

## ***CHILDREN WITH A DISABILITY***

### **Children with a disability are children first**

#### **Around 320,000 Australian children 0-14 years have a disability**

Disabilities that affect children are intellectual, psychiatric, sensory/speech, acquired brain injury and physical. The prevalence of profound or severe disability in children is gradually increasing<sup>1</sup>, particularly among children aged 5-14. The main area of increase is intellectually disabling conditions, most reported as Attention Deficit Hyperactivity Disorder (AHDH).<sup>2</sup> Also reported is a dramatic increase in the rate of diagnosis of Autism spectrum disorders (atypical neurological functioning) over the past decade.<sup>3</sup>

#### **The majority of children with a disability live with their families**

During much of the 20<sup>th</sup> Century, children with a disability were provided with 'whole of life' services, usually in large, segregated institutional settings. The process of 'deinstitutionalisation' that has occurred over recent decades is one of the leading policy and structural transformations in health and community services of the last century. Between 1981 and 1996, the number of people aged 0-14 accommodated in institutions almost halved.<sup>4</sup> Children with disabilities belong with their families, not in institutions, but families often require extra financial assistance and services to care for a son or daughter with a disability. Without such support, the impact of disability can impose significant pressure on parents and siblings and can lead to family breakdown.

#### **Most children with a disability go to the local school**

In 2001, using a narrow definition of disability that excluded children with specific learning difficulties, State Education Departments identified 114,250 students with disabilities (full time equivalent) in Australia's mainstream government, independent and Catholic schools<sup>5</sup>. Between 1997 and 2001, the number of students with a disability increased each year overall and in each sector.<sup>6</sup> Between 1996 and 2001 the number of integration aides assisting children with disabilities in mainstream schools increased by 261.3% to 10,396.<sup>7</sup>

#### **Teachers require more specialist training**

In 2002, the Senate Employment, Workplace Relations and Education Reference Committee conducted an Inquiry into the education of students with disabilities. The committee received much evidence of a lack of skills among teachers to deal with the increasing numbers of students with disabilities assigned to their classes. Prospective teachers are not receiving sufficient specialist training and most teachers already in service are unlikely to receive adequate professional development in this area. The report of the Senate Inquiry recommended mandatory training for all teacher aides and teachers in the education of students with disabilities<sup>8</sup>.

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<sup>1</sup> Australian Bureau of Statistics 'Disability, Australia, 2003' (preliminary findings from the 2003 Survey of Disability, Ageing and Carers), May 2004

<sup>2</sup> AIHW 'Disability, Prevalence and Trends', December 2003

<sup>3</sup> Report of Senate Employment, Workplace Relations and Education References Committee on the Inquiry into education of students with disabilities', April 2002, ch.4 ([http://www.aph.gov.au/Senate/committee/eet\\_ctte/index.htm](http://www.aph.gov.au/Senate/committee/eet_ctte/index.htm))

<sup>4</sup> AIHW 'Australia's Welfare 2003', ch.4

<sup>5</sup> State education authorities provide figures based on professional assessment of disability

<sup>6</sup> Department of Education, Science and Training submission to Inquiry into education of students with disabilities, section 2.3

<sup>7</sup> AIHW 'Health and community services labour force, 2001', p.26

<sup>8</sup> 'Report of the Senate Employment, Workplace Relations and Education References Committee on the Inquiry into education of students with disabilities', December 2002, pp.8, 80

### **Early intervention services build long-term gains**

Specialist disability services for children enhance the capacity of families to provide for the additional care needs of their children. Investing in services for children from an early age reaps significant long-term benefits for children's health and wellbeing and their future ability to be educated, find employment, develop relationships and participate in community life. To respond to the individual needs of children and their families, services should be flexible and locally delivered. Among the essential services provided to children and their families by non-profit, non-government disability organisations are aids and equipment; early childhood intervention; education support; recreation; community-based or recreation-based respite<sup>9</sup>; and therapy.

### **Children with a disability require more support services**

Under the Commonwealth State/Territory Disability Agreement (CSTDA), all Australian governments cooperate to fund and provide disability support services. The third CSTDA covers the five-year period 2002-2007. While between 2000 and 2002 governments provided an extra \$519 million in response to the unmet need for services, the need for additional resources for early intervention services for children (including aids, equipment and therapy) and for families to have a break from constant caring remains urgent.

The National Agenda for Early Childhood<sup>10</sup>, a welcome initiative of the Commonwealth Government in 2003, will only benefit children with a disability if it ensures they are given increased access to early childhood services.

### **Families may receive some income support**

Families may receive the non-means tested Carer Allowance (Child)<sup>11</sup> if they look after a child with a disability or severe medical condition. Centrelink uses the Child Disability Assessment Tool (CDAT) to assess medical eligibility for the Allowance by measuring the child's functional ability. A list of severe disabilities and chronic medical conditions allows fast-track entry to the Allowance for children with more severe conditions. Families are eligible to receive the more generous Carer Payment<sup>12</sup> if they provide constant care in their home for one or more children under the age of 16 years with a profound disability or medical condition and meet the income and assets tests.

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<sup>9</sup> Respite from caring helps to strengthen and develop resilience within the family unit, while providing beneficial experiences for the child

<sup>10</sup> Department of Family and Community Services [http://www.facs.gov.au/early\\_childhood](http://www.facs.gov.au/early_childhood)

<sup>11</sup> Centrelink <http://www.centrelink.gov.au>

<sup>12</sup> *ibid*

### **About National Disability Services**

National Disability Services is the national industry association for disability services, representing over 650 not-for-profit organisations. Collectively, our members operate several thousand services for Australians with all types of disability. NDS's members range in size from small support groups to large multi-service organisations, and are located in every State and Territory across Australia.

NDS defines its purpose under two broad categories. Firstly, it works to increase the capacity of its members to operate efficiently and effectively through provision of information, networking opportunities, and corporate partnerships. Secondly, NDS exists to make the voices of people with disabilities and their service providers heard by governments at both state/territory and federal levels. By so doing, NDS influences public policy to deliver outcomes that are responsive to the needs of people with disabilities and their providers.

NDS has a National Secretariat in Canberra and offices in every State and Territory.

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