may have further questions they will put on notice that have a two-week turnaround for answers, but that is obviously able to be negotiated with committee staff who may ask for clarification of anything you have put forward. Thank you for your submission and appearance today and your advocacy over 40 years. I am sure there are many children, parents and teachers alike who appreciate your work.

Dr GILLIES: I would like to make a final comment. I want to emphasise the fact that learning difficulties do not just involve learning; it involves behaviour as well. There are a lot of now newly identified, let us call them, learning difficulties such as ADD, et cetera that do lead to behavioural problems and we need to address behaviour associated with those difficulties.

(The witnesses withdrew)

ANNE ELIZABETH CRABB, executive officer, New South Wales Parents Council, and

MARY LOU CARTER, parent executive volunteer, New South Wales Parents Council, and

KAREN HICKMOTT, parent executive and team convenor, New South Wales Parents Council, sworn and examined:

CHAIR: In what capacity do you appear before the committee?

Ms CARTER: I have been on the executive since 2004 and I have the rare privilege of being the mother of two wonderful sons, one of whom has severe and multiple disabilities.

Ms HICKMOTT: I am also a team leader on the focus group for students with disabilities.

CHAIR: Apart from your submission and our questions do you want to make an opening statement?

Ms HICKMOTT: Yes, I would like to do that. As Mary indicated, Mary Lou and myself are both mothers of children with disabilities. I am at the beginning of that journey with a child in kindergarten and one in year 2. Mary Lou has just finished that journey but we both have had children in the non-government special school setting, and Mary Lou also had some time in the government special school setting as well. The New South Wales Parents Council has recently done a survey of all of its parents. It was interesting to note that one-third of responses it received were in relation to students with disabilities. So while they might be a minority in the number of students, parents are becoming very vocal and concerned about the treatment of their children within the school system.

As parents of children with disabilities we are used to having to be advocates for our children on a daily basis. One of the hardest decisions that we have to make is finding the appropriate education setting for these children. At a recent think-tank at my children's school we talked about all the additional costs of raising our children. Off the top of our head we came up with additional per annum costs of around $30,000 to cover their additional allied health costs, medical costs, equipment costs et cetera. We also know that by choosing to send our children to a non-government setting the funding will not necessarily follow those children. But as advocates for those children all parents of children with disabilities will try their very best, within the resources they have, as Heike mentioned before, and very few of them will make their choice of school based on any philosophical or political preference for the sector which they choose.

We look for the right setting for our children at the right time, and often that changes over time as those children progress. So it really breaks my heart to see these children being used in a discriminatory way as a political pawn on the funding of children with disabilities. Having spent many nights trawling through the various submissions and transcripts from this inquiry one thing really struck me, that is, you have heard from all manner of experts, academics, teachers, lobby groups and parents but the one voice that seems to be sorely missing is that of the children. I would really encourage you to take some time to visit some of these settings and I would be happy to help facilitate that within our environment.

Dr JOHN KAYE: We are going to do that.

Ms CARTER: I would like to say that in the twenty-first century it is supremely disappointing that we are actually here with another inquiry. We had one in 2002 in the Senate—very little, if anything, came of that. I urge this committee, even before it makes its findings, to make a submission to the national curriculum development because from what I see and have examined in the documents that have come out to stakeholders, and have been available to stakeholders, children and students with disabilities have been completely overlooked. Again it would seem that their needs are going to be bolted on to a curriculum that has already been development for neuro-typical children and neuro-typical students.

Again, unless you have a curriculum developed from the ground up students with disabilities will again miss out on having their needs, their educational needs, met—diverse as they are, just as they are diverse for neuro-typical children, they will miss out again. I am very disheartening to see at the Federal level we have students with disabilities forgotten again. The problem with our system in New South Wales is because this is a system of education that has been developed without the contemplation of having students with disabilities included in the education system.

CHAIR: Thank you very much. They are powerful comments from both of you, and heartfelt. Two questions were raised in that. One was about funding and the provision of funding and how that is assessed. The other was about curriculum. Can I ask you to explore the issue, in particular in the independent sector? You talk about a lack of funding for both government and non-government schools but you talk about the lack of funding and support allocated for non-government schools. How do you assess students in the independent school environment and do you support funding following a child as opposed to how it currently exists?

Ms CARTER: From my personal experience, I was guided only by the health professionals. My son, for six years, did not have a diagnosis and that is why I say I have a very rare privilege because my son has a disability that occurs in one in two million children. He is severely disabled, with multiple disabilities. His primary disability is severe intellectual disability but functionality has to be—the functional capacity—just because you can hold a pen does not mean you can write. Just because you can stand in a shower does not mean you can shower and bathe. So, functionality and functional capacity are so important.

When my son commenced school he was at a government special school because his support needs were so specific. Having had a neuro-typical child who just breezed through everything, having a special needs child with such significant needs was an extraordinary experience for our family. We did not expect a disabled child—nobody does but having been blessed in the way I have, Nicholas has given me challenges and provided experiences I would never have had. In addressing his educational needs I was simply guided by the allied health professionals that were helping me. I did not have any assistance with any options. I was just told this was the school my son had to attend and that was pretty much it.

How he came to go to a non-government school came about because of the significant behavioural problem my son had developed at the special school, because children attend from 4½ until 18 or 19 years of age. He was mimicking behaviours that were very aggressive, very violent. He was attacking his brother. He was attacking me. He was attacking family members when they arrived at our home, and it became a very isolating thing for our family. His needs were so great that moving from a government setting to a non-government setting, to me, was because his needs would be met and his education would be a 24/7 education. The school he attended was Kingsdene Special School.

I did not ever expect that moving from one system to another—I did not realise that disability had a divide. I did not know that funding did not follow the child, I just expected that would be the situation. However, when the school was to close at the end of the year that my son commenced, that is when I realised that students with disabilities in non-government schools are at significant disadvantage because of the choices made by their families for the better education of their children. Heike Fabig made great points about that. She began with a philosophical view, as I did. My older son went to a government school all of his school life, as did his father, and that was the expectation that I had in our family life. But that was not to be.

CHAIR: Does your organisation have a particular view on categorisation versus functionality or is it an individual view or do you see it as a combination?

Ms HICKMOTT: My youngest daughter has recently been diagnosed with autism. You will be aware that autism spectrum is a very broad spectrum. So, to me, having that diagnosis is like saying she has blond curly hair. Every child I have come across with autism has been impacted very differently by that. Certainly by funding these children on a medical diagnosis is a start, but it is far from the end. Funding on a primary disability only boggles my mind. Reading through the submissions I think there seems to be almost universal agreement that there needs to be a functional assessment. There needs to be more money for everybody and I am hopeful that the Federal funding review that is just starting will address some of those issues. But the lack number of places for these children, there is heated agreement on all these issues from all the submissions I have looked at.

CHAIR: You have also raised the curriculum issue, about the need for special curriculum or modified curriculum rather than what you called a bolted on system. It has been raised in a number of submissions that particularly high school students need a different curriculum. Is that your view?

Ms CARTER: Sometimes, depending on whether the student is mainstreamed or in a special school. You can have a mainstream child who has proceeded with their education very well but because of their specific needs at the end of, say, year 10 they need to go into a life skills program that may not be offered at the school. That in itself is something that parents come to the realisation yes, it is great that Johnny has gone through school from kindergarten to year 10 and has progressed with his peers doing work that has been modified—say, for example, he might be in year 7 and is doing year 3 work in mathematics, and that is because the parents and families and teachers and the professionals at the school make those modifications.

However, parents come to the realisation that the curriculum for their son or daughter at that point needs to change so it encompasses what their needs will be when they go out into the workforce and learn how to fill out forms or catch a bus, all those different things that are really part of mainstream curriculum. Often parents have to make the decision that at year 10 level their son or daughter needs to go to a special school that does provide those. That is a difficult decision to make and it is difficult for the child. Again, parents will work through that but that is definitely one of the things that needs to be looked at.

Dr JOHN KAYE: Thank you for your submission. It is very interesting. I want to take you to page 5 of your submission where you say:

> The funding formula for students with disabilities in non-government school is a miasma which makes it virtually impossible to simply provide a figure arrived at for the education of a student with a disability in a non-government school.

I am in furious agreement with you on that topic. That is absolutely clear.

Can we talk for a moment about the controversial issue of the general recurrent grants that non-government, Catholic and private schools receive? I am not referring to specific funding, which you identified to be about 70 per cent of the average government school's recurrent costs, but the general recurrent funding that non-government schools receive. You are aware of the funding formula. I think your submission specifically refers to the so-called socioeconomic status funding at the Commonwealth level and the education resource index funding at the State level.

I presume you would be aware that that funding is delivered on the basis of a proportion of the cost of educating the average child in public education. No doubt you would also be aware that a significant proportion of the cost of educating a child in public education—about 13 per cent—is because of additional services provided for children with special needs. Would you not therefore agree that a significant proportion—in fact, 13 per cent of the recurrent funding going to non-government schools—should be spent on special needs education or special needs services in non-government schools?

Ms CARTER: I am sorry, Dr Kaye, you have lost me completely. I do not know how the funding arrangements come about: I really do not. All I know is that students with disabilities in non-government schools receive significantly less funding than do students with disabilities in government schools. That is what I know.

Dr JOHN KAYE: I do not disagree with that proposition if you put in the words "special purpose". Ms Crabb, I notice that your name is on the submission. You address the issue in some detail. Perhaps you would like to address that question.

Ms CRABB: My name is on the submission, yes, but the parents are here to talk. Dr Kaye, we are very mindful of what your views are, and we read with interest your press release that was put on your website on Friday. I think we could go round and round about the proportions of funding and government versus non-government schools all we want, but I think what we are here to say today is that all parents with students with disabilities need to be looked after, and that funding for all students with disabilities needs to be looked at as a whole. It should not be that we fight over the size of the pie that is currently there. I believe that the pie should be bigger. With due respect, though, we will take the question on notice, if that is appropriate, and we will agree to disagree.

Dr JOHN KAYE: Okay. You were saved by the bell.

CHAIR: Or you were.

Dr JOHN KAYE: I do not think so.

Reverend the Hon. Dr GORDON MOYES: He is a tough fellow.

Ms CRABB: I said that with due respect.

Reverend the Hon. Dr GORDON MOYES: You answer him well.

Ms CRABB: Thank you.

Reverend the Hon. Dr GORDON MOYES: In your experience in the private school system in relation to assistive technology, are the schools providing enough hardware and software for the children about whom you are especially concerned?

Ms HICKMOTT: As I said, my children are just starting out on this journey. The school they attend does have a smart board in every classroom, and I know that they utilise that to a great extent.

Reverend the Hon. Dr GORDON MOYES: Personal computers and specialised software?

Ms HICKMOTT: No. There are some applications for non-verbal children that I believe they use.

Reverend the Hon. Dr GORDON MOYES: They are excellent.

Ms HICKMOTT: Yes. They use many methods of communicating. A lot of the children at the school are non-verbal. They use sign, they use PECS and they use a lot of visual aids.

Dr JOHN KAYE: They use sign, and what was the second thing?

Ms HICKMOTT: PECS, which is a system that is used a lot with autistic children. It is the picture exchange communication system [PECS]. It starts off with a number of pictures and it is about teaching children the fundamentals of communication, which is that I give you something you want and you give me something I want, in the spoken message.

Reverend the Hon. Dr GORDON MOYES: It is a funding matter?

Ms HICKMOTT: The last smart board was installed in my son's school in the year he started. I do not know how the funding for that came about. I do not know if that was through private donations, bequests or fundraising. Fundraising is a big focus in our school. I am not familiar with how that came about. We do hold fundraising events to make up the shortfall in our funding, which is approximately $600,000 in this particular school, to supplement the programs that we are able to provide with government funding.

The Hon. SHAOQUETT MOSELMANE: From your perspective, what do you see is a key reform issue that you would like to see in the education system? What is the reform agenda that you would like to see?

Ms CARTER: What I would like to see is that all students with disabilities, irrespective of their educational setting, are funded to meet their educational needs, whatever those needs are, based on a functionality assessment. That assessment should take place before the child commences school. When you look at Australia, there are so many people who are aware of human rights issues, but we have no legislation that gives children or adults with disabilities rights or entitlements to services, such as educational services, accommodation services or therapy services.

In the United Kingdom, that legislation was passed in 1978. We are way, way behind in meeting the needs of people with disabilities, irrespective of whether they are children or adults. As far as I am concerned, it was borne out in the "Shut Out" report, which was done by the National People with Disabilities and Carer Council, and released last year. That "Shut Out" report said exactly that—in fact, irrespective of the setting, children or students with disabilities should be funded to meet their educational needs. That is the reform that I would like to see.

The Hon. SHAOQUETT MOSELMANE: Thank you.

The Hon. CHRISTINE ROBERTSON: I am interested in your ideas about funding models. You are talking about attaching funding to a specific individual child? Is that it?

Ms CARTER: Educational funding for children should follow the student, irrespective of the sector. Disability does not recognise sector divides.

The Hon. CHRISTINE ROBERTSON: Forgetting about individual sectors, the department at the moment is trying to structure a system for the public sector in which there is a service provision right through and there are special things on the sideline.

Ms CARTER: Yes.

The Hon. CHRISTINE ROBERTSON: What happens to the structure when you have funding attached to individual students? I heard you say something about an educational facility closing. Say there is a borderline number for functionality and two parents decide to withdraw their children and send them elsewhere, funding is attached to the individual, and there is no core service. What happens to those institutions or the other children there?

Ms CARTER: For example—

The Hon. CHRISTINE ROBERTSON: I am just trying to get a handle on the process.

Ms HICKMOTT: We have been very actively lobbying since we lost funding at my children's school last year. One of the things that strikes us about special schools is that there is a very high administrative cost. By necessity they are small schools, but they have at least the same or a higher burden of administration because there is additional reporting. In mainstream schools, a few children might have medication requirements. A large proportion of them in a special school setting do, so there needs to be some sort of stopgap to set up the institution in the first place.

The Hon. CHRISTINE ROBERTSON: I think it is called core funding.

Ms HICKMOTT: Thank you.

Ms CARTER: I was talking to you about the closure of the school that my son was attending. That took the school community completely by surprise. It was only by the passionate advocacy of parents that the school was saved from closure then.

The Hon. CHRISTINE ROBERTSON: Was that the public or private sector?

Ms CARTER: It is a private school. It is a charity-operated school. It is the Kingsdene Special School. It was going to close at the end of this year because funding was withdrawn. Thankfully the State Government kept to its promise and continued with the funding being provided because it is the only school of its kind in Australia.

Dr JOHN KAYE: Which funding was withdrawn?

Ms CARTER: Federal funding for the school. It was withdrawn in 2007. That was a funding shortfall that was very significant, in the sum of about $350,000. That ongoing funding withdrawal has precipitated the closure of the school. It is a very expensive school, because the children are so very highly dependent. It is a unique model, because it provides 24-hour curriculum.

The Hon. CHRISTINE ROBERTSON: Is it live-in?

Ms CARTER: Yes, it is residential. It is the only school of its kind in Australia. It caters for severely and profoundly intellectually disabled children and those with severe multiple disabilities. Yet, in the United Kingdom—and there are those who say that the United Kingdom is old-fashioned—those kinds of residential schools are commonplace. There are residential schools that are online. You can find in the United Kingdom a specific school for a specific disability that is either residential or day. You can have the choice. You also have residential schools for children who are blind, children who are deaf; neuro typically, except for that physical disability. So, that school will close at the end of this year and it is fundamentally denying the children that go to that school, and the prospective children who could go to that school, the capacity to be included.

My son went to that segregated setting. But it facilitated his integration into our family life, into our community life. It is an exclusive education that facilitates inclusion, because it specifically addresses behaviour problems, anxieties that children have, their severe and profound intellectual disability, and that school lives where it is not giving chronological age. It does functionality, so you could have a 12-year-old with an 18-year-old, because they function at the same level. And, therefore, they are able to have, and they do, a Board of Studies curriculum, modified to their specific intellectual capacity. I know that my son had an extraordinary education at that school. He is non-verbal, has severe behavioural problems. He was able to demonstrate to me that he was learning the language other than English section of his curriculum.

He demonstrated to me how he was learning that by showing me something on television. For example he was making a noise to attract my attention that he was seeing something on television. I knew that they were doing Italian. On the screen was *The Carnival of Venice*, and they had been doing masks with feathers. He was pointing to that, to show me what he had learnt at school. All my family, all our extended friendships and people who come to our home are so enthralled with how much he has progressed and how wonderfully well he is fitting in. We take him everywhere. He had the most extraordinary education at that school, and that enables him to be part of our community.

Reverend the Hon. Dr GORDON MOYES: Hear! Hear!

The Hon. CHRISTINE ROBERTSON: Thank you.

CHAIR: That is a very good note to finish on. Thank you for your time. As I have mentioned to other witnesses, there is a 14-day turnaround for questions on notice that may be forwarded to you. Also you may have further information to send to the Committee. If so, please discuss that with the Secretariat staff. Thank you for your submission and for advocating on behalf of parents and children, who, as you have pointed out, are the most important people.

(The witnesses withdrew)

(Luncheon adjournment)

ELIZABETH MARY FORSYTH, Manager, Service Development and Government Relations, Northcott Disability Services, and

HARRIET JANE KORNER, Area Manager, Metropolitan Wide Programs, Northcott Disability Services, sworn and examined:

CHAIR: Welcome to the afternoon session of the third hearing date of the inquiry into the provision of education to students with a disability or special needs. Thank you for your submission, it is great to have your participation. Do you wish to make a brief opening statement?

Ms FORSYTH: Yes. Northcott provides a range of services to school-age children across New South Wales, including therapy, family support, case management, equipment and computer assistive technology. We believe that our submission to the inquiry outlines our organisation's experiences and recommendations in relation to education for children with a disability. However, we would like to highlight that Northcott's experience of working within and alongside the education system is that the provision of support services for students with a disability is extremely limited, fragmented, poorly coordinated and underresourced. We support the contention that these issues can be improved by increased funding, better coordination and allocation of resources, clearer and consistent information dissemination, systematic development of broad educational resources and supports, and collaborative and strategic partnerships across the service system.

In particular, we highlight that communication support for children is fundamental in terms of their ability to access the curriculum and actively participate as members of their class and school community. All children should have access to the communication supports they need, including augmentative and alternative communication systems and visual supports. These should be integrated into everyday classrooms as a support to learning.

CHAIR: When you talk about the integrated support, in your opinion what has the lack of service meant to students and teachers?

Ms FORSYTH: The lack of integrated support is really around access to additional supports for students in a mainstream setting. It is also, I guess, about the collaborative nature of those supports. Lots of different people might be involved in a child's life, and it is about bringing all those people together in the context of their education and with the support of their school to look at their needs in relation to their schooling and education.

CHAIR: The Committee has had a fair bit of discussion about access to professional support services, school counsellors, speech and occupational therapists, et cetera, as you submission mentions. There has been a fair bit of discussion during this inquiry, and in others, about the role of a school counsellor. Do you have a view on that? I note your submission mentioned the need to address the backlog of assessments by school counsellors. How do you envisage that being done? Do you think it should be subcontracted to outside private practitioners? Do you think there should be a division of roles with school counsellors, some in assessment and some in student welfare?

Ms KORNER: School counsellors have a lot to do. Currently they are very stretched because they often provide services to a number of schools, rather than having a full-time position in a school. You have to look at what demands are placed upon the school counsellor, and what is a reasonable workload for that school counsellor to do. It does depend on whether there is access to some of the services that the school counsellor does. It could be done by the school counsellor or by some other counsellor or person. It also will relate to how you look at deciding where children go to school—the issue about functional capacity versus disability type. At the moment a lot of time is spent doing assessments to categorise a student. Really, we should be looking at the needs of a student regardless of their form of disability.

CHAIR: That has been a hot topic during this inquiry.

The Hon. MARIE FICARRA: On the issue of school counsellors, what should be the primary role of a school counsellor? In various submissions the Committee has been told that there is a backlog of students requiring assessment by school counsellors. What are your thoughts on whether the Committee should focus on the role of a school counsellor in carrying out disability special needs assessment only, and then provide, perhaps, social workers to work on the general student welfare issues. Or, should the Committee think about contracting out disability special needs assessments to, say, private psychologists? What are your thoughts on those issues?

Ms FORSYTH: The assessment of a student with a disability is never in relation to one person, whether they are the school counsellor or a private psychologist. The issue is actually around putting in adequate resources so that those assessments are done in a way that are meaningful for the child in the context of their schooling. Any comment in relation as to whether those school counsellors do that within their role, or whether you contract to a private psychologist, the issue is that that position alone cannot be responsible for determining a student's functional capacity. We would support a range of professionals to support that process.

The Hon. MARIE FICARRA: Do you know anything about the existing backlog? Is this an issue for you?

Ms KORNER: I do not feel this is an area about which we have the most expertise. The amount a school counsellor can do is going to be limited by the amount of time they have available. They are always going to be juggling their priorities.

The Hon. MARIE FICARRA: You mentioned that coordination of agency support et cetera was an area of concern and needed improvement. Can you give some examples of how you believe it is not functioning well at the moment in providing the support services your students may need?

Ms KORNER: If students with special needs need additional services aside from the services of teachers because they have, for instance, a physical disability, you are going to require a range of services, including therapy services as well as educational services. At the moment all therapy services are provided by people external to the Department of Education and Training, with the exception perhaps of just a few therapists who are employed within the department. Generally it means that people with an intellectual disability will be working with therapists who work for ADHC and/or other private organisations, non-government organisations, such as ourselves, and there will also be some private therapists working there as well. You have a lot of different services coming from different directions once schools are having to create a relationship with a number of different professionals. It is quite difficult from the school's point of view when you think about it.

The Hon. MARIE FICARRA: How could we best deliver a coordinated approach? Should there be some person, body or unit? It would be important to utilise resources efficiently. Is this something we could look at?

Ms FORSYTH: We make some recommendations around some things that could be put in place that might better enable coordination. We make a recommendation around Department of Education and Training funding school-based therapy positions and that those therapists provide a holistic therapy support to students in that school, it might be done based on region as well, and they can also look at broader professional development—a systematic approach to how therapy services might support students in education. That was one of the recommendations we make. The other one that could enable better coordination is around Department of Education and Training taking some responsibility for the development of broader curriculum supports, that is, broad systematic adaptations of the curriculum according to disability types, and that information then is available on the website so that teachers in mainstream settings can use that information and make adaptations for individual students rather than having to start from the beginning all the time.

Dr JOHN KAYE: Picking up on the issue raised by the Hon. Marie Ficarra about the school-based therapy issue you suggested, we are talking about a variety of therapies and the needs of a particular school for that particular therapy delivery will change as the student cohort changes. How do you provide a school-based therapist or are you talking about providing a school-based therapy to match the evolving needs of students?

Ms FORSYTH: It is not in relation to one school-based therapist who would sit in one school because, you are right, the different therapy needs of students will change across time. It is about having people in the education system who are able to navigate the education system in light of the therapy needs of the students—possibly it is done regionally. That is something that could be done in different ways but it is about having someone inside to use the inside knowledge of the system to help navigate. Our experience is that as an external therapy service sometimes having to negotiate the system is a barrier to getting good outcomes.

Ms KORNER: I would like to add to that. It is important to see the needs of students. Students who have special needs are not just a small number, it is a large number of students and it really depends too on how you are looking at where those students can have those needs met. That is something that needs to be looked at. At the moment sometimes students are in mainstream settings, sometimes they are in support classes in mainstream settings and sometimes they are in special schools. Regardless of whether it is a mainstream school, a support class or a special school, there are actually, even across all schools, aspects where therapy would provide a lot of added value for all students. Whether or not the therapists are at the school or just a resource to the school, what needs to be looked at is how we can do it in a most efficient and effective way. A lot of what therapists bring to education actually would enhance education for all students.

Dr JOHN KAYE: Your recommendation 10 talks about the development and maintenance of a common waitlist for school-aged children needing access to therapy services. Can you expand on how that would work? I presume it is on a region-by-region basis. Is it the intention to try to match up needs to therapists? How does it work?

Ms KORNER: I believe there is actually a trial of having a common waitlist occurring at the moment within ADHC with some of the other non-government organisations as well. You could find out more about that, but the idea would be that at the moment often there might be services from the ADHC therapists and, for instance, from the Spastic Centre, Northcott or from other organisations. At the moment people get referrals for individual children and then they would go and see those children both in homes and in schools. Sometimes you get doubling up, so you might have people coming from different organisations all to the same school on the same day, for instance, so if there is more coordination it might just help. Rather than going to a school to see one child, three people going to see three different children separately, one person going to see the three children one after another, for instance, but there is lots of coordination involved with that.

Reverend the Hon. Dr GORDON MOYES: Thank you for the work that you have been doing over the years. The Northcott Society was established by the Rotary Club of Sydney, of which I am a past president, and only last Tuesday at a past presidents meeting we were making sure the new generation remembered the work of the Northcott Society in future plans for funding. One thing I am keen on is the involvement of societies like Northcott and other providers of services to the disabled with quality assistive technology. Give me a brief rundown: What are you using at the moment? Do you have problems with getting material? Is it getting out of your price range?

Ms FORSYTH: That is a large question. I do not think I can provide the expertise in relation to the actual technology equipment itself but Northcott has a computer assistive technology service that has a memorandum of understanding with the Spastic Centre and the department of education and that provides a minimum level of funding where students are regionally able to access technology funding. There are some systemic issues with the referral process that that service experiences, resulting in a lot of families choosing to access Northcott's services in a private capacity in order to get results faster. In relation to that, I guess Northcott has been subsidising our computer assistive technology service for a while and it is something that our organisation is committed to supporting, but at the moment there is inadequate funding in relation to the need. I do not know if Ms Korner can elaborate about some of the technology equipment itself.

Ms KORNER: There is a range of different technology equipment that is a very important support for many students and the two areas that our computer assistive technology service particularly focuses on are access to computers and software to enable people to access the curriculum and also access to specialised communication equipment to enable people who cannot talk, for instance, who have a physical disability or some other disability where they are not talking so that they can use an electronic communication aid to talk. But there are other forms of technology as well that children with disabilities require, in the area of seating, for instance, and so forth. It is a complicated issue.

Reverend the Hon. Dr GORDON MOYES: If you are short, contact me privately. I have access to technology companies that are able to help with hardware and software, and also an organisation for funds.

The Hon. SHAOQUETT MOSELMANE: In a previous hearing we have had discussions about whether specialist teachers should be the people teaching disabled kids and focussing on disabled kids, as opposed to school counsellors and aides. There is that argument that school counsellors and aides are not necessarily trained to be able to understand how kids with autism or other major disabilities react and be able to learn. What is your view about that?

Ms FORSYTH: We would support an inclusive approach to children's education so that would mean that not individual people necessarily be trained in specialist areas but all professionals that have the capacity to interact with students in schools and are part of that child's educational life have the adequate training they need in order to respond to and meet that student's needs.

The Hon. SHAOQUETT MOSELMANE: So you would be happy to have an aide or a counsellor as opposed to a specialist person assist the kids?

Ms KORNER: I think all children need to have a teacher first and foremost who is their teacher and then you look at what other supports they need around them. For instance, if you are in a mainstream school you may have a teacher who may or may not have any special education training, but good teaching is the basis of everything and then you have to look at what additional supports people need in order to provide a good education for children. We actually have a lot of the knowledge about how to teach children with all sorts of different disabilities but sometimes the information is not getting through, so to speak. I think you have to look at how we provide training and support to schools in an effective and systematic way so that people have the skills they need to provide a good education for all students.

The Hon. TONY CATANZARITI: How can the combined collaborative efforts of involving government and non-government service providers be streamlined and better facilitated, in your view?

Ms FORSYTH: I think the common wait list is one example of how that could work, because that would require involvement from non-government organisations as well as the State Government in education and in Aging, Disability and Home Care. So actually sharing a wait list of students needing access to therapy and coming together and allocating therapists based on need and also based on decisions around efficiency and effective use of the resources could be one way.

The Hon. TONY CATANZARITI: Any other way?

Ms KORNER: One thing that is an issue at the moment is that in order for some children to be included in the school community it will rely on specialist advice from therapists who are not from the department of education. So children are waiting that service, maybe on a wait list for a long period before they can access that service because there are not enough services available to people. So you can have a situation where someone might be on a waiting list for two years, meanwhile they might have started school but they might not have been able to access the specialist advice they need in order to prepare for starting school. An example would be where there is a need for physical modification of a school to enable a child with a physical disability who is in a wheelchair to access school buildings, to have a toilet they can access, et cetera. There are very practical things that need to be considered. I feel that should really be something that is the responsibility of the department of education to make sure that they can provide access to every school for every child.

The Hon. CHRISTINE ROBERTSON: Are you aware of the department's trial of the school learning support program? It is happening in the Illawarra.

Ms KORNER: I do not know a lot of detail. I have looked on the website to see that they have made changes to the learning support program.

The Hon. CHRISTINE ROBERTSON: It is planning to allocate a support teacher for each school. There is a possibility that could be a focus position for your sorts of issues in an individual school. Along with that, I would like to know who you think should be involved in the learning plan process.

Ms KORNER: I would probably need to get more information about the detailed learning plan process but in order to provide for a student, again it depends on what their needs are but often there will be a range of professionals involved. I do not believe that one learning support teacher will necessarily have all the knowledge that is required for every student so there will always be a need to have a collaborative team.

The Hon. CHRISTINE ROBERTSON: Do you think it should be being worked towards making a statement using examples of different persons who may be required in that team for the learning? We have had lots of information back through the inquiry about learning and planning and how it actually works for individuals. It seems that in some cases it ends up being a conflict between a teacher and a parent. Do you think it would be constructive if there was a definitive statement on the process for a learning plan—you do not need every kind of person involved—with a possible example of the kinds of people who should be involved?

Ms KORNER: I am not sure if I can comment specifically on that point. There are models of how collaborative teamwork can work well. An example is one called VISTA, and I can provide to the Committee what that acronym stands for. That is an example of a good practice and how different professionals can work in terms of interdisciplinary collaboration. A number of reviews of therapy services in schools have been done over the years, so there is a lot of information in reviews, and recently there has been a literature review of therapy with disability. It is not just about therapy, but that is one important issue. I do feel there is a need to look specifically at the needs for different students. I believe the learning support program has enhanced the number of learning support teachers for some students but not for all kinds of students. I would be interested in how well it is going to resource the schools.

CHAIR: Thank you for your evidence today and for your submission; it is very useful. I know you have contributed to other inquiries; the Program of Appliances for Disabled People inquiry, in particular, comes to mind. We will take your suggestions on board. If the Committee has further questions for you, we will endeavour to get them to you as soon as possible. We have a 14-day turnaround because of our time frame, but that is negotiable with the Committee staff if that is necessary.

(The witnesses withdrew)

MICHAEL ARTHUR-KELLY, Associate Professor and Acting Deputy Head, School of Education, Special Education Centre, University of Newcastle, sworn and examined:

CHAIR: Welcome to the third hearing of our inquiry into the provision of education to students with a disability or special needs. Apart from your submission and the questions we will ask you, if you would like to make some introductory remarks you are most welcome to do so.

Dr ARTHUR-KELLY: I would like to thank the Committee for the opportunity to have some input, and I particularly applaud your terms of reference. I was reading them again last night and realised you have really nailed some of the critical issues, all of which I could write to you about if I had had time, but I have picked on just a couple. I think it is great that there is an open forum such as this for various people from the field, particularly families but also educators and others, to have input. I thank you for accepting my submission, and for your invitation.

CHAIR: Quite a large chunk of our inquiry has focused on teacher training, not just pre-service but ongoing training, and the adequacy of that. The general view has been that really only a couple of institutions are doing a reasonable job. I wonder whether you agree with that, and whether you believe it has fallen away or it has always been behind the eight ball. I would also like to hear your view on ongoing training. You might also give some information on whether you have had any input into the trial that is occurring in the Illawarra with regard to online learning.

Dr ARTHUR-KELLY: My students tell me I can talk under water, so I will try to be brief. I will give a little bit of history. In, I think, 1994 New South Wales mandated compulsory special education content in teacher education. At the time that was applauded, and it is still regarded as being quite a landmark move, even though that is a while back now. Without going into the politics of it, I think that teacher education programs at an undergraduate level are pressed for space. So, as much as people like me and my colleagues in special education push for more time, I am not sure that we are going to win that one against all the other competing demands. However, the good news is that because accreditation as a teacher is dependent on a special education course, we have that unchallenged, as it were, and the Institute of Teachers recognises that when it endorses programs.

CHAIR: How many hours do they have to be?

Dr ARTHUR-KELLY: It has to be a full-semester program, so that would typically be 39 hours of contact. Universities do that in different ways, but I believe that that is pretty much the mandated time. Just as an aside, one of the challenges is that that can end up, as it does in our place, more as an academic course. We might have 400 students in a year. They will say, "We have done your course, but we still have not met a child on the autism spectrum."

CHAIR: There is no observational, practical component?

Dr ARTHUR-KELLY: It is linked in, and students have to do observations and some programming to meet the needs of an individual child. But a tailored, more extensive practicum—which of course costs a lot of money—is more difficult for the sorts of numbers we have. At Newcastle—and I am not here to advocate Newcastle—we are one of the places that does run they specialised fourth-year option in special education. We offer an elective program in the fourth year. Every year we get a small cohort of people who train to be a special education teacher. I would love to come back to the training of teachers, in terms of postgraduate training.

You other question was about the Illawarra. I have not had anything to do with that. I suppose my letter, brief as it was, was to try to pick out two particular issues close to my heart. One was the education of students with the most severe disabilities—who, I have to say, in all my teaching experience, continue to be one of the most needy and challenging groups in our educational system. I have been in teaching and in education for nearly 30 years and I have seen huge progress, but I suppose I just wanted to take the opportunity to suggest, as Harriet mentioned before, that we know a lot more about how best to support those students but we still have many challenges, and the link I made was to teacher training.

I am aware of the online course. I have to be very delicate, because I have worked for a long while with the department and I am not out to criticise any sector. My letter was to suggest that, because we do know a lot about specialised tactics to meet the needs of children on the autism spectrum, and because we know a lot more about understanding how to support communication and engagement in children with profound disability, I am concerned that a generic course is too generic—in other words, it is a little bit of everything but not enough of any one focus area.

I know to say that runs the gauntlet of reverting back to a categorical approach. I have colleagues at the University of Kansas. They still run teacher training that is totally for students with multiple and severe disability. That is the track you do and that is what you come out with. In this era of inclusion and access to the general KLA [key learning areas] curriculum, my personal view is to go back to something like that would be a retrograde step. I would like to suggest that perhaps an additional specialised module, some additional experiences for our retraining teachers in meeting the needs of children on the autism spectrum, children with multiple and severe disability, would be a great complement to the more generalised good teaching practice. I did not know Harriet was appearing but Harriet's point I agree with entirely—good teaching is at the heart of it. If we can get good teaching in place using the research base and collaboratively working with families, then we make great progress for our children.

CHAIR: What is your opinion—categorisation versus functionality or a combination of both?

Dr ARTHUR-KELLY: I will go out on a limb. I spend a lot of time working with staff particularly in special schools. As I indicated in my letter, as controversial as it may sound, I am concerned that in the name of access to KLAs some of our students are, if you like, put through or assisted to achieve outcomes that may not be meaningful for them. As soon as I say that, I know that I might be suggesting that those children are not capable of those outcomes. You would be aware that we have life skills curriculum through the Board of Studies for stages four, five and six. If you were to ask me one recommendation out of my visit today, it would be that we consider life skills curriculum right through the system. That is not to perpetuate gaps between students and groups of students.

Let us imagine a 12-year-old student I might have been working with. Her teachers are meant to be reporting to outcomes in stages two and three. But developmentally and functionally she is operating at a much earlier level. She is learning but at her own rate. I know this because of my own experience teaching students with these needs. How do we best meet in the middle and say: How is that child to have access to what her non-disabled peers are doing whilst making it meaningful and engaging? I get quite concerned sometimes. I even met with a teacher last week in a school who said, "I sometimes end up having to do it for the child so that we can say that that outcome has been addressed." This is the point I would like to raise. If that child is not really learning something from that time, if she is not becoming more functionally independent—she may never be fully independent—if we are not using that time to support her to know how to dress herself, how to eat, how to get out in the community if she is able to do so independently or partially independently, if she is doing something more esoteric, we have lost instructional time.

CHAIR: We have heard evidence about individual educational learning plans. Do you think that is the way to go? Does every child have an individual learning plan or is it done ad hoc?

Dr ARTHUR-KELLY: Unlike the States, we do not legislate for things here. We have policy and we have a strong encouragement in practice for things to happen. I am not criticising what happens but there is a great variability. Generally there are individual learning support plans. I can answer that by going back to the other half of what I was suggesting. I have worked a lot with Professor Phil Foreman, who is the Chair of the Institute of Teachers. We have been trying to develop really effective database ways of observing children's alertness and engagement in classrooms. We found some really interesting things about what happens in inclusive classrooms as opposed to special classrooms. That is not to say there is not a place for a continuum. There is because great things happen in special schools as well as in inclusive classrooms. But the point I make is we have the tools to observe and engage students' functional abilities and needs and then embed them into learning support plans. In answer to your question, at most places I go to there is a learning support plan. How it is being reported and accessed varies enormously across situations.

Dr JOHN KAYE: I am fascinated by your previous statement. I am not on either side of the debate. How do we do what you just said without putting limits on what children are going to achieve? How do we do it without amplifying a mistake or misjudgement of a teacher or educator who says, "This child cannot engage with the curriculum at this level. Therefore, we will give the child an individual learning program that does not go near the curriculum material." How do we make sure we do not make those mistakes?

Dr ARTHUR-KELLY: You are spot on. Firstly, your point is that it is about individuals. That is the most important thing. One of the outstanding things about New South Wales, if I may say, is that we have a continuing choice of options for parents. Parents can make choices about the sorts of schooling situation that their child goes to. Through the learning support process we would hope that robust discussion is had about that ceiling effect. I would not want to be understood to be suggesting that a child never learn Italian or never do art or music. But what I would like to suggest is that the bedrock of achieving that may be around enhancing their responsiveness, their engagement, through AAC [augmentative and alternative communication] their communicative participation, and then using that as a means into those different life experiences.

Dr JOHN KAYE: Are there robust ways we can build into the system an absence of a ceiling on children's achievement? Is there a robust way that we can provide individual learning plans, which I do think are sensible, without saying, "That is all you are ever going to do"? Can we leave the door open? Teachers constantly tell us that surprising things happen with children who they thought were not able to engage with the curriculum.

Dr ARTHUR-KELLY: Absolutely.

Dr JOHN KAYE: Suddenly they are doing the Higher School Certificate. How do we make sure we never close the door on that outcome?

Dr ARTHUR-KELLY: I keep referring to the fact that I realise I have been teaching in various forms for nearly 30 years, and I am starting to feel quite aware of that. That excitement around the credentialling that happened a few years ago for students in the School Certificate and Higher School Certificate was something that I have not encountered before. That students I might have taught in my time in schools would receive a meaningful statement about what it was that they had achieved, that is so powerful and inclusive. I am with you; would like to find a way. I think the mechanism is the review process, which should be happening twice a year. Operationally, with good leadership from the top, you would hope that twice a year families, the child where possible, the various teachers and all the participants can revisit what is important for that child.

Dr JOHN KAYE: Thank you for your answer; it does give the Committee some confidence. We are getting conflicting evidence as to how often one should assess children with special needs. There seems to be a body of opinion that we should move away from categorical diagnosis or at least temper categorical diagnosis with functional ability assessment. How often do we conduct a diagnosis and how often do we conduct functional ability? You have pushed towards every six months we should reassess what we are doing. Other people have said not to do anything for two years because you spend too much time doing the assessments. It is the old statement: If you want a fat cow don't weigh it, feed it. It is the old trade-off. Can you give us some guidance on what we should do?

Dr ARTHUR-KELLY: Again with my academic hat on, I have fairly limited interest in the one-hit measures around assessments. I am not talking IQ tests. I do think there is a place for adaptive testing and various other types of instruments that we could use every now and again. The answer I would give you is that good teaching is grounded, certainly in the research, in curriculum-based assessment. Good teachers are assessing day in day out, and that is why I am glad you raise the ceiling effect: good teachers are those who are looking for the stellar results in their students and hoping, through a mastery model, that once they have achieved this we will move on to the next thing. So the short answer would be ongoing assessment is what is critical, but I am thinking more around reviewing that data, ideally every six months—and I am talking here about in a room with all the stakeholders.

The Hon. CHRISTINE ROBERTSON: With the people who made the plan.

Dr ARTHUR-KELLY: The people who made the plan. That is not your classroom observation, it is not your behaviour state assessment that I am talking about, it is not your adaptive assessments, it is let us look collaboratively at what is important for this child.

Reverend the Hon. Dr GORDON MOYES: This morning I asked Professor Greg Leigh about Newcastle's program for special needs teaching and the program that you are running. I found out one thing that really thrilled me and one thing that alarmed me. The thing that thrilled me is that you are doing this fourth year for teachers in training. But on the principles of early intervention and the fact that they are already going into a classroom, should you not be giving meaningful course work for undergraduate students in their first three years, because they are in schools, they should be able to recognise dyslexia, they should be able to recognise autism in children and so on, and you are not doing that one to three years, and yet at the end of one to three most of those will not do your special training fourth year, most of those will be teaching?

Dr ARTHUR-KELLY: Let me just clarify: every one of those students in their third year will do a core course and at our place—I cannot speak for other universities—we use a text that people have put together. It is called Inclusion in Action and it is about how do I, as a regular teacher, best support children with dyslexia, children on the autism spectrum, in my class? That course has to navigate not been too categorical, which is the old way—here is a chapter, here is a lecture on how to identify a child with a hearing impairment. The focus is more what can I do, what curriculum adaptations, what adjustments are needed, what supports can I get and so on?

I take your point: 39 hours, 13 weeks, that is all those teachers get. A small cohort move into doing our fourth-year program. When we get to postgraduate—I am a colleague of Greg, so hearing and vision has always got to have a specialised focus—there are special orientation, mobility, audiometry and other skills that teachers need to have. I suppose the flavour of my submission was to say, and if I may be so bold—and again this may come out the wrong way—at the moment internationally and nationally we are very heavily, and rightly, focused on the needs of children on the autism spectrum. I am directing a big grant, thanks to DADAHC, where we are providing training for early childhood teachers so that we can reduce challenging behaviour and help them to use functional assessment to increase students' communication skills, and the focus has been terrifically, at a Federal and State level, on that. That was part of the Premier's strategy on autism, and it is going really well.

I wanted to take the opportunity to say that another group who are just as needy but perhaps not as visible are students with such complex and multiple disabilities. They are the students I am worried about in terms of teachers gaining the necessary instructional skills. My final comment would be this: For example, this Thursday at midday I will be doing a demonstration lesson with one of my students—they do not know it yet—using discrimination learning. I get a student to role-play being a child, I become the teacher and all the other students watch that. I take them through the various contingencies, I mock-up the student so that he does certain things and the students generally benefit greatly. My point is if our practising teachers do not learn those sorts of tactics that are really specific to children who may be non-verbal, who need some more support, who need to learn to match symbols and identify what they mean, then I am quite concerned that they will have a lot of generic good teaching skills but not the specialised knowledge that they need.

Reverend the Hon. Dr GORDON MOYES: I am keeping a close tab on what you are doing at Newcastle and Ourimbah in those areas because a member of my household is one of your students. What I am concerned about is Newcastle has got a good reputation in this field. Is it not true that some other schools of education, however, are not doing anywhere near enough?

Dr ARTHUR-KELLY: I am probably not in a position to answer that. I can only speak around what we are doing. Groups like the Australian Association of Special Education have a sterling history in terms of waving the flag. Could I just perhaps sidetrack a bit and say that the Board of Studies in the last 15 years has done so incredibly innovative work, particularly in the late nineties. You might be aware of the communications support document that came out with the English K-6 materials. That was cutting-edge material. It was basically how does a regular classroom teacher in the late 1990s with a child with severe disability in their class address K-6 English outcomes in a meaningful way for those children? I would love to see the Board of Studies innovate that sort of material for regular teachers. To go back to answer your question: I do despair that there are very few places focusing on this specialised area around diversity. We have just got such challenges in schools and such strategies in the literature. The evidence base is very strong.

The Hon. SHAOQUETT MOSELMANE: Over the last three days of hearings that we have had a lot of issues have been raised about funding, support, training, inclusiveness, definitions and so forth. In a nutshell, if you could zero in on one issue that you would love to see changes in the current system, and perhaps additions as well, what were they be?

Dr ARTHUR-KELLY: In reference to funding?

The Hon. SHAOQUETT MOSELMANE: Any issue that you see as significant or most important in terms of changes to the current system.

Dr ARTHUR-KELLY: In addition to what I have just said or out of all of those issues?

The Hon. SHAOQUETT MOSELMANE: Out of what you said.

Dr ARTHUR-KELLY: For my money, if I had one thing it would be the meeting of improved curriculum for such students and some way forward for more comprehensive teacher training, particularly at postgraduate levels. I take the point about pre-service, but I do not think that will ever be won because the Federal funding for practicum is really at its extreme. But I think in postgraduate we have got room to do a better job. So, curriculum, teacher training? But if I may just go outside the terms of my response to you, funding support: again, this State was well ahead when it introduced the funding support process, which moved towards what are the individual needs of this child as opposed to what category are they in. Where do we need to head with that? My view would be more support for school-level decision-making about how to use those resources. So yes, the schools get the money, but how are those resources best used to maximise the learning for all students, including the child with various needs?

The Hon. TONY CATANZARITI: You also raise concerns about teacher training. As the national teacher training standards are currently under development would you like to comment on what should be the standards and how should education systems monitor them?

Dr ARTHUR-KELLY: Again speaking at a personal level, I very strongly believe that—and again you can tell I have had a few battles about this—undergraduate teacher training needs a much heavier focus—in fact, we could probably do with a whole new course—on adapting curriculum, differentiating curriculum, how to address challenging behaviour. On the train today I read a paper from one of the gurus in the States, a 2010 paper, and they basically sampled regular teachers and special schoolteachers around how to manage challenging behaviour, and what was the result? There was a relationship between their level of preparation and postgraduate development and how they managed challenging behaviour.

They have the same dilemmas in the United States about how best to empower teachers to know how who deal with challenging behaviour. I believe in pushing more content about challenging behaviour and communication support into pre-service training. It would be ideal if we could do that with regard to standards. I am perturbed about how to monitor national standards in education. A few years ago some colleagues visited every State and Territory to establish definitions of different disabilities. We are still trying to agree about those definitions. I look forward to the enforcement of national education standards. We need to have the debate, but it is very difficult to achieve given the lack of agreement just on some of the needs.

The Hon. CHRISTINE ROBERTSON: What sort of supports structures do teachers and school communities need to deliver inclusive, productive educational experiences for children with disabilities?

Dr ARTHUR-KELLY: First, at the school level, there is the learning support framework team—perhaps led by the principal and comprising a head teacher, the school counsellor and others. They say, "Here are the resources available. How can we best provide support?" That might include the Illawarra pilot idea of one person allocated to the school. That sort of forum, if it is done well, has great potential. Achieving that is a top down situation because we must better support principals to lead that decision making and it is bottom up in terms of teacher training, qualifications and expertise. If we go beyond the school level, some regions in the State are doing an amazing job.

The Hon. CHRISTINE ROBERTSON: It seems to be variable.

Dr ARTHUR-KELLY: Yes. One region has the Regional Access Team, which comprises a number of experts with great experience in managing challenging behaviour, assisting with switching devices, seating and so on. I am referring to the sort of cross-discipline things that the previous witnesses talked about. If there is a situation at a central school or at a special school where a child has a particular need, that team comes in to support the school.

We and others are doing some fantastic lead work. I am very committed to disseminating those models of good practice. However, it seems that the glass is always half empty. Instead we need to highlight some of the great examples. I see them all the time. I keep handing out copies of Australian Council for Educational Research journals and encourage people to write about what they are doing so that others can learn. We have come a long way and we are doing some great stuff. It is more about streamlining and encouraging everyone to be a part of the process, particularly families, who I have not mentioned much and who are at the heart of this.

The Hon. CHRISTINE ROBERTSON: Reference is made in the nursing home sector to the "nursing home syndrome". That is a result of years of compliance. We see a structured walk and people do not look up. Is there potential for that sort of thing to develop in the special exclusive school situation? Have you ever seen that type of conditioning?

Dr ARTHUR-KELLY: Any good academic can drop the names of the gurus in the field. The leader in our area yeas ago was Seligman, who wrote in the 1970s about learned helplessness. It is exactly the same culture. The theory is that if somebody else does this for me, why would I try to do it myself? I suspect that that is one of the reasons that for some children—not all children—inclusive situations are so invigorating. The child is surrounded by peers who are able to involve them and engage them and perhaps even wind them up and say, "Come on, you can do that."

I have spent most of my teaching career in special schools as well as regular schools. I know there are certain benefits in special schools, particularly around the culture of support and empathy across staff and families. However, you are right, if we do not have a dynamic, positive, expectant approach to learning in our students we can end up with children who do not want to do much. That is why the behaviour assessment material that Phil and I have been looking at for years now is helpful. My interest was generated by a particular student who slept in a beanbag through most of my class despite the fact that she had a list of goals. I simply wanted to know how I could keep her awake a bit longer given the drugs she was on and the difficulties she was facing. I tried different sensory experiences to keep her awake a bit longer. You are onto something there. We must get away from that discourse—that is, that the poor child has such high levels of disability that he or she will not learn anything and we will not expect anything. That is the past.

The Hon. CHRISTINE ROBERTSON: It might come up with the six-monthly assessment process you are discussing because you would be able to measure backwardness.

Dr ARTHUR-KELLY: Absolutely. You might have to say that we are regressing. Phil probably will not be thrilled about my mentioning a study in which we failed, but we report all our data. We did a study a couple of years ago where we invited teachers and aides from various special schools to work with us. When we recorded the observational data pre and post and looked at the children's level of alertness, we found that we went backwards. We suspect that that occurred because it was not applied enough; it was theoretical. Phil and I—academics—were sitting in a room saying, "Try this strategy."

Our last study, which we are now writing up, involved a doctoral student with extensive experience as a mentor model. The student got onto the ground with the children and the teachers and spent a lot of time getting to know the children. That is a very expensive model to run and it was the conducted using a Federal grant. However, the data is phenomenal. Our follow-up observations suggest that teachers took a while to change what they were doing, but they have now retained those skills.

CHAIR: You talked about colleagues going around the country examining definitional criteria. We are always looking for best practice in our inquiries. Is there a best practice model overseas that we should be adopting? The United Kingdom is often mentioned in submissions and evidence with regard to contracts with parents and so on. What do you think?

Dr ARTHUR-KELLY: I am sorry to say that in my travelling and through links with other people I find pockets of great things happening and then I read a paper like the one by Westling referred to this morning highlighting the very challenges that we face here. Teachers do not feel empowered to do this or that and more training would assist them. Those who have more training feel more confident. The United States is usually held up as the exemplar. However, it depends on whether you look at demonstration projects, which are heavily funded, or those run by educational authorities, which do not have that level of funding, and ask what is happening. You again find that they face similar hurdles.

We are all trying to share with each other ways to do things better. To answer the question, I do not know of one system that has it all worked out. I recently worked with Tony Shaddock, Loretta Giorcelli, Julie Hook and others on the ACT review of special education. The same challenges and triumphs came through during our visits to schools and while chatting with teachers. We got a sense from the various stakeholders that there were no simple answers but that we are a lot further ahead than we have been and we need to keep looking for improvements.

The Hon. MARIE FICARRA: Dyslexia is prevalent and yet we have a track record of not recognising it and gearing up and training services. What is happening now?

Dr ARTHUR-KELLY: My understanding of that need is that it is one that is generally seen as subsumed with learning difficulties, so it is as seen as particular, whether it is omissions of words or sounds, substitutions or reversals—those sorts of challenges. They are usually viewed within the broader context of learning difficulties. I know there has been a lot of debate about whether you call it a separate phenomenon or whether you put it within a larger bundle. I suppose my answer to that, and I say this respectfully to his memory, is that a very esteemed colleague, Greg Robinson, who recently passed away, did some work over many years in special education on Irlen Syndrome and always said that you need to look at the particular experiences of that person. What is happening for them? How might coloured overlays help? There is a lot of debate in the literature. How might it be that they help some students or individuals but not others? It is like choice amongst schools. It is a continuum and we need to find the answer across that continuum. With dyslexia we need to look at all the variables around the person's experiences—reading difficulties, challenges. How do we remediate those?

The Hon. MARIE FICARRA: Are we identifying it early enough and giving support to services? Teachers say they are not trained. The prevalence of dyslexia is very high.

Dr ARTHUR-KELLY: Again, I think one semester and maybe a week or two on learning difficulties is not a lot, to be quite frank. All you can do—and I say this because I lecture on it and take tutorials often in this area—is point those teachers towards evidence-based practices and good sources of information. Again, I refer to the comment made earlier: What would happen in a perfect world? There would be more undergraduate teacher training, but I am not confident that that is realistic.

Dr JOHN KAYE: You were the lead author of a 2004 study that looks at children with multiple and severe disabilities in integrated settings and similar children with similar needs in special schools. That study is often quoted by both sides of the debate as to whether it is better to integrate or not. I am reducing a very complex debate to a very crude dichotomy, which of course it is not. I must admit I have not read that paper. Can you comment on what that paper really does say? What is the conclusion you can draw from it?

Dr ARTHUR-KELLY: We had eight matched pairs, so we had 16 students, and we basically looked at each child for an entire day—one child on one day and another child on another day, matched on age and gender. We basically descriptively tried to look at the level of communicative opportunity and the level of students' engagement. In other words, were they awake, asleep, dazed, drowsy et cetera in their situation? We found statistically significant differences for that sample of 16 children in favour, if you have to put it that way. There was more communicative opportunity and more engagement in the children that we observed in that study in the inclusive situations. That does not rule out the fact that there are great things happening in lots of special schools. It is just that that is what we found in our study. Brian Smyth-King, the Director of Disability Programs, was one of the authors and obviously facilitated our access to schools. Have I answered your question?

Dr JOHN KAYE: I suspect there is not an answer and we will all have to read that paper.

Dr ARTHUR-KELLY: In a nutshell it is complex but I suppose the thing I am trying to wave the flag for is the assessment tool that drove that because if we could find a way for teachers to feel skilled-up to use that in a basic way it would give them a dependent measure that we could use in learning support plans.

Reverend the Hon. Dr GORDON MOYES: Referring again to teacher training, I have been going around to a lot of public schools looking at various kinds of assistive technology and one of the big cries we get all the time is, "We've got the computer, we've got the software, we don't have the teachers. They're not trained and they don't know how to use it." Would it not be a very worthwhile thing to be pushing back into that undergraduate three-year course training in basic assistive technology?

Dr ARTHUR-KELLY: I could not agree more. Maybe you could come and see my head of school! I am being facetious. I have lost so many battles trying to embed core classroom management, which is a whole different story, for all teachers and good teaching practice around diversity, particularly assistive technology. I know I sound jaded in this but there is a crowded curriculum in teacher education and we are safe with the core course because it is a mandated course. You cannot be an accredited teacher without the special ed course. I would be fibbing and having you on if I thought for a minute I could say to you we can change that. We are holding onto that territory but I do not have any hope at the moment. Sorry.

Reverend the Hon. Dr GORDON MOYES: Michael, someone has to produce a cutting edge education department.

Dr ARTHUR-KELLY: I will see what we can do!

The Hon. SHAOQUETT MOSELMANE: There is a second part to the question asked by Reverend the Hon. Dr Gordon Moyes: What is the current access to assistive technology in schools and how can that be improved?

Dr ARTHUR-KELLY: That would be a nice note to finish on. I have been asking that question because we are encountering students in our studies who could do with exactly that. They might need a simple head tilt switch to allow them to make a simple choice as opposed to a person with every good intention making that choice for them. I have discovered in speaking with colleagues that the answer is there is huge variation around the State. Some regions have a regional access team, so they will have a switch kit and personnel who will come in and support an assessment and provide what is needed, or at least directions in trying to get funding for that. In other regions, I believe, there is no structure. It used to be that there was a centralised team out of Oxford Street called the flying squad, and if you had a child with really high support needs that group would come and support you. It is now regionalised. So, to answer you, my understanding is it varies enormously. It works well in some regions and it is hard to find in others.

CHAIR: Thank you. It has been a great conversation and we appreciate your thoughtful comments and submissions and your experience, which has been vital to our considerations.

Reverend the Hon. Dr GORDON MOYES: Just make it happen!

Dr ARTHUR-KELLY: I will see what I can do.

CHAIR: We will try to do our best.

Dr ARTHUR-KELLY: I think it is about being united and finding a way to improve. Things are much better than they have been and the last thing I want to do is criticise or put down what is happening. I did not know Harriet Korner was appearing before the Committee. She was in that flying squad years ago in another life and I worked with her. She made the point that we have the evidence base and it is about empowering the system to make progress.

(The witness withdrew)

(Short adjournment)

CATHERINE HOGAN, Director, Family Advocacy, sworn, and

KIM ROOTS, Advocacy Leadership Development Officer, Family Advocacy, affirmed and examined:

CHAIR: In what capacity do you appear before the committee?

Ms HOGAN: Apart from representing Family Advocacy, I am also the mother of a young man with intellectual disability who began in a special school and then spent a number of years in a support class and then did years 7 to 10 in a mainstream school. I have a bit of span of the opportunities within the department. I also have a sister with an intellectual disability who is only a couple of years younger than myself. She also had an experience within the education system that was just within a special school.

CHAIR: Do you want to make an opening statement?

Ms HOGAN: Yes I will make a statement. Initially Family Advocacy thanks the committee for the opportunity to speak further to its submission. Family Advocacy is a statewide disability advocacy agency that has existed in New South Wales for 19 years. Its purpose is to promote and protect the interests and rights of children and adults with developmental disability. It does this in a couple of ways, first, it works with families who are the ones who actually do the advocacy action. It also conducts systemic advocacy which aims to influence government, legislation, policy, funding et cetera and the way in which they impact on people with disability.

The involvement of the organisation in education of children and young people with developmental disability spans 17 years, and began in response to families wanting more inclusive educational experience for their child than that which they were currently experiencing. In an inquiry of this nature it is important to begin by exploring the purpose of education for all children, as well as for children with disability. Obviously a critical purpose is to maximise the opportunities for children and young people to develop the knowledge and skills that will prepare them for life. That is the individual goal, but there is also a broader social goal of education. UNESCO suggests that the social goal of education is to turn the diversity of our society into a contributory factor for mutual understanding between individuals and groups. We at Family Advocacy support that goal.

The vision statement of Family Advocacy includes that "the inherent value of people with developmental disability is recognised within a just and inclusive society". In theory, the New South Wales education system offers a choice of educational settings for students with disability and, in fact, we find children with very similar profiles in the regular class, in support classes and in special schools. However, I use the term "in theory" because it is the experience of many of the families that contact Family Advocacy that their choice of a mainstream educational setting is not respected and, in fact, is not real, and that educational professionals firmly guide them to support classes and SSPs.

Whilst Family Advocacy would prefer to see the opportunities for inclusion in mainstream classes strengthened, the political reality is that the choices of educational settings that currently exist will continue to exist. In this context Family Advocacy believes that the challenge for this inquiry is to work out how to make all of the options more effective both for the students with disability as well as for the whole school community. Family Advocacy's submission, and our comments today, will focus on efforts to enhance the effectiveness of the regular class to welcome and educate the diversity of children that make up our communities. Inclusive education views diversity as a challenge and enrichment to the learning environment, rather than as a problem, and as a progressive society we need to rise to that challenge.

A *BBC* report in April 2010 focussed on the fact that Finland continues to top the developed world in science, reading and maths in its NAPLAN-like testing. At a recent conference in Helsinki more than 100 foreign delegations and governments visited Helsinki hoping to learn the secrets of their schools' success. The Finish philosophy with education is that everyone has something to contribute, and those who struggle within a certain subject should not be left behind. A tactic used in virtually every lesson is the provision of an additional teacher who helps those who struggle within a particular subject. But the pupils are all kept in the same classroom, regardless of their ability in that particular subject.

The everyday experience of Australian teachers tells them that although students with diagnosed disabilities may attract differential funding, they are not the only students for whom they need to adapt their teaching. Typical Australian classrooms contain students with unique individual needs that may reflect influences derived from culture, class, ethnicity, language of origin, behaviour and other factors. Disability is only one of many possible sources of need that once would have been considered ‘special’. Do we see these issues as a problem or a challenge and enrichment? Do we focus on strategies to fix children who may not be fixable and then remove them if not fixed so as to stabilise the mainstream to some mythical norm? Or do we focus attention on how to transform education systems to respond to the diversity of all learners?

Some people believe that there are currently too many problems within our education system to attempt inclusion. Attempting to include students with significant educational and behavioural challenges tells us a lot about the way in which our schools are unimaginative, under resourced, unresponsive and simply inadequate. Inclusion did not create those problems, but it shows us where the problems are. It reveals the manner in which our educational system must grow and improve to meet the needs of all students. This view is reflected in the national project improve learning outcomes of students with disabilities in mainstream classes in the early, middle and post-compulsory years of school that reported to the Australian Government in 2007. That report was done by Shaddock and that is where the idea of universal design in curriculum appeared.

The project argued that students with disabilities and their families are at the forefront of educational reform that focuses on changing mainstream educational structures and processes so that they accommodate the natural occurring diversity within the school population. "Indeed, the needs of students with disabilities may be a proxy for those of all students who experience mainstream schools as unresponsive or even alienating." These many influences have produced an educational context in which educators require new ways of thinking about their role, and new skills to respond to the challenges so that all children are included educationally and socially.

CHAIR: Your statement contains a lot about your philosophical presentation if you are talking about inclusive education with children with disabilities and special needs in the mainstream setting. What is your view about what sort of supports needs to be built into the classroom situation to make that a success? You talked about Finland. What is your view about class sizes, and composition of student/teacher ratio in mainstream settings currently?

Ms HOGAN: Our submission covers many of the things that we think are necessary but I do not think there is any one solution to that very large question. What happens in our schools is very complex. Funding is one issue, but funding is not the only answer. I think anecdotally Family Advocacy has heard many stories over the years where children are very successfully included in mainstream school and it had nothing to do with the money. And it had everything to do with the approach that the school took, the welcoming attitude of the principal, the leadership shown from the principal down, the other supports that the school would have been able to tap into at the time. There is no one answer as to how that is going to work.

I have worked with Family Advocacy for 16 years and when I first joined the organisation it was back in the early days of integration funding to support children. Back then I think there were lots of problems that we saw within the system. There were separate enrolments for children with disability and children without. There were lots of structural barriers to children being welcome and supported in the regular class and many of those structural barriers have now been removed.

So, the funding is there, the policy support, many new strategies have now been rolled out to enhance the experience of children and their families in the mainstream system. I think we have come a very long way over the past 16 years—that I have experienced anyway. It is much better than it was. There is still room for improvement. Family Advocacy generally supports the school learning support program,. We think it is a terrific idea. In fact, Family Advocacy suggested a very similar approach some years ago as part of a campaign in the lead-up to one of the State elections. We suggested that specialist support, an additional teacher in every school to provide specialist support, was a really good idea. So, we see that we are moving towards that with the trial in the Illawarra. We still think there are other things that could be added to that program to make it better.

CHAIR: What sorts of things?

Ms HOGAN: For example, we think, as has been identified during the course of today, one person is not going to be able to be the repository of all knowledge about how to support children with autism or to support children with challenging behaviour. What we think would be useful would be to also have a few people at the regional level so if something comes up that is beyond the particular expertise of the support person at the school, or they are not able to address it themselves, there is another layer of resource they could draw on to assist them in that role. So, it is a multilayered response.

Also, I think if we move to the population-based funding, which is part of that program, there would also need to be perhaps an additional pool of money to be tapped into. You can plan all you like around population and then suddenly have an influx of children from somewhere, and unless you have some discretionary money to draw on, that could be problematic. It is finetuning what we see as basically a good idea. Family Advocacy has been involved in the stakeholder forum that the department has been drawing on to finetune because it is recognising as well that it is a good idea that may need a little finessing over time.

CHAIR: In terms of assessment, we have had constant debate about functionality versus categorisation. In relation to those doing the assessments does your organisation have a view at all about the role of school counsellors?

Ms HOGAN: Not particularly. We probably have more of an issue with the assessment process per se and the reliance on IQ. We think that IQ testing has been disproved as being useful too many times over for us to be still using it, but unfortunately we still are. It is the same, I guess, in terms of functionality as opposed to categorisation. There has been report after report after report—and I could name them if you want me to—that has said the move away from categorical funding is the right decision and for the right reasons, and looking at what the child's support needs are in the classroom is a better way to go.

In terms of the broader ideas around how we fund the education of children in mainstream, I think there are numerous schools of thought as to how else we might do it as opposed to assessing the child and just funding them. One of the suggestions I heard made a number of years ago which I thought had merit but has never really been explored is funding the classroom or funding the teacher—looking at a class at the beginning of the year and saying who is in this class, what children will be in here this year, who is the teacher, what is her expertise, what is her experience and how do we fund this classroom to function well over the next 12 months?

CHAIR: Is that not what should be decided currently by the principal?

Ms ROOTS: School learning support teams play a role in the process and it is part of that role to think through what supports are required within the school environment for each student and how those supports are utilised.

Ms HOGAN: At the moment funding support for children with moderate to significant disability is based on the child's functionality.

CHAIR: Do you support funding following the child?

Ms HOGAN: Yes, we do, but I do not know that enough thought has been gone into how that might work in practice. We certainly would support the fact that at the moment there is great inequity across the system, so within the State system and the independent and the Catholic system there are huge differences between how much funding is available to support children in those three different systems, and that is wrong. There is a problem there. Families are almost forced out of one system into another so they can get what they need. That is very inequitable.

CHAIR: Is that what families are telling you, that they are forced to choose a particular school or setting because there is insufficient funding?

Ms HOGAN: Most definitely. As I said, funding is not everything. Sometimes their child will attract a significant amount of funding but it is the school that turned them away.

Ms ROOTS: Part of my role is to talk to families when they are thinking through what is happening at school. So, people often phone us when things are not going well. The predominant cause of issues arising is the attitude of the school. Where schools are welcoming, even if there is not a great deal of funding, a way is generally found to support that child. It is worked through as a partnership between the family and the school. It is really where the attitude of the school is a negative one, regardless of the amount of funding, when things do not go well.

Dr JOHN KAYE: Thank you for a very comprehensive and tightly argued submission. It is quite a read. Can I check on a couple of issues, firstly just a clarification? You talked about population-based funding.

Can you clarify for the Committee what you mean by population-based funding in the school learning support program?

Ms HOGAN: I am not going to be able to expand on that in great detail. My understanding of how it works here is that it is just based on a recognition of how many children with a disability may be in that school population.

Dr JOHN KAYE: In the school population?

Ms HOGAN: I am sorry, I am going to have to take that on notice.

Dr JOHN KAYE: I think you will find it is in the general population.

Ms ROOTS: It is general population.

Ms HOGAN: I am sorry, you probably know more about it than I do.

Dr JOHN KAYE: Which takes me to my next point. On page 17 of your submission you make a statement that you support the school learning support program.

Ms HOGAN: Yes.

Dr JOHN KAYE: I think you are referring to the model of it that was suspended last year when it was to be generally rolled out and it has now been replaced by a trial in the Illawarra?

Ms HOGAN: In the Illawarra, yes.

Dr JOHN KAYE: I agree with you. You go through six of the key features. You say it is a great thing, it should not have been undermined and you suggest here that:

> Serious misinformation seems to have taken the proposal off track.

You then go through the six features and for most of those six features I notice the text underneath it begins, "However, it is essential that …"?

Ms HOGAN: Yes.

Dr JOHN KAYE: And you put in there features which you say are essential. I put it to you that each of those things you put in their were not part of the SLSP in the first place, so I am mystified by your support of the SLSP when you say it is okay provided these things happen?

Ms HOGAN: As I said in the beginning, it is a move in the right direction. It is better than what we had, which was no recognition that perhaps an additional teacher in every school could provide support in a timely way to a classroom teacher who was struggling, whether it be around a behaviour issue or a curriculum that the teacher is just not sure how to modify and adapt that curriculum to suit a particular child. We think that is a very good idea, which is one part of the rollout of this new program.

Dr JOHN KAYE: I do not think anyone argues against that. I think what everybody is concerned about is the cost of doing that, what had to be sacrificed in terms of expertise. Were you comfortable with the loss of expertise that would have accompanied that rollout?

Ms HOGAN: I do not know that we saw that it was such a loss of expertise but just rather putting the expertise somewhere else so it could be drawn on in a more timely way. The way it works at the moment, some schools struggle without any additional expertise for months and what often happens then is children end up being suspended or parents just get to the point where they will not send their child to school any more simply because the additional support they are needing that they know, probably through ringing and speaking to us in some instances, should be made available to them, and it is not.

So we think that this suggestion goes some way to addressing the situation when there is just not the timely response that is needed.

Ms ROOTS: I might just add that one of the negative experiences that some families talk about when they ring in is a school's reluctance for all kinds of reasons to seek expertise from outside the school. It would be a simplification to name a few, but if there is expertise within a school that is informing teaching practice and is on the spot, we see that as a positive step towards making that part of the school framework rather than something that a school might see as commenting on the school or being beyond the expertise of the school. It is part of the school, as opposed to making a suggestion that the school is unable to cope with a particular situation, or is unable to sort through a situation.

Dr JOHN KAYE: I will take you to page two of your submission where you argue fairly powerfully for inclusion. Can the Committee take from the arguments that begin on page two and end at the bottom of page four of your submission that you believe the direction that the New South Wales Department of Education and Training should follow is the abandonment of SSPs and the closure of support units, and that all children should be included? Is that what we should take away from that?

Ms HOGAN: Yes, you can, but I would say that we absolutely recognise that that is not going to happen tomorrow. As much as we think there would be a huge benefit to all students and communities if we did have one education system that welcomed all learners, we recognise that there is a huge bureaucracy called special education.

Dr JOHN KAYE: We do have such a system that welcomes all learners. It is called public education.

Ms HOGAN: Sure. There are a lot of resources that currently are tied up within the special education system. We think that if we were able to do the mainstream inclusion of children with disability more substantively, people would recognise that there are many benefits to their child being included in the mainstream—benefits that are beyond the curriculum and beyond education. We would see parents who would prefer to have their child in the mainstream bringing their kid over, so we would be freeing up resources within the special education bureaucracy that would also follow the children.

While ever we have two separate systems—it is a complex issue—it feeds the view that there is a special place for special children. That constantly undermines a commitment to or a recognition of there being benefits of the mainstream in being included. We hear anecdotally from parents on a regular basis that they have made the choice—and it should be their choice—to have their child included in the mainstream at their local school, where their child's brothers and sisters go, but they are told that that is unrealistic and it is not sensible. They are basically being told that there are schools for the child, but this school is not it.

It is a broader question about whether we are for or against. We currently have a system that exists in which we have special schools, we have support classes and we have mainstream. As I said in my opening address, the political commitment at the moment and commitment of the Department of Education and Training is for a continuum of support. But I do not believe it is an even playing field. It is not easy for people to have their children included in mainstream. There is a pressure for them to accept a special school or a support unit placement simply because the places, or the classrooms, or the schools, exist. That is a reality that exists.

Dr JOHN KAYE: You do not agree with the proposition that there are some students whose needs are so singular that they are better catered for in a separate environment, either in a support unit or an SSP?

Ms HOGAN: I think that special education should be a resource, and it does not necessarily have to be a place. We are in no way shape or form saying that we do not need specialist knowledge and a skill base. We absolutely need it.

Dr JOHN KAYE: No, I accept that. I know you are not saying that.

Ms HOGAN: We absolutely do.

Dr JOHN KAYE: Although there are people in the disabilities area who say that.

Ms HOGAN: Absolutely.

Dr JOHN KAYE: And, to be honest with you, quite disgracefully so. I know you are not saying that, but what I am trying to get at here are the special placements for some children whose behaviour possibly is sufficiently challenging and would take the situation beyond the capacity of a mainstream school to deal with it.

Ms HOGAN: Yes.

Dr JOHN KAYE: What do you see as the future for a child whose physical needs are so substantial that it becomes difficult to deal with them in a mainstream school?

Ms HOGAN: I do not think, but I know, that at the moment in New South Wales there are children in special schools of exactly the same profile as those who are in mainstream schools, as I said at the beginning. I know children with significant intellectual and physical disability who also have some behaviours that challenge their teachers and their families, but they are being supported in the mainstream. I just think that where there is a will, there is a way.

I will draw on my personal experience as well. I enrolled my son in a special school when he was very young, based on my learnt experience from having had a sister with a disability who also went through the special school system. Really out of ignorance or just a lack of opportunity to know something else, I followed that path, but I also took the advice of professionals who said that my son needed special schooling and that he needed to be in that special education environment.

Over time, I could see he was learning how to be disabled. This morning someone mentioned learned helplessness, and that was one of the lessons that he learnt best in the special school environment. I really regret that I did not know I could make a choice of moving him into the mainstream setting until he was in year seven. He had a lot of un-learning to do and was very disadvantaged because of that. I made the choice of the special school system and the support classes based on my knowledge at the time and because I wanted the best for my son. But sitting alongside that, I had also lived with my sister. When my sister was a young child, my parents were advised by professionals that Margaret was better off living somewhere else, away from the family, so she was institutionalised for a number of years.

I guess I had lived through the damage that that did to my family, and certainly the damage that that did to my sister because she needed special schooling. It was a residential environment that she was in. After some years my family made the decision to bring my sister home. Because of that experience, I could see that my son was following that path. He was learning behaviours that were not his. He was learning how to look, sound and act like a disabled person. He was not doing very well academically. I just started to really think that it was like déjà vu and that I was seeing history repeat itself.

But I was lucky enough to hear about inclusive education on the radio. Just serendipitously, a parent was talking about her child who had very significant physical and intellectual disability. Her child used a wheel chair and was supported in every aspect of her life, but she was being included in mainstream. That rang really loud bells for me. I wondered how come no-one had ever suggested that that was possible for my son when he could walk and talk and there was much less challenge involved than with that young woman, but she was in the mainstream.

That led me on a steep learning curve of what that meant, how it could look, and what the benefits might be. I had beaten myself up over the years many times about why I did not inherently think that that was a good idea and why I did not come to that myself, but I did not. As I said at the beginning, I think many parents are very heavily steered towards the special education environment, even if inherently in their own hearts that is not really what they want. The professionals often trump the mere mother or the mere father.

The Hon. CHRISTINE ROBERTSON: On the issue of population-based funding and having a spare bucket, what would you think if the spare bucket came out of the baseline population funding? I have no idea what is happening, I just know that sometimes with population-based funding and you want a bucket for emergencies or something else, quite often the top comes off the population-based funding to put in the bucket. Do you perceive that as a good idea?

Ms ROOTS: I suggest that there should be recognition that there will be variations, and so there should be discretionary funds available at a regional level to be able to be used in consultation with schools where those needs are required to meet the educational needs of particular students. Those funds can be used flexibly, and instruments like learning support teams within schools, individual learning plans, consultation broadly within those school communities in that region, should inform how those funds are utilised if they are required.

The Hon. CHRISTINE ROBERTSON: Perhaps at a regional level, and then worked out like that.

Ms ROOTS: That could be the way.

The Hon. CHRISTINE ROBERTSON: I am not in charge of the Education budget; I was just interested in your comment.

Dr JOHN KAYE: That is a shame!

The Hon. CHRISTINE ROBERTSON: I have worked in population-based funding before.

Ms ROOTS: Having some capacity for discretionary fund access could be an important aspect.

The Hon. CHRISTINE ROBERTSON: That is a good way to put it. On the issue that Dr Kaye referred to in relation to the school learning support program. The key directions you have written, and then "Commentary". Are those commentaries things that you wish to see within those specific issues?

Ms HOGAN: Yes.

The Hon. CHRISTINE ROBERTSON: They are not things you have already half negotiated?

Ms HOGAN: With the department?

The Hon. CHRISTINE ROBERTSON: Yes.

Ms HOGAN: Well, we have certainly put them forward to the department, absolutely, when we have been part of the stakeholder forums. The department is running a trial and that is what a trial is: we are going to see how this looks and how this works. They are committed to getting it as right as they can. So, these are just some suggestions that we have put forward to say, "If this is the path you are taking, this is the tweaking that we think might work, or might make it better".

The Hon. CHRISTINE ROBERTSON: How many different groups are on the stakeholder consultations?

Ms HOGAN: I do not know. Possibly 10 or 12.

The Hon. CHRISTINE ROBERTSON: On the sentence about the misinformation and the school learning support, do you think stakeholders in the separated class type system are pushing their own issue? Do they get stuck in their own issue and cannot move on? Have you been watching this all the time?

Ms HOGAN: Yes.

Ms ROOTS: It is complex. Some part of it was people genuinely not understanding what was happening. I would get calls from people who had been told that there would be no support for their child anymore, so they now needed to go to the support class or the special school even though they had been quite successfully included in that school and had relationships, friendships and connections. That may well have been just a lack of understanding of what was happening. But that can spread very quickly, because it is a frightening thing.

The Hon. TONY CATANZARITI: How could partnerships with schools and families be improved through the school learning support mechanism?

Ms HOGAN: At the moment in many of the ways that the department is funding children and supporting children, there is the view that parents are partners. At the State level you will see that in many of the policy documents and many of the guidelines that sit around a lot of support programs. However, the reality is often very different once you get down into the schools. Also, many families come to us, we are an advocacy agency and people ring us when they are having trouble. We hear about the difficulties that families face. We hear some horrendous stories of families who are deliberately kept out of the processes, the discussions, and the meetings that are happening around their children.

We hear also from families who have developed, either through being terrific negotiators and very assertive rather than aggressive, who knows, terrific relationships with the school. They have been able to be partners with the school from the moment they have approached them around the enrolment of their child. As we said in our submission, the setting up or mandatory involvement or strategy of using those learning support teams does list who should be part of that team, or who could be part of that team. Parents are always in the list. It could be parents with classroom teachers or a teachers aid or the principal. It actually says who could attend those meetings.

For children whose inclusion and mainstreaming is going well, there is generally a functioning team around the child. There may also be a team within the school, because they work at two different levels. There is a genuine recognition of the parents' knowledge of their children. We birth them, raise them and often know how they learn best. Generally, where the parents' knowledge of their children has been listened to, respected, and taken on board, the teams work well, and the child's inclusion is going better than it might otherwise. Partnerships are important, but they have to be real. Often it is not an even playing field, it is a very different power differentiation. If you are the parent and you walk into a room and there are six of them and one of you that can be a very intimidating place to be.

The Hon. TONY CATANZARITI: Partnership is basically based around the child, the teachers and the family?

Ms HOGAN: Yes.

The Hon. TONY CATANZARITI: Are there any outsiders?

Ms HOGAN: There can be. Sometimes it is just at the discretion of the team to ask, "Who is going to be useful to us in working out how to support this child well in this classroom?" Sometimes it can draw on the speech therapist, or an occupational therapist.

Ms ROOTS: It varies. Where it is working well anyone who can usefully contribute to the conversation is included, either in person or perhaps by sending in a report. If a family does not want to bring along every specialist that has ever interacted with their child, they may seek a specific advice around a particular thing if that is going to inform the discussion. Certainly the framework is there for people to be included – if the attitude of the school is an inviting one and offers a timeframe. We do hear from some families who are told, "We are having a meeting on Thursday", and there is no option for another date if that is not suitable. Again, there is a framework if it is used well, if there is an expectation that there is to be a partnership and that families and others are to be included in the process, and are a valuable part of the process.

The Hon. SHAOQUETT MOSELMANE: What is your view on the proposal for the New South Wales Institute of Teachers to accredit special education courses and register special education?

Ms HOGAN: As I mentioned earlier, we absolutely recognise the need for specialist knowledge around how best to teach a child who has a cognitive disability. In terms of teacher training, we support most of what has been said to day and I am sure across the inquiry. At the moment there is not nearly enough done to support new teachers in their pre-service training. It certainly needs to be looked at. Teachers are coming into our schools ill prepared for the mixed ability classrooms that they are facing.

The Hon. SHAOQUETT MOSELMANE: You said that they are ill equipped?

Ms HOGAN: Absolutely. Lots more needs to be done around up-skilling our teachers so that they are able to manage.

The Hon. SHAOQUETT MOSELMANE: You referred to class sizes. Are they small at the moment, or large?

Ms HOGAN: Too big.

The Hon. SHAOQUETT MOSELMANE: Too many?

Ms HOGAN: Yes, I think everyone would agree that our class sizes are much too big. They are a challenge for everyone.

The Hon. SHAOQUETT MOSELMANE: Earlier Professor Arthur-Kelly honed in on two issues that he would like addressed, the curriculum and the funding and training for teachers. What is your view on what he said about the curriculum?

Ms HOGAN: What in particular?

The Hon. SHAOQUETT MOSELMANE: He would support some of the changes to the curriculum. I did not go into depth about that with him.

Ms ROOTS: Expanding life skills outcomes.

Ms HOGAN: He did suggest that, across the whole of the school from K to 12.

The Hon. SHAOQUETT MOSELMANE: Yes, he did mention something like that.

Ms ROOTS: That is an area sometimes misunderstood by families throughout schooling. The families we interact with have found that the curriculum works really well when adaptions/adjustments are made so that students in the class are working from a curriculum at their level and are supported in whatever ways are appropriate to their learning. That could be helpful throughout the whole schooling of students so that as teachers are monitoring what is going on in the class, goals are changed. There are set goals within that curriculum framework that are achievable and once students have achieved those goals they move on within the full curriculum framework set out by the Board of Studies. We would see that as a positive thing.

Ms HOGAN: Absolutely. One issue we have taken up with the department and the Board of Studies is the name "Life Skills". It is a bit of a misnomer. Having had my son in a special school, in a support class, life skills are about going to the shop, doing the washing and whatever, whereas the curriculum as it currently stands from the Board of Studies is nothing like that. It is much more about an outcome in maths or science, which is relevant to that child's level of understanding and capacity. It becomes very confusing for parents who, perhaps having had some experience with the special education environment, then come into the regular school environment and hear about life skills and think, "Right, well that's going to be about cooking and shopping and those sorts of things." It is quite confusing. I think there is a bit of a problem with the name of it.

CHAIR: I must admit I was confused as well.

The Hon. CHRISTINE ROBERTSON: Yes, that has cleared it up for me.

Ms HOGAN: Yes, lots of people get very confused about it.

Reverend the Hon. Dr GORDON MOYES: I thank you for that. I ran an organisation that provided a life skills program for disabled people. It was all about learning to use public transport, what is the value of money, how to get change, how to live independently, how to cook and all those things.

Ms HOGAN: Yes, and those skills are really important, but the curriculum about which we are talking is different.

Reverend the Hon. Dr GORDON MOYES: The education curriculum.

CHAIR: Thank you very much for your detailed submission and presentation today and for your continued advocacy on behalf of parents. You certainly seem to be doing a fantastic job.

Reverend the Hon. Dr GORDON MOYES: I have a brief question I should have asked earlier, but perhaps it could be taken on notice. Could you provide an extrapolated version of what could be done to discipline disabled people who are being rejected within the class? There has been mention of forms of discipline such as hitting, smacking and suspension, which is not appropriate. What would be an appropriate form of discipline?

Ms HOGAN: As opposed to just suspending a child?

Reverend the Hon. Dr GORDON MOYES: Yes, that is right. I agree with you that suspension is not the answer.

Ms HOGAN: Yes.

Reverend the Hon. Dr GORDON MOYES: What is the answer?

Ms HOGAN: Okay. We will take that on notice.

CHAIR: In relation to questions on notice, the Committee asks that the responses to those questions be returned within 14 days, if that is possible. Committee members may forward other questions. If you need extra time, that can be negotiated with the Committee staff. Also, if you have something about which you must let us know desperately, please do so.

(The witnesses withdrew)

NATALIE MUNRO, Portfolio Leader, Speech Pathology Australia,

CANDICE BRADY, Portfolio Leader and Speech Pathologist, and

FELICITY MAY BURKE, Speech Pathologist, sworn and examined:

CHAIR: Welcome to the afternoon session of the third hearing of the inquiry into the provision of education to students with a disability or special needs in New South Wales. In what capacity are you appearing before the Committee?

Ms BURKE: I am appearing as a Speech Pathology Australia member. I have been a speech pathologist for over 30 years and for the past 20 years working with people with disability.

Ms BRADY: I am a speech pathologist appearing on behalf of Speech Pathology Australia as a portfolio leader for the New South Wales branch.

Dr MUNRO: I am a speech pathologist and scientific affairs leader for the New South Wales branch. I am a lecturer at Sydney University. I teach and research to reach children with communication impairments.

CHAIR: Would you like to make some brief opening remarks before we proceed to questions?

Ms BRADY: Speech Pathology Australia is advocating for the needs and rights of children who present with speech, language and communication impairments of both known and unknown origin. Communication impairments of unknown origin include things such as developmental disability, cerebral palsy and acquired brain injury, amongst other things, but we would like to draw your attention also to communication impairments of unknown origin. These children have a real need for education support yet their disabilities often are not recognised. As such, these have been described as an invisible disability, but their individual needs and potential cost to society are great.

Communication impairment in fact is a high-prevalence condition. Data recently released by the Australian Early Development Index indicates that 15 per cent of five-year-old children starting school are developmentally vulnerable in respect to language, cognition and communication outcomes. Another study done by McLeod in 2007 indicates that this trend continues throughout schooling with 13 per cent of children in primary and secondary schools demonstrating a degree of communication impairment. We are talking about 4 children in every class of 30 presenting with real communication needs. These needs are not currently being met by the system in New South Wales.

The New South Wales Department of Education and Training does not recognise impairments of speech, language and communication. It does not label them, which means that effectively they can be ignored. The failure to recognise or classify speech, language and other communication impairments as a disability means that there is no acknowledgement that these impairments will impact on the learning outcomes of these students. Children with communication impairments are educationally disadvantaged in classrooms all over New South Wales. The department needs to recognise the real disability these children face and, indeed, try to repair that.

In New South Wales there is no specific funding allocation to support students with speech, language and other communication impairments. Effectively, this means that 13 per cent of children in our classrooms are disadvantaged socially, educationally and emotionally. The department needs to provide funding support to these students. The lack of support is significant for individuals, their families and for the people of New South Wales. Local and international studies have outlined this, some of which indicate that limited education prospects require more remedial assistance and children achieve lower grades—a study done by McKinnon and McLeod in 2005; children with communication impairments have limited career choices. They are more likely to be unemployed and work in lower income brackets—a study completed by Johnson et al in 2010; and they are more likely to experience increased social, emotional and behavioural difficulties, and mental-health co morbidity—a study done by Taylor in 2002.

Further to this, a United Kingdom study found that the cost of education provision and welfare benefits is significantly higher for adults with a history of childhood communication impairment, which was a study done by Clegg and Henderson in 1999, and in the US communication impairments have been estimated to cost the economy between 2.5 and 3 per cent of the US gross national product, a study done by Rueben in 2000. So the economic, educational and social cost is real and significant to New South Wales. Speech Pathology Australia would like this Committee to acknowledge the importance of speech, language and communication skills in achieving optimal educational outcomes for all students living in New South Wales and to actively pursue real solutions to avoid adverse costs incurred by the community.

All children should have the opportunity to access appropriate support in order to achieve their potential. Commonwealth legislation obliges education and training service providers to protect the educational rights of people with a disability. Children with speech, language and communication impairments have a disability. They need additional services to exercise their rights to an equal education. Did you know that New South Wales is only one of two States and Territories in Australia that does not provide speech pathology services through the education department? We have to ask why this inequity. Students deserve equal access to professional support services. Family and student-centred approaches warrant professional support services such as speech pathology to be based in a child's main learning environment. For school-aged children, this is the school.

Existing school-aged speech pathology services in New South Wales are minimal, ad hoc, fragmented and suffer from long waiting lists. Coordinated care is extremely difficult and private services are expensive. It is also often the case that these students miss out on class time in order to attend such services. It does not make sense to pull kids out that need extra additional educational support at school and make them catch up. New South Wales needs speech pathology services to be embedded in schools. Employment of speech pathologists by the New South Wales Department of Education and Training will facilitate better learning outcomes and provide appropriate support for the 13 per cent of students with speech, language and communication impairments.

Speech pathologists are willing and able to work collaboratively with teachers in the assessment, diagnosis, planning and intervention stages to support these children. Employment of in-house expertise in the area of communication impairment would ensure equitable provision of coordinated, holistic, multidisciplinary and collaborative care for students with communication difficulties. Speech pathologists employed within the New South Wales education system would also provide appropriate and sustainable education and training options for teaching and support staff—something which is also a real need for teachers on the ground. It is a fundamental right of children with speech, language and other communication impairments to access speech pathology services to address their educational, social and emotional needs. The New South Wales Department of Education and Training and Speech Pathology Australia want students to achieve their best. Let us help them together by employing speech pathologists in New South Wales schools.

CHAIR: To pick up your final point and the main point of your introductory remarks, if we were to recommend and the Government accepted tomorrow that speech pathologists should be part of the school environment and funded accordingly, would there be enough speech pathologists to do that? What is the time frame in order to have enough speech pathologists? Have you done any assessment on how many you would need in a rollout such as that?

Ms BRADY: Given that New South Wales is one of the two States within Australia that does not employ speech pathologists in schools, there are a number of models across the nation and indeed internationally I guess of a different way of providing speech pathology services. As to the numbers, I do not have access to the numbers of students in New South Wales schools, but I think we could probably have a fair idea of what the numbers would look like.

CHAIR: Is there a State that you think is implementing that sort of proposal well that has an adequate ratio of teachers to students?

Ms BURKE: Queensland. For some years Queensland has had a model of speech pathologists in education. I do not know what their percentage is per population but they generally have speech pathology representation in all schools in Queensland.

CHAIR: There is currently, you are probably aware, a pilot program of a different model of rollout with provision of special needs education in the Illawarra. Were you consulted as part of that?

Ms BRADY: Not to my knowledge.

Ms BURKE: Was this a student program?

CHAIR: No. The department is planning this pilot program in the Illawarra.

Ms BURKE: Not to my knowledge.

The Hon. CHRISTINE ROBERTSON: The school learning support program.

Ms BURKE: I am only aware of the student program. That is speech pathology students from the university in that region.

Dr JOHN KAYE: Thank you for your submission and your opening remarks. I have a question about the existing provision of support for students with language difficulties and speech difficulties. Currently at some New South Wales public schools there are things called language classes and there are fewer of them now than I think there were a year ago.

Ms BRADY: Last year.

Dr JOHN KAYE: Yes, I think somewhere along the line we managed to lose possibly up to half a dozen although I have not been able to track down the exact number yet. Those classes, I understand—and correct me if I am wrong—are run by teachers with some training that to some extent not mimics but picks up on what speech pathologists do. Can you comment on the interchangeability between teachers with speech pathology training and speech pathologists as service providers within a school?

Ms BRADY: I guess in reference to the support classes language, which I guess have been under threat for a number of years now, I would hesitate to call them teachers with speech pathology training. They are teachers with a very specific skills set in terms of language development and support. I guess one of the things that we would like to argue for is that we increase our number of teachers with those skills.

Dr JOHN KAYE: So you see that as a complement to having a speech pathologist in the school?

Ms BRADY: To speech pathologists, yes.

Dr JOHN KAYE: Can you explain how that would work?

Ms BRADY: As the family advocacy have just talked about prior to our presentation, it is not so—we need the specialist expertise but we also need teachers to be very well equipped to deal with their very broad spectrum of children who present in their classrooms. So I do not think it is about an either/or. I think we need both. And I think we need to upskill our teachers and our teaching and support staff but I think we also need speech pathology staff to do the assessment and diagnosis and planning to better support these kids in terms of their curriculum.

Dr JOHN KAYE: With a speech pathologist in a school, you would still see language classes being run?

Dr MUNRO: For those with severe language impairments, there is a need for support classes with mainstream—

Ms BRADY: I guess one of the down sides of the support class language is only ever meant to be a short-term solution for one or two years. The children who are eligible for those classes are very, very severe in terms of their language skills. That is not going to disappear in one year. It is definitely not going to disappear in two years. So I think there is definitely scope for, and while those children get huge benefits, they will never be able to learn at the same rate that a child with normal language skills will learn.

Ms BURKE: That also ignores the full 13 per cent of children who have communication needs. So you are looking at a very small percentage of children who are in language classes.

Dr JOHN KAYE: I totally agree with you but they are at the extreme end for whom an absence of action is quite catastrophic.

Ms BURKE: Absolutely, but you could say that for the other 11 per cent, 12 per cent, too, that is quite catastrophic.

Reverend the Hon. Dr GORDON MOYES: The Government funds up children with hearing and vision impairment very strongly. Many of those same people also have language difficulties and a lack of communication skills. Going a step further, we fund up dental health and oral health, but not communication skills.

Ms BRADY: It is slightly ironic, isn't it?

Reverend the Hon. Dr GORDON MOYES: It is ironic, particularly when frequently it is the mouth that has problems, it is the eyes that have problems, and it is the ears that have the problem that is seen best in the speech.

Ms BRADY: Yes.

Reverend the Hon. Dr GORDON MOYES: There are suggestions that many allied health professionals, including occupational therapists, speech pathologists and so on, could be attached to a school as a flying squad, if you like, in the same way as we used to have visiting dental nurses come into schools to do examinations. Would this be a step forward? Let me say, I do not believe you are going to get a speech pathologist funding an appointment in schools. What I am trying to do, however, is to get your expertise into our schools.

Ms BRADY: I suppose we can view it as a step forward, in that at the moment we have nothing, but I do not know that it would be the solution to the problem.

Reverend the Hon. Dr GORDON MOYES: It would only identify problems, would it not?

Ms BRADY: Yes. I guess one of the things is: Do we have a flying squad of speech pathologists who come into a school as a one-off identification who say, "Oh, there's a problem; what do we do about it?" It still does not solve that end of the issue, and that would not improve our learning outcomes for these kids.

Reverend the Hon. Dr GORDON MOYES: What it does do is identify the problem and allow for early intervention?

Ms BRADY: It does—

Reverend the Hon. Dr GORDON MOYES: But that then involves private—?

Ms BRADY: Yes. The numbers we are speculating on, 13 and 15 per cent—that is, four children in every classroom of 30—are conservative because that does not even fully capture, in terms of assessment and identification, the full spectrum of kids we are looking at.

Ms BURKE: I think the fact that they are not labelled, and that there is no legislation around this disability, is a problem. In the United States there is an Act for individuals with disabilities in education, called "No Child Left Behind", which specifically defines speech and language impairment as a disability. Therefore, you then get the funding because it is recognised.

Reverend the Hon. Dr GORDON MOYES: When we were arguing for dyslexia, we did bring up this issue. We indicated that sometimes the need for speech pathology is there because of some of the other disabilities, such as dyslexia, et cetera.

Ms BURKE: Yes. There are complex communication disabilities with people who have recognisable disorders—vision, hearing, Down syndrome, and so on—who will attract a certain amount of funding because they have a recognised disorder. What we are arguing is that speech-language communication is a recognised disorder, with huge implications for the future of our State, our society, employment, and even in the justice system. You get a lot of unrecognised problems in behaviour that are communicative in basis as well. So there is a big cost. If we do not bear the brunt of the cost now, while children are at school, we double, triple, or quadruple it for the future.

The Hon. CHRISTINE ROBERTSON: Do you know whether there is an issue of children copy catting in the language class process when a whole bunch of young persons with language difficulties are put together?

Ms BURKE: Are you talking about the online training for teachers?

The Hon. CHRISTINE ROBERTSON: No, I am talking about the language classes for the students.

Ms BRADY: I would have to say, no.

Dr MUNRO: I am sorry, I am not clear about your question.

CHAIR: Children copying each other's speech disorders?

Dr MUNRO: Communication disorders are not contagious. You are not going to get a student who is in a language class acquiring another language problem. It is a developmental impairment.

The Hon. CHRISTINE ROBERTSON: I realise it can go away.

Dr MUNRO: Ironically, it does not go away by itself.

The Hon. CHRISTINE ROBERTSON: I am not talking about the clinical issue. I am talking about young children learning to speak like other young children.

Dr MUNRO: Think of stuttering. You cannot really learn how to stutter: you either have it or you do not.

The Hon. CHRISTINE ROBERTSON: Stuttering is what you are speaking about?

Dr MUNRO: No. We are talking about speech and language.

The Hon. CHRISTINE ROBERTSON: In country New South Wales, and indeed right across Australia, professionals such as speech pathologists are very difficult to find. The health sector has great difficulty getting enough persons to cover its basic speech pathology/rehabilitation requirements. Waiting lists for children's services in country New South Wales are phenomenal.

Ms BRADY: They are.

The Hon. CHRISTINE ROBERTSON: Having worked for a time in the south of Queensland, I cannot imagine that it is any different there. I reiterate the Chair's question about where they are going to come from. We cannot get them to work in the country now.

Ms BRADY: I think the funding is the problem in health.

The Hon. CHRISTINE ROBERTSON: The physicians are there for health, let me assure you.

Ms BRADY: Our workforce studies have indicated that it is more about the funding.

CHAIR: There are unemployed speech pathologists, is that what you are saying?

Ms BRADY: The area of private speech pathologists is an area that is growing quite exponentially.

Ms BURKE: Also, if the speech pathologists were in the education system there would be much more of a support network—which is one of the reasons we lose people, because they do not feel that they have enough educational support or professional development long term. If we had a sustainable system that encouraged them, then we would probably get more people to stay.

Reverend the Hon. Dr GORDON MOYES: Do you get Medicare benefits?

Ms BRADY: Limited.

The Hon. TONY CATANZARITI: The lack of speech pathologists in New South Wales is nothing new. I remember that when my kids were growing up, 30-plus years ago, there was a shortage of them then. Why is it that we are still talking about it now? What is the problem? I know you referred to funding earlier. Are there enough people who are prepared to take up that particular career, or is there a problem with that as well?

Dr MUNRO: I think it is a growing career opportunity for a number of allied health professions. I work in the faculty of health sciences at Sydney University and our enrolments are increasing over the years. We have undergraduate training programs as well as Masters level education programs for speech pathology, and our demand is quite high.

The Hon. TONY CATANZARITI: I know that in country areas, in particular, there is an acute shortage of speech pathologists. I do not know how we can get them into country areas, but certainly there is a genuine need for speech pathologists in those areas. Earlier a Committee member asked how many speech pathologists there are, perhaps leading to asking: How many do we need in New South Wales. Could you take that on notice and come back to us with that information?

Ms BRADY: Sure. As I said before, the problem is underestimated, in terms of the number of children who have communication needs. As we employ speech pathologists and identify more children examined, it is like the chicken and the egg: the problem becomes bigger. I think that is why we are still talking about it 30 years later.

The Hon. TONY CATANZARITI: I am particularly concerned about this, because it is something that has needed to be addressed for years.

Ms BRADY: The other thing we have mentioned in our submission is about teacher training, both undergraduate and ongoing teacher training.

The Hon. TONY CATANZARITI: But it is more than just training a teacher; it is a specialised issue that needs to be addressed. It would be great to have the teachers trained to a certain level, but it is very important to have that specialist issue resolved. That is why I would be very keen to hear what sort of people are around and how many we need to train.

Dr MUNRO: Yes, we can take that on notice.

The Hon. SHAOQUETT MOSELMANE: I concur with and support the Committee members' questions. Does the private sector employ a speech pathologist in its schools?

Ms BURKE: Yes. The government sector employs speech pathologists in schools.

The Hon. SHAOQUETT MOSELMANE: Does the private sector employ them on a full-time basis?

Ms BURKE: No.

The Hon. SHAOQUETT MOSELMANE: How can it be replicated in the public sector?

Ms BRADY: It is more on a contract basis, which gives us our ad hoc, fragmented lack of coordinated service at the moment.

The Hon. SHAOQUETT MOSELMANE: Are they contracted for once a week?

Ms BRADY: Yes.

The Hon. SHAOQUETT MOSELMANE: For the entire school?

Ms BRADY: Different schools have different—

Ms BURKE: It depends on the contract. There are a number of private speech pathologists who go into government schools and private schools. They are individually contracted. They are private practitioners and they provide whatever service the school asks for. It could be that they go in and do team teaching with teachers, they could provide a program, or they could do direct client work. It depends what the school wants.

CHAIR: Does the school individually pay them?

Ms BURKE: Yes.

Dr MUNRO: It is a combination of both.

Ms BRADY: The parents as well.

The Hon. SHAOQUETT MOSELMANE: Four students out of 20 or 30 per class, it is not a small number. That is a significant number.

Dr MUNRO: It is a significant prevalence and it is not going to go away.

CHAIR: Thank you very much for your evidence. As to the information you have undertaken to provide, if you are able to provide that information easily would you do so within 14 days? The Committee staff will negotiate with you if that is an issue. We will be able to look at that information and interstate examples that you have mentioned. We may put further questions to you. Thank you for your presentation today. I learnt a great deal, as an individual member. I cannot speak on behalf of the other members.

Dr JOHN KAYE: I concur.

(The witnesses withdrew)

JOANNA LAURA SHULMAN, Director and Principal Solicitor, New South Wales Disability Discrimination Legal Centre, and

SHARON ELIZABETH YOUNG, Member of Management Committee, New South Wales Disability Discrimination Legal Centre, affirmed and examined:

ELIZABETH MEYER, Solicitor, New South Wales Disability Discrimination Legal Centre, sworn and examined:

CHAIR: Apart from your submission and your presentation today, which we greatly appreciate, you have an opportunity now to make some brief remarks before we proceed with questions.

Ms MEYER: First of all, we would like to thank the Committee for giving us an opportunity to give evidence at this parliamentary inquiry. We are a specialist disability discrimination community legal centre, which provides direct legal services to people with disability and their associates, delivers community legal education and undertakes policy work. Over the past year the Disability Discrimination Legal Centre [DDLC] has provided advice to over 100 clients on discrimination in the area of education, one of the highest areas of inquiry for our service. Despite the high number of inquiries to our centre, only 9 per cent of complaints made about disability discrimination to the Australian Human Rights Commission relate to education. This number was only 6 per cent at the State level. The reason for this is not because things are working but because students or their parents are hesitant to make a formal complaint.

Our experience is that the current disability discrimination complaint regime can be ineffective in the case of education complaints. This is due to a number of factors but in particular our clients express concern that making a formal complaint will only make their relationship with the school worse. In our experience many clients do not make a complaint until things have got so bad that they have no other choice, their child has reached the senior secondary level and they are concerned that discrimination will affect their tertiary chances or they have left the particular school and no longer fear being victimised for making a complaint. The cases we see often demonstrate serious allegations of discrimination. However, for too many students a solution is never found.

One inquiry our centre received was from the mother of a primary school student with vision impairment. The student's vision was rapidly decreasing. However, her school refused to provide equipment to assist her in learning Braille and was not willing to meet with the mother to discuss the changing needs of the daughter, arguing instead that they had already had one meeting that year. It was also clear that the teachers and principal did not appreciate the emotional impact that losing vision had on both the child and her family. On one occasion the child was yelled at by the principal who said to her, "Hasn't anyone ever told you it is rude to stare?" Despite many calls to our centre over a number of months, the mother always indicated that she felt things would get better soon and that she was nervous about what would happen if she made a complaint. To date she has still not made a complaint, despite there being no improvement in her child's situation at school. This child still faces significant barriers in accessing her education.

Foremost it is imperative that adequate funding is allocated to education providers for students with disability and special needs so that problems do not arise in the first place, as the existing legal framework for resolution is so often inadequate or underutilised. In addition to increased resources, it is also essential that education staff are adequately equipped to deal with students with disability and that they are educated around their legal obligations under the discrimination acts, the Disability Standards for Education and the Conventions on the Rights of Persons with Disabilities. In particular, we recommend that the Government investigate the implementation of a centralised equity services system where disability specialists experienced in working with children with a particular disability liaise with schools on behalf of students and their parents. We envisage that this will facilitate a more inclusive education system for children with disability and special needs. Having staff better aware of the individual needs of students with particular a disability will improve understanding of some of the barriers that students with disability face in education, including access issues and appropriate use of support mechanisms and adaptive technologies.

We also feel that this structure will reduce the incidence of discrimination in relation to students with behavioural disability. The DDLC is very concerned that the “Guidelines Issued Under part 5A of the Education Act 1990 Over Management of Health and Safety Risks Posed to Schools by Students with Violent Behaviour” may, if applied widely, be inconsistent with the Disability Discrimination Act, Education Standards and the

Convention. In our experience students with behavioural disabilities who exhibit violent behaviour are often placed in the too hard basket. They are either moved from school to school, often exacerbating their disability as they do not react well to change, or they are excluded from the school system, severely inhibiting their ability to socialise or learn. As such, we recommend that the Department review its standard suspension policies and institute training in alternative behavioural management policies.

We are also concerned that the definition of disability under the Education Act is not as broad as the definition of disability under the Disability Discrimination Act, and, as such, the Department may be at risk of breaching the DDA when implementing both the Education Act and the guidelines. As such, we recommend the Department review, in concert with the Government, the Act and the implementation of the Guidelines to ensure compliance with the DDA, the Education Standards and the Convention.

Of the hundreds of students that the Disability Discrimination Legal Centre has provided advice to over the years many have been let down by the system. All students, regardless of disability, have the right to an education. Not only does access to education afford academic opportunities but it also ensures that students with disabilities are given the tools to develop socially and emotionally, allowing them to fully participate in the community through employment and active citizenship.

CHAIR: You have made a couple of suggestions, which we will explore some more both in our questions and perhaps in our response. When you talk about the complaints in your submission in mainstream schools is there a particular issue that arises or is it just about lack of communication or lack of support?

Ms MEYER: Many of the complaints that we receive stem from a failure to consult with students or parents. A lot of the time there is a misunderstanding about the specific needs that a particular disability presents and there is often no capacity in the particular school or a particular region to identify and understand those particular disabilities.

CHAIR: Do you only deal with government schools or do you deal with the non-government sector as well?

Ms MEYER: We deal with both.

CHAIR: Is there a difference in terms of the issues or are they the same issues?

Ms MEYER: It tends to be the same issues across both types of schools.

Ms SHULMAN: I think there is a difference in response, though, between government and non-government schools. We seem to get a better response or a greater willingness to engage in discussion from the non-government schools rather than from the government schools.

CHAIR: You have talked about some concern about behavioural issues or suspensions, transferring students, that sort of thing. What are your concerns and is there a better way of dealing with those particular issues—suspensions, et cetera?

Ms SHULMAN: The problem we see is the application of the standard suspension policy for students with a disability means that students with behavioural disabilities can be suspended for—we have seen some cases where students are suspended for up to half to two-thirds of the year cumulatively. So this means that students are missing out on the opportunity to access education.

The Hon. SHAOQUETT MOSELMANE: That is a long time.

Ms SHULMAN: It is a long time, and the effect is not just on the student it is also on the entire family. We see parents being forced to quit jobs, not taking employment opportunities, et cetera, in order to be at home with the student. We believe that the application of the standard school suspension policy needs to be reviewed. In addition to that there have also been some amendments to the Education Act and some new guidelines passed that mean that there have been some significant changes in the last few months in relation to directions that can be given to students to attend different schools if it is felt that that school does not appropriately meet their need. We have not seen any cases around this yet, it is quite a new change, but we are concerned about the effect that that will have, particularly on students who live in rural and remote areas being forced to move schools where the nearest school might be a long way away. It would have quite a significant effect on the student and the family.

CHAIR: Do you have a view about the current behaviour school program, the behavioural schools rollout that occurred a few years ago? Do you think it is working effectively?

Ms SHULMAN: I have not looked directly at that program.

Reverend the Hon. Dr GORDON MOYES: On the same point, I asked the Family Advocacy group if in the opinion of the teacher a child with disabilities needed some discipline, and if we rule out all of the old kinds of discipline that were given—and I think it is absolutely disgraceful that some disabled children have been suspended cumulatively for such long periods of time—if you rule that out, have you any suggestions about what forms of discipline are still available to a teacher?

Ms MEYER: I guess one point to make from the beginning is that for a lot of the students who have disabilities that affect their behaviour, often if support is put in place before it gets to the point where they need to be suspended that is the way to solve the problem. We have a lot of students, for instance, who need a quiet place to be able to go when they are feeling stressed—those sorts of things. So in our experience in a lot of the cases that we have seen, if those sorts of measures are put in place beforehand then the need to suspend never actually comes about.

Ms YOUNG: I would just like to add that I do not think we are advocating that suspension be taken off as an appropriate option for schools but it does appear in cases of students with a disability who have behavioural issues it is often the first option. It should be the last.

Reverend the Hon. Dr GORDON MOYES: And it is disproportionate in the frequency and so on, and perhaps length?

Ms SHULMAN: I think the key point is that often for students with behavioural disabilities, when they behave badly it is because their needs are not being understood or, as Elizabeth said, the supports are not in place to ensure that they are able to access the curriculum. We have one case where as part of the education revolution there is a lot of building going on at the school and there are new facilities being constructed, and every time the building occurred our client, who is a student with autism, would get very upset and act badly. What was actually occurring was that the noise from the building was frustrating them. The result was that the student got suspended because she was behaving badly, but a more appropriate way to have dealt with that might have been to consult with the parent and the student around any changes in the classroom environment that might have occurred and ensure that accommodation could have been made so that the student was not upset or disrupted in any way by the building.

Dr JOHN KAYE: I want to take some degree of dispute with you over your suggestion, Ms Young, that suspension is being used as a first option in discipline. I do not know of any school ever anywhere that would do that, where the school education director would allow that to happen or a principal would seek to do that. I think that is possibly an exaggeration. There may be cases where you felt that there were other things that could have been done but I would ask you to review that statement that it is being used as a first discipline option.

Ms YOUNG: In my experience in dealing with complaints at the Human Rights Commission as part of the disability complaints team I certainly saw that in complaints.

The Hon. SHAOQUETT MOSELMANE: You were just providing the facts?

Ms YOUNG: Yes.

Dr JOHN KAYE: While we are talking about suspension, you talked about preventative measures. I think they are very sensible. Preventative measures are great but they do not always work and there does need to be a layer of things that happen. Would you accept that the situation does occur where the continued presence of a child in a school is no longer viable from a school discipline point of view, from a school safety point of view, from an occupational health and safety point of view of the other children?

Ms SHULMAN: I think we would accept that in some situations a school does not fit a student and that there are competing obligations for the department in relation to the safety and welfare of other students and teachers. We are not advocating for every student to be able to be at every school. I think the focus again, though, and the point we are trying to make is that if appropriate supports and measures and funding are put in place earlier rather than later a lot of the behavioural issues that you will be seeing may be avoided.

Dr JOHN KAYE: There is no doubt that you would reduce them, but there then needs to be a mechanism for dealing with children for whom those preventative measures do not work. What you do in education is a huge issue. Reverend Gordon Moyes referred to it earlier. It is a major challenge for teachers and principals to maintain order in a school with some of the children who continue to act up despite all the things that they have done. I am projecting my opinion here, but I think we need to have a conversation about what we do. I am not convinced that suspending kids is the right way to go. I refer you to page 23 of your submission where refer to schools for special purposes [SSP] as segregated schools. You say that CRPD and domestic law mandate a move towards inclusive education. Are you implying that the schools for special purposes are actually outside both international and domestic law?

Ms SHULMAN: Eventually they will be, yes. CRPD has two levels of obligation. One is the obligations that are immediately realisable and the other is obligations that are progressively realisable. For the most part education is accepted as a progressively realisable obligation and having inclusive education as part of the article in relation to education means that eventually states will need to ensure that all education is inclusive.

Dr JOHN KAYE: Does that include removing the exemptions for non-government schools in the various Acts?

Ms SHULMAN: Are you referring to the Discrimination Act?

Dr JOHN KAYE: Yes.

Ms SHULMAN: Those exemptions refer particularly to employment in religious schools, so I do not think they are relevant here.

CHAIR: Does the CRPD refer to Commonwealth rights?

Ms SHULMAN: It is an international convention that has been ratified by the Australian Government and all Australian governments must have regard to it.

Dr JOHN KAYE: What does CRPD refer to?

Ms SHULMAN: It is the Convention on the Rights of Persons with Disabilities.

The Hon. CHRISTINE ROBERTSON: Your submission contains many case studies. The Committee has undertaken an inquiry into bullying in schools. It might involve too much work, but I am interested in when the events occurred. It appears that some of them could have been dealt with using other policy processes.

Ms SHULMAN: What are you asking?

The Hon. CHRISTINE ROBERTSON: It is difficult to work out when the incidents occurred, during what era or under which school policies. It would be useful if we knew when they arose.

Ms MEYER: I believe all the case studies in the submission are open cases.

The Hon. CHRISTINE ROBERTSON: Can you check on that, because that makes a difference?

Ms MEYER: Yes.

The Hon. CHRISTINE ROBERTSON: Some of the policy issues should have been dealt with in other areas rather than in the discrimination of disadvantaged humans area.

Ms MEYER: In many of the case studies referred to in the submission the parents of the child would have pursued internal avenues and made internal complaints.

The Hon. CHRISTINE ROBERTSON: I understand that, but there are rigid internal complaints processes in the Department of Education and Training in relation to bullying. I am interested in why some of these cases came to you via the legal system. Can you check that they are all current cases?

Ms MEYER: Yes.

The Hon. SHAOQUETT MOSELMANE: I have a question arising from the suspension of several kids. Can you provide the Committee with statistics on suspensions of disabled children?

Ms SHULMAN: We cannot provide that information. We can provide you with the number of complaints that we receive that deal with suspensions, but we do not have access to the Department of Education and Training's statistics. You would need to request that from the department.

The Hon. SHAOQUETT MOSELMANE: Ms Young said she has had many cases of this type. I am curious about the statistics and how they compare with the statistics on the suspensions of other students.

Ms YOUNG: That was when I was a conciliator at the Human Rights Commission and I regularly dealt with education matters. I was speaking from that experience. It was a common complaint from parents that suspension had become an immediate option.

The Hon. SHAOQUETT MOSELMANE: From your experience is that endorsed by the department as the immediate step to take? Does the department get involved in these matters when schools decide to suspend several children, particularly for two-thirds of the year?

Ms YOUNG: At the Human Rights Commission I dealt with complaints when they had been lodged. It was at that end. Parents generally felt that they had exhausted every internal avenue with the Department of Education and Training. I am not in any way implying that it is condoned by the department. However, in my experience of five and a half years at the commission—which was only a couple of years ago—that was certainly a regular component of complaints.

The Hon. SHAOQUETT MOSELMANE: Were there any other complaints about the treatment or abuse of disabled children that you found offensive or unacceptable?

Ms YOUNG: Again, the complaint process gave me a good insight into what parents were experiencing. I have worked in the disabilities area for nearly 23 years and I have worked with people with extreme behaviour issues, so I am not coming from a touchy-feely small "l" liberal perspective. I approach this with experience in the area. My colleagues will be able to articulate this much better than I can, but victimisation and bullying were common threads in the complaints and suspension is an issue particularly with children with autism spectrum disorder who can be disturbed by change. Reasonable adjustments might not be provided or experts in that area might not be made available. Having people with specialist skills in the area of intellectual disability, vision impairments and so on to implement reasonable adjustments for the students are also an issue. They are the three common things I saw.

The Hon. TONY CATANZARITI: Do any defamation issues or cases arise?

Ms MEYER: What do you mean?

The Hon. TONY CATANZARITI: The documentation states that you are a defamation lawyer.

Ms MEYER: No, a discrimination lawyer.

The Hon. TONY CATANZARITI: I thought it said "defamation". Do you have any cases involving defamation?

Ms MEYER: Not necessarily defamation. We have certainly had cases where individual teachers have been accused of harassing students about their disability. One student's walk was mimicked by his teacher in front of a classroom of children. There are issues like that, but I cannot recall any defamation cases.

Ms SHULMAN: I do not think we have had any defamation case as such. However, education complaints often involve a relationship breakdown. There can be interactions that arise in defamation proceedings. Relationship breakdowns between schools and parents often happen because there is no open dialogue or space for them to talk about needs so things are left and the issue simmers and gets worse. We see cases where parents, teachers and principals are throwing chairs at each other. The situation can escalate to that point because the issues have not been addressed earlier.

CHAIR: That concludes today's hearing. You have taken some questions on notice and members may wish to ask further questions. The Committee would appreciate responses within 14 days. If that is not possible, arrangements can be made with the Committee staff. We appreciate your submission, your appearance and the advocacy work that you undertake.

(The witnesses withdrew)

(The Committee adjourned at 5.31 p.m.)