Square Peg Round Whole Advocacy Group

Submission to the Productivity Commission’s Review of the National School Reform Agreement Interim Report consultation

Who we are

Square Peg Round Whole (SPRW) is an advocacy group pursuing the goal of inclusive education in Australian schools. Our members are parents, but they are also teachers, doctors, researchers, lawyers, and healthcare workers, who are raising children who are autistic, have ADHD, dyslexia, anxiety, giftedness, trauma, and dyspraxia among other conditions and disabilities. Although their demographics are varied, their experiences of navigating school are strikingly similar, in that they have struggled to get the understanding and accommodations necessary from schools in their jurisdiction/s to enable genuinely inclusive education for their children.

Introductory comments

Thank you for the opportunity to respond to the National School Reform Agreement (NSRA) review. SPRW welcomes the recommendation that the next agreement should focus on supporting teachers to be their best, tackling lack of equity and addressing poor student wellbeing. We believe that addressing these interrelated areas will lead to better outcomes on many levels, but that it won’t be possible while current models of behaviour management persist.

“They have simply broken my child and caused her to become fearful, distressed, and feel like a broken piece of a puzzle. My child became virtually catatonic at school, simply sitting in class and not responding. School felt this was success as my child was behaving. In reality, my child was mentally dissociating, seeing and hearing things, and deeply distressed. My child was repeatedly confined to a withdrawal space at the back of the classroom, sometimes going there directly from the morning lines.”

At SPRW, we hear far too many stories like this. The quotes throughout this document represent a tiny snapshot of the experiences of our members, whose children are harmed when stressed teachers are not provided with the tools to create inclusive, thriving classrooms. A move is urgently needed towards a collaborative, problem-solving approach underpinned by neuroscience-based understandings of behaviour.

Inclusive education and human rights

“The Commonwealth is the guardian of equity across the nation, and should ensure that the quality of a child’s schooling is not dependent upon living in a particular State or Territory and that all systems and schools share the responsibility for contributing to the quality of education for all children.” – Commonwealth Schools Commission[[1]](#footnote-1)

The NSRA interim report recognises concerns that current ‘manage-and-discipline’ models are detrimental to inclusion and wellbeing, in that they lack understanding of the physiology behind behaviours and often lead to sanctions rather than support. This has been the experience of many, many members of SPRW, and it is distressing that these strategies are often promoted or required by State education departments.

In order to provide equity in education – and to give all students a chance at the best possible educational and wellbeing outcomes – the Commonwealth is obligated to provide inclusive education that accommodates and nurtures ALL children in the same classroom.[[2]](#footnote-2) While education is a primarily a State responsibility, the discriminatory impact of current approaches to behaviour management in schools across the country means that the federal government’s responsibilities regarding education are engaged.

In creating the next agreement, we urge the Australian Government to take steps to ensure that the states are upholding Australia’s human rights obligations in regard to education.

Obligations of the Australian Government include:

* United Nations Convention on the Rights of Persons with Disabilities (in particular, articles 24 and 7)
* United Nations Convention on the Rights of the Child (in particular, articles 23 and 28)
* United Nations Declaration on the Rights of Indigenous Persons (in particular, article 14)
* Australia’s Disability Strategy 2021-2031 (in particular, Policy Priority 2: Build capability in the delivery of inclusive education to improve educational outcomes for school students with disability)
* The National Disability Insurance Scheme is responsible for certain accommodations relevant to children with disability in the school environment.

We also note that the National Disability Insurance Agency (NDIA) was originally recommended to include an agency within it with responsibility for research and data, comparable to the model of the Civil Rights Division of the US Department of Justice. Whether this data was to come from the NDIA or the Australian Education Research Organisation (AERO), a division such as this would be able to provide a consistent evidence base on agreed-upon measurements and criteria, centralised training and support for schools and teachers and additionally, a way of enforcing inclusive education standards according to the Commonwealth’s international human rights obligations and anti-discrimination legislation. Unfortunately, we know that the current system, which depends on individuals to bear the burden of taking action against huge Departments of Education, does not work to protect the rights of disabled students.

Behaviour management contributing to pervasive challenges

Our education system is working from a model that views behaviours in isolation of the child’s body, mind and relationships. - Mona Delahooke, PhD[[3]](#footnote-3)

When thinking about improving teacher effectiveness, student equity and wellbeing, the tendency is to zoom in on particular issues and cohorts. Information request 3.1 asks, “Would programs that provide intensive, targeted support to students who have fallen behind lend themselves to being a national policy initiative under the next intergovernmental agreement on schools?” Such programs may well be necessary, but to ensure they are effective, it is imperative to take a step back and investigate perhaps the biggest pervasive challenge in the education system - that of behaviour management.

Vulnerable children are constantly traumatised by their engagement with education environments, in part because mainstream approaches to behaviour management, even those such as ‘positive discipline’, are punitive and shaming and do not address the problems that are causing the concerning behaviours in the first place. These approaches – including extreme measures such as seclusion, isolation, restraint, suspension and expulsion, along with everyday measures such as token systems – further isolate and alienate children. These children include, among others (diagnosed and undiagnosed): autistic children, children with ADHD, other neurodivergent children (eg. dyslexic, gifted), children with learning disabilities and children with trauma backgrounds.

We know that a large percentage of prisoners in all Australian jurisdictions have ADHD and/or learning disabilities, cognitive impairment and trauma backgrounds. We also know that there is a disproportionately high number of First Nations people in our prisons in all jurisdictions; that a very high percentage of First Nations people have experienced first-hand and/or intergenerational trauma, and that trauma results in behaviours similar to untreated ADHD.

School leaders and teachers, like the rest of us, have been socialised and educated in a society that sees enforcement as the primary method of ‘supporting’ appropriate behaviour. Psychological theories such as behaviourism, often misunderstood and misused, have solidified the view within the education system that behaviours are best managed with punishments and/or rewards (sometimes called consequences and positive reinforcements). Current neuroscience, however, is challenging this paradigm, as much more is now understood about things like trauma, stress behaviours, neurodivergency and individual nervous system differences.

The clash between what human bodies need to thrive, and behaviour management techniques in schools, is evidenced in many ways:

Restrictive and exclusionary measures

Exclusionary discipline approaches such as suspension are on the rise in Australia, according to recent studies in Queensland and South Australia[[4]](#footnote-4). This is despite evidence that suspension is ineffective in reducing problem behaviours, and in many cases appears to contribute to future antisocial behaviour and the ‘school-to-prison’ pipeline.[[5]](#footnote-5) Many parents report how suspension, and even seemingly more benign measures such as separation from peers during class or recess, has led to further disengagement from school.

“My son ended up having a breakdown and being disengaged from school for six months after he was made to lose privilege and spend recess sitting outside the deputy’s office in full view of his peers.”

“My grandson has been suspended by a special education teacher. He had a meltdown when she did not prepare for him in class like his usual teacher and asked him too many questions in succession. He was suspended for hitting his mum in frustration, and hasn't been back to school since May.”

Similarly, restraint and seclusion of students, often in violation of their human rights[[6]](#footnote-6), is still considered a necessary tactic, often under the guise of protecting the safety of other students and staff. While we support the right of students and educators to have a safe environment, this includes ALL students; if a student is so dysregulated that their actions become unsafe, it is because their nervous system does not perceive safety, and inclusive schools must work to meet all students’ needs for psychological safety. Restrictive and exclusionary practices are known to exacerbate behavioural problems and cause psychological harm, and are not aligned with trauma-informed care.[[7]](#footnote-7)

Positive reinforcement and functional behaviour assessments

Positive behaviour support (PBS) programs are the preferred behavioural management method of many state governments currently. While the tiered system of supports can be a useful framework, a closer look at the techniques being promoted show that they are far from being inclusive, even though they are evidence-based.

Positive reinforcement, often in the form of token economies, is a strategy that purports to increase appropriate behaviours. It appears preferable to punitive, restrictive and exclusionary measures of influencing behaviour and yet, the focus is still on increasing desired behaviours, without investigating the needs of the child. The goal is compliance, not wellbeing. Parents report that this can lead to a child being under constant stress due to close monitoring or consistently missing out rewards when behavioural expectations cannot be met, as well as disengagement from school.

“In pre-primary, our daughter’s behaviour was unusually difficult after school one day. Turns out a star chart had been started. It was a long road to diagnosis in year 5, but anything controlling of behaviours created difficulties, whereas when she was left alone, she excelled.”

“My 8-year-old daughter was told she could have her favourite chocolate if she did a group spelling activity that she’d previously struggled with. The education assistant had already tried offering dojo points and lollies. My daughter refused to go to school, as she didn’t want miss out on her chocolate because she couldn’t do the spelling. She has not been back to school for a whole term. It’s her third period of school refusal at the age of eight, all because of behaviourism.”

Functional Behaviour Assessments are also often used as part of PBS models in schools. While this tool looks like a more collaborative and informed strategy, its focus is still on eliminating behaviours rather than meeting students’ needs, and it relies on a very narrow and outdated understanding of behaviours. (It evolved from Applied Behaviour Analysis, which is often promoted as the only evidence-based therapy for autism, but which is overwhelmingly criticised as traumatic by autistic adults who have undergone it.[[8]](#footnote-8)) To provide truly inclusive spaces, our educational institutions must look beyond ‘evidence-based’ as the gold standard, and towards tools that are also informed by current neuroscience.

“Approaches that don’t respect the instinctual, protective and automatic behaviours autistic and neurodivergent individuals display are missing the most important element, which is respecting individual differences, and viewing behaviours as adaptive and protective.” - Mona Delahooke, PhD[[9]](#footnote-9)

Additional issues

A lack of understanding of neurodivergence, as well as the social model of disability, often leads to students being denied supports, given unreasonable expectations, excluded from class and sanctioned for behaviours that are caused by disability.

“My youngest had eye contact listed on his PBS ‘behaviour plan’ as an expected behaviour. If I hadn’t stepped in, he’d have had rewards and consequences for eye contact. He’s autistic.”

“A coordinator screamed at my year 10 child to take their headphones off (which were being worn with permission from the teacher). I had to cite the Disability Discrimination Act to the principal for my child to wear headphones without further interference.”

“When my ADHD-diagnosed old son was 9 years old, he was removed from his class room due to emotional deregulation and spent his days with only an SSO or wellbeing co-ordinator. He missed a total of 250 hours of teacher contact/lesson time compared to his peers.”

“My autistic child was told multiple times by multiple teaching staff to 'stop fidgeting', 'stope whinging' when self-advocating, and was asked to use their Zones of Regulation skills to assess if their distress was really out of perspective.”

Some parents also report a tendency of schools to deny supports when there is no diagnosis of disability.

“The high school kept telling me that I had to ‘prove’ diagnosis by sharing doctors’ reports, before they would provide any accommodations, even though the NCCD includes imputed disability and I detailed the ways my kid was struggling. (And the doctor just wasn’t delivering on a school-appropriate version of the letter.)”

Another non-inclusive practice that families experience is ‘push-out’, when supports are denied and/or hours are reduced, or unofficial ‘suspensions’ occur, with the end result of parents removing their child from the school in an attempt to find a suitable alternative.

“My older boy (now diagnosed ADHD) was assaulted at school twice in one day and the school flat out told me they couldn't keep him safe. He received no funding or support and I felt pressured into taking him out because the school wouldn’t manage the bullying.”

On the flip side, some families report the stress they are under due to the ableism of attendance policies, where school structures and curricula are designed with full, in-person attendance in mind. In some cases, students are rewarded for attendance, or parents receive legal threats when attendance drops due to ‘school refusal’, which is often caused by school trauma.

“With its constant sensory overwhelm, social interactions, and demands and expectations, the school environment is exhausting for my autistic child and she functions much better with reduced hours. I’ve had to learn to tune out the regular messages in the newsletter about there being ‘no safe number of days to miss.’”

The way forward

“Kids do well if they can.” - Dr Ross Greene

For as long as the focus remains on encouraging or eliminating particular behaviours, with very little understanding of the physiological and psychological needs of children, students will continue to be harmed and the goals of NSRA will not be met. The way forward is a shift to viewing behaviours as indicators of how a child’s nervous system is experiencing and responding to both internal and external stimuli, and a move to a collaborative, problem-solving approach.

Regarding information request 4.1, “Should there be National Policy Initiatives to improve student wellbeing?” SPRW recommends that Dr Ross Greene’s Collaborative and Proactive Solutions (CPS) model of care be adopted nationally.

“CPS is the evidence-based model of care that helps caregivers focus on identifying the problems that are causing concerning behaviours in kids and solving those problems collaboratively and proactively. The model is a departure from approaches emphasizing the use of consequences to modify concerning behaviours. In families, general and special education schools, inpatient psychiatry units, and residential and juvenile detention facilities, the CPS model has a track record of dramatically improving behaviour and dramatically reducing or eliminating discipline referrals, detentions, suspensions, restraints, and seclusions. The CPS model is non-punitive, non-exclusionary, trauma-informed, transdiagnostic, and transcultural.”[[10]](#footnote-10)

Other models that are based on collaborative problem-solving, consent or democratic processes would be equally beneficial. The priority is the lens change from behaviour management directed by the adult, to problem solving in collaboration with the student. The CPS model is underpinned by an understanding that kids do well if they CAN, rather than if they WANT TO, and that the way to help kids do well is to investigate why they are having difficultly meeting expectations and solve the problem collaboratively. CPS has the advantage of an extensive evidence base behind it,[[11]](#footnote-11) with training readily available (see the Appendix for the background to the campaign for CPS in Australian schools, including training opportunities offered by Dr Greene). It would be quick to implement and cost effective.

The benefits of using this approach to support students include:

* getting to the root of the problem, whether it be lagging skills or unmet needs, for a more sustainable solution;
* helping kids develop skills such as problem solving, self-advocacy and collaboration as well as the specific skills they need for solving each problem;
* more effectively understanding and supporting neurodivergent students and others who may have more difficulty meeting expectations;
* not having to rely on diagnosis in order to provide support;
* working in sync with the latest scientific understandings of bodies, brains and behaviours, rather than outdated psychological theories.

This model also helps to create psychological safety because it strengthens the connection between teacher and student. Neuroscience is showing that warm, connected relationships with carers are central to healthy brain development in children, leading to mental wellbeing.[[12]](#footnote-12) However, traditional behaviour management models actively hinder this type of relationship between teachers and students, putting the teacher into the role of enforcer, rather than a safe and trusted adult who can provide guidance, empathy and co-regulation.

Several SPWR parents shared the difference a connected, informed, problem-solving approach can make:

“My son’s teacher makes a point of connecting with her students, and said to me recently that since she’s dropped the enforcement of unnecessary compliance-type demands and an emphasis on ‘results’, and instead focused on building connections and relationships in the class, her classroom is so peaceful and happy and they’re learning way quicker and way more.”

“My Year 9 son (anxiety and ADHD) has at least one day off a week to get through existing at school. The school is so supportive of that. Teachers accept drafts and give feedback on assessment tasks and check in on him during class. The Head of House has provided a safe place.”

“My son is now at a lovely supportive state school who use trauma-informed practices and problem solve in a way that is similar to CPS. They implement the same neurodivergent-affirming strategies that his previous school refused to use and my son is doing so well. 18 months on from exclusion, my son has not had a single meltdown at school. No swearing, no chair throwing, no hiding under tables. In fact, he now trusts his teachers so much that if he is escalated, he will tell them he is angry and ask them to call me. Which they do straight away. These strategies changed my son’s life and mine.”

“My 7-year-old child brought home a straight As report card and I almost fell off my chair. In this new learning environment, that is supportive of neurodiversity, my child has just flourished. His self-esteem has improved too.”

CPS benefits ALL children and teachers – children’s nervous systems perceive safety, challenging behaviours decrease, the classroom is calmer, safer and more conducive to learning for all children, teachers have stronger connections to their students and far fewer challenging behaviours to manage.

Improved training

In terms of strengthening Initial Teacher Education, along with ongoing Professional Learning for all school leaders, teachers and support staff, SPRW recommends that CPS be taught in place of behaviour-focused models, alongside trauma-informed and trauma-responsive understandings, and neuroscience-informed understandings of how the nervous system affects behaviour (for example, courses run by Dr Mona Delahooke[[13]](#footnote-13) and Dr Stuart Shanker[[14]](#footnote-14)). If we are to create inclusive schools that meet physiological and psychological needs as well as educational ones, such training must be given at least equal importance to that of teaching and learning theories and techniques.

“Nothing about us without us”

Regarding embedding the perspectives of priority equity cohorts in policy and institutions (information request 3.5), SPRW would like to see stakeholders of many different types be included in decision-making; not only in consulting roles, but in decision-making roles as well.

The slogan “Nothing about us without us” is often used by disability rights activists to explain the concept that no policies should be created without the full and direct participation of members of the groups that are affected by the policy. We welcome the mandate for consultation and shared decision-making with Aboriginal and Torres Straight Islander people. We strongly urge the government to adopt a similar mandate regarding people with disability, including neurodivergent people. Other relevant groups include parents (from various locations and demographics); school leaders, teachers and support staff; advocacy groups; health, mental health and allied health professionals; and academics working in relevant research. There is a final group of people who are consistently left out of decision-making processes even though they are the most affected: students. A truly collaborative approach to inclusive schooling must embed student voice at the highest levels of decision-making.

Recommendations

It is long overdue that the Australian education system reassesses how it is engaging with the evidence in a more holistic way. What ‘works’ cannot be measured by what works to keep students with behavioural challenges quiet in the classroom or out of the classroom altogether – that is based on suppressing students’ lagging skills and unmet needs rather than addressing them. What ‘works’ must be measured by what creates a safe and calm environment for ALL students and teachers, and a learning environment that can cater to all students.

SPRW suggests that the Productivity Commission recommend that:

1. The federal government expands the NDIA or AERO to create a department with responsibility for research, data and enforceable national inclusive education standards; this department should work with State/Territory departments and potentially individual schools to promote inclusive education practices that are:
   * Trauma-informed
   * Culturally safe
   * Neurodiversity-affirming
   * Interoception-informed
   * Neuroscience-based
   * Collaborative and proactive
2. Initial Teacher Training and ongoing Professional Learning that covers the understandings listed above should be made a priority. School leaders should be able to demonstrate competence in these areas.
3. All education policies and initiatives, at the federal and state level, be required to include the input of representatives of ALL stakeholders and professionals with relevant knowledge, including: Aboriginal and Torres Strait Islander people; people with disability; neurodivergent people; school staff; parents; advocacy groups; health, mental health and allied health professionals; academics; and students.
4. Wellbeing be incorporated into the next agreement, and that the effects of behaviour management techniques be investigated with regard to their impact on wellbeing and inclusion.
5. CPS be considered as a cost-effective program to be implemented nationally to improve student wellbeing, and that it be piloted in a number of schools in order to begin data collection.

We believe that schools, like kids, do well if they can. It’s time to equip school leaders, teachers and support staff with the tools they need to provide inclusive, thriving educational environments.

Appendix – Background to the campaign for CPS in Australian schools

The following provides an overview of the campaign by SPRW and other advocates of neurodivergent children to introduce Collaborative and Proactive Solutions (CPS) into Australian schools.

* There is a significant movement towards inclusive education in Australia and across the world generally. However, until the education systems in Australian jurisdictions get up to speed with the latest neuroscience-based evidence and approaches to behaviour support, it is not possible to be genuinely inclusive.
* There is a parent advocate movement to get CPS implemented in schools across the country, including by SPRW. These are (often neurodivergent) parents of neurodivergent children who have had lived experience of their children being traumatised by school – by an education system with an outdated emphasis on behaviour management through rewards and ‘consequences’; and by teachers who are in crisis mode and who are not given the knowledge, tools and supports to teach and care for children with challenging behaviours in a more effective way.
* There are already Australian schools who have implemented or begun implementing CPS with success, for example St Philip’s Christian College DALE. However, despite attempts by The Kidman Institute at UTS, in conjunction with individual schools, the Department of Education in NSW did not agree to be involved in a formal trial of CPS.
* The NSW Government has been engaging, via Education Minister Mitchell’s office and officials in the Department, with Lou Kuchel of SPRW regarding implementing a pilot of CPS schools in NSW. The Education Department has agreed that individual principals and schools may trial CPS and provide their data for the Department to consider implementing a formal pilot program. Other states are working towards similar scenarios.
* There is a groundswell of parents engaging with their schools individually to introduce CPS on a school-by-school basis, but we are concerned that data collection needs to be coordinated by a research institute or government department.
* Dr Ross Greene has met with the NSW Education Department and Lou Kuchel. Dr Greene has offered free training to any school piloting CPS in NSW (and presumably any other state or territory too).
* [www.Livesinthebalance.org](http://www.Livesinthebalance.org) has existing teacher and parent training programs and videos and resources freely available. There are freely available resources on how to implement CPS in schools. There are also low-cost Professional Learning courses run by Dr Ross Greene.
* This petition to implement CPS in schools has almost 20,000 signatures: [Petition · Stop the Aussie school system punishing vulnerable kids! · Change.org](https://www.change.org/p/stop-the-aussie-school-system-punishing-vulnerable-kids)

1. Commonwealth Schools Commission report, 1985, p12 [↑](#footnote-ref-1)
2. Of course, SPRW respects the need for parents to choose to send their child to a segregated ‘special school’ while our education system does not cater for all students and in fact traumatise so many neurodivergent students with their current ‘behaviour management’ approaches. However, the aim should be that all children can be sent to their local public school and be welcome, safe, included, understood, accommodated and educated. [↑](#footnote-ref-2)
3. https://monadelahooke.com/how-teachers-can-take-a-more-compassionate-approach-to-behaviors/ [↑](#footnote-ref-3)
4. https://www.aare.edu.au/blog/?p=12256 [↑](#footnote-ref-4)
5. https://www.aic.gov.au/sites/default/files/2020-05/tandi531.pdf [↑](#footnote-ref-5)
6. https://brill.com/view/journals/chil/23/1/article-p189\_9.xml [↑](#footnote-ref-6)
7. https://www.centreformentalhealth.org.uk/sites/default/files/2020-01/Briefing\_54\_traumainformed%20schools\_0.pdf [↑](#footnote-ref-7)
8. https://nepc.colorado.edu/blog/autism-and-behaviorism [↑](#footnote-ref-8)
9. https://endseclusion.org/2021/09/23/whats-the-problem-with-this-functional-behavioral-assessment-interview-form/ [↑](#footnote-ref-9)
10. https://livesinthebalance.org/our-solution/ [↑](#footnote-ref-10)
11. https://livesinthebalance.org/research/ [↑](#footnote-ref-11)
12. https://monadelahooke.com/childrens-mental-health-everyones-responsibility/ [↑](#footnote-ref-12)
13. https://catalog.psychotherapynetworker.org/sales/pn\_c\_001442\_beyondbehaviors\_organic-173076 [↑](#footnote-ref-13)
14. https://self-reg.ca/ [↑](#footnote-ref-14)