

Select Committee into Child Development Services

Submission by



the Dyslexia-SPELD Foundation

This submission has been prepared by the Dyslexia-SPELD Foundation (DSF) Western Australia. DSF is a registered charity and not-for-profit organisation that has been in operation since 1969. DSF is committed to ensuring that all children are provided with opportunities to learn – to learn to communicate, to read, to do maths, and to participate in high quality instruction delivered by well-informed, caring educators. DSF also advocates for those with learning and literacy challenges (including Specific Learning Disorders such as Dyslexia) to support and enhance their achievements and contributions to society. Our role includes supporting and advising children and families directly, as well as indirectly through the support and advice we provide at a school level. The DSF team is comprised of 103 staff with a clinical team of 17 psychologists, seven speech pathologists and one occupational therapist.

We have drawn on our extensive experience in the provision of child development services in WA to provide the following submission. We will address the terms of reference that relate specifically to our experience and field of practice, including:

- (a) The role of child development services on a child's overall development, health and wellbeing;
- (b) The delivery of child development services in both metropolitan and regional Western Australia;
- (c) The role of specialist medical colleges, universities and other training bodies in establishing sufficient workforce pathways.

I would be pleased to discuss our submission in further detail.

Mandy Nayton OAM
DSF CEO

21 October 2022

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"every child deserves the gift of reading."

(a) The role of child development services on a child's overall development, health and wellbeing;

DSF provides a range of services designed to support children with language and/or learning difficulties in Western Australia. Approximately 20% of Australian children have a learning difficulty and approximately 5% of children meet criteria for a specific learning disability.

Children with learning difficulties underachieve academically for a wide range of reasons, including factors such as: sensory impairment (weaknesses in vision or hearing); severe behavioural, psychological or emotional issues; English as an additional language or dialect (EAL or EAD); high absenteeism; ineffective instruction; or, inadequate curricula. These children have the potential to achieve at age-appropriate levels once provided with programs that incorporate appropriate support and evidence-based instruction.

Children with learning disabilities have unexpected and persistent difficulties in specific areas of academic achievement as a result of an underlying neurodevelopmental disorder, the origin of which includes an interaction of genetic, cognitive and environmental factors. One of the defining features of a specific learning disability is that the difficulty continues to exist, despite appropriate instruction and intervention.

Children with a learning disability:

- have underlying difficulties in a key academic skill that results in an ongoing and lifelong impact;
- do not perceive or process information as efficiently or accurately as children without a learning disability;
- often have a family member with learning difficulties;
- do not respond to appropriate intervention in the expected way;
- do not have an intellectual disability and may have highly developed competencies in numerous areas.

Left unidentified and without appropriate intervention, a learning disability puts a child at significant disadvantage, with little likelihood of achieving at levels close to their academic potential and at risk of poor self-concept and mental health concerns that extend into adulthood. The early identification of students at risk of literacy and numeracy difficulties, along with the introduction of effective intervention and support, is the key to academic success. (*Ref: Auspeld's uldforparents.com website.*)

The development of strong literacy and numeracy skills is fundamental to positive outcomes for children as they move through childhood, into adolescence and adulthood. Children with poor literacy and/or numeracy are more likely to experience poor physical and mental health outcomes. The impact of poor literacy is similar to the impact of chronic disease, when considering the risk of increased mortality – even when other factors such as age, race, gender, income, health access and psychological status were controlled for (Vollandes & Paasche-Orlow, 2007). Children with poor literacy tend to have worse health outcomes (DeWalt & Hink, 2009). Children with reading difficulties are also at elevated risk of developing internalising and externalising mental health problems (Leitao et al., 2017).

As a key child development service in Western Australia, DSF plays a significant role in supporting the families of children experiencing learning difficulties and disabilities. DSF also provides training to educators and allied health professionals to improve the provision of high-quality instruction for all children in schools.

(b) The delivery of child development services in both metropolitan and regional Western Australia;

DSF provides a range of child development services that are designed to improve outcomes for children and adolescents at risk. These services include:

- Provision of professional learning to Western Australian teachers, school staff and allied health professionals
- Training of school psychologists
- Dissemination of evidence-informed resources for families, educators and allied health professionals through library resources, social media, electronic mailouts, the DSF website, and targeted resource development
- Assessment of children experiencing language and/or learning difficulties
- Consultation with parents/caregivers of children with language and/or learning difficulties
- Responding to enquiries from parents, principals, teachers, allied health professionals and others
- Information sessions and workshops for parents
- Tutoring in literacy and numeracy through community-based specialist teachers
- Tutoring at DSF Literacy Clinics (based in Mount Hawthorn, Victoria Park and Albany)

The demand on DSF's services increases every year. There is an increasing number of families, schools, teachers, allied health professionals accessing our services to support Western Australian children. In the past 12 months to June 2022, DSF received more than 46,000 calls, emails and in-person enquiries and 903 assessments were completed by our clinical team.

Currently, in Western Australia, the significant delay between the onset of language or learning difficulties and the availability of services is highly problematic. The wait time for assessments with DSF psychologists is lengthy. Families attending the DSF clinic have often seen a number of other professionals before their appointments at DSF. These factors result in the delay of the identification of Specific Learning Disabilities and of the implementation of appropriate interventions.

The impact of such a delay on achievement and socioemotional development can be enormous. The gap between children who are slow starters in reading development and fast starters widens over time such that the "rich get richer and the poor get poorer" (*the Matthew Effect*, Stanovich, 1986). It is increasingly difficult for children to "catch-up" as they get older and additional months or years of struggling with literacy can have devastating consequences for self-esteem and self-concept.

(c) The role of specialist medical colleges, universities and other training bodies in establishing sufficient workforce pathways.

DSF plays a vital role in supporting children at risk of literacy and learning difficulties. One of the key services provided by DSF is assessment of children experiencing language and/or learning difficulties. It is difficult for us to find appropriately qualified psychologists and speech pathologists in WA to take on clinical roles at DSF and this challenge has contributed to a lengthy waiting list for assessments and other appointments. The availability of qualified clinical staff has always been a challenge but has become a more significant issue with the introduction of NDIS. Children and adolescents with learning disabilities are not eligible for NDIS support due to the NDIS guidelines but a huge number of psychologists, speech pathologists and occupational therapists have now been absorbed into the NDIS system leaving a very small pool of available candidates for roles outside of the NDIS system.

The wait time for appointments with other child development professionals (especially Paediatricians and Child Psychiatrists) is also of significant concern.

Inquiry into Child Development Services

Submission number: P00019

Submission received: 21 Oct 2022

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Would you like the committee to consider: Making the submission and your name public

How did you find out about the inquiry? Media Statement

Record created by Website

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