UNSW Sydney Special and Inclusive Research Group

We are a research group comprised of academics, research students, teachers, parents and people with disability. The following group members were the main authors of this submission:

Professor Therese Cumming, UNSW School of Education

Professor Iva Strnadová, UNSW School of Education

Dr Sue O'Neill, UNSW School of Education

Dr Sarah Mulholland, UNSW School of Education

Caroline Basckin, UNSW School of Education

Laurel Mimmo, The Sydney Children's Hospitals Network Clinical Governance Unit

Michelle Davies

As educators and providers of education and training, we welcome the opportunity to provide feedback on the Disability Education Standards 2005. Our submission is based on both research we (and other experts in the field) have conducted, as well as our personal experiences as educators in NSW, Australia. The submission will outline our experiences and recommendation in the following areas: **Participation, Supporting students, and Transition**.

Experiences and Recommendations: Participation, Supporting students, and Transition

Enrolment and access

Many families have revealed that they have felt the undercurrent of discrimination with respect to enrolment, however, this has been subversive. In one SIERG member's role as both a Learning and Support Teacher and an Assistant Principal Learning and Support, she has had many discussions with school senior executive where the notion of 'right setting' has been brought up. This 'right setting' is often used when discussing students with significant behaviour concerns, physical disability (particularly with hygiene needs), and significant learning disabilities. Some schools will also discuss student grades, behaviour, aptitude and/or 'fit' when discussing enrolment and will often deny student entry (if they are not the local public school) based on some relatively subjective comments. Additionally, some schools will have a conversation with parents at an enrolment meeting about the level of support their child will receive, in an effort to dissuade them from enrolling their child. They will often discuss a lack of funding or additional support staff as a reason for minimal support and may attempt to use the 'unjustifiable hardship' clause as a reason for denying enrolment.

Recommendation

Although the group acknowledges that a mainstream school might not be the most appropriate placement for every student for diverse reasons, clearer guidelines for schools about subversive discrimination and clearer guidelines on what constitutes an unjustifiable hardship for different types of education providers.

Participation

Many students with disability are not provided with the opportunities to participate in educational activities that are offered to their peers without disabilities. Some schools cancel excursions and camps for an entire year group rather than find ways to support the participation of students with disabilities. Many teachers do not know how to differentiate appropriately, and Universal Design for Learning and the multi-tiered system of support is

not being used in schools. This often leads to students with disabilities being over-represented in suspension data.

Additionally, students are often not provided with the support they need to succeed. This can be access to specialist school settings, access to specialist support in mainstream schools, and/or funding to support their needs. Often, a specialist setting is not an option, as there are no places available. Many educators and educational providers will use this lack of access to specialist services as a reason to block participation in learning activities. The phrase "on the same basis" is sometimes used to avoid differentiation and support. The justification appears to be that same = equal.

Recommendations

- A Professional learning (PL) course on the Disability Discrimination Act (DDA) and Disability Standards for Education (DSE) found on the Nationally Consistent Collection of Data (NCCD) website should be mandated for all teachers in all systems to gain knowledge about legislation around teaching students with disability. With this knowledge, teachers will better understand their responsibilities in teaching students with disabilities.

- Further unpacking of the term 'on the same basis'.

- Professional development in differentiation is needed. This should be related to the reasonable adjustments to assist students in accessing the curriculum, excursions etc.

- Develop a repository of resources for teachers: include NCCD, NESA, ACARA and other essential teacher documents/ policies (see IRIS Centre)

  https://iris.peabody.vanderbilt.edu/

- Greater access to funding and specialist settings for those that need it.

- Explore how to utilise the technology such as video conferencing to support students with disability. Some students with disability did well during remote learning, as they could get one-on-one or small group support.
- Recruit and train volunteers to assist students with disability in school to reduce the need for additional funding.

Supporting students

Differentiation is often done inconsistently across classrooms and often students do not receive work that supports skill and knowledge development. Often students with disabilities do not have their work adjusted to their Zone of Proximal Development and the justification for this is that teachers need to get through the syllabus.

Additionally, students with significant behaviour difficulties often do not have support in the acquisition and development of social and emotional/self-regulation skills. Again, this is often due to a lack of trained professionals (not all Learning and Support teachers are trained in special education) and lack of funding.

Recommendations

- Teachers are not familiar with the Response to Intervention model, and the evidence-based practices that underpin this model. Professional development and mentoring in this area are recommended.
- The NCCD should be clearly unpacked and made meaningful for teaching practice rather than just checklists. Inclusion criteria are not clear for teachers across schools (i.e. Should students with medical conditions such as asthma be included in the numbers?).
- Some students with disability require highly specialised placements, and funding is critical for these to operate.

- Professional development and universities should teach co-teaching models. Far too often, learning support teachers aid in classrooms rather than actively plan and deliver lessons with classroom teachers. Models such as Lattice task analysis (Morgan et al. 2014), and time to implement this model would be effective in raising student achievement.

- More collaboration between universities and schools in terms of teacher preparation, and university students providing voluntary services to schools to support students with disability.

- Every school should have a minimum of 1 trained learning and support teacher

Transitions

We have discovered through our research and experiences that life span transitions for students with disability are often unsupported. These transitions include: (a) from home to school, (b) from early childhood to primary settings, (c) from primary to secondary school, (d) in and out of hospital settings, (e) in and out of juvenile justice, (f) in and out of special school settings, and (g) from secondary school to post-school contexts. We have found that transition is often unaddressed until the last year of schooling, if at all. For example, in the U.S.A. transition planning is mandated to start when a student is 16 years old, although many states require transition planning at age 14 (IDEA, 2004).

Our research in NSW schools shows, that while some of the evidence-based transition practices are used, the students with disabilities have only a limited voice in planning for their future (Chandroo et al., 2018; Strnadová & Cumming, 2014). This is especially true of students with complex needs who are transitioning from alternate environments, such as juvenile justice (Cumming et al., 2018, O'Neill et al., 2017; Strnadová et al., 2017).

Students with disabilities are more likely to have additional and/or complex healthcare needs, and some may have commenced healthcare transition from paediatric to

adult healthcare services. This transition is particularly stressful and challenging, and coordination between paediatric and adult healthcare services in some areas can be fragmented.

Recommendations

Our suggestions for the improvement of transition planning and instruction for students with disabilities are grounded in two values: evidence-based practices, and person-centred planning and instruction. We believe that these are crucial for students with disability. Our recommendations are as follows:

- First and foremost, teachers and other support providers should ensure that they are engaging students in the most up-to-date evidence-based transition planning practices. Although an American document, Kohler et al.'s 2016 Taxonomy for Transition Programming provides a student-focussed, evidence-based approach to planning and programming transitions of students with disabilities. It can be accessed here: https://transitionta.org/sites/default/files/Tax_Trans_Prog_0.pdf

- Transition planning needs to start by Year 9; if the young person has NDIS funding, post-school transition support can be targeted in their plan, but this support may not be chosen by the young person or their family. That transition planning is not mandatory, and if provided, begins in Year 12, needs to be changed.

- Students and their families are the primary stakeholders and therefore should have a voice in any planning that involves them (Shogren et al., 2015). Encouraging students with disabilities to actively take part in developing and monitoring their Individual Educational Plan (IEP), which also includes transition planning, is essential. Students should be provided the training necessary to facilitate this participation, including the development of self-determination skills (such as choice-making, problem-solving,

- decision-making, self-advocacy, locus of control, etc.), which enhance transition outcomes for students with disabilities (Shogren et al., 2015).

- Transition assessment is essential to determine a student's strengths and areas of needed support, his/ her preferences, and interests (IRIS Center, 2016; Mazzotti et al., 2009). This will allow for targeted transition planning, and it is the essential first step in transition planning for educators in order to develop measurable post-school goals.

- When it comes to supporting students in relation to post-school education and training, vocational education as well as provision of information about possible post-school options are the very minimum that can be done. Providing information about post-school opportunities and options is important, but not sufficient in itself.

- As students with disabilities often have support needs in many areas, services should be coordinated via a multi-systemic or wraparound framework to reduce gaps in service provision or duplication of services (Cumming et al., 2019).

- Institutes of higher education and other educational entities should be and are held accountable to providing training and development to pre- and in-service education for teachers that is firmly grounded in evidence-based practices.

- Particular effort should be made to identify those students who would require healthcare transition support as well and ensure active partnerships with the student and their family to maximise the student's capacity and capability for self-management and agency when navigating the adult health sector.

Specific Experiences

Suspensions – Members' revealed that students with disability, particularly those who have externalised behaviours associated with their disability, are overrepresented in suspension data. These students are often suspended for behaviours that are due executive functioning, social skills deficits, and/or sensory needs. As per the DSE, the behaviour must be considered

as part of the disability, but this is not happening in most schools. Additionally, students with disabilities often receive multiple suspensions for similar issues at a far greater rate than their aged-peers. Students with disabilities are not receiving the support they need (explicit teaching of behaviour/social skills and provisions to support their sensory needs). Often schools will cite a lack of funding/staff to be able to provide this support. Additionally, high schools are often too concerned with curriculum content and forget about other skills that need to be taught.

Support – Schools have limited knowledge and limited use of the response to intervention model and/or universal design for learning. This has a significant impact of students with disabilities. Some students are pushed to life skills courses (which has a significant impact on senior and post school options) as this is seen as the "easier" option for teachers than adjusting or accommodating for students. Sometimes schools do not have any universal (tier 1) strategies in place and move straight to tier 3 intensive supports, which can involve restrictive practices such as playground withdrawals and/or partial day exemptions where students are sent home.

Curriculum - Many schools/teachers feel that the mainstream curriculum is too full to support the repetition and slow pace some children with disabilities need to learn important skills and content knowledge, particularly with respect to students with intellectual disabilities. This is particularly important in instances when the skill and content is vital for growing up - e.g. sexual health education. Students often need a lot repetition and many opportunities to practices skills and learn new concepts and the full syllabuses do not allow for this. Additionally, schools often do not have the training and/or resources to provide small group instruction in highly specialised areas. There is limited professional learning in areas like sexual health education for students with disabilities and therefore they do not get the education they need/deserve.

Sexuality Education - School personnel often have limited knowledge of how to provide students with disabilities sexuality and sexual identity education, especially in cases of those with intellectual disabilities and autism. Indeed, research (Schaafsma et al., 2015) shows that students with intellectual disabilities and autism receive less quality education than their peers without disability. As a result, they have limited knowledge about their rights, what appropriate behaviour in dating and relationships looks like, and what is the difference between private and public, etc. This unfortunately leads to their limited capacity to recognise when they are being abused or are a target of violence and exploitation, or indeed if they are committing it themselves. This is well documented in research, for example, there is a 10x higher incidence of sexual abuse of children with intellectual disabilities compared to children without disability (Wissink et al., 2015); with some authors citing prevalence of sexual abuse in population of children with this disability as high as 32% - 52% (Akbas et al., 2009; Birggs, 2006).

Furthermore, more education and training is needed for teachers and all relevant stakeholders, as very often students with disabilities (especially intellectual disabilities and autism) are not trusted when they report incidents of violence, abuse, neglect or exploitation. Another issue is that students with disabilities, especially those with intellectual disabilities and autism, are not used to having their voices heard at school. If Individualised Learning Plans are developed for them, they rarely take part on this process (e.g., Wagner at al., 2012), and if they do, they are rarely active participants (Chandroo et al., 2018). If these students know that they do not have a say in their education and their life in school and beyond, how they can expect being heard in cases of violence, abuse, neglect or exploitation? The experiences of different stakeholders (i.e., students with intellectual disabilities, their parents and teachers) can be found on the Disability and Me blog (Strnadová & Loblinzk, 2020). See: https://disabilityandmeonline.com/?p=366

COVID 19

The following is an account of the effects of the COVID 19 situation on students, families, and staff at an NSW SSP:

The school year under COVID 19 circumstances has been extremely difficult and for most, has been a confronting experience. COVID 19 was unexpected and the limitations and restrictions were equally unexpected, disseminating normality and creating a new sea of normal where ' sink or swim' was the motto for many. Leaders across the school were feeling frustrated with the lack of clear direction that was given from outside the school and the constant change of direction we then had to make as a school was never-ending. It made leading and managing a school and a team very difficult, as we tried to guide and lead, only to be given a different direction the next day.

Staff were stressed with mixed messages of how the new world of online learning would exist and the lack of preparation they had made for it. Technological literacy proved to be a major obstacle, especially for the older generation of teachers who did not grow up with computers. Teachers felt stressed with the amount of professional learning that needed to take place and the pace at which it was delivered, in order to survive this new world of teaching. School Learning Support Officers (SLSOs) were strongly impacted when their Pre-COVID day resembled nothing close to having students at school.

As there was no one way to provide online learning for our families, it was confusing at times, as every school was different and this added more stress to the matter, especially when our students' siblings attended mainstream schools. Access (or lack thereof) to technology had a major impact on connecting with families and on teaching and learning.

Usually there were not enough devices in the home, limited access to the internet was limited and students with disabilities were typically the last in the home to access the computer or iPad, as these has to be shared.

Teachers expressed that they felt like sacrificial lambs, as they were ordered back to work by the government. While the rest of the state was going into lockdown, the health of teachers and their families was ignored. Mixed messages of solidarity were being filtered down from officials and rather than being thanked and appreciated, teachers were being further demoralised and demonised. While government officials got a pay raise, teachers were told they were losing their pay raise and because they were not essential workers, even shopping for their own families was difficult. Our professionalism, adaptability and selflessness as a profession was not adequately recognised or valued by those that it needed to be valued by.

During the COVID period, as the school was required to develop action plans and protocols to keep all staff and students safe, we also developed strategies to ensure students could continually work towards their own personalised learning and support plan goals, engage in teaching and learning experiences to meet the current key learning areas and maintain a routine that our students needed to work and live effectively and purposefully. The three sections of the school (Junior, Middle, High) worked collaboratively to create resources and learning experiences that would meet the needs of each student and be able to be used effectively in the home environment. A limited number of classes completed lessons on zoom each day, and teachers replicated the classroom setting to the best of their ability. The remainder of classes completed packs of laminated workbooks and resources that were tailored to their individual personalised learning and support plan goals. The students were engaged in different activities daily, however due to a long period of absence some students' personalised learning and support plan goals were not met; to accommodate for this, parent

teacher interviews were conducted via zoom and the goals were adjusted. As a school, we worked collaboratively and maintained open communication throughout the COVID period; this was imperative to ensure all staff and students were safe and could engage in learning daily.

From the school administration's perspective, the impact of COVID meant that we no longer greet parents face to face, has resulted in a large reduction in personal side of these relationships. We have been using emails and keeping paper copies of things to a minimum to help stop the spread. With the securing of the site, we are spending a minimum of 30 to 40 minutes a day opening and shutting gates for students who arrive late or leave early and to receive deliveries. We have to be vigilant that any external visitors coming onsite (through the admin door) complete a COVID form. When the lockdown occurred in April/May it was difficult to work from home, as most files are held on the school's server and attempting to do nearly 5 hours a day of online training is difficult. The current bombardment of online courses and meetings is no longer a novelty, although probably not beneficial.

Recommendation

We recommend that any revision of the Standards include the rights of students with disability during an emergency situation such as the current pandemic, and some targeted advice for schools and teachers to follow regarding their responsibilities to students with disability during such times.

References

Akbas, S., Turla, A., Karabekiroglu, K., Pazvantoglu, O., Keskin, T., & Boke, O. (2009).
Characteristics of sexual abuse in a sample of Turkish children with and without mental
retardation, referred for legal appraisal of the psychological repercussions. *Sexuality
and Disability, 27*, 205–213.

Briggs, F. (2006). Safety issues in the lives of children with learning disabilities. *Social
Policy Journal of New Zealand, 29*, 43–59.

Chandroo, R. C., Strnadová, I., & Cumming, T. (2018). A systematic review of the
involvement of students with autism spectrum disorder in the transition planning
process: Need for voice and empowerment. *Research in Developmental Disabilities,
83,* 8-17. https://doi.org/10.1016/j.ridd.2018.07.011

Cumming, T. M., Strnadová, I., & Lonergan, R. (2019). *A wraparound approach to 'whole of
student' issues: Education, health, and community services review of literature.* Project
Report. UNSW Sydney.

Cumming, T., Strnadová, I., & O'Neill, S. (2018). Transition planning processes for young
people serving custodial sentences in New South Wales, Australia. *Australasian
Journal of Special Education*, 10.1017/jsi.2018.1

The IRIS Center. (2007, Rev. 2016). *School counselors: Facilitating transitions for students
with disabilities from high school to post-school settings*. Retrieved
from https://iris.peabody.vanderbilt.edu/module/cou2/

Kohler, P. D., Gothberg, J. E., Fowler, C., and Coyle, J. (2016). *Taxonomy for transition
programming 2.0: A model for planning, organizing, and evaluating transition
education, services, and programs*. Western Michigan University. Available at
www.transitionta.org

O'Neill, S. C., Strnadová, I., & Cumming, T. M. (2017). Systems barriers to community re-entry for incarcerated youths: A review. *Children and Youth Services Review*. https://doi.org. 10.1016/j.childyouth.2017.05.025

Mazzotti, V. L., Rowe, D. A., Kelley, K. R., Test, D. W., Fohler, C. H., Kohler, P. D., & Kortering, L. J. (2009). Linking transition assessment and postsecondary goals: Key elements in transition planning process. *TEACHING Exceptional Children*, 44-51.

Morgen, J. J., Beyers Brown, N., Hsiao, Y-J, Howerter, C., Juniel, P., Sedano, L., Lappin Castillo, W. (2014). Unwrapping academic standards to increase the achievement of students with disabilities. *Intervention in School and Clinic, 49*(3), 131-141. https://doi.org/10.1177/1053451213496156

Schaafsma, D., Kok, G., Stoffelen, J. M. T., & Curfs, L. M. G. (2015). Identifying effective methods for teaching sex education to individuals with intellectual disabilities: A systematic review. *The Journal of Sex Research, 52*(4), 412-432. doi: 10.1080/00224499.2014.919373

Shogren, K. A., Wehmeyer, M. L., Palmer, S. B., Rifenbark, G., & Little, T. (2015). Relationships between self-determination and postschool outcomes for youth with disabilities. *The Journal of Special Education, 48*, 256–267.

Strnadová, I. & Cumming, T.M. (2014). Importance of quality transition process for students with disabilities across settings: Learning from the current situation in New South Wales. *Australian Journal of Education, 58*(3), 318-336.

Strnadová, I., Cumming, T., & O'Neill, S. (2017). Young people transitioning from juvenile justice to the community: Transition planning and interagency collaboration. *Current Issues in Criminal Justice 29*(1), 19-38.

Strnadová, I., & Loblinzk, J. (2020). *Disability and Me blog*. Retrieved from: https://disabilityandmeonline.com

Wagner, M., Newman, L., Cameto, R., Javitz, H., & Valdes, K. (2012). A national picture of

parent and youth participation in IEP and transition planning meetings. *Journal of*

Disability Policy Studies, 23(3), 140-155.

Wissink, I. B., an Vugt, E., Moonen, X., Stams, G. J. J. M., & Hendriks, J. (2015). Sexual

abuse involving children with an intellectual disability (ID): A narrative review.

Research in Developmental Disabilities 36, 20-35.