How deep does it go?

Australian students with disability and their experience of entrenched inequity in education

CYDA School Education Survey 2022

Dr. Catherine Smith, Professor Helen Dickinson, Dr. Sophie Yates and Dr. Anne Faulkner

May 2023

Suggested citation

Smith, C., Dickinson, H., Yates, S., Faulkner, A. (2023) How deep does it go? Australian students with disability and their experience of entrenched inequity in education CYDA School Education Survey 2022, Report prepared for Children and Young People with Disability Australia (CYDA), Melbourne.

ISBN: 978-0-6489169-5-6

Acknowledgements

Children and Young People with Disability Australia and Dr. Catherine Smith, Professor Helen Dickinson, Dr Sophie Yates and Dr Anne Faulkner would like to acknowledge the traditional custodians of the lands on which this report has been written, reviewed and produced, whose cultures and customs have nurtured and continue to nurture this land since the Dreamtime. We pay our respects to their Elders past, present and future. This is, was, and always will be Aboriginal land.

Executive summary

Background

Research evidence consistently demonstrates that children and young people with disability fare less well than their peers in education.

School aged students with disability are segregated, suspended, and expelled at higher rates. Over the last fifteen years, the highest level of educational attainment for people with disability has improved, but this level still remains lower than children and young people without disability. These inequities can have lifelong implications.

About this survey

Children and Young People with Disability Australia (CYDA) has been gathering feedback on educational experiences from its members via formal surveys since 2010. This survey repeats that conducted in 2019 to explore whether similar trends are found and what progress has been made.

Survey questions were about the types of services and supports accessed, perceptions of resources available and training of professionals, and whether children have experienced exclusion, seclusion or bullying. Responses were collected from May–August 2022, with respondents from all states and territories (with the majority from New South Wales, Victoria and Queensland). CYDA partnered with researchers from the Public Service Research Group, UNSW Canberra and Melbourne Graduate School of Education, University of Melbourne to analyse the data and prepare this report.

Results

The positive news in this survey is that families and caregivers in the main broadly agree that they are made to feel welcome in schools (61% of respondents). However, just 28% of respondents feel that teachers and support staff have the necessary education and training to provide a supportive and enriching education environment for students with disability.

The survey also finds that around one fifth of families have been asked to limit the hours their child attends school for. 15% of respondents had experienced a child being refused enrolment in education and some found that enrolment was only accepted after significant parental advocacy. 29% of respondents had experienced their child being excluded from events, excursions or activities in school. A further 50% of respondents reported that their child has experienced bullying within school that may be physical or psychological nature. 25% of respondents reported that their child has experienced restrictive practices in an education setting.

Although 72% of students were reported to have an Individual Education Plan (IEP) in place, these were largely seen as being lacking and either did not accurately capture their child’s needs or were not being implemented sufficiently. While 83% of respondents had NDIS plans in place for their children, just 16% indicated that they were able to use these funds in supporting their child to engage with education.

34% of families and caregivers had paid for supports at school for their child.

More than half of respondents had made a complaint about their student’s school or education experience, while a further 15% has needed to make a complaint but had not proceeded with this. Often those who had not complained had done so as they were concerned about the potential repercussions of such an action. Most reports were in relation to student support services and bullying, harassment or victimisation. Just 18% of those who had complained felt satisfied with the outcome of the process.

From free text comments there is a strong theme that families have to undertake significant advocacy work in order to achieve good or event satisfactory outcomes in the education of students with disability.

Some respondents reported distressing school experiences that has left their child traumatised, self-harming, speaking about suicidal ideation or attempting suicide.

Such findings speak to the need to support students with disability much more comprehensively to avoid doing harm that will affect them throughout their lives.

In comparison to the previous survey in 2019 it appears that the broad trends are largely similar and there are few areas of significant change for children with disability in their experience through the education system.

In some senses this may be seen as a positive, particularly given that we saw the emergence of COVID-19 between these two surveys.

But this also suggest that we are not seeing substantial improvements to the educational experiences of children and young people with disability and instead somewhat of a stagnation of these inequities.

Limitations

Given that the survey is anonymous we cannot make direct comparisons between the numbers reported in the 2019 survey and those received in 2022 as the individuals who responded to these surveys may not be the same.

Although responses were received from each state and territory, 73% of survey responses were received from Victoria, Queensland and New South Wales, meaning that findings may not be reflective of experiences across all of the country. There may also be an overrepresentation of neurodiverse students in the survey responses, perhaps reflective of the large number of students with NDIS plans who are the subject of responses and the numbers of children and young people with autism within the scheme.

Introduction

Research evidence consistently demonstrates that children and young people with disability fare less well than their peers in education.

Students with disability are segregated, suspended, and expelled at higher rates. Over the last fifteen years, the highest level of educational attainment for people with disability has improved, but this level still remains lower than children and young people without disability (1). These inequities can have lifelong implications. Research shows that people with disability are more likely to experience poverty, are less likely to be in work, and more likely to be socially isolated (2, 3, 4).

Children and Young People with Disability Australia (CYDA) is the national representative organisation for children and young people (aged 0–25) with disability. CYDA is a not-for profit community organisation that provides a link from the direct experiences of children and young people with disability and their families to federal government and other key stakeholders. CYDA has been gathering feedback on educational experiences from its members via formal surveys since 2010 (5).

CYDA’s online National Education Survey began in 2015 to deepen this understanding of the kinds of issues children and young people face in education systems. These surveys have consistently found that students with disability are excluded in their education. This document reports on the findings from the 2022 survey as well as comparing the broad trends with the 2019 education survey.

While there are some encouraging findings regarding how welcoming schools are for both students and families, the findings are more equivocal regarding the quality of educational support students receive. There are also some concerning findings regarding exclusion, suspensions, bullying, and the handling of complaints. Families often report the development and implementation of Individual Education Plans to be far from satisfactory, regarding factors such as timeliness, adequacy of supports, and family involvement. Teachers often lack the skills and training to work effectively with children and young people with disability to ensure they experience inclusive education. While we must be cautious in comparing these results with previous CYDA education surveys (as the respondent sample is not the same across years), the findings on many aspects of students’ educational experiences have not meaningfully changed in recent years.

This indicates that outcomes may not be moving in the desired direction across areas such as bullying, inclusion and educational support – pointing to a stagnation in improvements for students with disability in Australia. Moreover, there appears to be a lack of a clear strategy to significantly move inclusive education substantially.

Background and approach

Australia was one of the first signatories to the United National Convention on the Rights of People with Disabilities in 2006, which obliges the provision of accommodations and support to access the general educational system ‘on an equal basis with others in the communities in which they live’.

Federally the Disability Discrimination Act 1992, the Education Act 1989 and the Disabilities Standards for Education 2005 (Reviewed 2015) have followed broader trends in many advanced economies moving policy towards a more inclusive, less segregated approach to the full involvement of students with diagnosed intellectual, physical, sensory or learning disabilities into mainstream classes.

There is a strong evidence base to suggest that inclusive education is beneficial not only for children and young people with disability, but all students (6). Inclusive education is guided by an understanding about reasonable adjustments, which stipulates that a teacher or school make adjustments that enable a student with disability to participate in the classroom and demonstrate their learning while not placing an unnecessary burden on the student, their peers or their teacher.

Despite the various commitments to inclusive education, a range of reviews and reports (e.g. 7, 8, 9, 10, 11) note that children and young people with disability in all schools still experience inequities. Most recently this has been vividly demonstrated through accounts heard by the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability.

Outside of issues relating to academic attainment we see children and young people face challenges such as teacher preparedness to deal with students with disability (12, 13), a high likelihood of being bullied (14, 15, 16), and experiences of exclusion and rejection (17). This is a problematic situation given that the research evidence demonstrates that students with disability who attend education in inclusive mainstream settings demonstrate positive gains in social competence, friendships, aspirations for livelihoods and independence in adulthood, some gains in access to broad curriculum, and more access to academic skills (18). Inequities in education can have lifelong implications. Research shows that people with disability are more likely to experience poverty, are less likely to be in work, and more likely to be socially isolated (2, 3, 4).

Funding for supporting students in Australian schools requires detailed diagnoses and evidence. The Nationally Consistent Collection of Data of School Students (NCCD) with a Disability is a joint initiative of federal, state and territory government and non-government school authorities. Funding is determined and allocated as a ‘Commonwealth student with a disability loading’ based on the NCCD and schools have specific document requirements they must meet with in order to accord with the criteria. Funding is then allocated based on needs they have provided the evidence for and schools have discretion to use this funding to meet the needs of their students, adjusted every 12 months in accordance with their current data.

This can be used for many different supports such as specialised technology or other equipment, building modifications or other identified approaches to modifying teaching and learning to meet the students’ differentiated needs for access to the curriculum. The list of the adjustments the NCCD identifies as suitable are as follows:

* planning
* teaching and learning
* curriculum
* assessment
* reporting
* extracurricular activities
* environment and infrastructure

In addition to school-level support, funding from the National Disability Insurance Scheme (NDIS) is provided at an individual level and can also provide ‘reasonable and necessary supports’ that enable students with disability to go to school. This individualised funding might include things such as: support for daily living activities at school like eating or getting around; necessary equipment or technology; and, support for transitions between schooling levels and into post-school options. Most state and territory departments also provide curriculum support materials to assist students with disability.

This research is part of CYDA’s ongoing commitment to understanding the experience of students with disability in Australia. This survey focuses on school-aged children and a separate report (19) provides insights into the experiences of younger children in early childhood education and care. A further report (20) sets out the findings of a survey with young people with disability reporting their experiences.

The survey that this family and caregivers research is based on was designed to be as consistent as possible with surveys conducted in previous years, to allow for broad trend comparison over time.

It asks a range of questions relating to the demographic circumstances of students, the types of services and supports accessed, perceptions of resources available and training of professionals, whether children have experienced exclusion, seclusion or bullying, and experiences with making complaints. The survey was launched on 9 May 2022 and stayed open until 1 August 2022, with the majority of responses received during May.

CYDA sought the assistance of researchers from the Public Service Research Group, UNSW Canberra and Melbourne Graduate School of Education, University of Melbourne to analyse data and prepare this report.

While the survey received 380 individual responses, figures in tables may not always add up to 380, because some respondents skipped some questions, and for some questions respondents were able to select multiple answers. We report quantitative findings in relation to raw numbers of participants who responded to each question, with percentages where appropriate (expressed as a percentage of responses rather than total participants). Due to rounding, percentages may not always add up to 100. For most questions, qualitative data provided in text boxes helped to explain reasons for particular responses or provided additional relevant experiences and insights.

To demonstrate the spread of responses from different respondents we have given each respondent a participant ID, included at the start of each quote.

Access to education is a fundamental human right protected under the Convention of the Rights of People with Disability, which Australia is in contravention of if it is unable to ensure an inclusive education system at all levels.

Findings

In this section we set out an overview of the responses to the 2022 survey. In total, 380 responses were received to this survey. We set the responses out according to the following themes: demographics of respondents; whether schools are welcoming and supportive; exclusion, suspensions and bullying; learning support and learning materials; and making complaints. Where appropriate, we contextualise the quantitative data with comments from free text boxes.

However, it is important to note that these boxes were not required for survey completion and so the comments may not reflect the full range of respondents’ experiences.

Demographics of survey responses

Given that there is a separate survey that is targeted directly at young people with disability, it is unsurprising that 98% of these responses (372) came from family members of caregivers of children and young people with disability. Male students are overrepresented in the sample with 64% of the sample (Table 1).

Table 1: What is the gender identity of the child or young person?

Gender category No. %

Male 241 64

Female 129 34

Prefer not to say 4 1

Non-binary 3 0

Other 2 0

Total 379 100

Of the survey sample, just 7% (25) come from a non-English speaking background. This means that the findings underrepresent those from culturally and linguistically diverse backgrounds. Similarly, 4% of responses are from an Aboriginal or Torres Strait Islander background (Table 2).

Table 2: Is the child or young person from an Aboriginal or Torres Strait Islander background?

Responses were received from all states and territories, although Victoria, New South Wales and Queensland are the most represented jurisdictions in the sample (Table 3). As Table 4 shows, responses are primarily from those living in metropolitan areas, although 30% are also from regional areas. Rural and remote areas are underrepresented in the sample.

Table 3: What state or territory do you live in?

No. %

VIC 104 27

NSW 91 24

QLD 83 22

WA 30 8

SA 29 8

TAS 24 6

ACT 14 4

NT 4 1

Total 379 100

Table 4: What type of area do you live in?

No. %

Aboriginal 17 4

Torres Strait Islander 1 0

Aboriginal and Torres Strait Islander 0 0

Not Aboriginal or Torres Strait Islander 360 95

Total 378 100

The age of students ranged from 4 to 25, with those between 7 and 12 being the most represented in the sample (Table 5).

Table 5: What is the current age of the student?

No. %

4–6 years 39 10

7–9 years 104 27

10–12 years 96 25

13–15 years 83 22

16–18 years 49 13

19–25 years 8 2

Total 379 100

The majority attended government schools (68%), with another 23% attending non-government schools (Table 6). Most were enrolled in mainstream schools 77% (310), with 12% (47) attending special schools and 3% (11) in dual enrolment (Table 7).

The questions that inform Table 6 and 7 are worded in a way to capture the fact that students may have attended multiple schools over the past 12-month period. Of those in mainstream school, 89% (279) were in regular classes, 15% (47) in special units and 19% (58) in other arrangements (for example, distance learning or individual one to one arrangements). Of respondents, 80% (305) attended school full time and 19% (72) did not.

Table 6: What type of school does/did the student attend?

No. %

Government 270 68%

Non-government (e.g. Faith-based, private school) 93 23%

Home schooling or distance education 17 4%

Does not attend school 6 2%

Other 13 3%

Total 399 100

Table 7: What type of school is/was the student enrolled in?

No. %

Mainstream school 310 79

Special school 47 12

Dual enrolment 11 3

Other/Comments 26 7

Total 394 100

Are schools welcoming and supportive?

The survey asked whether students receive or received adequate support in their education. With respect to this statement, 38% either strongly agreed (47) or agreed (98) with this statement, 13% neither agreed nor disagreed (48) and 49% strongly disagreed (76) or disagreed (108) with this statement. As one respondent shows, mainstream education can work very well for students with disability when appropriate support is provided:

87: We have had an extremely positive experience with the local public system. My son has been in a mainstream class since preschool, he is now in year 12. The schools have been very supportive with the majority of staff and students embracing my son as just another member of the school community albeit with extremely high needs.

Another family member commented on the difference between two local mainstream schools their son had attended:

97: The experience [at the original local primary school] was highly stressful for all concerned and I can’t believe the lack of understanding and support. I thought my son may never attend school again he was that traumatised. Fortunately we managed to find another smaller public school which has been wonderful and the complete opposite and my son now likes going. It can be done and it can be done so well if the principal decides to go the extra mile.

Regarding how welcome respondents and students and families and caregivers are made to feel in schools, the responses are largely positive. 61% strongly agreed (108) or agreed (133) with the statement that the student is made to feel welcome in the school, 16% neither agreed nor disagreed (62) and 20% strongly disagreed (41) or disagreed (42) with this statement (Figure 2).

For families and caregivers 62% strongly agree (89) or agree (142), 18% neither agreed nor disagreed (59) and 22% strongly disagreed (32) or disagreed (37) with the statement that they were made to feel welcome at the school.

Despite largely feeling to be made welcome, there were less positive responses about whether teachers and support staff have the education and training required to provide a supportive and enriching education environment for the student. In relation to this statement just 28% strongly agreed (42) or agreed (65), 19% (72) neither agreed nor disagreed and 53% either strongly disagreed (106) or disagreed (94) (Figure 3). This was also the most common issue in free text comments from family members. Over 50 respondents reported that teachers and other staff lacked appropriate knowledge of disability in general or the students’ specific disabilities or lacked the training and opportunities necessary to implement inclusive education: as one respondent pointed out, having training and having the support to implement it are two different things.

20: Typically, staff – even those trained in “special ed” – have no idea what they’re looking at. They have no concept – often haven’t even heard of – function behaviour, different forms of processing information and learning, or different types of communication. Therefore, we have had a catastrophic string of failures that have traumatised all concerned, not least my children.

155: Support staff had no disability training, teacher training was generic and not reflective of current inclusion standards/ ideals. There appeared to be no inclusion training. No training for individual assistive technology or tools to access education.

The survey did not ask respondents to identify the types of disabilities that children and young people mentioned in responses experience, as is standard with CYDA’s approach. However, in a number of places respondents did mention specific disability diagnoses. Of these, the disabilities commented on most often were autism and ADHD, perhaps reflecting an increase in recent diagnoses:

177: I believe more teachers would benefit from training on autism spectrum disorder. I would love to see teachers work more closely with parents of children with ASD to understand the child more and to learn more about their strengths and challenges.

335: Schools and teachers do not have a modern understanding of neurodiversity and ASD.

141: Excellent classroom teacher but significant issues with school and other staff approach to a child with severe ADHD.

As in the comment above, respondents often reported that particular staff were well trained or performed well but that this was not consistent across the school.

Figure 3: The teachers and support staff have the training required to provide a supportive and enriching education environment for the student

The survey asked whether there is regular communication with family members or caregivers about the student’s learning progress. Of the responses received, 39% either strongly agreed (46) or agreed (100) with this statement, 14% (53) neither agreed nor disagreed and 47% either strongly disagreed (70) or disagreed (108) (Figure 4).

Indeed, lack of communication was such an issue for one respondent that they commented on how difficult it was to answer some of the survey questions:

153: I disagreed with most of these [questions] as the communication is so bad I don’t know the answers. I was told to “leave it all up to them” when our [Occupational Therapist] stated the school didn’t think writing was an achievable goal, I wrote a letter to ask how else they intend to support her expression and got no answer. Story after story.

Another commented that the communication focused too much on behaviour and not enough on academic achievement:

331: Too much focus in communication with home is about the child’s behaviour. Child is non-verbal so can’t tell parents what they do at school or how they are progressing in their learning. Greater information about academic progress (not compared to classmates as on [Individual Education Plan]) would be appreciated.

Figure 4: There is/was regular communication with the family/caregivers about the student’s learning progress

The quote on the previous page [331] may be reflective of a broader issue around expectations of students with disability.

When asked whether teachers and support staff have high expectations of the student and their learning, 45% strongly agreed (61) or agreed (109) with this statement, 25% (94) neither agreed nor disagreed and 30% either strongly disagreed (39) or disagreed (74) with this statement (Figure 5). Respondents often felt the students could achieve much more

if expected and supported to do so. While some respondents commented about harmfully low expectations (using words such as ‘infantilising’, ‘babysitting’, and ‘deficit led’), another explained the important balance required in setting realistic expectations:

171: I think the expectations of my son are proportionate to his ability to learn and apply learning. I think he’s pushed to achieve, but his teacher is realistic about not setting expectations too high.

Another respondent commented on how the school had worked with families to support their vision for the student’s transition to work:

38: They have certainly shown respect and support to enable the ordinary vision for an inclusive and contributing life. Our plan for a long and ‘high expectations’ transition to work has especially been supported.

Exclusion, suspensions and bullying

Respondents were asked about expulsion, suspension, and restricted hours. Regarding expulsion, 4% of respondents (13) reported that the student had been expelled from school in the last year and 96% (332) said the student had not. 11% indicated that the student had been suspended in the last year. Some respondents commented that this had occurred on multiple occasions, which they often perceived as an unfair or discriminatory response to disability-related behaviours.

20: Constantly [suspended]. Teachers don’t even seem to understand the purpose of “suspension” – that is, to give them time to implement better supports. It’s typically touted as a punishment for the child (or parent) or as “down time” for the teachers to “have a break from” the child.

253: Multiple times since reception. All for behaviour related to his disability.

Several respondents explained that they had been able to successfully appeal suspensions, get the school to apologise, or prevent future suspensions, but it is worth noting that not all families are in a position to advocate for students in this way.

A further 19% had experienced the hours that they attend school being limited. This was sometimes by agreement with families, but respondents more often described unwelcome restrictions on school hours, or frequent requests to pick students up early. This was sometimes a result of student behaviours, and sometimes a lack of available support at the school:

86: My son was only allowed to go to school for two hours a day. We asked if he could stay for morning tea with the other students but they said he could not.

130: …the student is unable to attend full days at school as he needs assistance with toileting, and the school is unable (or possibly unwilling) to provide the type of assistance he needs, so we take him home at lunchtime every day.

377: I have been asked to collect my son early from school regularly. It became so difficult that I made the decision to just collect at 12 to avoid issues. In the end my son was exempted entirely.

Respondents were asked whether the student had ever been refused enrolment in education. Of those who responded to this question, 15% (53) had been refused enrolment and 85% (294) had not. In free text, some respondents explained that enrolment had only been accepted after parental advocacy, for example making a complaint or getting legal advice. Several mentioned being refused multiple times:

23: Refused enrolment over many years for early intervention, mainstream school, and distance education.

357: Religious schools. All private schools in Sydney. Applied for 16 schools. So have moved to QLD.

Some family members explained the reasons schools had given for refusal.

Most commonly, these related to not having the resources or being able to provide the support the student required:

246: Was refused private school enrolment. Because they are not funded to support ASD.

302: It was done in a way where they said that they could not support him, another school refused to return calls.

Others reported not being explicitly refused entry but given other reasons including ‘no places available’ or claims of being out of catchment zone:

378: They were keen at first but then reconsidered and refused when they found out about his support needs and said that we didn’t live in their zone, even though they have plenty of students enrolled and attending out of their zone.

Although some had experience being explicitly declined because of the student’s disability:

294: ASD level 3. Declined by several private schools sight unseen.

Other family members explained that they had not been refused enrolment, but had been strongly encouraged to enrol elsewhere:

297: Not refused, but they kept her on a very reduced timetable of 1 hour school a day for over half a year and kept on pushing towards special school in the meantime.

The survey also asked whether the student had been excluded from excursions, events or activities at school in the last year. Of those who responded to this question, 29% (100) had been and 71% (245) had not. In comments, the most commonly mentioned events or activities were school camps, excursions, and sport. Reasons given were often simple refusal, or lack of accessibility, adjustments or support to attend. Some family members described exclusion across the board, or from multiple types of events and activities:

59: Not offered appropriate support and told can choose to attend but won’t be supported. Not told of or offered to attend some excursions with peers in class

263: Advised that these events wouldn’t be good for son to join and preference would be for him to stay at home. No adjustments offered.

Other respondents reported that the school had tried to exclude their student, or that inclusion in events had required parental advocacy:

73: Again with a “but”. We have had to remind the school of its legal obligations in this regard. We are seen as troublesome parents!

155: Would have been excluded except for my advocacy over the years; bus not accessible (took him in our van); not able to participate in excursion as buildings not accessible; not allowed to participate in swim carnival because couldn’t pass swim safety test; only supported at camp during school hours; Still in the last year always segregated at Christmas concert; path for walkathon and cross country not accessible so grouped with “sick and injured” kids.

In several cases, respondents described the student only being able to attend if a family member also attended to transport or supervise.

The survey also asked whether the student had experienced bullying (which could be verbal, physical or social) at school in the last year from other students or staff.

Worryingly, of those who responded to this question, 50% (174) said that they had experienced this, 19% (67) did not know and 31% (106) had not. Over 100 family members provided further information in comments.

They described incidents or long-term experiences of bullying from other students, staff members, or both. Bullying from other students was most commonly described, ranging from social exclusion to name calling and teasing, online abuse, physical abuse and assaults, and theft and property damage. Some relevant comments include:

118: Pushed over and kicked up the bum, verbally taunted, segregated, and “othered”.

246: Physical and emotional bullying. Possessions stolen and defecated on. Name calling. Threatening notes. Ostracised.

260: Has been pushed, shoved, had water thrown on them, had their bags stolen.

Examples of bullying from teachers and other staff included the following:

147: From teaching staff (not all) resulting in medical exemption this year due to signs of trauma (previously had success with supportive class teachers).

255: Verbal bullying from a teacher has damaged my child and impacted severely on my family

359: The teacher verbally mentally and physically bullied my child for 6 months and had the class join in and the principal did nothing. I have an apology from the minister, the entire school did training, the teacher stayed on and the principal transferred.

In two comments, family members reported that the school took positive action to resolve the situation, but many families commented that the school did nothing or very little to respond to incidents or allegations of bullying, for example:

73: From both other students and some staff. The school does not seem to know how (or have the will to) deal with bullying. At one stage, a sibling stepped in and we were summoned to the school about the sibling’s “violent behaviour”.

Very worryingly, several respondents talked of suicide attempts, suicidal ideation or self-harm occurring as a result of bullying at school:

358: They were strangled at school by another student who was not punished and no action was taken for them to be able to feel safe in school again. This was only one incident, the bullying was at such an extent they were attempting to commit suicide multiple times a day and we had to move to distance education.

Respondents were asked whether the student has ever experienced restrictive practices in an education setting. Of those who responded to this question, 25% (86) had, 19% (65) did not know and 57% (198) had not. A further 19% (64) had experienced seclusion at school in the last year, 18% (61) did not know if this had been experienced and 64% (221) had not experienced seclusion.

In comments, the most commonly described incidents and practices were physical restraint or coercion, segregation or seclusion during class time, segregation or seclusion during break times, and psychosocial restraints or threats:

76: She is restricted to a very small area for outside play. Any child is allowed to go and annoy her, but she may not walk away.

120: [Student] was afraid of going outside the classroom because of his fear of clouds/weather and one of the aides in the [Special Developmental School] picked him up and carried him out. [Student’s] teacher would frequently say, “If you don’t listen to me I will take you outside,” knowing how scared [he] was and knowing it would cause him fear and anxiety.

378: Is taken to the library at break times and has a table away from everyone else.

Segregation or seclusion during class time included practices such as separating the student from other students in the same classroom, or putting them in a room by themselves:

20: Placed behind a screen to work separately from other students, placed outside (even in the winter) while other students learned in the classroom, confined to his “own classroom” (no other kids in his class) all day – not allowed out for recess, lunch or PE.

155: Taking control of wheelchair for convenience – taking control of wheelchair to keep still – limiting speed of wheelchair beyond safety needs – seated segregated in the classroom – taken to room/isolated (but not locked in) for punishment called ‘time out”.

Respondents also mentioned force feeding, medication, lack of movement breaks, lack of support for physical movement needs (as in the comment above), being prevented from leaving class, segregation or seclusion during other activities such as concerts, and being sent to the principal’s office.

Some respondents reported seclusion or restrictive practices as being justified in their child’s case (for example to prevent injury or running away).

The survey asked respondents whether the student has an Individual Education Plan (IEP) in place. These are also called One School plans or Individual Learning Plans in some areas. 72% (256) of respondents indicated that their child has an IEP in place, 11% (40) did not know whether their child had an IEP in place and 17% (56) did not have one.

Respondents commented extensively on the development, adequacy and implementation of IEPs, with very few having anything positive to say about the experience. Firstly, over 20 respondents commented that they had not been offered one, had been refused one, or had not signed off on the plan because it was unsuitable. A similar number commented on delays in developing or updating plans, for example:

188: Only received today and we are in May and only because I continued to ask for one.

319: It took 10 months to get ILP in place and there is no evidence of it being implemented.

Many families also commented on IEPs not meeting the needs of their children or not being implemented, with several reporting that it is “not worth the paper it’s written on” or that it seemed to be a box ticking exercise for the school.

11: The plan is woefully inadequate, we almost laugh when they give it to us, nothing is really achievable and it seems like they are just putting pen to paper.

Of those who had an IEP in place, 75% (215) had the involvement of a caregiver and/or family member in the development of the IEP. This means that for one quarter (71) of students with IEPs, their caregivers had not had the opportunity to be involved in the plan’s development. Free text comments clarified that family involvement was often present but insufficient. 27 respondents explained that they had been sufficiently involved, but sometimes only after advocating for this outcome. About twice this number supplied comments about not being involved enough – or at all.

98: School refused to allow input from parents or therapists. No IEP meeting was held.

377: I attempted to engage and support the school to develop an IEP to no avail.

24: The learning support teacher left the school. No one took over her role.

Consequently, the school didn’t create the promised (and urgently needed) IEP for my child. That is, until the NCCD data was due! Then, within days of the NCCD deadline, the classroom teacher – without support or consultation with parents/therapy team – copied/pasted from another child’s plan to quickly cobble something together. There was no opportunity to convene or consult with the therapy team – something we’d been seeking for 12 months. As parents, we dropped everything to provide feedback that night. Unfortunately, this was ignored due to the urgency associated with the impending NCCD deadline.

This quote may reflect on the important role that IEPs play in schools when accounting for the spend of additional funding to support students with disability. The above respondent reluctantly switched to home schooling the student as a result of this incident. In 10 cases, respondents reported that they had just been asked to sign off on an already completed plan.

Respondents were asked whether their child is eligible for additional support or funding at school because of a disability or learning difference. Of those who responded, 66% (232) were, 18% (52) were not and 19% (68) did not know. Respondents were also asked whether the student is receiving specific support at school because of a disability or learning difference.

Of those who responded to this question, 69% (237) indicated the student is, 12% did not know (41) and 20% (68) not. Regarding the supports received, the most common choices indicated are curriculum modification or individual support worker or aide, although a number of other options were also indicated as outlined in Figure 6.

Figure 6: What type of support does/did the student receive? Number of responses

Other 64

Access to specialist allied health via/at school supports 69

Assistance with personal care 71

Specific aides and equipment 72

Behavioural support 74

Social support 74

Supervision 95

Individual support worker or aide 150

Curriculum modification 158

In free text, respondents described other supports such as modified school hours, permission to leave class, literacy support, large text, or Auslan interpretation. Many mentioned that while the student did receive support, it did not meet their needs, for example:

341: Limited aide time available – resourcing issue. More aide time given to children with behavioural needs.

359: All of the above are useless – if you don’t have enough funding – we are supposed to have access to all – and there is not enough there.

Sixteen respondents used the free text box to explain that their child receives no support or requires different types of supports than those the school will offer.

237: They put the office lady in his room. An untrained aide. I offered to donate money to the school for an aide and the principal replied, “no aide is going to help your child!”

The survey also asked whether the student is an NDIS participant. Of those who answered this question, 83% (294) indicated the student is an NDIS participant and 17% (59) are not. Of those receiving NDIS funding, 16% (50) indicated that there were supports that the NDIS funds for the student to assist in accessing education, but 74% (233) did not receive support to access education. In comments, respondents commonly explained that the NDIS will not fund anything related to education, and even that they had been denied supports on these grounds. Others mentioned items or services they had purchased to assist the student with schooling, the most common of which was allied health supports such as psychology, speech therapy and occupational therapy (OT). Families often mentioned that these services were delivered on school grounds.

75: Allied health therapists come to school for their sessions and to consult with school staff about aides, equipment, modifications, etc

179: My daughter is accessing OT and behaviour management to learn skills to socially and to control herself in classroom settings, speech to learn to lip read, Auslan to learn her first language

Other NDIS-provided supports included assistive technology and sensory items, staff training, transport, and support workers.

As one respondent indicated, while the boundaries between NDIS responsibilities and education department responsibilities are supposed to be clear, in reality some families are able to navigate shortfalls in this way:

359: We are always using NDIS funding to cover gap in education argh…Not allowed to – according to NDIS – but we do anyways.

Respondents were asked whether they have ever had to pay for supports at school either personally through the family or by using fundraising to pay for supports or equipment that enable access and participations in education. Of those who responded to this question, 34% (133) had and 66% (218) had not. In comments, the most commonly mentioned items were equipment such as assistive technology and sensory items.

Some also mentioned therapy (including for assessments), tutoring, classroom aides, teaching materials and equipment such as special paper, and training for staff. Several respondents reported that the school had refused to let families provide supports, even at their own expense:

64: At one stage I was specifically denied to pay for a support for my son.

212: We would like to have our OT able to come to the school to assist. So far not allowed.

In thinking about the implementation of students’ IEPs, the survey asked respondents for their perspective on whether the school implements age-appropriate learning tasks, resources and learning materials to their child (Figure 7). In response to this statement, there were mixed views with 37% either strongly agreed (34) or agreed (124), 23% (79) neither agreed nor disagreed and 30% disagreed (66) or strongly disagreed (37) with this statement.

Figure 7: The school implemented age-appropriate learning tasks, resources and learning materials

Number of responses

Strongly agree 34

Agree 124

Neither agree nor disagree 79

Disagree 66

Strongly disagree 37

Similarly, respondents were mixed on views as to whether the school seeks out any required equipment, assistive technology, or additional resources for the student’s learning needs (Figure 8). In response to this statement, 32% either strongly agreed (30) or agreed (79), 26% neither agreed nor disagreed and 42% disagreed (91) or strongly disagreed (52) with this statement.

The survey also asked whether respondents felt that the school selected and implemented appropriate teaching strategies to facilitate effective learning for the student (Figure 9). Of those who responded to this statement, 35% strongly agreed (39) or agreed (79) with this statement, 23% (78) neither agreed nor disagreed and 42% either disagreed (77) or strongly disagreed (67) with this statement.

Respondents were also asked whether staff appear to understand the shared responsibilities in working with the student (Figure 10). 34% of respondents strongly agreed (37) or agreed (78) with this statement, 19% (65) neither agreed nor disagreed and 47% either disagreed (78) or strongly disagreed (82) with this statement. This suggests nearly half of respondents to this question do not feel that there are shared responsibilities understood.

Respondents felt similarly strongly as to whether staff appear to set aside time to monitor, reflect, evaluate and do further planning or adjustments (Figure 11). Of those who responded to this statement, 31% strongly agreed (32) or agreed (74), 26% neither agreed nor disagreed and 42% disagreed (73) or strongly disagreed (71).

Respondents were largely not positive about whether school staff appear to seek out relevant professional learning to build skills and knowledge (Figure 12). In response to this statement, just 28% strongly agreed (24) or agreed (71) with this statement, 27% (91) neither agreed nor disagreed and 45% either disagreed (75) or strongly disagreed (79).

Respondents were also asked whether they felt their school has shared clear policies and information for other families about the benefits of inclusion for all students (Figure 13). Just 22% of respondents agreed (25) or disagreed (50) with this statement, 20% neither agreed nor disagreed (69) and 58% disagreed (89) or strongly disagreed (106).

Respondents were asked whether they had ever made a complaint about their student’s school or education experience. More than half (52%, 181) indicated that they had made a complaint and a further 15% (53) had needed to make a complaint but had not proceeded with this (Figure 14). This means that just over two thirds of respondents at some time needed to make a complaint about their student’s school experience.

Those who had not made a complaint were given the opportunity to explain why. The two most common reasons were that they had decided to give their feedback informally (such as in emails to the principal or meetings with teachers), or they were worried about repercussions if they complained.

39: Many occasions, especially around refusal to provide reasonable adjustments for my student. Have not ever proceeded as the implications of proceeding are usually not in the best interest of the student.

Especially if you want to go through and do the HSC – the school holds the keys to applying for disability provisions so we have literally been advised to suck it up so that process can happen appropriately at the end.

71: Did not proceed due to fear for child’s safety at school and the repercussions.

One respondent recounted the consequences of their complaint, indicating that a fear of repercussions may sometimes be justified:

34: It created a massive void in communication and resulted in us having to move house and try again at another school – it was then gossiped about so much that the issue never goes away.. there is a wall put up with very little information sharing or interaction with her family..

Other reasons given by multiple respondents included not knowing how to complain or who to complain to, giving up or being too upset to proceed, feeling nothing would happen after a complaint, the issue being resolved in some other way (such as a staff member moving on), or being discouraged from complaining by the school or department.

Respondents were further asked what the focus of this complaint was (Figure 15). The most common reasons given were student support services and bullying, harassment or victimisation. Respondents explained in comments that there were often multiple issues underlying complaints, such as lack of support and adjustments, bullying, seclusion and restrictive practices, suspensions or restricted hours, and safety and accessibility concerns. For example:

221: Previous school (Catholic): bullying by teacher, shaming, hit by teacher, continually missing recess/lunch because of behaviour, different rules to others… You name it, it happened.

86: Being segregated in a class by himself. Being made to go into a sensory room. Being told which way to walk into school (to not be near other students). Not having an education plan.

Figure 15. What did the complaint/s relate to?

Enrolment 21

Other 56

Curriculum and teaching materials 100

Participation in education 111

Bullying, harassment or victimisation on the basis of disability 116

Student support services 118

The survey also asked where the complaints were directed to (Figure 16). The majority of complaints were made to school leadership or classroom teachers. But respondents also pursued a range of other avenues.

Figure 16. Who did you make the complaint/s to?

ACARA\* or local regulatory board 1

Teaching Registration Boards 2

Non-government school body 14

Other 15

Anti-discrimination and human rights offices 18

State/Territory educational Minister 27

State/Territory Department for Education 38

Regional educational office 74

School support or specialised staff 88

Classroom teacher 113

School leadership 156

\*Australian Curriculum, Assessment and Reporting Authority

Respondents were also asked whether they were satisfied with the outcome of the complaint. For 19% of respondents the complaint process was still ongoing. Only 18% of respondents were satisfied with the outcome of the complaint that they made and 63% were not satisfied. In comments, a few respondents elaborated on positive outcomes (often after ‘fighting’ or ‘jumping up and down’ or ‘reluctance’), for example:

87: After an open and frank discussion where all parties were able to talk about expectations the issue was resolved. It was more a lack of understanding than wilful behaviour that caused problems.

317: Education department do not call back. Ignore phone calls, lie, use private numbers so one can’t ring back, draaaag out the process for as loooong as they can.

Further, nine respondents explained they had left the school in the context of the complaint:

204: I just gave up and for my son’s best interest it was best to take him out of that school. They were not going to change.

Figure 17. Were you satisfied with the outcome of the complaint?

Number of responses

Yes 37

No 130

The process is still ongoing 39

64: I finally found I was being listened to seriously and something changed. We got a new head teacher and she was much more suited to working with autistic teenagers.

However, much more frequently family members explained that nothing at all had changed, complaints were not listened to, or that there had been only partial resolution of the issues.

23: Still not satisfied. Accepted an out-of-court settlement but this was not justice. Alleged abusers remain. Some with multiple child protection issues spanning years at various schools. They all remain in secure employment and working with children, particularly disabled children.

One of the strongest themes to come through the free text comments is that parental and caregiver advocacy is often required to achieve good (or even partly satisfactory) outcomes in the education of students with disability. Respondents talked of the advocacy required with regard to getting schools to accept enrolments, IEP development and implementation, overturning suspensions, addressing bullying, getting the school to enact educational and social supports, implementing accessibility, addressing restrictive practices and seclusion, and many other issues. Many comments (as with participant 73 above) amounted to ‘yes but’ – yes the student receives a particular support, but only due to parental advocacy. Just a few of the relevant comments include:

31: Finally getting [an IEP] after 6 months at school this year. We had to send an email stating that they were breaching her human rights and discriminating against her before we got action.

181: Had to fight for every adjustment for him at school

292: I have advocated for my child a LOT in the past couple of years, and therefore have quite a high view of our school, however am aware this isn’t the general experience of other parents in our school.

303: Some allowances are made but only after I have chased it down. There is no support provided that is not asked for and arranging any allowances or support is time consuming and is more about excluding from an activity that is not able to be achieved rather than supporting inclusion.

If good or adequate outcomes often require parental advocacy, this is concerning not only for the families involved, but also for the families and caregivers that are not in a position to advocate for their children.

Further, while some respondents talked of positive school experiences, many families described negative experiences. As will be evident from several comments included in previous sections, some described experiences so distressing they had left children traumatised, self-harming, speaking about suicidal ideation, or attempting suicide. This also took a toll on other family members.

120: [After an incident at his previous school] my son is now in a mainstream government primary school, he has been talking about self harming, he has been anxious and fearful of the weather, of rain and storms, and has been referred to Psychiatric Triage at Monash Children’s Hospital because of the severe decline in his mental health, his anxieties, fears and constant talk of wanting to die. This has had a severe [effect] on my mental health and my husband’s mental health as well. …We have a broken child that we are trying to piece back together, whilst trying to hold it all together ourselves. This is one of the most challenging experiences of my life, as we do not have a roadmap, there is no accountability and it feels like we have just been left on our own to work all of this out and somehow get our boy back.

179: We were advised that they haven’t taught our daughter for 3 years and not to worry as most deaf and hard of hearing children don’t finish year 4 level by year 10. Our daughter is repeating year 5 this year and only just finished year 1 work and starting to expose her to year 2. …they said it’s a [worldwide] problem so it doesn’t matter. They have stressed her out that much that she has been hospitalised 8 times in the last 2 years. I have had many meetings and they won’t correct anything.

204: A complaint was made on his last school, I had to get the DET [Department of Education and Training] to come in and assist his teachers on putting in accommodations for my son. This did not make matters any better. My son had to leave due to the effect that school was having on his mental health and anxiety. It traumatised him.

352: He has recently described verbal bullying from his Principal and classroom teacher. He experiences verbal and social bullying. He has [Post-Traumatic Stress Disorder] and [Traumatic Brain Injury] from assaults at schools from last year and before.

While this is a small subset of overall responses (around 20), these experiences speak to the need to support students with disability much more comprehensively to avoid doing harm that will affect them throughout their lives.

Comparing trends in the education survey over time

As outlined in the background, CYDA has undertaken the education survey for a number of years, with the last survey being reported in 2019. There were very few changes made to the questions between the surveys. However, it is likely that a different group of people responded to the survey, which means we cannot make a simple comparison of the figures over time.

However, we can look at the broad trends reported in the two surveys to explore whether there are any areas of major difference across the surveys. When we undertook the activity of comparing the responses from 2019 with those of 2022 it is stark how similar the results of the surveys are. In the vast majority of cases, the average findings of 2022 fall within a few percentage points of those reported in 2019. The only areas of significant difference between the broad trends are:

* Percentage of children with disability excluded from events or activities at school in the last year, in 2019 this was 40% and in 2022 30%.
* Percentage of families who had to pay for a range of supports or equipment to enable the student to participate in education, in 2019 this was 57% and in 2022 34%.
* Percentage of families not involved in the development of the IEP, in 2019 this was 36% and in 2022 25%.
* Percentage of respondents that disagreed there was regular communication with the family/caregivers about the student’s learning progress, in 2019 this was 35% and in 2022 47%.

Looking at these broad trends it appears that there have been few areas of significant change for children with disability in their experience through the education system. In one sense this could be seen as good news. Between these surveys we have seen the emergence of the COVID-19 pandemic and CYDA has reported the disruption and impact that this has had on the education experiences of some children and young people with disability (21). But this also suggests that we are not seeing substantial improvements to the educational experiences of children and young people with disability.

Rather than seeing significant areas of improvement there is somewhat of a stagnation in responses over this time period. As outlined in the background, this is concerning given the importance of quality education in supporting young people to enter adulthood, moving on to further education or work and feeling included within local communities. These issues are vividly demonstrated in some of the free text responses reported by families and caregivers around the trauma experienced in schooling for some.

What do these findings mean?

Despite significant investments in a range of policies and programmes, such as the NDIS, the Australian Disability Strategy and a range of initiatives to support students with disability in schools, the data from this survey indicates there are still a range of challenges in creating inclusive school environments. Although there are some encouraging findings with respect to schools being welcoming for students with disability and their families and caregivers, it appears there are still some important gaps.

Findings suggest that while many teachers try to be welcoming of students, they lack the training or support to work in a way that will create an inclusive schooling environment.

This is not a new issue and a range of studies have found that schools and teachers often lack the resources, time and training to create an environment that supports students with disability and their families (6). The Organisation for Economic Co-operation and Development (OECD) has reported data showing that less than half of Australian teachers feel prepared to teach in mixed ability settings after undertaking formal teacher education (22). In 2020 the Department for Education, Skills and Employment undertook a review of the 2005 Disability Standards for Education and found that a number of educators were unaware of their obligations to students with disability or did not know how to effectively implement the standards (23). The data reported from this survey suggests that there have not been significant advancements in teacher training and support in the last few years and this is an area in need of urgent attention.

A number of free text comments suggest that there are particular issues around children and young people who have an autism diagnosis not being supported effectively in school. We would note that a large percentage of responses to this survey came from families of NDIS participants and the identification of this issue might be reflective of the numbers of children and young people with autism within this scheme.

But what does seem to be clear is that there is an urgent need for schools to find more effective ways to support all disabled children and young people.

One of the tools that educators can use in working with children and young people with disability are IEPs, but the data collected through this survey suggests that these are not working well for all. Free text comments suggest that rather than these being a partnership tool that is developed between educators and children and families, they are often developed with limited input from families. A number of respondents suggested that the end product is not always as useful as it might be and often felt like it was a ‘tick box exercise’. Further many reported struggling to have their plans implemented meaning that it was not a worthwhile exercise.

Respondents also talked about the inconsistent ability to access NDIS supports for education. Nearly three quarters of those who receive NDIS funding reported that they were not able to use this to support their child to engage in education. A large number reported that they had not considered how to use funding because ‘the NDIS does not fund education’. While it is true that the NDIS should not fund supports that should be covered through the education system, some respondents talked about using NDIS funding in more creative ways to ensure their child’s access to inclusive education. In the research literature it is clear that there are challenges that are experienced at the interface of the NDIS and other mainstream services (24, 25, 26). Further work needs to be done to clarify the types of services and supports that the NDIS might fund to enable children and young people to engage in education.

All of these issues mean that families and caregivers often spend significant amounts of time engaging in advocacy to ensure that their student gets the inclusive education experience they are entitled to. This puts a heavy responsibility on families and many report having to walk a fine line between speaking up around issues that are important to their child and not being seen to complain too much or cause too many issues for the school. Significant numbers of respondents report having to make a complaint to schools and many find that these are not resolved in a satisfactory manner. There are also important equity considerations here. Such a system favours families who have resources and high administrative literacy and there will be some students and families that lack this and are not able to engage in the same type of advocacy.

The data from this survey illustrates that school can be highly traumatic for some students with disability and their families. There are significant amounts of bullying, exclusion and even suspensions that are being experienced by this group. These have very real impacts on the health and wellbeing of these students. Students who experience challenges in engagement and inclusion at school are more likely to report lower levels of wellbeing. Children with disability are more likely to experience anxiety or childhood depression (27) and this can be exacerbated by experiences of not being included within schooling. As the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (28) acknowledges, ‘education is critically important to the inclusion and independence of children and adults with disability across their life course. It is a determinant of future outcomes, such as employment and health, and vital to the full development of an individual’s potential’ (p. 1).

Access to education is a fundamental human right protected under the Convention of the Rights of People with Disability, which Australia is in contravention of if it is unable to ensure an inclusive education system at all levels.

It is worth considering the ways that behavioural management is identified as unjust and challenging to students having positive experiences of schooling. In the research literature, teachers identify difficult behaviour as one of the challenges they face in inclusive education (29). There is a common assumption in policy statements and documents that poor classroom discipline is connected to academic under- achievement (30). However, student misbehaviour is often a by-product of poorly met educational needs. A problem-solving approach to teaching informed by the students need to address behaviour difficulties should be adopted (30). Teacher training towards skills around this would be beneficial. Teachers’ understanding of, and response to, anxiety and stress can play a significant role in the successful inclusion and academic performance of all students, but particularly those who are neurodiverse (31). Emphasis on academic performance and academic outcomes often positions student misbehaviour as an obstacle to the achievement of core academic progress for the whole class/cohort and ultimately for the school in meeting key curriculum targets (30).

However, while curriculum modification is one of the responsibilities that lie in the work of teachers in inclusive classrooms, other challenges include organisational and time restraints to be addressed at a school and system level. The competing demands for

time and increased responsibilities, the call on emotional energy required for more vigilance in some classroom situations, and the limited access to support equipment and specialist professional help and classroom assistance are also identified (29).

While this survey has a relatively small response rate when compared to the number of children and young people with disability engaged in education, as the Productivity Commission notes (11) there is a lack of data regarding the outcomes for this group. This is also noted by the Royal Commission (32) who expressed concerns that governments ‘do not routinely collect and report publicly on data which would help them better understand and address violence, abuse, and neglect and exclusion experienced by students with disability in education’ (p. 34).

The findings from this survey, although limited in sample size do provide some data to help fill this gap. The Productivity Commission goes on to suggest that in the next National School Reform Agreement there should be commitments outlined that align with those in the Australia Disability Strategy. While this is a welcome move, as this data shows there is an urgent need for action to improve the experiences of students with disability. It is not clear at the moment where the impetus for this action will come from over the short term. There is no apparent overall strategic plan to help drive the inclusion of students with disability in the education system. When comparing the findings of this survey to those of previous years we find many of the trends persisting, suggesting that we have not seen significant improvements around inclusive education in recent years. Such stagnation will require significant action if it is to be addressed and all Australian students have the right to equal access to education.

Potential actions that might help to address these are laid out in the Australian Coalition for Inclusive Education’s roadmap (33).

References

1 Australian Institute of Health and Welfare. Australia’s Children. Canberra: AIHW; 2020.

2 Kavanagh A, Kmjacki L, Beer A, LaMontagen AD, Bentley R. Time trends in socio-economic inequalities for women and men with disabilities in Australia: evidence of persisting inequalities. International Journal of Equity in Health. 2013;12:73.

3 Milner A, LaMontagne AD, Aitken Z, Bentley R, Kavanagh A. Employment status and mental health among persons with and without a disability: Evidence from an Australian cohort study. Journal of Epidemiology and Community Health. 2014;68(11):1064–971.

4 Kmjacki L, Emerson E, Llewellyn G, Kavanagh A. Prevelence and risk of violence against people with and without disabilities: findings from an Australian population-based study. Australian and New Zealand Journal of Public Health. 2016;40:16–21.

5 Children with Disability Australia. CDA Disability Care and Support – Submission – September 2010. Melbourne: CYDA; 2010.

6 Cologon K. Towards inclusive education: A necessary process of transformation. Melbourne: Children and Young People with Disability Australia; 2019.

7 Australian Government Productivity Commission. .Review of the National Disability Agreement. Canberra: Productivity Commission; 2019.

8 Australian Government Productivity Commission. Disability Care and Support. Melbourne: The Productivity Commission; 2011.

9 Committee on the Rights of Persons with Disabilities. Combined second and third periodic reports submitted by Australia under article 35 of the Convention due 2018. . United Nations Human Rights Office of the High Commissioner.; 2019.

10 Hall S, Fildes J, Liyanarachchi D, Plummer J, Reynolds M. Young, Willing and Able: Youth Survey Disability Report 2019. Sydney: Mission Australia; 2019.

11 Australian Government Productivity Commission. Review of the National School Reform Agreement. Canberra: Productivity Commission; 2022.

12 Mason LH, Hedlin LR. Reading science text: Challenges for students with learning disabilities and considerations for teachers. Learning Disabilities Research & Practice. 2011;26(4):214–22.

13 Richards C, Pavri S, Golez F, Canges R, Murphy J. Response to intervention: Building the capacity of teachers to serve students with learning difficulties. Issues in Teacher Education. 2007;16(2):55–64.

14 Bourke S, Burgman I. Coping with bullying in Australian schools: How children with disabilities experience support from friends, parents and teachers. Disability & Society. 2010;25(3):359–71.

15 Carter BB, Spencer VG. The fear factor: Bullying and students with disabilities. International Journal of Special Education. 2006;21(1):11–23.

16 Rose CA, Espelage DL. Risk and protective factors associated with the bullying involvement of students with emotional and behavioral disorders. Behavioral Disorders. 2012;37(3):133–48.

17 Krull J, Wilbert J, Hennemann T. The social and emotional situation of first graders with classroom behavior problems and classroom learning difficulties in inclusive classes. Learning Disabilities: A Contemporary Journal,. 2014;12(2):169–90.

18 Szumski G, Karwowski M, Smogorzewska J. Academic achievement of students without special eductional needs in inclusive classrooms: A metaanalysis. Educational Research Review. 2017;21(33–54).

19 Dickinson H, Smith C, Yates S, Faulkner A. Taking the first step in an inclusive life: Experiences of Australian early childhood education and care. Melbourne: Children and Young People with Disability Australia; 2022.

20 Smith, C., Dickinson, H., Faulkner, A. I think the teachers need more help: Voices of experience from students with disability in Australia. Melbourne: Children and Young People with Disability Australia; 2023.

21 Dickinson H, Smith C, Yates S, Tani M. Not even remotely fair: Experiences of students with disability during COVID-19 – Full Report. Melbourne Children and Young People with Disability Australia; 2020.

22 OECD. TALIS 2018 Results (Volume I) 2019.

23 Department of Education SaE. Disability Standards for Education 2005: 2020 Review. Canberra: DESE; 2020.

24 Yates S, Dickinson H, Smith S, Tani M. Flexibility in individual funding schemes: How well did Australia’s National Disability Scheme support remote learning for students with disability during COVID-19? . Social Policy & Administration. 2021.

25 Dickinson H, Yates S, Dodd S, Buick F, Doyle C. “Most people don’t like a client group that tell you to get fucked”: Choice and control in Australia’s National Disability Insurance Scheme for formerly incarcerated people. Public Policy and Administration. 2022.

26 Dickinson H, Carey G. Managing care integration during the implementation of large-scale reforms: the case of the Australian National Disability Insurance Sheme. Journal of Integrated Care. 2017;25(1).

27 Raising Children Network. Children with disability: mental health & physical health. https://raisingchildren.net.au/disability/ mental-health-physical-health: Accessed 20th February 2023; 2021.

28 Royal Commission into Violence A, Neglect and Exploitation of People with Disability,. Public hearing 5 – Experiences of people with disability during the ongoing COVID-19 pandemic. Canberra: Commonwealth of Australia 2020.

29 Carrington S, Berthelsen D, Nickerson J, Nicholson J, Walker S, Meldrum K. Teachers’ Experiences of Inclusion of Children with Developmental Disabilities across the Early Years of School. Journal of Psychologists and Counsellors in Schools. 2016;26(2):139–54.

30 Armstrong D. Addressing the wicked problem of behaviour in schools. International Journal of Inclusive Education. 2018;22(9):997–1013.

31 Adams D, MacDonald L, Keen D. Teacher responses to anxiety-related behaviours in students on the autism spectrum. Research in Developmental Disabilities 2019;86:11–9.

32 Royal Commission into Violence A, Neglect and Exploitation of People with Disability,. Public Hearing Report: Public hearing 7: Barriers experiences by students with disability in accessing

and obtaining a safe, quality and inclusive school education and consequent life course impacts. Canberra: Royal Commission into Violence, Abuse,

Neglect and Exploitation of People with Disability; 2021.

33 Australian Coalition for Inclusive Education. Driving change: A roadmap for achieving inclusive education in Australia Melbourne: ACIE; 2021.

Children and Young People with Disability Australia

Suite 8, 134 Cambridge Street

Collingwood Vic 3066

PO Box 172, Clifton Hill VIC 3068

Phone 03 9417 1025 or

1800 222 660 (regional or interstate)

Email info@cyda.org.au Web www.cyda.org.au ABN 42 140 529 273