

30 September 2020

Disability Standards for Education Review Team
Disability Strategy Taskforce
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By email: DisabilityStrategy@dese.gov.au.

Dear [REDACTED]

RE: 2020 Review of the Disability Standards for Education 2005 and early childhood education and care

Context

The City of Knox (Knox) is situated in the outer eastern metropolitan area, between 20 and 25 kilometres south-east of the Melbourne CBD. It is a large municipality that has passed through a period of rapid housing and business development over the past three decades. Knox is now emerging from this period of high growth to a time of maturation and consolidation.

Knox borders the municipalities of Maroondah in the north, Yarra Ranges in the east, Casey in the south, and Monash, Whitehorse and Greater Dandenong in the west. It has an area of 11,382 hectares and at the 2016 Census, recorded a population of 154,110. In 2016:

- 46,505 residents were born overseas (30%)
- 13% had arrived in Australia within the last five years prior to 2016
- 23% of residents born overseas came from non-English speaking backgrounds.

Knox is an established centre for manufacturing. It is a major economic force in the region with a gross regional product of \$9,475 million. With around 70% of its resident workforce working outside of Knox, the local economy is closely linked to other parts of the regional labour market.

In recent periods, key industries in Knox have become more skills-intensive, partly as a response to globalisation and increased specialisation, particularly in advanced manufacturing. This has also led to greater interaction across the region, e.g. in establishing supply links with other businesses and the establishment of relationships with specialist providers of technological expertise including Swinburne and Monash Universities, CSIRO, and the Australian Synchrotron.

Knox City Council (Knox and Council) has made a significant investment to provide for the delivery of early years services. This includes sessional kindergarten, maternal and child health, playgroups, and long day childcare services and facilities.

Knox meets its statutory roles under the *Local Government Act 2020*, in part, through its municipal health and wellbeing plans, and its non-statutory municipal early years plans. These plans provide strategic direction for coordinating educational, care and health programs, and activities within the municipality that affect children – from birth, through kindergarten, to the time they enter school. The primary guiding document is Council's *Key Life Stages Plan 2017 -2021*. Collectively these services see just over 300 Council employees providing programs to meet community needs.

Feedback:

The discussion paper asks a number of questions of early childhood educators and providers, relating to two key aspects:

- i. Experiences with children with a disability
- ii. Understanding of obligations under the Disability Discrimination Act (DDA)

i. Experiences with children with a disability

Funding agreements require services to apply priority of access to those children who are recognised as needing assistance and access. The data on children who meet the Priority of Access criteria does not identify specific categories of vulnerability or disability, therefore it is difficult to comment on participation trends in our early learning services. It is important to note that all council facilities comply with requirements under the DDA to ensure access and participation are maximised and modifications are made when required in addition to a capital works program being implemented to adhere to building compliance.

Anecdotal experience of educators working with children who have disabilities highlights that access, participation and inclusion of children with disabilities is generally a positive experience for families. Educators work collaboratively with families to ensure that their child's needs are met throughout the program. There is also a raft of additional resources such as professional development opportunities, access to allied professionals were available, funding opportunities dependent on eligibility and support services such as Preschool Field Officers and Inclusion Professionals which educators can all access to ensure they have the knowledge, skills and abilities to implement inclusive programs for all children.

Although measures put into place by government during COVID-19 such as ensuring children with disabilities were able to attend early learning services, COVID-19 has caused significant disruption and distress for both children and families in Knox. This has been observed in reduced attendance, an inability to access allied professional support, an increase in disruptive behaviours being exhibited by children due to routine changes and expectations and also a reported increase in mental health issues by families who care for children with disabilities. As a consequence, during Stage 4, Knox Council early childhood centers were staffed in excess of the higher staff: student ratio of 1:4 as observed in special schools.

ii. Understanding of obligations under the Disability Discrimination Act (DDA)

Consultation with staff in our Early Childhood Education and Care Services (which span child care and kindergarten services) confirms that:

- there is a general awareness that the *Disability Discrimination Act 1992 (DDA)* exists;
- the Act outlines the rights of people with disabilities; and
- the Act ensures children with disability can access and participate in early childhood education.

There is also a general understanding that services are required to make appropriate changes to include children with disabilities. However, a deeper understanding of the role, scope and implications of the DDA amongst sector professionals could be viewed as limited. Potential reasons which may contribute to the reduced understanding around the DDA is a lack of content focus in regards to the DDA in all levels of preservice tertiary education. Furthermore, there is limited professional development opportunities for early childhood care and education services professionals to gain or maintain an understanding of the DDA and its implications for service delivery.

With respect to the Disability Standards for Education 2005 the following observations are offered on barriers to access, participation and inclusion of a child with a disability:

- Families whose child is a participant of the NDIS scheme, pay for allied professionals directly from their child's NDIS plan. An unintended consequence is educators in kindergartens wanting to liaise with allied health professionals for strategic advice and resources must do so at a direct cost to the child's funding and so reducing direct allied health service delivery to the child. It has become more difficult for early childhood education and care staff to obtain this vital input into their program design.
- There is an inconsistent referencing of critical requirements as criteria for government support. All programs that provide funding for children with a disability currently use different definitions for defining a child who has a disability. This lack of consistency impacts a child's opportunity to ensure equal access and eligibility into a service of choice. For example, the State funded Kindergarten Inclusion Support (KIS) funding uses the Disability Act 2006 whilst NDIS refers to a child with a disability according to the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5).
- There is a lack of cohesion between Commonwealth and State support mechanisms that reduces families' options for their child. As an example, the State funded Kindergarten Inclusion Support (KIS) Program provides funds to support Kindergarten services to include children with a disability, often through additional staffing to support a child's access and inclusion. This program however, operates as a deficit model with regards to access and inclusion. The application process requires the identification of a child's behaviours as being 'a danger to themselves or others' therefore, families need to sign off on the funding application which outlines behaviours which have been identified as being a danger or inflicting danger on others. This labelling of a child's behaviour can become a stigma that families are reluctant to incur and therefore they do not seek much needed assistance.
- The Standards currently do not cover child care services, which limits children's access to programs in child care centres as well as vital support for families and their ongoing participation in the workforce. In Victoria with the anticipated expansion to two years of kindergarten an increasing number of children will attend kindergarten in long day care services, most of which do not need to comply with the Disability Standards for Education 2005. This has significant implication for families and their children.

In summary, possible considerations for change and implementation are:

- Including child care services in the scope of the Education Standards to ensure children with a disability have a clearly legislated right to attend any service or program.
- Providing more education within tertiary courses around including children with a disability into care and education services with an emphasis on the underpinning legislation.
- Greater flexibility for participants to use NDIS funds in a child's education and community settings such as a kindergarten or child care service to supplement inclusion staffing.
- A greater cohesion between Commonwealth and State Government programs in ensuring all children with a disability are able to access, participate and be included in all available early learning environments equally through the use of the same definition of 'disability.'

Yours sincerely

A handwritten signature in black ink, appearing to read 'J. Brown', written in a cursive style.

Janine Brown
Manager Family & Children's Services

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