AT-RISK YOUTH IN AUSTRALIAN SCHOOLS AND PROMISING MODELS OF INTERVENTION

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The largest population of youth at risk for involvement in the juvenile justice system are those with disabilities and mental illness. There has been scant research into the pathways that these students take from home, school and the community to involvement in the justice system in Australia. This paper utilises insights from critical disability studies, critical criminology, disability studies, and special education to identify the complex intersections of individual, social and systemic experiences for this group and to examine risk and success factors in the educational domain. Suggestions are offered for improvement, based on evidence-based practices and promising programs.

The prevention of youth involvement with the juvenile justice system has traditionally been addressed by different human services disciplines in isolation, but the frameworks informing these practices are not mutually exclusive. Gagnon and Mayer (2004) discuss the use of different frameworks across the disciplines of education, juvenile justice, social work and mental health, and the fact that the frameworks overlap or have the potential for overlap. Working in the Australian context Richards (2011) specifically identifies the operation of both welfare and juvenile justice models. The welfare model assumes that offending behaviour is rooted in factors and experiences beyond the youths' control, and thus considers the support needs of the youth and is focused on 'rehabilitation'. The juvenile justice model, on the other hand, sees offending as an act of free will and deserving of punishment, effectively precluding consideration of the impact of impairment and social context. Richards's points out that in the Australian system, elements of both of these models are present and that the juvenile justice system is more welfare-oriented than the adult justice system.

Significant research has sought to identify the range of factors that put youth at risk for delinquency (Catalano, Loeber, & McKinney, 1999; Hawkins et al., 2000; Loeber & Farrington, 2000). These include individual, family, school, community, and peers, with the number, types, duration, timing, and severity of risks identified as affecting the likelihood of antisocial behavior (Christie, Jolivette & Nelson, 2005). Quinn, Rutherford, Leone, Osher, and Poirer (2005).further identified a range of demographic variables that appear to contribute to delinquency including: (a) ethnic and minority status, (b) poverty, (c) aggressive behaviour, (d) family problems, (e) inconsistent discipline/parenting, (f) physical abuse, (g) substance abuse, (h) living in a high crime area, and (g) a family culture of delinquency.

Youth with disabilities typically have poor academic and social outcomes, including: (a) lower grades, (b) failed courses, (c) below average literacy skills, (d) below average skills in Mathematics, (e) low rates of high school completion, and (f) communication skills deficits (Gagnon, 2008). These students also have high rates of school suspension and expulsion (Beauchamp, 2012). In relation to the specific experiences of young offenders with disabilities in education Leone & Mayer (2004) suggest that many times there is a disconnect between students and the school system, causing student disengagement and problem behaviour. They cite several school factors as possible contributors to this *lack of fit*: (a) the general climate of the school, (b) classroom setting events, (c) teacher-student communication, (d) high-stakes testing, (e) discipline polices, and (f) diversity issues. The argument has been made that such systemic failures to accommodate children with disabilities in the school system lead to disproportionate representation in the delinquency system (Tulman, 2003).

Taken together it is clear that the confluence of offending and disability in some young people is likely to create complex challenges for social services and in particular education providers. In understanding the parameters of reform needed to support young people with disabilities who are at risk of offending, it is necessary to develop a picture of the nature of impairments commonly experienced by this group and the ways that these intersect with social disadvantage and service frameworks to create and sustain pathways to offending and involvement in the justice system.

Young people with disabilities at risk of offending
Juvenile offenders with disabilities are not always identified or formally diagnosed, making it difficult to build a profile of exact prevalence and characteristics of the population. However, a picture of impairment in the lives of young offenders is beginning to emerge from a range of research in the US, UK and Australia, which indicates higher than expected prevalence of cognitive disability (Hayes, Shackell, Mottram, & Lancaster, 2007; Salekin, Olley, & Hedge, 2010; Holland & Persson, 2011; Indig et al., 2011); mental health disorder (Teplin et al., 2007; Vermeiren, Jepsers, & Moffitt, 2006); speech, language and communication difficulties (Snow & Powell, 2011); specific learning difficulties (Macdonald, 2012); and social, emotional and behavioural difficulties (Games, Curran, & Porter, 2012; Indig et al., 2011). Overall, mental illness (or emotional disturbance), learning disabilities, and borderline intellectual disabilities have been identified as the most prevalent disabilities found in juvenile correction facility populations (Gagnon & Buttell, 2008).

Cognitive impairments include diagnostic labels such as intellectual disability, learning difficulties, acquired brain injury, foetal alcohol syndrome, dementia, neurological disorders and autism spectrum disorders (NSW Law Reform Commission, 1994). In Australia, as well as the USA and UK, intellectual disability is more common among juveniles under the supervision of the criminal justice system than among adults under the supervision of the criminal justice system or among the general population. For example, three per cent of the Australian population has an intellectual disability and by comparison, 17 per cent of juveniles in detention in Australia have been found to have an IQ below 70, with this group also known to be at a significantly higher risk of recidivism than other juveniles (Frize, et al., 2008).

Mental health disorder is also known to be over-represented among juveniles in detention compared with those in the community. Mental health disorders and more serious mental illness impair the mental functioning of an individual and are characterised by the presence of one or more of the following symptoms: delusions, hallucinations, serious disorder of thought, a severe disorder of mood, and sustained or repeated irrational behaviour (Mental Health Act 1990 (NSW), s11). The relationship between first-stage mental health problems (e.g., conduct disorders) and more severe mental illness has also been associated with contact with the juvenile justice system (Zubrick, Silburn, Burton, & Blair, 2000). The majority (87%) of respondents in the 2009 Young People in Custody Health Survey conducted in NSW Australia were found to have at least one psychological disorder, with only 13% of the population having no psychological diagnosis present. Nearly three in four (73%) young people had two or more psychological disorders present. The two most common psychological disorders were attention or behavioural disorders (70%) and substance use disorders (64%) (Indig, et al., 2009)

Oral language competence is compromised in individuals with speech, language and communication difficulties. Snow and Powell (2008) found that over 50% of a community sample of young male offenders had significant deficits on measures of figurative/abstract language, sentence repetition and narrative language skills, indicating that juvenile offenders are more at risk from language problems than non-offenders. Deficits in communication and social skills, and sometimes willingness to please others with providing positive answers, can cause this population to confess to crimes more quickly, and they are more likely to plead guilty. Difficulties in communicating with their legal representatives may make them less likely to appeal their sentences.

Specific learning difficulties including dyslexia, dyspraxia, and attention deficit disorder have likewise been identified to occur to some degree in at least 20 per cent of the prison population, indicating that people with specific learning difficulties are twice as likely to be sent to prison as those without this condition (The Dyslexia Institute, 2005). Researchers have suggested that rather than assuming a direct link between specific learning difficulties, antisocial behaviour and crime per se, it is the cultural and educational deprivation associated with the presence of specific learning difficulties that may be criminogenic (Svensson, Lundberg, & Jacobson, 2001).

While the above discussion highlights the various conditions that are commonly experienced by young people with disabilities who are at risk of offending, further research indicates that for many young people these issues may be multiple and co-occur in the context of complex social disadvantage. These further dimensions of disadvantage include precarious housing; social isolation; family dysfunction; having a parent who has been incarcerated, having been removed into out of home care and problematic drug and/or alcohol use (Carney & Buttell, 2003; Draine, Salzer, & Culhane, 2002; Hamilton, 2010). A cohort study of people with complex impairment who had been in custody in NSW Australia confirms that this group have a constellation of experiences which appear to combine to make them significantly vulnerable to early, ongoing and intense contact with the criminal justice system (Baldry, Dowse, & Trollor, 2013).

Conceptual and practical approaches
The impact of multiple impairments coupled with social disadvantage and the role this plays in offending remains poorly understood. What is clear is that this group pose a significant challenge both conceptually and practically. Conceptually for researchers to take account of the dynamic interactional effects of impairment, social disadvantage and offending and practically for service systems and policy makers to design and deliver services which move beyond addressing such issues singly or in isolation from one another.

Conceptually Dowse, Baldry & Snoyman (2009) suggest combining the theoretical approaches available in critical disability studies and in critical criminology to enable new ways of thinking about disability and offending and the social service responses it. They suggest that this approach brings disability to the centre of the analysis and provides a new way to make visible material structures, ideological discourses and experiences of impairment that fundamentally and differentially structure an individual's pathway into, around and often back into the criminal justice system. In this analysis, the offending behaviours of persons with disabilities are not dismissed, ignored or excused. Instead, they are re-situated in individual and social systemic contexts, opening up new ways to identify conceptualisations, structures and interventions that enable the support and development of new individual, systemic and political levels of engagement. This then highlights social support and enables thinking about ways to make it possible for individuals to more frequently take non-offending pathways (Dowse, Baldry & Snoyman, 2009).

Adopting a hybrid critical criminology / critical disability studies approach to the reintegration of young offenders with disability draws out the complex interaction between individual factors relating to impairment, socio-economic, and health, life histories of disadvantage such as institutionalisation, exclusion from education, abuse and neglect, and systemic issues around social exclusion, discrimination and poverty and the sociocultural construction of disability. This moves beyond current thinking on disability and offending that typically focus on the impact of impairment or, at best, impairment and aspects of personal socio-economic disadvantage.

Practically, both youth with and without disabilities involved in the juvenile justice system have poor outcomes in respect to reintegration and recidivism (Gagnon, 2008). The financial and social costs of maintaining these youth in correction facilities are substantial, easily reaching $1.5 million over a lifetime (Cohen, 1998; Baldry, Dowse, McCausland & Clarence, 2012). With these conceptual and practical caveats in mind the paper now turns to examine risk and protective factors that have been identified for young people with disabilities at risk of contact with the juvenile justice system.

Risk Factors
Becroft (2006) discusses four categories of factors (in addition to having a disability) that contribute to youth offending: (a) family, (b) community, (c) friends, and (d) school. Although the focus of this paper is on education, none of these factors can be taken in isolation, so each is considered in this section.

Families play a crucial part in determining the outcomes of their children. Becroft (2006) describes the family factors that put children at risk. Many are centred on the interaction of parents with their children and include the lack of strong adult role models, lack of affection from parent to child and low levels of parental support as well as poor supervision, which allow youth to form friendships with undesirable peers. Parents are role models for their children; therefore antisocial behaviour such as substance abuse, violence, and criminal justice involvement on the part of parents put their children at risk for the same. Lastly, Becroft identifies low income as a family-related risk factor.

There is a strong connection between lack of parental supervision and the involvement of children with antisocial peers (McLaren, 2000). When family relations become strained and/or poor, children seek acceptance from friends. As children reach adolescence, it is these peer relationships that hold the most importance to them; therefore having friends who are involved in criminal activity can lead to poor outcomes (Richards, 2011). Friendship issues also include gang involvement, delinquent siblings, and lack of pro-social skills within a peer group (Goldstein, McGinnis, Sprafkin, Gershaw, & Klein, 1997), all factors likely to make vulnerable young people at risk of offending.

Community also plays an important role, as this is where young people socialise and grow up. Youth living in low socio-economic communities with high rates of crime and violence, drug use, and transience have been found to be more likely to offend (Greenwood, 2006). They are also disproportionally victims of crime themselves, identified as a further risk factor for offending (Richards, 2011). Teens who live in communities that provide limited opportunities for recreation or employment are also more likely to offend (Leone, et al., 2003). Lastly, returning youth to their communities upon release from incarceration with no plan for support or change has been associated with recidivism (Gagnon & Richards, 2008).

Leone et al., (2003) discusses several ways that schools and education systems contribute to the criminality of youth, particularly overcrowding and the absence of clear rules and policies and ineffective follow-through when rules are broken. However, others believe that the immediate and most obvious contribution to youth offending made by schools is their inability to keep all students engaged. Becroft (2006) estimates that over 80% of offending youth are not engaged in the school system. This disengagement may be due to lack of enrolment, suspension, expulsion, truancy, or waiting for a place at an alternative setting. Suspension and expulsion are of particular concern, as not only have they been found to be ineffective practices that do not target the underlying cause of student misbehaviour, but there is also a high correlation between suspension/expulsion and youth offending (Daly, 2013). Becroft (2006) cites truancy as another major contributor to risk of offending whereby students who are habitually truant typically fall behind in their academics and are more likely to drop out; abuse drugs and alcohol; experience or commit violence; and become delinquent. Rather than find ways to keep them engaged or re-engage them in their education, many times education systems exclude such students further with 'solutions' such as alternative schools, correspondence schools, and expulsions.

Success Factors
There are of course many young people with disabilities who do not come in to contact with the juvenile justice system. It is reasonable to assume that their experience may be the inverse of those who offend. Examining both the risk factors and predictors of success can assist in being proactive and designing intervention. Parents of successful youth: (a) encourage and reward good behaviour, (b) know where their children are, (c) know who their friends are and monitor those friendships, (d) have a consistent, positive approach to discipline, (e) spend time with their children pursuing hobbies, (f) are involved in their children's education, and (g) show their children affection (McLaren, 2000).

As detailed above, involvement with antisocial peers is a precursor and risk factor to youth offending. Strong family bonds go a long way to supporting adolescents in participating in appropriate peer relationships, particularly when parents monitor their children's activities closely. Young people who are positively engaged with school are also less likely to develop friendships with antisocial peers. Finally, having the ability to communicate well (a skill which many students with disabilities do not possess) is a strong predictor of success in this area (McLaren, 2000).

Involvement in community activities decreases the chances that a young person will become involved in criminal activity (Arthur, Hawkins, Pollard, Catalano, & Baglioni, 2002). Arthur et al. (2000) discuss the phenomenon of 'social bonding,' which describes the quality of the relationships a young person has with adults, school and the community. The quality of social bonding is increased through community participation, for example in a church, social or sporting group. Youth with high levels of social bonding are less likely to commit anti-social acts, as they are more likely to be aware of the consequences of jeopardising their relationships with adults in the community.

Involvement in education is a powerful protective factor against involvement in the juvenile justice system (Arthur, et al., 2002). Simply attending school on a regular basis reduces the chances that young people will get involved in criminal activity, even if they are not achieving academically (McLaren, 2000). School involvement contributes to students feeling that they are part of the wider social fabric.

Students with disabilities who receive appropriate educational supports are more likely to stay engaged with school, and therefore less likely to offend (Arthur, et al, 2002).

The following evidence-based educational interventions are well aligned with Dowse Baldry & Snoyman's (2009) theoretical analysis and seek to support the engagement of at-risk youth with disabilities. These interventions were designed to meet the individual social, academic, and emotional needs of all students. Proactive school and classroom behavioural support make it possible for individuals to more frequently take non-offending pathways (Leone & Mayer, 2004).

Evidence-based Educational Interventions
Leone and Mayer (2004) made a series of suggestions to prevent *lack of fit* and student disengagement with their education and the school system. The first of these is to ensure that the school's supports are congruent with their academic mission. In other words, if high achievement is mandatory then supports must be in place for students who will be at risk of not meeting this standard, including some students with disabilities. Secondly, school discipline is identified as key – it should be proactive, consistent, and positive. Disciplinary policies and practices should have a solid research base. Although it can take years to fully implement and requires a large commitment, positive behaviour interventions and supports (PBIS) are the most recommended, as they have a strong evidence base (Sugai & Simonsen, 2012).

Positive behavioural interventions and supports (PBIS) is defined by Sugai and Simonsen (2012) as: "an implementation framework that is designed to enhance academic and social behaviour outcomes for all students by (a) emphasising the use of data for informing decisions about the selection, implementation, and progress monitoring of evidence-based behavioural practices; and (b) organising resources and systems to improve durable implementation fidelity (p.1)." PBIS has been widely implemented in the US, the UK, and is gaining momentum in Australia. The following evidence-based practices can be successfully integrated into the PBIS framework in the classroom and school to keep students engaged and prevent behavioural problems.

Having clear, well-defined school and classroom expectations is one of the first steps to maximizing engagement and preventing off-task and disruptive behaviours. These expectations should be posted, taught, reviewed, and referred to frequently (Cumming, 2013). During classroom instruction, maximising student participation is crucial. This can take the form of passive participation (listening) or active participation (contributing to discussion, writing answers on paper). If students are actively engaged in instruction, then it is difficult for them to engage in unwanted behaviours such as talking out or leaving their seats (Ornelles, 2007). Providing students with increased opportunities to respond will provide them with the opportunity to be more actively engaged during academic instruction (Simonsen, Fairbanks, Briesch, & Myers, 2008). Strategies to actively involve students in instruction include: (a) the use of response cards, (b) systematic direct instruction, (c) classwide peer tutoring, (d) guided notes, and (e) computer assisted instruction (Cumming, 2013).

Alberto and Troutman (2009) recommend the use of research-based classroom management strategies for students with challenging behaviour. These strategies include: (a) specific and/or contingent praise, (b) class-wide group contingencies, (c) behavioural contracting, and (d) token economies. Teachers should also use contingent and specific praise to recognise student achievement in both academics and behaviour.

Token economies, behavioural contracting and class-wide group contingencies and are often used to encourage desired behaviours such as positive verbal interactions, appropriate classroom behaviour, student attention, peer social acceptance, and assignment completion (Simonsen, et al., 2008). Simonsen, et al., (2008) also found that these strategies decreased negative verbal interactions, transition time, inappropriate behaviour, talk-outs, and out of seat behaviour. A token economy is a symbolic reinforcement system based on a monetary system. In this system, students earn tokens or points in exchange for performing pre-determined tasks and behaviours (Zirpoli and Melloy, 2007). Behavioural contracting is simply a written contract between a student and a teacher regarding the performance of specific target behaviours in exchange for specific consequences (Zirpoli & Melloy, 2007). Classwide group contingencies operate in much the same manner as a token economy but on a group rather than an individual scale.

Cognitive Behavioral Interventions (CBI) is an evidence-based approach that is defined as: *a behavior modification approach that promotes self-control skills and reflective problem-solving strategies.*

Interventions combine elements of behavior therapy (modelling, feedback, reinforcement) with cognitive approaches (problem solving, self-monitoring, self-instruction, communication skill building, relaxation, and situational self-awareness training) to teach individuals to recognize difficult situations, think of possible solutions, and select the most appropriate response (NICHCY, 2010; Research terms, Cognitive Behavioral Interventions). Strategies used in this approach include problem solving, self-monitoring, self-instruction, communication skill building, relaxation, and situational self-awareness training. Social skills instruction is an effective intervention that is based on CBI and used to support students with disabilities in overcoming social interaction deficits (Cook, Gresham, Kern, Barreras, Thornton, & Crews, 2008). The most effective strategies for teaching social skills include a combination of modelling, coaching, and practising (Gresham, 2002).

Functional behaviour assessment or FBA is a widely accepted data-based assessment and decision making practice that is used to determine the purpose or function of behaviours (Horner, Sugai, & Anderson, 2010). Once the functions of the behaviour(s) are determined, a Behaviour Intervention Plan is developed to support the student with disabilities in developing more appropriate behaviours that meet the same function as the inappropriate behaviour.

Students with disabilities involved in any educational system, including those of juvenile justice systems should have an individual education plan or IEP. This allows relevant information to be shared, so each student with disabilities can be properly supported to achieve their academic, behavioural, and vocational goals (Government of South Australia, 2014). The Australian Government prescribes at a minimum, that this plan should include: (a) academic goals, (b) social-emotional goals, (c) strategies to support the student in meeting these goals, (d) who is responsible for each part of the plan, and (e) progress evaluation methods and time lines. A transition plan as well as a behaviour intervention plan (if applicable) may be part of the student's IEP also. Unfortunately, not all Australian states and territories require schools to create IEPs for students with disabilities, so there is much inconsistency with this practice among schools and states.

Improving Results through Collaboration
Among the best practices identified by the NSW Parliament Report (2012) belongs collaboration. The current alarming recidivism of students with disabilities back into the juvenile justice system demonstrates a crucial need for intervention. Although programs supporting youth offenders exist in education and justice systems, they often exist in isolation, with stakeholders from one system being unaware of programs available in the other system. Various research results stress the importance of collaborative efforts between juvenile justice, education, workforce development, mental health, community and youth and families. This suggested collaboration can be used to help combat the high recidivism rates of youth with disabilities through careful planning of each student's education and/or transition from the correctional facility back into his or her home, school, and community environments.

Gagnon and Mayer (2004) stress the importance of collaboration during transitions both into and out of correctional settings. Collaborative transition planning should ideally begin before the student transfers out of his or her home school and into a correctional setting (EDJJ, 2003). They posit that in order to provide an appropriate education for students with special needs, it is imperative that any educational documentation (Individualised Education Plans, health records, etc.) transfers with the student in a timely way. This will ensure uninterrupted supports and services for the student. Students in these alternative settings should also be provided with a rigorous curriculum to prepare them for their return to their home schools, so communication between the two entities is crucial from the beginning (Gagnon & Mayer, 2004).

Many times, students have difficulty re-entering the *real world* after becoming accustomed to the structured, institutional environment of the penal system (Griller-Clark, Rutherford, & Quinn, 2010). Careful transition planning can smooth the transition for the student and those involved with him or her. First and foremost, a transition team must be formed. This team consists of, at a minimum, the student, family members, representative from the justice system, and a representative from the school the student will be attending upon his or her release. Other members could include people that provide support services for the student, such as: community members, potential employers, special educators, and medical or psychological professionals (EDJJ, 2003). The team then meets to discuss the student's current strengths and support needs, and builds upon those strengths to design a transition plan. The student's role in this process cannot be underestimated, as, if the decisions are made for the student rather than by and with him/her, the efforts will be likely to be unsuccessful.

The transition plan should include two major categories, planning and services. Planning consists of identifying goals and benchmarks, designing implementation, deciding who is responsible for each part of the plan, and determining how and when progress will be monitored. Gagnon & Mayer (2004) also recommend that in addition to traditional academics, the service part of the plan include services that assist students with adaptive behaviour, such as: (a) vocational education, (b) social skills training, (c) anger management therapy, (d) independent living skills, (e) health education, and (f) parenting classes. They suggest that students have the opportunity to access information on transition-related topics, such as community services, mental health services, and financial support. This can be accomplished through the use of a transition library, limited computer/Internet access, and/or visits from community members.

Other recommendations for facilitating the successful transition of students with disabilities from a juvenile corrections setting back into the community are apparent in the literature and are related to support. Students with disabilities should receive targeted support for at least 12 months, as research shows that they are less likely to reoffend if they haven't done so for a year after they are released. Unrhu and Bullis (2005) suggest that students should be supported by a transition specialist who works directly with the student and collaborates with individuals and organisations involved in supporting the student. This will provide the student with a *wraparound* of support services, which is crucial, as youth who receive social services after they transition out of the corrections system have better outcomes than those that do not (Unrhu & Bullis, 2005).

Bertram, Suter, Burns, and O'Rourke (2010, p.713) define wraparound services as, "a community-based, family-driven collaborative team planning process that engages informal supports and formal services with families in culturally competent, individualized, strengths-based assessment and interventions." The wraparound around process has emerged as best practice for students with disabilities and co-morbid mental health and/or behavioural issues (Walker & Sanders, 2011). The transition specialist can also act as the coordinator of wraparound services both while the student is in custody and upon release. Parents, teachers from the correctional facility, teachers at the student's home school, representatives from vocational service agencies, social services, and medical personnel may be involved in providing key services such as schooling, employment, mental health services, health care and housing.

Where to from here?
Youth with cognitive disabilities, mental health disorders, learning difficulties, speech, language and communication disorders; and social, emotional and behavioural difficulties are at a higher risk of offending and being incarcerated when compared to those without disabilities. A number of risk factors precipitating this have been discussed in this paper. While there is rich literature presenting both success factors that contribute to minimising the risk of offending, and evidence-based practices identified as effective for this population, a significant gap between theory and practice remains. To address this systemic changes are needed.

Firstly, there is a need for collaboration between sectors including education, juvenile justice and welfare. This collaboration includes shared access to a student's documentation across sectors, which will prevent isolated efforts to support the student, often repeating approaches that have proven unsuccessful in the past. As identified by the report of the NSW Parliament Standing Committee on Social Issues (2012), *there are inadequacies with the transfer of information about the strengths and needs of individual students, with the result being that families have to re-tell their story every time they apply for support or go through a transition*. (p.27) This is especially problematic, as access to information is crucial in order to develop a support plan 'made-to-measure' for each student.

Secondly there are a number of changes required in education sectors more generally. In spite of Australian legislation supporting inclusive education (*Disability Discrimination Act, Disability Standards for Education*), all levels of the educational system still continually fail students with disabilities and mental health issues. In order for inclusion to be successful, schools must employ practices that keep students engaged, and instruction must be differentiated to address diverse student needs. Yet, as demonstrated above, suspension, and expulsion are the most commonly used approaches with at-risk youth. The NSW Standing Committee on Social Issues (2012) indicates that 88 % of youth in custody had been suspended from school at least once, and 47% had been excluded from school. While the Standing Committee states in this Report that it would *support a review of DEC's policy regarding suspension and expulsion of students in these additional needs groups*, it was also highlighted that this is *beyond the terms of reference for this Inquiry* (p. 93). This raises an important question: Whose responsibility is it? Is it up to the various state departments of education to initiate the revision of their

own policies regarding suspension and expulsion? Or should a national approach be taken in this matter? In order to address the issue of suspensions and expulsions as ineffective, professional development and pre- and post-service training should be designed to raise teachers' and school leaders' awareness of ineffective vs. evidence-based practices and how these can be implemented by all teachers.

Thirdly, the role of individual educational plans is grossly underestimated in Australia. While mandated by law in number of developed countries (e.g., U.S.A., Great Britain, Czech republic), a number of Australian states and territories (e.g., New South Wales) leave the decision about developing individual educational plans to individual teacher/school. The findings of the NSW Parliament Report (2012) indicate that many students with disabilities do not have individual educational plans, and if these are developed, these substantially differ in quality. Furthermore, even if an individual educational plan is developed, a student is rarely involved. Follow-up IEP meetings with all involved stakeholders are also rather rare.

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