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Department of Education
GPO Box 9880
Canberra ACT 2601

Registered Charity
ABN 42 006 173 379
Level 7, 461 Bourke Street
Melbourne VIC 3000
Telephone 03 9670 1000
StrokeLine 1800 STROKE (1800 787 653)
strokefoundation.org.au

Dear Sir/Madam

Stroke Foundation's response to the 2025 Review of the Disability Standards for Education

As the voice of stroke in Australia, Stroke Foundation welcomes the opportunity to provide input into the 2025 Review of the Disability Standards for Education (the Standards).

Our recommendations are:

1. Australian Government to incorporate education about acquired brain injury in children and how the injury impacts their abilities, behaviour and needs, into mandatory training for Australian teachers.
2. Australian Government to invest in raising awareness of the Standards, and associated online resources, among teachers and other individuals responsible for applying the Standards, as well as students with disability and their families and carers.
3. Australian Government to develop more explicit guidance, for both teachers and other individuals responsible for applying the Standards, as well as students with disability and their families and carers, about what constitutes a reasonable adjustment.
4. Australian Government to invest in improved access to learning diversity specialist staff within schools, as well as training and protected time for teachers to engage and collaborate with these staff, as well as other specialists, including allied health professionals, to support every student's personalised learning and support needs.
5. Draft principles in Attachment B of the Discussion Paper to be included in the Standards, and education providers to follow these principles when they consult, resolve issues or handle complaints arising in relation to the Standards.
6. Educational authorities to make adjustments portable, so they follow students across all settings/situations (learning from home/hospital or clinical settings, exams, training, assessment, placements), stages of education, and transitions between years and institutions.

About Stroke Foundation and childhood stroke

Stroke Foundation is a national charity that partners with the community to prevent stroke, save lives and enhance recovery. We do this through raising awareness, empowering health professionals to deliver high quality, best-practice care to stroke patients, facilitating research, and supporting survivors of stroke. We advocate for better systems, processes and resources to help health professionals deliver world class stroke care.

Up to 120 babies and 400 children have a stroke in Australia each year.[1, 2] Stroke is among the top ten causes of death in children[3] and the highest risk of childhood stroke is before one year of age.[2] More than

half of childhood survivors of stroke will have a long-term neurological impairment.[4, 5] The causes of stroke in children are very different from those in adults. The most common risk factors for childhood stroke are arteriopathies (diseases affecting arteries) and congenital heart disease.[6, 7]

The effects of stroke are different for every child and are dependent on the area of the brain that was injured, and the degree of impairment caused. A child's brain is continuously developing and changing, and the effects of stroke may become more pronounced as a child grows, although in some instances may improve over time. Stroke can cause difficulties with sitting, standing, balancing and walking, and may also cause changes to the way the hand, arm and shoulder move. Changes in communication can also occur after a stroke, and a child may struggle to express themselves or understand others. Stroke can impact a child's cognition, affecting how they think, learn, remember things and make decisions. Stroke can affect how well a child sees, as well as how they sense and perceive things. Other common post-stoke disabilities include swallowing difficulties, and 'hidden' impairments, such as fatigue, changes in personality, and regulation of behaviour and emotions.

Navigating life after childhood stroke, in particular the complex health and education systems, can be challenging for survivors and their families. Many of these challenges stem from a lack of understanding of acquired brain injury (ABI) in children, and how the injury impacts their abilities, behaviour and needs. This is particularly the case for children with 'hidden' disabilities, which are often missed. Stroke Foundation believes it is critical that teachers receive education about these issues as part of their mandatory training. Recently, work has been undertaken to adapt a Canadian digital resource for educators to address their unmet ABI-related professional learning needs, *TeachABI*, for the Australian education system.[8] This professional development module could be incorporated into mandatory training for Australian teachers.

Recommendation 1

The Australian Government should incorporate education about acquired brain injury in children and how the injury impacts their abilities, behaviour and needs, into mandatory training for Australian teachers.

Unfortunately, many survivors of childhood stroke face a variety of attitudinal, physical, communication, social and policy barriers, which make it challenging for them to participate in everyday life, access the services they need, and succeed in education. Survivors face barriers to an inclusive education, where they are made to feel welcome by their school and supported to reach their full potential. While there are requirements for schools and teachers to make reasonable adjustments for students with disabilities, parents are still reporting that they are having to fight for accommodations such as the right of their child's therapist to come into school and work with them in the classroom.

The Standards are an important tool to help families and carers of survivors of childhood stroke to advocate for their rights in the education system. Outlined below are a number of opportunities we have identified for the Australian Government to strengthen the Standards, as part of the current Review.

2025 Review of the Disability Standards for Education

Effective implementation of the Standards

While most teachers and other individuals responsible for applying the Standards are aware of them, as a result of the mandatory training they receive, a much smaller proportion of these individuals have a detailed knowledge of the Standards and their practical application. Similarly, many of these individuals would not be aware of the free online resources that are available to help them and their organisations to understand and comply with the Standards. For many teachers who are time-poor, being able to contact learning diversity specialist staff within their school, or externally, in order to get the information and understanding they need to apply the Standards, or be connected to relevant resources, is key.

For many students with disability and their families and carers, awareness and understanding of the Standards, and the free online resources that are available to help them understand and advocate for their rights, is limited. Accessing information about the Standards is particularly challenging for certain priority populations, including those from culturally and linguistically diverse (CALD) communities.

Recommendation 2

Australian Government investment is needed to raise awareness of the Standards, and associated online resources, among teachers and other individuals responsible for applying the Standards, as well as students with disability and their families and carers. Further work is also needed to improve accessibility of the Standards and associated resources, for example by ensuring links to these are available on individual school websites, and in-language resources are available for those from CALD communities.

The Standards aim to ensure students with disability can access and participate in education on the same basis as students without disability, regulating schools to make reasonable adjustments for these students. Importantly however, the main challenge to the effective implementation of the Standards, is the lack of understanding on the part of teachers and other individuals responsible for applying the Standards, as well as students with disability and their families and carers, about what constitutes a reasonable adjustment. This lack of clarity can have significant negative consequences for students. For example, when they are denied adjustments such as videoconferencing into classes, gatekeeping and segregation occur, and they may be diverted to distance education or homeschooling, which disrupts learning continuity alongside their peers.

Recommendation 3

The Australian Government should develop more explicit guidance, for both teachers and other individuals responsible for applying the Standards, as well as students with disability and their families and carers, about what constitutes a reasonable adjustment, to support every student's personalised learning and support needs.

There is a lack of supports within schools to ensure the effective implementation of the Standards. While teachers want to provide their students with disability with the supports they need, many don't know where to access the right information and resources. As mentioned earlier, for many teachers, learning diversity staff can be an excellent resource, to work collaboratively with teachers and parents to provide an integrated support network for students with individual needs, including those with disability. For many survivors of childhood stroke, who have complex needs, a variety of allied health professionals play an essential role in their rehabilitation and recovery, and optimising their function and independence. For these students, their success at school is dependent in large part on a team-based approach involving students, parents, teachers and clinicians; however, significant challenges to this approach exist. For example, teachers are expected to engage with their students' allied health therapists outside of class time, meaning that for some teachers, this time may be unpaid.

Recommendation 4

Australian Government investment is needed to improve access to learning diversity specialist staff within schools, as well as training and protected time for teachers to engage and collaborate with these staff, as well as other specialists including allied health professionals.

Inclusive decision-making

Stroke Foundation notes the set of draft principles for consultation, issues resolution and complaints handling under the Standards, outlined in Attachment B of the Discussion Paper, and the three options for their implementation.

Recommendation 5

Stroke Foundation supports the inclusion of the draft principles in the Standards, and believes that education providers should be required to follow these principles when they consult, resolve issues or handle complaints arising in relation to the Standards and a student or prospective student (Option 3).

In addition, we suggest the following changes to the draft principles:

- In '(a) encourage early, regular and open interactions with the student or an associate of the student in relation to the matter', replace the word 'encourage' with 'ensure', as this should be an expectation, not an option, particularly where adjustments beyond universal strategies are being implemented.
- A statement about the need to work in 'partnership' with the student or an associate of the student should be included.

When teachers, schools and other individuals and organisations that are responsible for applying the Standards make decisions on access and participation, it is critical that all relevant stakeholders are consulted, including students and their families, carers and clinicians. This ensures decisions are informed by all of the relevant information about the individual student and adjustments reflect their personalised medical, educational, and wellbeing needs.

Further guidance and support is needed for teachers, schools and other individuals and organisations that are responsible for applying the Standards, in order to help them undertake effective consultation and implement more transparent and accessible complaints processes. Specifically, clearer guidelines are needed regarding reasonable adjustments. Currently, some schools are providing students with disability with extensive support, while other schools are able to say they are unable to accommodate the needs of students. Often, statements such as 'principal discretion' or 'where you can' are used, which makes it unclear to organisations what their obligations are. A clearer understanding of what these obligations are is also important for students and their families and carers, who often don't know if the adjustments they are asking for are in fact reasonable.

Clear responsibilities for assessment authorities and course developers

The needs of students with disability are considered in the development of courses, and curriculum is written to include adjustments for these students. In addition, diverse learning teams are well equipped to support teachers with the delivery of courses to ensure students with disability are able to access them. Importantly however, the needs of students with disability are often not considered in the development of course assessments, with traditional forms of assessment still employed. Therefore, students who have adjustments, such as less course content or alternate forms of course delivery, are not able to demonstrate their knowledge and successfully complete assessments, and as a result, are excluded from accessing traditional pathways to tertiary education. It is important that students and their families and carers are aware of, and fully understand, what the responsibilities of curriculum development, accreditation and certification organisations are under the Standards. Diverse learning teams within schools should have a responsibility to deliver forums for these families, where these responsibilities are explained, as are the dual roles and responsibilities of families and teachers as key stakeholders in a student's learning journey.

Further support and guidance is needed to help students with disability get the reasonable adjustments they need to participate in work experience within school settings and to take courses with professional accreditation requirements, work integrated learning and practical placements. Many parents feel their child is a burden to the school, while a lot of schools don't offer these opportunities to students with disability due to work health and safety concerns and the associated red tape, as well as a lack of understanding of individual student needs and abilities. There is a need for increased resourcing and support for teachers, such as engagement with specialist allied health professionals, to ensure transitions are prepared for appropriately.

Recommendation 6

In order to ensure continuity and equity, educational authorities need to make adjustments portable, so they follow students across all settings/situations (learning from home/hospital or clinical settings, exams, training, assessment, placements), stages of education, and transitions between years and institutions.

Summary

In summary, the Standards seek protection from stigma and exclusion for students with disability; however, they are only as effective as schools' application of them, which currently is systemically lacking, particularly for invisible disabilities which impact many survivors of childhood stroke (and many with other neurological and neuromuscular conditions).

Stroke Foundation and our community welcome the Review as an opportunity for the Australian Government to strengthen the Standards through:

- inclusion of the draft principles outlined in the Discussion Paper
- development of guidance to clarify what constitutes a reasonable adjustment
- targeted investment focused on improving awareness of the Standards and associated online resources, as well as access to information, resources and training for teachers.

This will help to ensure students with disability, including survivors of childhood stroke, can access and participate in education on the same basis as those without disability.

Thank you for the opportunity to provide feedback as part of this Review.

Yours sincerely

Kelvin Hill
Interim Executive Director, Stroke Programs, Research and Innovation
Stroke Foundation

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