

Fostering inclusive relationships; students with special needs, whānau, teachers and allied health professionals

Nicole Hook

College of Education, Health and Human Development, University of Canterbury, New Zealand

Abstract

New Zealand Ministry of Education (MoE), has changed their policy for education of students with special needs from segregated to an ideal of inclusion where student are entitled to enrol at a school of their choice and to receive effective educational services. This literature review looks at how special education is viewed by society, how policy changes have affected the outcome of special education and how maintaining a professional relationship between whanau, teachers and allied health workers can ensure inclusive learning environments are developed and maintained.

Keywords: *Special Education, Inclusive Education, Professional Development, Allied Health Professionals*



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Introduction

New Zealand's educational system has undergone a combination of policy changes, from education providers, funding allocations, to classroom management and expectations from teachers of students with special needs. Within these changes, a common theme dominates the New Zealand educational system; that is a theme of inclusive education and equal opportunities to all children of New Zealand (Miles & Singal 2010; Slee 2011; as cited in Arthur-Kelly, Sutherland, Lyons, Macfarlane & Foreman, 2013). Students, who are identified as having special needs or who require aid with their learning, have been at the centre of these policy changes. With these ongoing modifications, MoE has concluded that it is vital for both the education and health services to work together to ensure there are inclusive learning environments for children of New Zealand.

Special Education

The concept of special needs education and what classifies learning disabilities is often in conflict with society and culture. How disabilities are perceived by society and diagnosed by science shape how people with disabilities are treated (Kingi & Bray 2000; as cited in Fortune, 2013). Mitchell (2001) in *Shifts in Special Education in New Zealand* (2001), comments on the continuous shift that special education has undergone within New Zealand. Special Education has been subjected to a wide

range of policy changes, which whilst similar to international shifts changes have also been unique to New Zealand Government's changing educational policies (Mitchell, 2001). Historically, students with disabilities were segregated from the educational system (for example, schools for children who were blind) or more often overlooked (Vaughan-Jones & Penman, 2004). Currently, Special Education provides a collection of support for individuals who are identified with a physical, learning or behaviour need and who require further support for individual learning (Mitchell, 2001). Individual students who require supported learning are assessed under different criteria, (i.e. Ongoing Resource Support, ORS) so that schools can obtain additional staffing allocation and resources to support learners (Fortune, 2013). Special education resources can range from low to high technology, environmental changes and interventions accessed through allied health workers, for example Occupational Therapists, Physiotherapists and Speech Language Therapist. In addition Resource Teachers, Learning and Behaviour (RTLB) and Teacher Aids collectively, develop Individualized Educational Pathways (IEP) for identified students (Mitchell, 2001).

Fortune (2013) highlights how the ongoing changes within special education and the incorporation of Māori culture within New Zealand educational model, has emphasized the importance of understanding and respecting students' Mana and uniting whānau into individual educational plans. There is a lack of evidence from a Māori perspective on disability, even though a large percent of special education students are of Māori

descent (Fortune, 2013). Fortune (2013) also provides evidence on the limitations and lack of relevance of special education constructed by western societies has with Māori views and perspective. Special education is currently providing inadequate services that lack cultural relevance to individual students (Bevan-Brown, 2002).

Policy changes (2000-2015)

Special Education within the twenty first century is modelled on the concept of inclusive education, and the objective that all students 'regardless of strengths or weaknesses' will be educated alongside their peers (Meyen & Bui 2007, pg. 48; Selvaraj, 2015). Presently, Special Education within New Zealand is based under the policy Special Education 2000 (Ministry of Education, 1996), which underpins the theories of inclusive education to meet the needs of all learners (Selvaraj, 2015). The purpose and theory behind Special Education 2000 was to reflect positively on students with special needs in mainstream schools. Many conflicting arguments have risen throughout the past half-century as consequence from changing governments and development of policies. Selvaraj (2015) identifies that, while inclusive education dominates within the theoretical world of education, several changes and grey areas within Special Education 2000 have led to confusion and conflicts on special education philosophies from parents, teachers and specialist.

However, limitations such as shortages of skilled professionals, contestable funding to adequate resource the teachers and classrooms have had negative effects in some schools. This, coupled with ineffective cultural and emotional support for at risk students, has caused whānau deliberation on what is vital and needed for these students to ensure that they can confidently learn within mainstream classrooms (Selvaraj, 2015).

Wills (2006) points out similar barriers that arose from Special Education 2000 policy change. Special Education 2000 changed the government's roles from providing a direct service to schools, into a service that delivers advice and funding for special educational service within a cluster of schools (Wills, 2006). Wills (2006), highlights the important and forgotten aspect of Special Needs Education, that is, the involvement of whānau and notion that a student family/whānau knows best. Wills (2006) comments on how the move into Special Education 2000 encouraged schools to be aware of the responsibility they hold to their wider community, and provide whānau with the right to choose their child's educational experience. Another policy reformed saw plans of providing training for principals and teachers, yet there are no mandatory obligations to complete such workshops (Wills, 2006). Other literature reviewed comments on how the lack of understanding from educators on students living with disabilities, causes difficulty with lesson planning, classroom management, as well as engaging their whānau (Arthur-Kelly, Sutherland, Lyons, Macfarlane & Foreman 2013; Twyford, 2009; Vaughan-Jones & Penman, 2004).

Moves within contemporary teacher training look at focusing and redefining individual attitudes/assumptions on diverse learners. Arthur-Kelly et al., (2013) reflects how pre service teachers are trained and exposed to special needs education was reviewed to locate areas that could emphasize the need of inclusive education. Evidence supports pre service teachers ability to develop skills that endorse positive teaching and learning behaviours for special needs students when they are positively exposed to special needs education early in their

training. Strategies being developed combine a theoretical aspect of inclusive education with practical evidence based on teaching, to develop adaptive classroom practices that includes students with disabilities from different cultural backgrounds (Arthur-Kelly et al., 2013). Suggestions focusing on how teachers are trained within New Zealand is a fundamental step for special needs education within the twenty first century as this enable future teachers to better meet the needs of diverse learners in a practical and inclusive learning environments.

Teachers and allied health professionals

The evolving special needs education policy impacts on both education and health sectors within New Zealand society. The inclusion of special needs students within mainstream schools provided direct funding for allied health professionals to enter and work within a student's classroom (Vaughan-Jones & Penman, 2004). Vaughan-Jones and Penman (2004) describe the history of special needs education from a health sector point of view. They identify that within the twenty first century, two individual sectors – that is health and education services, must work together to formulate effective, inclusive IEP and learning opportunities for students with special needs.

Vaughan-Jones and Penman (2004) conclude that to generate an effective system for students, allied health therapists "must adjust their habits, skill, and practices in order to fit into the educational environments" (Vaughan-Jones & Penman, 2004, pg. 13). Supporting their conclusion they comment on the need of therapists to be a part of the educational setting. Evidence shows that providing in-service presentations to educational staff on their roles and services develops a cohesive team approach when cultivating inclusive education programs (Vaughan-Jones & Penman, 2004). Twyford (2009), supports a high level of communication and liaison between parents, RTLB, teacher aids, teaching staff and therapists, to provide a continuous level of positive achievement in an inclusive learning environment.

Vaughan-Jones and Penman (2004) and Twyford (2009) also identify that the integration of specialists within the mainstream educational sectors enables positive feedback on students with special needs. Yet to accomplish this, a greater understanding and acceptance is required from both sides (i.e. education and health sectors) with implementation nationwide. Parallel to an evolving history of New Zealand Special Education, it is vital to keep up to date and 'be politically aware and active' (Vaughan-Jones & Penman, 2004, pg.15) to ensure that both parties can successfully generate a constructive learning environment for students receiving special education services.

Conclusion

Looking at the range of literature written on Special Education within New Zealand, it is apparent that current teachers and educator providers need to understand special education policy and the overall needs of at risk students. With an overarching theme of inclusive education backing Special Education 2000 and the New Zealand Curriculum, there is evidence that students with special needs are successfully educated within mainstream schools when barriers such as inadequate resourcing, social assumptions and poor communication are removed (Arthur-Kelly et al., 2013; Twyford, 2009; Vaughan-Jones & Penman, 2004). To maintain an inclusive learning environment the relationship between teachers and allied health professionals

must be apparent when planning IEP's and interacting with special needs students and their whānau. Incorporating an understanding of policies, embracing diverse cultures and abilities, will help future teachers to provide programs to engage all learners. This may inspire teachers to remain positive when interacting with special needs students, their whānau and range of support staff available to them.

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