

4.8 Feeling physically and mentally well

Physical and mental health affects all aspects of life and all areas of wellbeing.¹²⁷ Positive physical and mental health provides a strong foundation for learning and student emotional, cognitive and behavioural engagement with school and learning. Student engagement with learning may also be affected by disability or a long-term condition. It is critical that student health is promoted and students with disability or a long-term health condition are appropriately supported to be able to engage with learning.

The following chapter explores student's views of health and its influence on learning. Chapter 5 – Students in education support centres and students with disability discusses the experiences of school and learning from the perspective of students in education support centres and students in the main sample who identified as having a disability or long-term health condition.

Survey findings

- 70 per cent of Year 7 to Year 12 students rated their health as 'excellent' or 'very good'.
- 22 per cent of Year 7 to Year 12 students reported having long-term health problems and seven per cent reported having a disability.
- More than 40 per cent of Year 7 to Year 12 students said they had difficulties with concentration, behaviour, feelings or getting along with people.
- Students who reported a health problem were less likely to give a positive rating of their school and learning experience than students with no such problems.

The views of Year 3 to Year 6 students

A number of Year 3 to Year 6 students raised health-related issues in response to the final survey question 'If there was one thing you could change about your school what would it be?'

Predominantly in their comments students asked for healthier canteen food, more playground equipment and for more sports and physical education to be taught in their school:

"Physical education every day to keep us healthy."

"I would change the canteen food because the canteen food is very unhealthy."

"More playground equipment. I feel if there [was] some more it would intrigue more kids to get more fit and healthy."

In response to a question about preferred teacher qualities, students acknowledged the importance of tailored support for their health and wellbeing, and the impact on their learning:

"I love how all of the teachers care and ALWAYS look out for you. With me I have ADHD and my mum only found out about it about five years ago and I was really struggling with my school work and my concentration but all of the teachers helped me heaps with my education and if I had not come to this school I think my concentration and education would be very poor."

"I love learning with my teachers because they help me with my maths and my hearing problem."

The survey for Year 3 to Year 6 students did not include any specific questions about physical and mental health.

How do students rate their health? – Year 7 to Year 12

Almost 70 per cent of Year 7 to Year 12 students rated their health as 'excellent' or 'very good', with a further 23 per cent saying their health was 'good'.

However, more than seven per cent of students answered that their health was either 'fair' or 'poor'. A few students were 'unsure'.

A higher proportion of male than female students rated their health as 'excellent' however the difference was not statistically significant (25.7% versus 22.3%). There was little difference between students from regional and metropolitan areas.

Aboriginal students were significantly less likely than non-Aboriginal students to rate their health as 'excellent' (11.4% versus 24.8%) and more likely to say their health was 'fair' or 'poor' (22.7% versus 6.4%). In other words, only one in 10 Aboriginal students said their health was 'excellent' but more than one in five said their health was 'fair' or 'poor'.

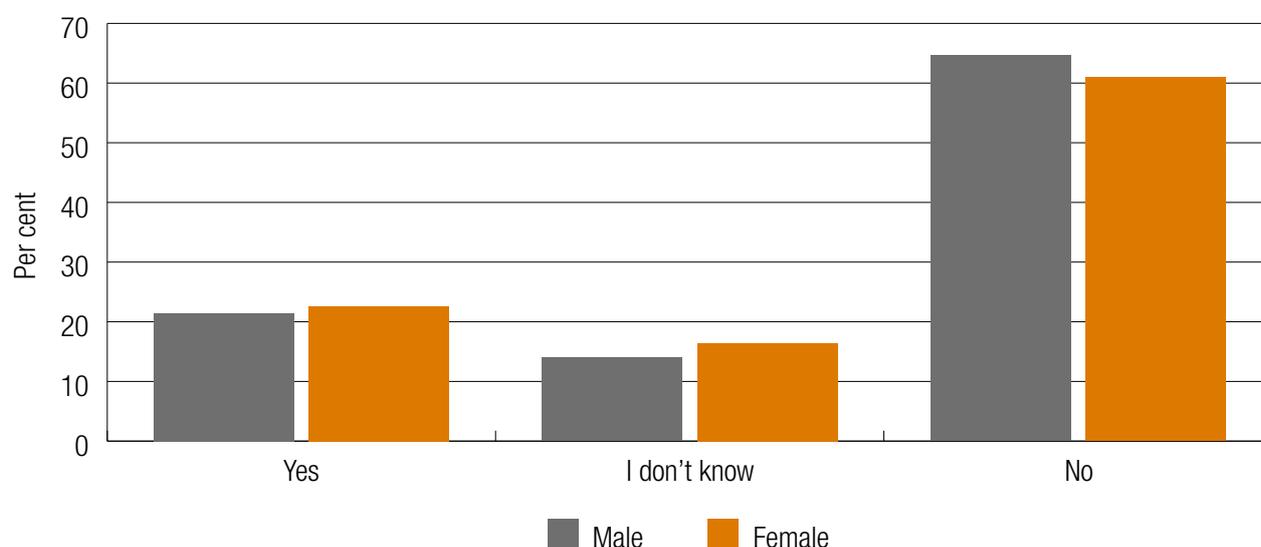
Table 4.26: Proportion of Year 7 to Year 12 students saying their health is excellent, very good, good, fair, poor or student is unsure, by selected characteristics

	Male	Female	Metropolitan	Regional	Non-Aboriginal	Aboriginal	All
Excellent	28.4	22.3	25.2	24.0	25.7	11.4	24.8
Very good	42.8	46.2	42.3	49.5	44.8	38.6	44.5
Good	22.8	22.6	23.5	20.7	22.3	27.3	22.6
Fair	4.2	7.7	7.0	4.8	5.5	18.2	6.3
Poor	1.1	0.5	1.5	0.0	0.9	4.5	1.0
Unsure	0.7	0.8	0.6	1.0	0.7	0.0	0.7

In regard to long-term health problems, one in five (22.2%) Year 7 to Year 12 students reported having a long-term health condition(s) such as asthma, diabetes or depression. Two-thirds of students (62.3%) said they had no long-term health problems and 16 per cent said they 'didn't know'.

There was no significant difference between the genders, between students from regional and metropolitan areas or between Aboriginal and non-Aboriginal students in regard to this question.

Graph 4.22: Proportion of Year 7 to Year 12 students saying they have long-term health problem(s) or condition(s) (lasting 6 months or more) (e.g. asthma, diabetes, depression), by gender



Year 7 to Year 12 students with a long-term health problem(s) reported that their condition most commonly caused them difficulty or stopped them doing:

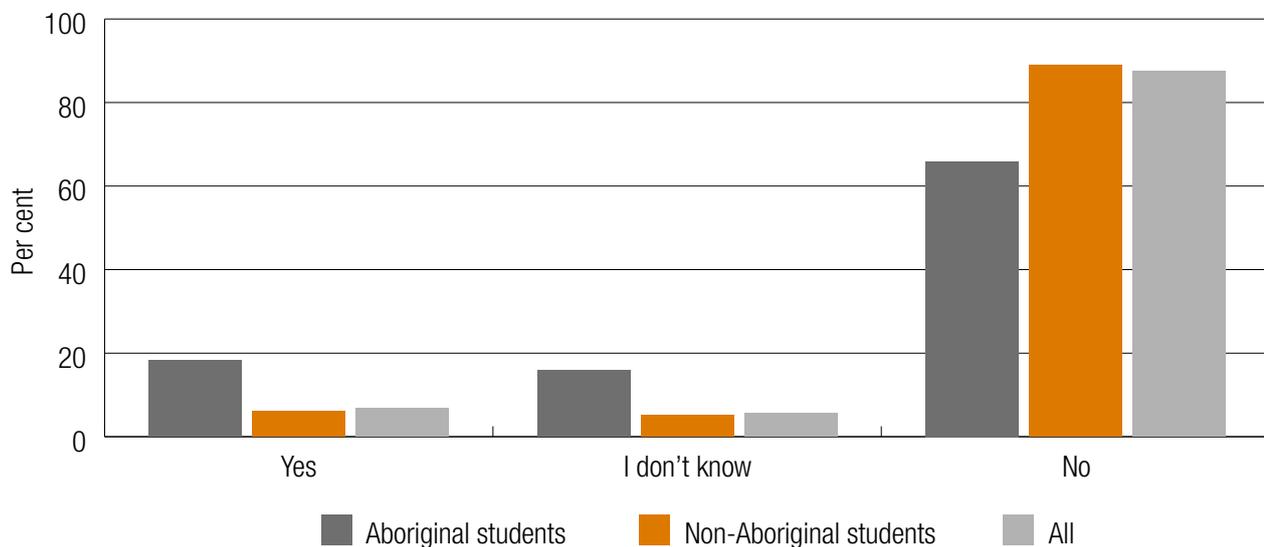
- sports (36.4%)
- socialising, communicating and meeting friends (21.9%)
- coming to school (19.9%).

More than one-third of students (35.8%) with a long-term health condition(s) said that it did not cause them any difficulty.

Students were also asked whether they had a long-term disability such as sensory impaired hearing, visual impairment, were in a wheelchair or had learning difficulties. Seven per cent of students answered 'yes' to this question and a further six per cent said they 'didn't know'.

Eighty-eight per cent of students said they had no long-term disability. There were no marked differences between the genders or students from regional and metropolitan areas. However one in five Aboriginal students (18.2%) reported having a long-term disability and a further 16 per cent said they 'didn't know'.

Graph 4.23: Proportion of Year 7 to Year 12 students saying they have a long-term disability (lasting 6 months or more) (e.g. sensory impaired hearing, visual impairment, in a wheelchair, learning difficulties), by Aboriginal status



Students with a long-term disability reported that their disability most commonly caused them difficulty or stopped them doing:

- school work in class (41.3%)
- homework (34.8%).

A little less than one-third of students with disability (30.4%) said that it did not cause them any difficulty.

Almost 15 per cent of Year 7 to Year 12 students reported doing extra work around their house because someone has a disability, is sick or can't do things. Aboriginal students were particularly affected by this with 34.1 per cent of Aboriginal students reporting doing extra work around their house.

For affected students, this extra work impacted most commonly on doing homework (22.0%), everyday activities that other people [their] age can usually do (20.0%) and socialising, communicating and meeting friends (20.0%).

Around one-half of students (48.0%) who do extra work around their house answered that it did not stop them doing any activities.

Students' mental health

More than 40 per cent of Year 7 to Year 12 students reported having difficulties with concentration, behaviour, feelings or being able to get along with other people.

A higher proportion of male than female students reported being affected by such difficulties however the difference was not statistically significant (44.6% versus 38.2%). There was little difference between students in regional and metropolitan areas.

Aboriginal students were significantly more likely than their non-Aboriginal peers to be affected with two in three Aboriginal students (68.2%) saying they had some level of difficulty with concentration, behaviour, feelings or getting along with other people.

Table 4.27: Proportion of Year 7 to Year 12 students saying they have difficulties with concentration, behaviour, feelings or being able to get along with other people, by selected characteristics

	Male	Female	Metropolitan	Regional	Non-Aboriginal	Aboriginal	All
Yes, a few difficulties	28.4	19.5	23.9	21.6	22.4	34.1	23.2
Yes, some difficulties	13.0	15.6	14.2	15.9	13.8	29.5	14.7
Yes, many difficulties	3.2	3.1	3.2	3.4	3.1	4.5	3.2
No	55.4	61.8	58.8	59.1	60.7	31.8	58.9

Overall, Year 7 to Year 12 students who reported having some level of difficulty in the mental health area were more likely than students with no such difficulties to:

- have other long-term health problems or poorer health overall
- not like school or not like school very much
- feel unsure about feeling part of their school
- feel that teachers don't care or care some rather than a lot
- not think it important to be proud of their school work
- not feel safe at school 'all the time' and be afraid of getting hurt or bullied
- have wagged school.

The additional burden of disadvantage in the Aboriginal community is well documented. Aboriginal children and young people are also more likely to experience mental health concerns – and this was reflected in the results of this survey with Aboriginal students being significantly more likely to report difficulties in this regard (68.1% of Aboriginal students reported having such difficulties compared to 39.3% of non-Aboriginal students).

Specifically in regard to gender, male students overall were more likely than female students to report having some level of difficulty in the area of mental health (44.6% versus 38.2%) however they were less likely to say that these difficulties upset or distressed them (62.2% versus 82.6%).

Overall three-quarters of all students with mental health problems (73.6%) reported being upset or distressed by these difficulties. One-half of affected students (48.5%) felt that the difficulties interfered with their classroom learning and more than one-third (37.2%) said their difficulties interfered with friendships.

Table 4.28: Proportion of Year 7 to Year 12 students saying their difficulties in the mental health area interfere with their everyday life, by selected areas of interference

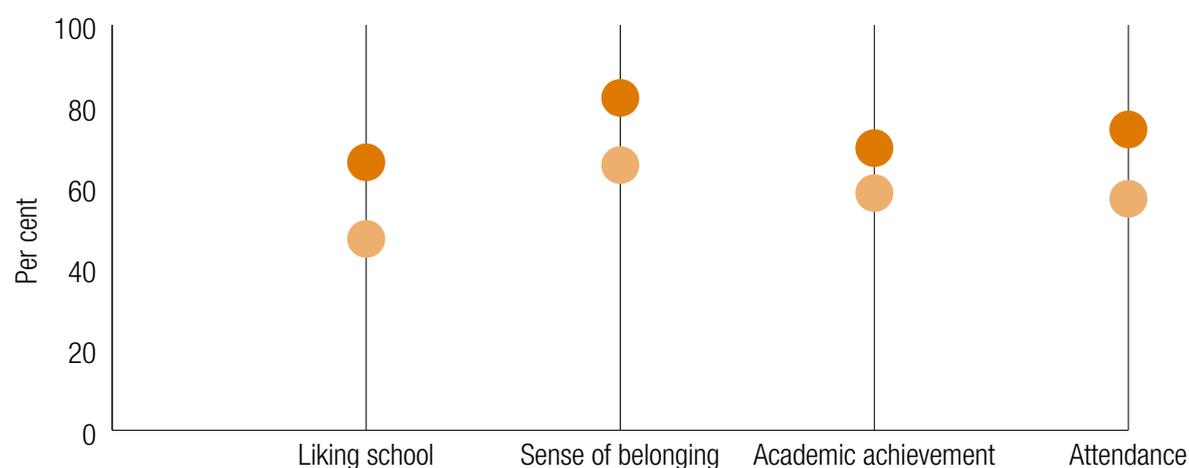
Area	Percent
Friendships	37.2
Classroom learning	48.5
Home life	32.5
Leisure activities	13.1
No, do not interfere with any of these areas	29.9
Other area	3.6

Cross-tabulation of responses from students who reported difficulty with concentration, behaviour or feelings with those from students who reported no such difficulty showed that students with difficulty in the mental health area had poorer engagement outcomes.

Students with reported difficulty in the mental health area were less likely to:

- like school ‘a lot’ or ‘a bit’ (47.2% compared to 66.1%)
- feel like they are part of their school (65.4% compared to 82.0%)
- say being at school every day is ‘very important’ (57.1% compared to 74.2%)
- achieve results that are ‘above average’ or ‘near the top’ (58.5% compared to 69.6%).

Graph 4.24: Selected engagement indicators for Year 7 to Year 12 students saying they do not or do have difficulty with concentration, behaviour or feelings

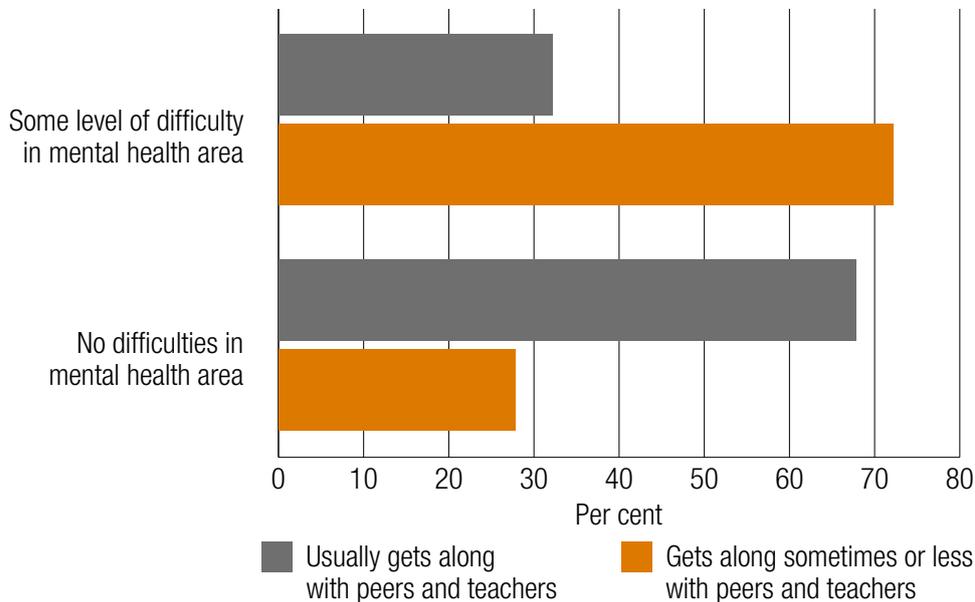


Note: Liking school includes students who said they like school ‘a lot’ or ‘a bit’, sense of belonging includes students who said they feel like they are part of their school, academic achievement includes students who said they achieve ‘above average’ or ‘near the top’ in their school results and attendance includes students who said it is ‘very important’ to them to be at school every day.

Students who get along with peers and teachers

Students who said they ‘usually’ get along with their peers and teachers were less likely than students who said they get along ‘sometimes’ or less to report some level of difficulty in the area of mental health (32.2% versus 72.2%).

Graph 4.25: Proportion of Year 7 to Year 12 students reporting some or no level of difficulty with concentration, behaviour, feelings or being able to get along with others, by how well student gets along with peers and teachers



Students with fair or poor health

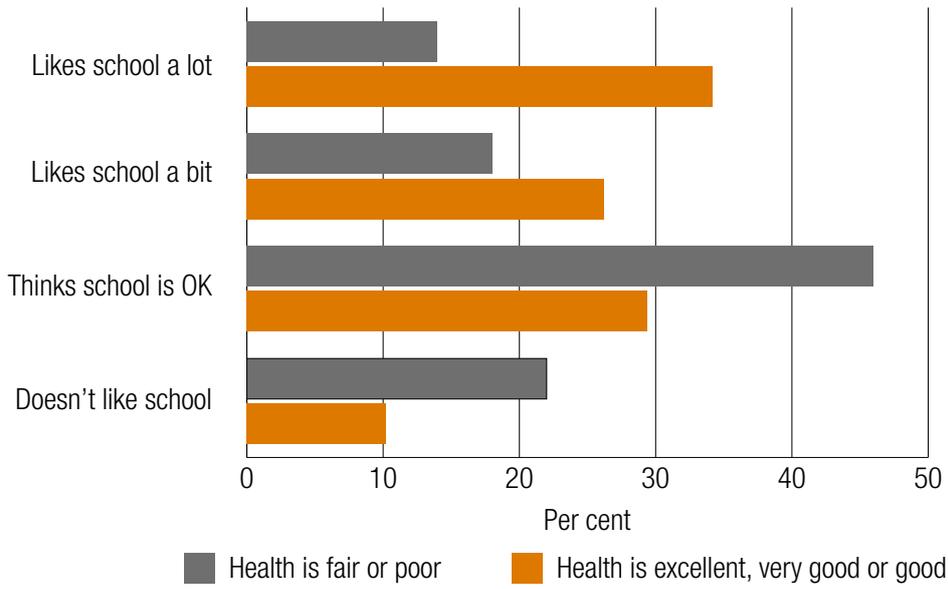
Cross-tabulation of responses from students who described their health as either ‘fair’ or ‘poor’ with those from students who said their health was ‘good’ or better showed that less healthy students had poorer engagement outcomes.

Students with self-reported ill-health were less likely to:

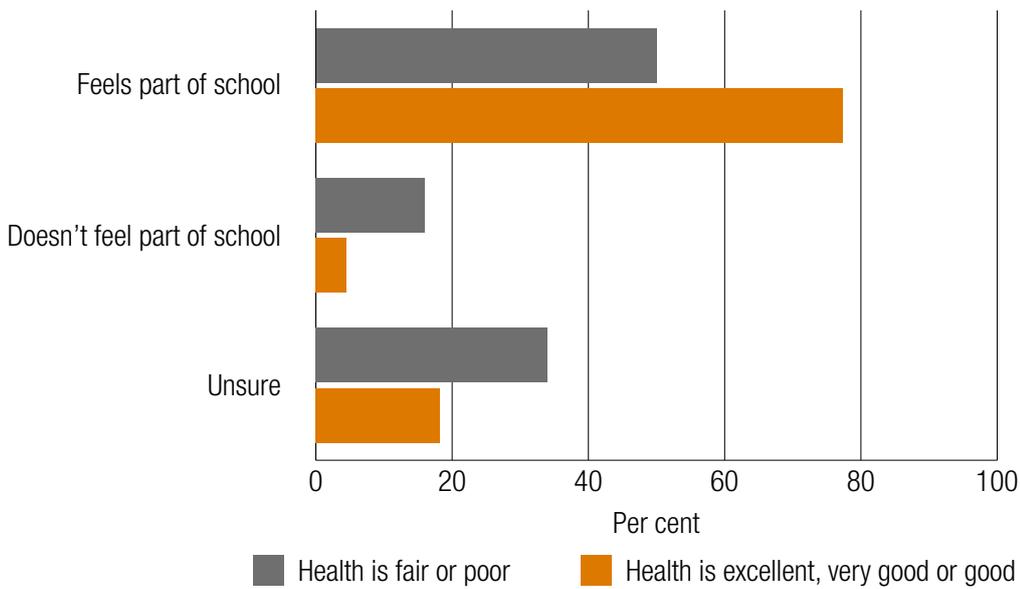
- like school ‘a lot’ or ‘a bit’ (32.0% compared to 60.4%).
- feel like they are part of their school (50.0% compared to 77.3%).
- say being at school every day is ‘very important’ (48.0% compared to 68.4%).
- achieve results that are ‘above average’ or ‘near the top’ (40.8% compared to 67.2%).

It is important to remember that Aboriginal students were significantly overrepresented in the group of students with ‘fair’ or ‘poor’ health (22.7% of Aboriginal students versus 6.4% of non-Aboriginal students).

Graph 4.26: Proportion of Year 7 to Year 12 students saying they like school a lot, a bit, school is OK or they don't like school/don't like school at all, by self-reported health rating



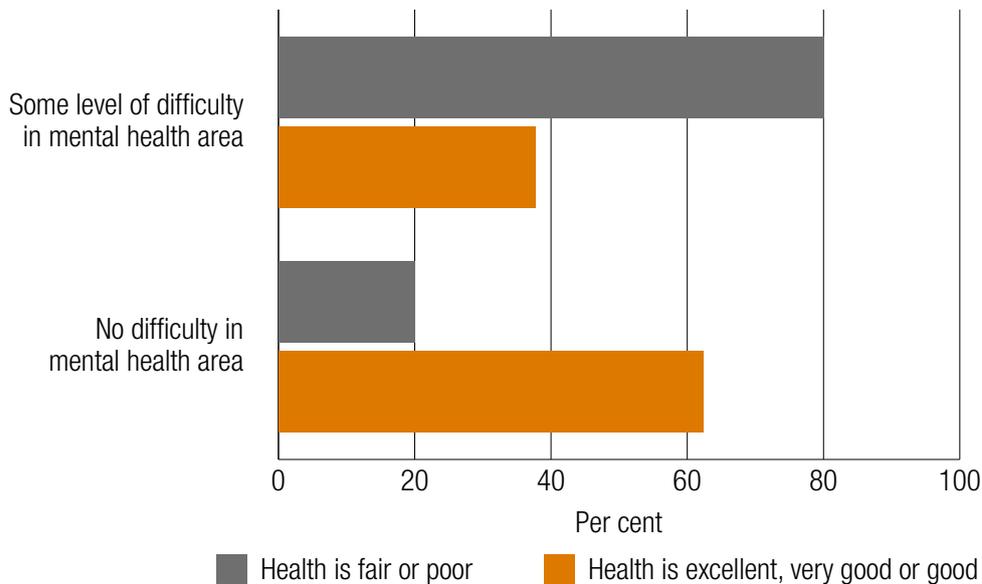
Graph 4.27: Proportion of Year 7 to Year 12 students saying they feel like part of their school yes, no or unsure, by self-reported health rating



Accumulation of health problems

Results from the survey showed that compared to students with 'good' health or better, those with 'fair' or 'poor' health were more likely to report having a long-term health condition(s) (19.1% versus 40.0%), a long-term disability (4.9% versus 22.0%) or difficulties in areas of mental health such as problems with concentration, behaviour, feelings or being able to get along with other people (37.7% versus 80.0%).

Graph 4.28: Proportion of Year 7 to Year 12 students reporting some or no level of difficulty with concentration, behaviour, feelings or being able to get along with others, by self-reported health rating



Students with long-term health condition(s) or disability

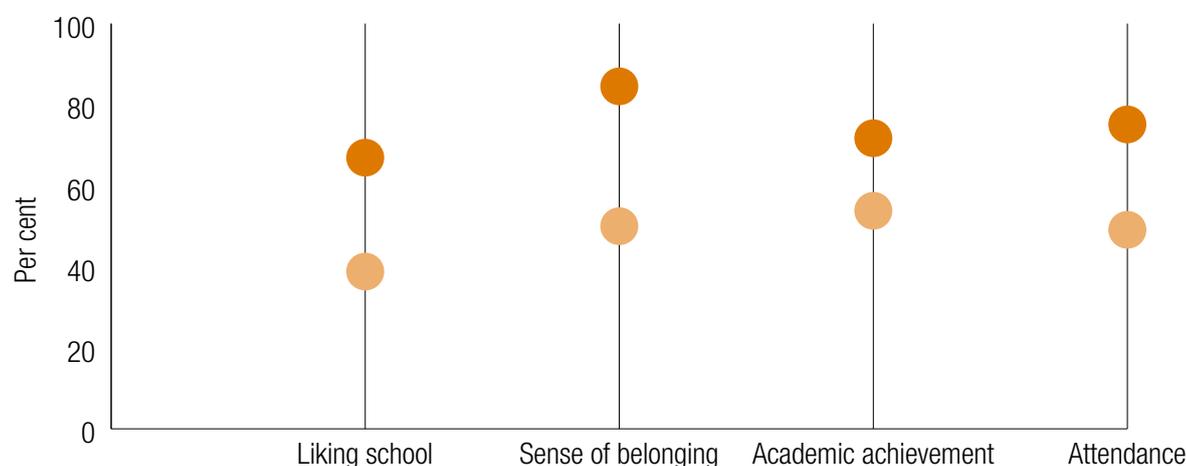
Cross-tabulation of survey responses showed that students with long-term health condition(s) or disability were less likely than students with no such health problems to feel like they are part of their school, to like school ‘a lot’ or ‘a bit’, to achieve highly and to say that being at school every day is ‘very important’ to them.

Table 4.29: Selected engagement indicators for Year 7 to Year 12 students, by self-reported health status

	Student reported health is excellent or very good and student has no long-term health condition	Student reported health is good, fair or less and student has a long-term health problem or isn't sure	Student reported no difficulties in mental health area	Student reported difficulties in mental health area
Liking school	66.9	38.8	66.1	47.2
Sense of belonging	84.5	50.0	82.0	65.4
Academic achievement	71.7	53.8	69.6	58.5
Attendance	75.1	49.1	74.2	57.1

Note: Liking school includes students who said they like school ‘a lot’ or ‘a bit’, sense of belonging includes students who said they feel like they are part of their school, academic achievement includes students who said they achieve ‘above average’ or ‘near the top’ in their school results and attendance includes students who said it is ‘very important’ to them to be at school every day. Students who gave a combination of answers (e.g. student reported health is very good but student has long-term health condition) have been omitted in this table.

Graph 4.29: Selected engagement indicators for Year 7 to Year 12 students saying their health is excellent or very good and they have no long-term health problems or students saying their health is good, fair or poor and they have long-term health problems



Note: Liking school includes students who said they like school ‘a lot’ or ‘a bit’, sense of belonging includes students who said they feel like they are part of their school, academic achievement includes students who said they achieve ‘above average’ or ‘near the top’ in their school results and attendance includes students who said it is ‘very important’ to them to be at school every day.

For further discussion on students with disability, see other sections in this chapter (‘Learning and disability’) and Chapter 5 – Students in education support centres and students with disability.

Group discussion findings

Students across Year 3 to Year 12 identified that being healthy increased their ability to engage with school and learning. Students adopted a holistic view of health, with being healthy including physical, mental and emotional health. To be healthy students needed to:

- have their basic needs met – food, water and sleep
- be provided with or have access to healthy foods
- be provided with breaks and opportunities to be physically active
- have positive relationships with peers, school staff and family members.

Students identified that schools and families have important roles to play in meeting these needs. Students in Year 7 to Year 12 in particular, felt schools could do more to support their health and wellbeing, particularly through the provision of breakfast programs and altering school times to take account of their changing biology through adolescence. Friends, school staff and family members contributed significantly to student health – as noted in previous chapters.

Being unhealthy or student ill-health negatively affected student learning and students wanted support and strategies to minimise the consequences of ill-health.

Students across Year 3 to Year 12 also identified that disabilities can make it difficult for some students to learn and to get the help and support they need. Students suggested a range of supports that students with disability may require to like and engage with school and learning. These supports are the same as those of all students, including having:

- acknowledgement of learning needs and subsequent support for learning
- someone to talk/communicate with
- someone to trust
- safety
- people to support them.

A holistic view of health

To be in a position to engage with school and learning students were cognisant of the importance of their basic needs being met. They indicated it was essential to have food, water and sleep to be able to concentrate. Generally families provided for these needs, however, as outlined in Chapter 3.3 – Families who are involved and interested, friends and schools also provided for basic necessities, and students requested support for these needs to be met. Some students in Year 7 to Year 12 suggested schools had a role to play through programs such as breakfast clubs, and they felt that all schools should have these programs.

Students in Year 7 to Year 12 noted school can impinge on their ability to have their needs met, particularly regarding sleep. Students explained that their time is often taken up by school and work, and they may need to stay up late to complete homework.

Year 3 to Year 6	Year 7 to Year 12
<p><i>“Food.”</i></p> <p><i>“Water.”</i></p> <p><i>“Sleep.”</i></p>	<p><i>“Rest.”</i></p> <p><i>“Balanced diet.”</i></p> <p><i>“More sleep.”</i></p> <p><i>“Breakfast at home.”</i></p>

The types of food available at school were also commented on by students, with identification of improvements that could be made to support student health. Many requested changes to the canteen menu, including increasing the amount of healthy food, and for prices to be reduced. For schools without canteens, the installation of one was seen as beneficial for students who forgot lunch and as an additional income stream for schools.

Year 3 to Year 6	Year 7 to Year 12
<p><i>"Healthy food in canteen."</i></p> <p><i>"Eat food in class so whenever we are hungry we can eat."</i></p> <p><i>"I would change school by putting a cafeteria in the school. If you don't have lunch or recess you could buy food yeh?"</i></p> <p><i>"A canteen because if you don't have time to make lunch they could buy lunch and plus it will earn the school money."</i></p> <p><i>"More healthy food."</i></p>	<p><i>"Healthier food available to buy – it's all sugary or greasy."</i></p> <p><i>"Cheaper canteen and healthier canteen."</i></p> <p><i>"More canteen options that will not break my bank. It is so expensive to buy lunch and recess."</i></p> <p><i>"More food in our canteen and healthier options."</i></p> <p><i>"A school farm so we can produce our own food like eggs and milk."</i></p> <p><i>"Food in class."</i></p>

Students in Year 3 to Year 6 made a clear connection between their ability to concentrate and nutrition. Not being provided with food or being provided with unhealthy food made it difficult to concentrate on learning.

Year 3 to Year 6

"Feed them/as you need food to concentrate."

"Feed you bad food e.g. McDonald's because they have so much advertising. They are also so junky it is hard to learn."

"Sometimes not bring lunch at all and you sit in class when you are supposed to be listening you are thinking about how hungry you are."

"They [family members] provide lunch so that you can concentrate."

Whereas students in Year 7 to Year 12 requested changes to school organisation that would better enable them to engage with school and learning. Largely, their comments related to later school starting times to accommodate the biology and associated sleeping patterns of the adolescent brain, and more breaks from learning. Breaks from learning could include longer lunch times, earlier finish times or more pupil free days. Students explained these breaks gave their brains a rest, reenergised them and provided time to participate in activities they enjoyed and that promoted positive mental health, such as seeing friends, playing sport, listening to music or spending time with family.

Their comments emphasised the importance of breaks for learning, spending time with friends and play. Students in Year 3 to Year 6 also suggested changes to school organisation that would enhance their health.

Year 3 to Year 6	Year 7 to Year 12
<p><i>"Earlier recess because I get really hungry before 10:55."</i></p> <p><i>"I would change the amount of time students have for lunch and recess because I don't think we have enough time in those areas. I would change lunch to 50 minutes. I don't think it's fair that we have 6 hours doing nonstop work and 25 minutes as a break."</i></p> <p><i>"Brain breaks."</i></p> <p><i>"Less hours at school because you don't get a lot of sleep."</i></p> <p><i>"I want the recess and lunch time to change because people don't get to play enough!!"</i></p> <p><i>"I would change the time of recess and lunch because not everyone is a fast eater so they can't play with their friends."</i></p>	<p><i>"I wish school would start a bit later and finish later. Teenagers don't function well when they are tired so by making school start later will help teenagers function and work to the best of their ability."</i></p> <p><i>"Change the start and finish times to about 10:30-4:50 because teenagers are more focused at that time."</i></p> <p><i>"Earlier lunch times – not after 1:15pm!"</i></p> <p><i>"I would like to have more pupil free days, because I get tired."</i></p>

Physical activity was noted by students in Year 3 to Year 6 as important for being healthy and to assist their behavioural and cognitive engagement in learning. Students discussed the importance of being physically active to increase their level on concentration when in class. Curriculum content and learning experiences that contributed positively to physical health were valued.

Year 3 to Year 6

"I liked learning about sport to get more fitter."

"Sport: you can get fitter and we have a nice teacher. I love being active and running around with friends."

"Because it is fun and I like to be fit and healthy."

"I liked football because it meant that everybody could get a run around in the fresh air and sport is better than work (football is the best)."

Students across Year 3 to Year 12 were cognisant that ill-health made it difficult to learn and to get the help and support they needed for learning. Absences and disruptions in class were referred to by students in Year 3 to Year 6 as contributing to difficulties with learning and getting support for learning, whereas students in Year 7 to Year 12 discussed the mental health of students, disabilities and family issues.

Year 3 to Year 6	Year 7 to Year 12
<p><i>"When kids are away from school e.g. sick or on holidays."</i></p> <p><i>"Kids with mental health issues makes it hard for the other kids to learn."</i></p> <p><i>"Homework when sick so you know stuff when you go back to school."</i></p> <p><i>"When a kid is sick and people want to take you down to the office."</i></p>	<p><i>"Mental issues."</i></p> <p><i>"Health and mental problems."</i></p> <p><i>"Home issues!"</i></p> <ul style="list-style-type: none"> • <i>domestic violence</i> • <i>drug abuse (very common in the Pilbara)</i> • <i>depression and other mental disabilities."</i>

Students in Year 7 to Year 12 identified a need for support in regards to their mental health. Requesting formal education (as discussed in Chapter 4.7 – Help to overcome personal issues and Chapter 4.4 – Teaching and learning that is relevant), understanding from teachers, family members and peers, and outlining how quality time with friends and family supported wellbeing.

While family members were generally noted as positively influencing health and wellbeing, sometimes their actions to support student health were frustrating for students.

"If they make you stay home because you are sick but something fun is going on at school." (Year 3 to Year 6)

Suggestions from students

Students suggested changes to schools to create functional, clean and welcoming built environments that promote physical activity and social interaction. Specific suggestions included café-style or shaded tables and chairs within the school grounds so students could sit and talk together, more stairs to increase physical activity, fit-for-purpose areas (particularly to account for weather), stimulating playgrounds and different or better use of recreational sports areas to support student fitness (e.g. remove bans placed at certain times of day).

The cost and options of food from the canteen was commonly referred to as prohibitive. Students outlined canteen food was overpriced and requested healthier options. Some students also suggested regular breakfast clubs as essential for all schools.

Changes to school organisation to better enable student engagement with learning were also suggested. This included the timing and length of breaks and, for students in Year 7 to Year 12, change to the timing of the school day to account for the biology of adolescence. In particular, students suggested breaks from learning throughout the school day to increase concentration, motivation and engagement with learning. This included short breaks between lessons or classes, opportunities to move around or to be active and longer lunch breaks.

Year 3 to Year 6	Year 7 to Year 12
<p><i>"I would change the canteen's menu because it's too unhealthy and messy. Quick, healthy snacks are more school-appropriate."</i></p> <p><i>"We could grow a veggie garden for the school canteen."</i></p> <p><i>"Playground redesign – more activities."</i></p> <p><i>"Lunch area I want a carpeted lunch area because we have to sit on cold stone."</i></p> <p><i>"Colourful walls (Patterns) because colourful and bright room can make the students more positive when they come in the room. Positive students can cause less bullying."</i></p>	<p><i>"We should get canteen cards like a smart rider."</i></p> <p><i>"School should start later in the morning."</i></p> <p><i>"Cheaper canteen and healthier canteen."</i></p> <p><i>"More food in our canteen and healthier options."</i></p> <p><i>"A school farm so we can produce our own food like eggs and milk."</i></p>

The toilets were mentioned as an area for improvement, with this suggestion more common for students in Year 3 to Year 6. Students outlined toilets were untidy, unhygienic and lacked basic requirements such as toilet paper, soap, hand towels or hand dryers. Suggestions for toilets to be cleaned more frequently and to include mirrors were made.

Year 3 to Year 6	Year 7 to Year 12
<p><i>"I would change the toilets because they are not very hygienic."</i></p> <p><i>"More toilet paper."</i></p> <p><i>"The toilets because the spiders."</i></p> <p><i>"Toilets because one toilet has no lock and there is wee all over the floor."</i></p> <p><i>"I would change the toilets they are disgusting and we need hygiene."</i></p>	<p><i>"There are too many mozzis [mosquitoes] in the change rooms."</i></p> <p><i>"Toilets are disgusting. There aren't any mirrors."</i></p> <p><i>"More bathrooms around the school."</i></p> <p><i>"A clean toilet with no graffiti."</i></p>

Learning and disability

Children and young people with disability emphasise that their disability is just one part of their life.¹²⁸ Indeed, the United Nations Convention on the Rights of the Child¹²⁹ and the United Nations Convention on the Rights of Persons with Disabilities¹³⁰ require that children with disability are considered as children first, experiencing their lives as children and, by extension, students within the education system. However, the experiences of school for students with disability may differ considerably from their peers.

Within Australia, all students have the right to an education. Ensuring the system is accessible and equitable for all students requires that their needs are considered and catered for at a systemic, whole-school and classroom level. For some students, their disability may be undetected until commencement of school.

Within the consultation, students across Year 3 to Year 12 identified disabilities can make it difficult for some students to learn. They spoke of learning disabilities, intellectual disabilities, sensory impairments or mentioned ‘disability’ in general.

Year 3 to Year 6	Year 7 to Year 12
<p><i>“It is hard for [name of student] because he has disability.”</i></p> <p><i>“They might have a disability.”</i></p> <p><i>“My friends has dyslexia and she needs glasses to read.”</i></p> <p><i>“Dyslexia.”</i></p> <p><i>“Blindness.”</i></p> <p><i>“Concussion.”</i></p> <p><i>“O.C.D.”</i></p> <p><i>“Hearing aid.”</i></p> <p><i>“When they have special needs.”</i></p> <p><i>“When kids have dyslexia or any disabilities and can’t work properly.”</i></p> <p><i>“Because some people are deaf or have autism.”</i></p> <p><i>“When they have special needs.”</i></p>	<p><i>“Behaviour problem.”</i></p> <p><i>“If they have problems/disabilities.”</i></p> <p><i>“Disabilities (ADHD) (dyslexia).”</i></p> <p><i>“Learning difficulties.”</i></p> <p><i>“Behaviour issues.”</i></p> <p><i>“Learning disabilities.”</i></p> <p><i>“If they have a disability they find it hard.”</i></p> <p><i>“They have learning disabilities.”</i></p>

Students across Year 3 to Year 12 also identified that having a disability can make it difficult to get support for learning. Students referred to communication, behaviour, cognition, viewpoints or understandings of others and ‘disability’ generally. Through previous consultations with children and young people with disability, supportive families were one of the good things in their lives.¹³¹ However, as students stated in this consultation, if family members found it difficult to acknowledge a young person’s disability then this impacted their capacity to access the help and support required for school and learning.

Year 3 to Year 6	Year 7 to Year 12
<p><i>“The kids who have disability and can’t talk well it makes it hard for them to talk to others in the way they want to.”</i></p> <p><i>“Some kids with disabilities can’t concentrate like us.”</i></p> <p><i>“People who have special needs.”</i></p>	<p><i>“Sickness, disability.”</i></p> <p><i>“Parents may disagree on children’s disabilities for personal reasons. Often pride can influence a parent’s thoughts (unintentionally).”</i></p>

While the majority of student comments referred to students with disability, family situations in which someone in the home environment had disability also had an impact on school and learning. Students in Year 7 to Year 12 explained having a family member with disability at home made it difficult to get the support they needed for school and learning. The reasons may be because other family members, such as parents, may be required to spend significant amounts of time caring for a sibling with disability. Alternatively, students may be young carers, providing informal care to family members.

Year 7 to Year 12

“Family situations – family with disability.”

“If you have a death/disabled sibling or family member in the family.”

As such, students were mindful of the varying needs of other students. They identified that some students may require individualised and tailored support for learning and to be empowered to participate in classroom activities. This required schools to acknowledge all needs of students, regardless of whether a diagnosis existed, and to support teaching staff in their roles. Without appropriate support, students noted that students with disabilities experienced difficulties in accessing school, engaging in learning or getting support for learning or other concerns. Students expressed a clear desire to be able to engage with and support students with disability.

Year 3 to Year 6	Year 7 to Year 12
<p><i>“If they are blind they can talk about it, if mute we should be able to learn sign language to speak to them because when the blind or mute need us we can speak.”</i></p> <p><i>“Some kids with disabilities need helpers to help them.”</i></p> <p><i>“Kids with disability need a nursing hospital (or their own personal protector that they can trust).”</i></p> <p><i>“Learning disability.”</i></p> <p><i>“It’s hard for kids with disabilities like down syndrome to get support. They might need a special EA to help them with all their school work.”</i></p>	<p><i>“Having mental disabilities at a school that has no help.”</i></p> <p><i>“Kids with disabilities will need easier ways to get somewhere such as ramps.”</i></p> <p><i>“Help people who have disability and make it hard for teachers to teach.”</i></p> <p><i>“Teachers need to properly acknowledge and respect even the smallest of disabilities.”</i></p> <p><i>“Depends on their condition</i></p> <ul style="list-style-type: none"> • <i>deaf students need hearing aids</i> • <i>down syndrome students need an extra person to help.”</i>

The kinds of support suggested by students above speak to the needs of all students and, in particular, the importance of having strong relationships and understanding from those around them. Students referred to having someone to talk to/communicate with, someone to trust, safety and support.

“If you had a disability you need someone close to your heart.” (Year 3 to Year 6)

Suggestions from students

Within Australia, all students have the right to an education and to receive appropriate support to experience success. Similar to previous consultations undertaken by the Commissioner for Children and Young People, students expressed a desire for greater awareness and understanding of disabilities.¹³² Students clearly wanted schools, school staff and family members to acknowledge and to understand disability and potential impacts. Students also wanted schools and school staff to cater for the range of student abilities, no matter how small a disability was perceived to be.

“Dyslexia education.” (Year 3 to Year 6)

“Having a broader learning spectrum... Taking into account people’s learning skills and disabilities.” (Year 7 to Year 12)

There are a range of ways in which the education system can create equality and equity within the schooling system. What is critical is to adopt a strengths-based approach and to understand and respond to the needs of all students.