GOVERNMENT NOTICES • GOEWERMENTSKENNISGEWINGS

DEPARTMENT OF HIGHER EDUCATION AND TRAINING

NO. 1410 18 NOVEMBER 2016

CALL FOR COMMENTS ON THE MINISTERIAL COMMITTEE REPORT: DRAFT POLICY FRAMEWORK FOR DISABILITY IN THE POST-SCHOOL EDUCATION AND TRAINING SYSTEM

I, Bonginkosi Emmanuel Nzimande, Minister of Higher Education and Training, in terms of Section 41B of the Continuing Education and Training Colleges Act (Act 16 of 2006), and Section 3 of the Higher Education Act (Act 101 of 1997), hereby publish for comment the *Ministerial Committee Report: Draft Policy Framework for Disability in the Post-School Education and Training System.* The report is available on the Department of Higher Education and Training website (http://www.dhet.gov.za).

This policy framework is intended to assist all types of public post-school education and training institutions to provide effective and uniform services to students with disabilities.

All interested persons, organisations and institutions are invited to comment on the *Ministerial Committee Report: Draft Policy Framework for Disability in the Post-School Education and Training System* in writing, and to direct their comments to the Director-General, Department of Higher Education and Training, Private Bag X174, Pretoria, 0001 for the attention of Ms SP Mahlobogoane, fax: (012) 323 8593; email: Mahlobogoane.s@dhet.gov.za or hand delivered to 123 Francis Baard Street, Pretoria.

Kindly provide the name, address, telephone number, fax number and email address of the person/organisation/institution submitting the comments.

The comments on the *Ministerial Committee Report: Policy Framework for Disability in the Post-School Education and Training System* must be submitted not later than 30 calendar days from the date of publication of this Notice.

Dr BE Nzimande, MP

Minister of Higher Education and Training

Date: 28/10/2016

DRAFT STRATEGIC DISABILITY POLICY FRAMEWORK FOR THE POST-SCHOOL EDUCATION AND TRAINING SYSTEM

2016

CONTENTS

1	INTRODUCTION	1
2	BACKGROUND	3
2	2.1 SITUATIONAL ANALYSIS	3
	2.1.1 Historical Overview	3
	2.1.2 Prevalence	4
2	2.2 LEGISLATIVE AND POLICY ENVIRONMENT	6
3	OBJECTIVES OF THE FRAMEWORK	9
4	STANDARDISATION OF A MODEL TO DEFINE DISABILITY	10
Re	commendation 1	11
5	STANDARDISATION OF A CLASSIFICATION MODEL FOR DISABILITY	12
Re	commendation 2	13
6	STANDARDISATION OF A REPORTING SYSTEM	14
Re	commendation 3	14
7	STANDARDISATION OF DISABILITY POLICIES OF THE DIFFERENT PSET INSTITUTIONS	3. 15
Re	commendation 4	15
8	STANDARDISATION OF SERVICES	16
Re	commendation 5	17
a	AWARENESS AND ADVOCACY	1 9

Red	commendation 6	18
10	CAREER DEVELOPMENT OF STUDENTS WITH DISABILITIES	18
Red	commendation 7	19
11	COOPERATION AND COORDINATION	20
Red	commendation 8	21
12	THE PROFESSIONALISATION OF DRUs	21
Red	commendation 9	21
13	ACCESS AND INFRASTRUCTURE	22
Red	commendation 10	23
14	SPORT AND RECREATION	24
Red	commendation 11	24
15	FUNDING	25
Red	commendation 12	25
16	MONITORING AND EVALUATION	26
Red	commendation 13	26
17	STRATEGIC IMPLEMENTATION PLAN	26

ANNEXURES	
ANNEXURE A: CODING FRAMEWORK	29
ANNEXURE B: OUTLINE OF DISABILITY POLICY	31
ANNEXURE C: UNIVERSAL ACCESS STANDARDS	32
ANNEXURE D: BENCHMARK FOR ASSISTIVE DEVICES	34

ABBREVIATIONS AND ACRONYMS

ADHD	Attention Deficit Hyperactivity Disorder		
CET	Community Education and Training		
DHET Department of Higher Education and Training			
DRUs	Disability Rights Units		
DWCPD	Department of Women, Children and People with Disabilities		
HE	Higher Education		
HEDSA	Higher and Further Education Disability Services Association		
HEMIS	Higher Education Management Information System		
ICT	Information Communication Technologies		
NSFAS	National Student Financial Aid Scheme		
PSET	Post-School Education and Training		
TVET	Technical and Vocational Education and Training		
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities		

1 INTRODUCTION

It is critical that disability is appropriately addressed along with all other areas of transformation within the Post-School Education and Training System (PSET) in South Africa. The South African Constitution has set the stage for the removal of barriers to integrating vulnerable groups in mainstream society as participating members of society. Of the major pillars on the national transformation agenda of South Africa, disability has been acknowledged as the area where change has not kept pace with other areas. It has been lagging behind in spite of legislation aiming at normalising the lives of persons with disabilities. A key issue is the lack of mainstreaming.

Mainstreaming is, within the context of a rights discourse and sustainable development, about dignity, self-worth, autonomy and self-determination. Mainstreaming requires commitment at all levels, and needs to be considered across all sectors and built into new and existing legislation, standards, policies, strategies and plans. Disability mainstreaming is therefore the process through which governments and other stakeholders ensure that persons with disabilities participate equally with others in any activity and service intended for the general public.

Reasons for the slow progress in mainstreaming and its implementation may include the following: the absence of effective monitoring of compliance with national and international standards and obligations; the lack of effective coordination mechanisms; the lack of funding mechanisms; absence of enforcement mechanisms and together with this, the lack of accountability and consequences for non-compliance. Discrimination against persons with disabilities continues since there are no consequences for failing to implement the legislation and policies, with the result that mainstreaming of disability in all areas of life is lagging behind.¹

¹ Department of Social Development, 2015, the White Paper on the Rights of Persons with Disabilities.

In January 2014 the Minister of Higher Education and Training, Dr Bonginkosi Emmanuel Nzimande, launched the White Paper for Post-School Education and Training for building an expanded, effective and integrated PSET system. In this policy document, which acknowledges the continued existence of barriers that discourage people with disabilities from entering post-school institutions, emphasis is placed on the need for expanded disability support for the entire PSET system. A recommendation was made for a National Policy Framework "to guide the improvement of access to and success in post-school education and training institutions" including private institutions, for people with disabilities.² Subsequently, in December 2014, the Minister proceeded to appoint a Ministerial Committee to develop a Strategic Policy Framework for Disability in the PSET system.

The tasks assigned to the Ministerial Committee were the following:

- Developing a strategic policy framework on disability for all public and private PSET institutions i.e. Colleges, Technical and Vocational Education and Training (TVET) Colleges, Community Colleges and Higher Education (HE) institutions;
- Safeguarding the diverse field of disability in the PSET system as articulated in the White Paper for Post-School Education and Training; and
- Developing a strategic implementation plan to support the framework.

The Ministerial Committee submitted their report to the Minister in September 2015. The report is available on the Department of Higher Education and Training's website (http://www.dhet.gov.za).

Based on the Ministerial Committee Report, the Department of Higher Education and Training developed the draft Strategic Disability Policy Framework for the Post-School Education and Training System for public comment and consultation.

_

² Department of Higher Education and Training, 2014, White Paper for Post-school Education and Training, p.46.

2 BACKGROUND

2.1 SITUATIONAL ANALYSIS

2.1.1 HISTORICAL OVERVIEW

"Among the yardsticks by which to measure a society's respect for human rights, to evaluate the level of its maturity and its generosity of spirit, is by looking at the status that it accords to those members of society who are most vulnerable, disabled people, the senior citizens and its children."

Disability affects individuals across ethnic, racial, economic or regional barriers. While some disabilities may be immediately visible, some are not immediately apparent to observers. It is said that persons with disabilities are made more 'disabled' by the structure of the world in which we live.

For many years equality issues such as race and gender have received suitable focus. Disability inclusion in PSET institutions in South Africa has not been as fortunate. Access and inclusion of students with disabilities received very little attention and resources, leading to a low number of students with disabilities entering and graduating from the South African PSET system. More PSET institutions are now addressing the need to provide services to students with disabilities and have policies in place to ensure equal access to all students.

Whilst significant progress has been made in mainstreaming disability in South Africa, far more still needs to be done to ensure and regulate disability inclusion by enforcing existing accessibility legislation and developing minimum norms and standards for universal application. One reason for this could be that a major shift in the attitude of society is needed to make better progress.

The Baseline Country Report submitted to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), approved by Cabinet in April 2013, acknowledges that

.

³ Office on the Status of Disabled Persons South Africa, 1997, Integrated National Disability Strategy - White Paper. Pretoria: Office of the President.

"weaknesses in the governance machinery of the State, and capacity constraints and lack of co-ordination within the disability sector, have detracted from a systematic approach to the implementation of the UNCRPD. The continued vulnerability of persons with disabilities, particularly children with disabilities as well as persons with psychosocial disabilities, residing in rural villages, requires more vigorous and better co-ordinated and targeted intervention."

2.1.2 PREVALENCE

Census 2011 reported that 11.1% of South African people had at least some difficulty performing functions as described in the Washington Group questions⁴ and estimated an impairment prevalence of 7.5% or approximately 2.9 million out of 38 million people. This figure, however, excludes among others, children between 0-4 years of age; statistics of persons with disabilities in residential care and school boarding facilities; and persons with psychosocial, neurological and/or emotional disabilities.⁵ A Look at the World Report on Disability reveals that Africa has a much higher prevalence of disability when compared to other continents.

According to the section on access to education in the White Paper on the Rights of Persons with Disabilities, children with severe functioning difficulties were the most marginalised. Primary School attendance varies among the different functional domains. Children with severe difficulty in walking and communicating had the lowest numbers attending school, while those with severe difficulty in seeing had the highest numbers attending.

Attendance at secondary level was lowest among persons with severe difficulties in the various functional domains. Attendance at secondary school level was higher among males than females with all types of difficulties and degrees of affliction. Children with severe

,

⁴ The Washington Group on Disability Measurement develop international disability measurements for statistical reporting in order to facilitate the comparison of data on disability cross-nationally (http://www.cdc.gov/nchs/washington_group.htm).

⁵ Department of Social Development, 2015, White Paper on the Rights of Persons with Disabilities.

difficulty in walking and communicating were the most marginalised in terms of access to secondary education.

The majority of persons with severe difficulties across all functional domains aged between 20 to 24 years were not attending tertiary education, with only about one-fifth of them attending tertiary education. Attendance was highest among the white population group and lowest among black Africans. Slight variations in tertiary enrolment exist between males and females.

The highest proportion of persons aged 20 years and older with no formal education was recorded in tribal/traditional communities regardless of the type of disability, while those in urban areas had a better profile. Persons with severe difficulties had the worst educational outcomes (5.3% attained higher education, 23.8% no formal education and 24.6% some primary education).⁶

Higher Education Management Information System (HEMIS), as well as Technical and Vocational Education and Training Management Information System (TVETMIS) data⁷ and institutional feedback show that there is an increase in the numbers of students with disabilities every year, yet there is minimal growth when compared to the general or total intake and the increase that occurred in the PSET sector over the last five years.

Accurate and up-to-date data on post-school students with disabilities is not readily available. Data received from the HEMIS from 23 public universities show the following: in 2011, 5 856 students with disabilities were enrolled in higher education institutions out of a total population of 938 201, accounting for only 0.6% of the total enrolment; in 2012, student numbers increased to 6 277 out of a total enrolment of 953 373, accounting for 0.7%; and in 2013, student numbers increased to 7 118 out of a total enrolment of 983 698, equalling the 0.7% observed in 2012. Data received from the TVETMIS from the 50 public TVET Colleges⁸

_

⁶ Department of Social Development, 2015, White Paper on the Rights of Persons with Disabilities.

⁷ Data for Community Colleges are not yet available.

⁸ The number of students with disabilities in TVET Colleges are more than the numbers provided because not all colleges have submitted data in the survey.

show the following: in 2010, 834 students with disabilities were enrolled in TVET Colleges out of a total population of 358 393, accounting for only 0.23% of the total enrolment; in 2011, 1 459 students with disabilities were enrolled in TVET Colleges out of a total population of 400 273, accounting for only 0.36% of the total enrolment; in 2012, student numbers decreased to 1 369 out of a total enrolment of 657 690, accounting for 0.21%; in 2013, student numbers increased to 2 266 out of a total enrolment of 639 618, accounting for 0.35%; and in 2014, student numbers further increased to 2 884 out of a total enrolment of 702 383, accounting for 0.41%.

2.2 LEGISLATIVE AND POLICY ENVIRONMENT9

It is critical that disability is appropriately addressed along with all other areas of transformation. Our Constitution strives to inculcate an inclusive mind-set towards all vulnerable people who deserve the dignity and right to be recognised and function as participating members of society. The overarching policy underpinning the protection of disabled persons is to give effect to human rights. It has been shown that disability is the one area of transformation that has not changed significantly in the South African landscape.

More should be done to promote the social justice of persons with disabilities. There are four constitutional rights – dignity, equality, freedom and Ubuntu, and in order to meet these rights it is our duty to empower all people, able-bodied and disabled, to succeed through universally-designed innovative working and learning environments. This must not only be limited to physical access, but also include access to information and technology and decrease the attitudinal barriers towards people with disabilities.

A greater effort should be made to address the transformational agenda and especially disability. There needs to be a willingness to allow open and honest discussions over disability matters which are often left behind when transformation is discussed. A concerted effort should be made to prioritise disability in order to show that South Africa is a true barrier breaker and leader in inclusion and transformation.

_

⁹ See research document on the Policy Framework for Disability in the Post-school Education and Training System.

Several existing pieces of legislation form the foundation of disability legislation, starting from a broad perspective and narrowing down to sector specific legislation. The South African Constitution (Act 108 of 1996) outlaws all forms of discrimination including those based on disability. All organs of the State were required to ensure that the human rights of disabled people are honoured. During the first term of the democratic government, the Office on the Status of Disabled Persons was established in the Office of the President to coordinate activities aimed at addressing disability and to cooperate with state organs including all government departments to ensure an environment that is responsive to the needs of people with disabilities. The Integrated National Disability Strategy was developed in 1997 to provide a framework and vision for the integration of disability issues in all social, political and economic programmes within South Africa. In 2007, South Africa became a signatory of the UNCRPD protocol, hereby committing the country to be held accountable internationally.

Many legislative mechanisms followed including the Employment Equity Act (1998), the Skills Development Act (1998) and the Promotion of Equality and Prevention of Unfair Discrimination Act (2000). The most recent policy which addresses disability is the White Paper on the Rights of Persons with Disabilities published in September and approved by Cabinet in December 2015.

Before 1994, people with disabilities had little access to PSET and only a small number registered as students in the sector. However, after 1994, important legislation and policies followed that underlined equity and non-discrimination with respect to people with disabilities in the PSET sector.

The South African Schools Act (1996), Higher Education Act (1997), Further Education and Training Act (1998), Adult Basic Education and Training Act (2000) and the Continuing Education and Training Act (2006) call for all educational institutions to ensure that learners with disabilities can access education.

The National Plan for Higher Education (2001) obliges universities to increase access for students with disabilities. The Plan requires universities to develop plans indicating aims, strategies implemented and steps taken towards improving access.

White Paper 6: Special Needs Education: Building an Inclusive Education and Training System (2001) provides a blueprint for inclusive education in South Africa as a means to address the challenge of disability across the education landscape. However, the focus is very much geared towards schooling. Where there is mention of further and higher education, this is largely in relation to access. White Paper 6 also calls for "regional collaboration" when addressing disability, a suggestion aimed at pooling resources for the benefit of larger groups of learners with similar support needs. In practice, this is considered by many as restrictive in terms of access as it implies that institutions only cater for certain disabilities at the expense of others.

White Paper 3 on the Transformation of the Higher Education System (2007) highlights the need for an equitable and just system of higher education that is devoid of all forms of discrimination including discrimination against students with disabilities. This is based on the principles of equity and redress. The principle of equity requires fair opportunities to enter higher education programmes and to succeed in them. This policy has clearly not been fully implemented, either by institutions or by the allocation of sufficient financial support by government. In 2012, The Minister of Higher Education and Training released the Green Paper for Post-school Education and Training for public comments. On November 2014, Cabinet approved the White Paper for Post-school Education and Training, outlining the Department of Higher Education and Training's (DHET's) vision, priorities and strategies for the PSET system.

All these efforts provided the impetus for addressing disability within the broader South African society, but also more specifically within the education sector. This said, a multiplicity of challenges remain and need to be addressed if the PSET sector is to be responsive to the needs of people with disabilities.

3 OBJECTIVES OF THE FRAMEWORK

The Ministerial Committee on disability in the PSET sector conducted research to determine the current status of disability services and the inclusion of people with disabilities in this sector. The research included an overview of the whole sector including issues such as the number of students, available services and the standardisation thereof, policy governing the rendering of services to students with disabilities and challenges experienced in and by the PSET institutions.

The objectives of this policy framework are to propose:

- A standardised model to define disability;
- A standardised classification model for disability;
- A standardised reporting system;
- The standardisation of disability policies of the different PSET institutions;
- The standardisation of services for students and staff with disabilities:
- The creation of awareness and advocacy;
- The career development of students with disabilities;
- Coordination and cooperation in terms of services;
- The professionalisation of Disability Rights Units (DRUs);
- The establishment of an accessible learning and recreation environment, including accessible infrastructure;
- · The creation of accessible sport and recreation facilities;
- A standardised disability funding model for the entire PSET system;
- The creation of a standardised monitoring and evaluation system; and
- A strategic implementation plan.

4 STANDARDISATION OF A MODEL TO DEFINE DISABILITY

As already stated in the background, accurate statistics regarding the prevalence of disabilities in the PSET System in South Africa are not readily available. One of the reasons for this is the absence of a standardised definition and measurement of disability. Obtaining reliable statistics about the prevalence of disability and factors around this remains a challenge as it hinges on how disability is defined and also how people perceive and disclose disability e.g. the social construct.

Different models are used to explain disability. The early understanding of disability focused on impairment and equated disability with a deficiency in the individual. This limiting medical definition influenced measures that resulted in policies and practices that excluded persons with disabilities from mainstream society for decades (medical model).

The social model focuses on the abilities of persons with disabilities rather than on their inabilities. It assesses the impact that the socio-economic environment has on the full participation, inclusion and acceptance of persons with disabilities as part of mainstream society. The social model emphasises the need for broader systemic and attitudinal changes in society; the provision of accessible services and activities; and the mainstreaming of disability to ensure full inclusion of persons with disabilities as equals. The model further dictates that persons with disabilities must actively participate in transformation processes that impact on their lives. The key features of the social model are:

- Acknowledging that the social context within which persons with disabilities live, does impact on their full participation, inclusion and acceptance into mainstream society;
- Focusing on the abilities of persons with disabilities; respecting their inabilities and aiming to address the social barriers that result in discrimination;
- Promoting broader systemic and attitude changes in society and mainstreaming disability;
 and
- Reinforcing the importance of persons with disabilities as being part of transformation processes to improve the quality of their lives.

The social model does not exclude the presence of impairment and acknowledges the need for medical intervention, but the emphasis is on how society, through inaccessible environments and facilities excludes people with disabilities.

The rights-based approach emphasises social justice, a minimum standard of living, equitable access, equal opportunity to services and benefits, and a commitment to meeting the needs of all South Africans with a special emphasis on the needs of the most disadvantaged. This approach is supported by the principles of universality, inalienability, equality and non-discrimination and requires a human-rights focus in drafting and implementing policies and programmes.

While protecting and promoting the human rights of persons with disabilities is an underlying principle in all the Articles of the Convention on the Rights of Persons with Disabilities, Article 4 commits States Parties to ensure and promote the full realisation of all human rights and the fundamental freedom for all persons with disabilities without discrimination of any kind, on the basis of disability, and to protect all persons against the violation of their human rights.

Disability is a complex concept, and as yet there is no definition of disability that has achieved international consensus.

RECOMMENDATION 1

The Strategic Disability Framework for the Post-School Education and Training System recommends a working definition of disability in line with the United Nations Convention on the Rights of Persons with Disabilities. Persons with disabilities include those who have physical, psychosocial, cognitive, neurological and/or sensory impairments. As a result of various attitudinal, communication, physical and information barriers, these persons are hindered from participating fully and effectively in society on an equal footing with others.

5 STANDARDISATION OF A CLASSIFICATION MODEL FOR DISABILITY

Institutions should be adequately capacitated to address all different categories of disabilities, including the following areas of disability support not always catered for but which are crucial to the PSET sector: learning disabilities, psychiatric/social disabilities, D/deaf¹⁰ as well as communication disabilities (e.g. stuttering). Future planning should involve the Health Sector. Disability has many intersections and for a large number of students, health care services are crucial to maximise their chances of success. In many instances neither students nor DRUs have the funds available to optimise health care.

The expansion of disability categories to increase access and to know the extent and prevalence of disability across the sector is crucial. Using the correct codes to track disabled students who enrol in order to put in place the necessary support is of vital importance. Yet, with the current HEMIS coding system in use, it is very difficult to obtain proper information and to make the necessary provision and reach the correct conclusions.

Furthermore, the TVETMIS report on 16 different categories of disabilities, viz. Attention deficit disorder with/without hyperactivity (ADHD/ADD), Autistic spectrum disorders, Behavioural/conduct disorder (including severe behavioural problems), Blindness, Cerebral palsy, Deaf-blindness, Deafness, Epilepsy, Hard of hearing/partial hearing, Mild to moderate intellectual disability, Moderate to severe/profound intellectual disability, Partial sightedness/Low vision, Physical disability, Psychiatric disorder, Severely intellectually disabled and Specific learning disability.

The debate around the HEMIS categories and the disjunction between the categories used in the HEMIS and TVETMIS that currently exist within the PSET sector brings home the importance of standardised workable codes. In standardising the coding, categorisation and reporting of impairments, the evaluation and service delivery across the PSET system will improve.

¹⁰ The capital 'D' is used to denote a member of the cultural and linguistic community (the Deaf community), as opposed to the small 'd', which refers to hearing loss from a medical point of view.

This Strategic Disability Framework for the Post-School Education and Training System therefore proposes the categorisation of impairment types which have been welcomed by the various DRUs and continued consultation is taking place between the Higher and Further Education Disability Services Association (HEDSA) and the DHET to consider ways to implement this disability coding framework (see **Annexure A**). The principles of the UNCRPD and the Washington Group questions employed by the latest SA census (2011) were considered in arriving at this framework. The current coding is not sufficient to assist DRUs in identifying students with different disabilities. This deficiency makes it difficult to provide the necessary services.

RECOMMENDATION 2

It is recommended that the classification framework in **Annexure A** be implemented as part of the disability policy framework, to capture disability related statistics within the PSET sector and that the DHET ensures the effective implementation of this framework.

6 STANDARDISATION OF A REPORTING SYSTEM

It is important to report on the discrepancy between HEMIS and TVETMIS data and information reported by institutions. The question remains: why do DRUs usually report a higher number of disabilities than what is reflected in the DHET data? One reason may be the time of reporting the disability (at the beginning of the academic year or on the application form). At this time some students with disabilities may not have approached the DRUs to disclose their support needs. This may be indicative of a lack of trust or fear of disclosing information such as disability status. Some students from rural areas may not even be aware of hidden disabilities such as learning disabilities, and are only diagnosed when difficulties surface or are identified during their course of study.

One way of overcoming this situation is that students should give their written permission to allow the institutions to upload their disability status on the DHET's databases when their disability status is disclosed to the institutions. If all institutions follow the same process, this will ensure parity in DHET and institutional statistics and provide an objective picture regarding the number of students with disabilities in the PSET sector.

To ensure the capturing of disclosures after admission, there must be cooperation between the internal or institutional administrator, the DRUs as well as the DHET.

RECOMMENDATION 3

It is recommended that all PSET institutions use a uniform classification framework for recording purposes on the DHET's databases to ensure the standardisation and integrity of data on students with disabilities.

7 STANDARDISATION OF DISABILITY POLICIES OF THE DIFFERENT PSET INSTITUTIONS

In line with the autonomy of institutions, most higher education institutions with DRUs do have their own policies to guide the work done in the field of disability support. The policies, however, differ greatly, with some not addressing all the core areas necessary and others not being underpinned by the UNCRPD and other government policies. In many instances there is a gap between the implementation of the policies and costing and budget allocations not being taken into account.

Greater emphasis is needed on the development of plans to guide policy implementation. In terms of TVET Colleges and Community Colleges, work needs to start from scratch and in many instances people in charge of the *ad hoc* services are not knowledgeable or equipped to perform the work or draft a policy that is holistic, addressing all areas from a human-rights perspective.

The proposed standard policy outline (see **Annexure B**) with all elements that should be adopted to address disability in institutions in a holistic manner, will greatly assist in setting minimum standards. It will also create the space for policies in the PSET sector to use the same model as a point of departure that is underpinned by the UNCRPD and other government policies. Once this is in place, institutions can add to this to create a policy in line with its specific institutional practice and culture.

RECOMMENDATION 4

It is recommended that the standard policy outline in **Annexure B** be used by all PSET institutions when preparing institutional policies for students with disabilities.

8 STANDARDISATION OF SERVICES

Most universities have some form of formalised services available for students with disabilities, but there is no consistency in what is offered or even minimum standards to adhere to, while the TVET and Community Colleges are lagging behind in formalised services for students with disabilities. To add to the predicament, where services are offered, they are also known by different names. This illuminates the bigger problem of standardisation. There needs to be consistency in the name given to services for students with disabilities to make them easily identifiable and enable them to be monitored. It is evident that one consolidated framework needs to be put in place to ensure that all students with disabilities in the PSET sector will be able to access the necessary support to ensure that, in line with their human rights, they will experience equal access and success in the PSET sector.

Currently seventeen universities have established DRUs, all functioning at different levels. Information collated by the then Department of Women, Children and People with Disabilities (DWCPD) Road Show (2013) as well as feedback given to the Ministerial Committee, strengthened the observation that there is no consistency across the array of services afforded to students with disabilities. This inconsistency relates to the type and quality of services, the policies governing the services, name of units, budget allocation, or staff component and reporting lines. The functions vary vastly but most DRUs are generally responsible for facilitating access to basic reasonable accommodation in terms of facilities and study material, extension of extra time, computers with specialised software, making lecturers aware of students' needs and support required, and examination related assistance required by students with disabilities, as well as raising some awareness of disability and advocacy.

According to information that the Ministerial Committee received in early 2015, the picture is unfortunately worse for TVET and Community Education and Training (CET) Colleges with very few institutions able to support students with disabilities. The DHET also reported that no formalised services are offered at CET Colleges.

The level of service delivery and provision mostly depends on:

- The needs of rights holders (students with disabilities) and available services at the institution to meet the specific needs of the individual;
- The institutional policy which defines what the institutions can enforce in order to accommodate students with disabilities; and
- The size of the unit responsible for disabilities the bigger the size of DRUs, the better
 equipped they are to provide greater and more varied levels of service to students with
 disabilities.

There are great inconsistencies with respect to the types of disabilities supported. In order to enhance service delivery the recommendation is that the positioning of DRUs within the educational facility must be at a high level structure e.g. in the Senior Executive Teams. Apart from this, the physical location must also be considered, as the DRU should be accessible.

Even though it is cost intensive to cater for all disabilities, it is not advisable that certain institutions should specialise in particular disabilities and a note of caution is made that this type of strategy could lead to the exclusion of students who want to go to a PSET institution of their choice.

A possible solution to the high cost for specific support can be the sharing of resources across regions where possible. Resources not in use at one institution can then be utilised by other institutions in the same region.

RECOMMENDATION 5

In order to standardise services it is recommended that:

- Units delivering services to students with disabilities should be called Disability Rights
 Units in all PSET institutions;
- Units need to report to the Senior Executive Teams of the institution;

- The institution should ensure access and visibility according to universal design principles (see Annexure C);
- The standardised policy framework must be adhered to;
- An assessment of the needs of every student with a disability must be conducted at the commencement of studies; and
- The alignment of services must be done according to the minimum standards and must be aligned with the assessment.

9 AWARENESS AND ADVOCACY

The field of disability is complex and it is, therefore, important to sensitise people and create awareness about every aspect that has an impact on the life of a student with a disability while he or she is studying. This includes aspects such as sport and recreation, social activities as well as learning activities. Creating awareness about compliance requirements is also important. One of the tasks of the DRUs is that of advocacy to ensure that people understand the importance of providing an accessible environment to students with disabilities. It is therefore important that DRUs should have an awareness programme in place aligned to the institution's disability policy.

RECOMMENDATION 6

Institutions should develop advocacy and awareness programmes in line with their disability policy.

10 CAREER DEVELOPMENT OF STUDENTS WITH DISABILITIES

Students with disabilities face challenges in terms of career opportunities and pathing. At school level subject choices for these students are usually limited. Special schools often do not offer the full range of subjects which means that the students do not meet the entry requirements for certain learning programmes/institutions. For example, if the subject Mathematics is not offered, careers in the engineering and financial fields are not accessible.

The DHET is currently operationalising the Khetha Career Development Services nationally and it is important that special attention should be given to the career development of students with disabilities. Career development services (meaning career guidance, advice and information) form a crucial part of guiding all students, including those with disabilities, into learning and career paths.

Articulation is also an important issue for students with disabilities. Articulation refers to the logical progression of a person's learning within and between learning programmes and institutions. The White Paper for Post-school Education and Training emphasises the importance of establishing a coherent and coordinated post-school system that can ensure easy articulation between different parts of the system. This entails, among other things, ensuring that curricula are designed to permit articulation between succeeding levels of the National Qualifications Framework (NQF) wherever possible. The White Paper states that South Africa must build a system that facilitates the movement of students both vertically and horizontally, between different streams and levels.

There is a general expectation that entry requirements for students with disabilities who want to access post-school institutions should be lowered. This expectation should be approached with caution. The better option is to introduce bridging programmes and where necessary extended programmes for students with disabilities. This will allow students with disabilities to successfully access and complete learning programmes of an equal standard to their peers.

RECOMMENDATION 7

The following recommendations are made:

- The career development of students with disabilities is addressed in their current career development service initiatives; and
- Entry requirements for all students should be the same, but bridging programmes and extended programmes should be available for students with disabilities.

11 COOPERATION AND COORDINATION

To ensure that services for students with disabilities are available and aligned good cooperation and coordination between key stakeholders, cooperation between various government departments is necessary. The key stakeholders are: the DHET with its PSET institutions; the Department of Basic Education (ensuring a smooth transition from school to post-school); the Department of Labour (ensuring that employment opportunities for students with disabilities are created and communicated); the Department of Social Development (providing disability grants); the National Treasury (ensuring that funds are available) and the Department of Health (ensuring that medical assistance is available). Other stakeholders include other government departments, various non-profit organisations such as HEDSA and Sector Education and Training Authorities. The DHET is well positioned to facilitate cooperation and support among the different stakeholders.

Departments such as Public Works (assisting with accessible infrastructure), Communication (developing strategies that will provide people with disabilities with equal opportunities for access to information and connectivity), and Sport (promoting inclusion in mainstream sport and recreation opportunities) should also be included in cooperation and coordination strategies, as well as departments that are providing large scale employment such as the National Defence Force, Correctional Services, Health, Public Works and the South African Police Services.

It is essential that the DHET aligns its work within the disability field with that of government as a whole. The DHET and the institutions for which it is responsible must align their strategic and operational plans and programmes with key national policy initiatives such as the National Development Plan. The establishment of a structure to formalise cooperation and coordination is necessary and the DHET should take leadership in this regard. Once established the roles and responsibilities of the different stakeholders should be identified and described.

RECOMMENDATION 8

A formal structure should be established to ensure cooperation and coordination among the relevant stakeholders. The DHET should be the mandated party to take the responsibility to establish such a structure.

12 THE PROFESSIONALISATION OF DRUS

Currently PSET institutions, especially TVET Colleges and Community Colleges, struggle to cater for students with disabilities because of a lack of capacity and funding. Firstly, many of these institutions do not have DRUs in place, and secondly, if DRUs or similar units are in existence, there are insufficient qualified staff working in the units. This highlights the fact that there is a dire need for professional and skilled staff to work in DRUs.

Training and the professionalisation of staff working in DRUs is non-existent in South Africa and very few opportunities or accredited programmes are available. The only training available at the moment are short courses offered at the Stellenbosch Business School and the University of Cape Town. At the moment institutions co-opt staff from unrelated departments or positions to work in DRUs, which only adds to the problem and exacerbates the lack of professional and skilled staff in DRUs. Currently some basic training is provided through regional training sessions and support. A formal course that offers an opportunity to obtain a professionally accredited qualification will provide a vehicle via which to professionalise staff and services.

A statutory professional body that can oversee the quality of services and the professionalisation of staff is required to professionalise the sector. The HEDSA could be considered to fulfil this function but will have to change their status in order to do that.

RECOMMENDATION 9

The establishment of a statutory professional body that can oversee the professionalisation of staff working in the DRUs is recommended. Such a body should have the following responsibilities:

- Overseeing the quality of staff and services of the DRUs;
- Accrediting training programmes for staff working in the DRUs; and
- Registering staff as members of the professional body.

13 ACCESS AND INFRASTRUCTURE

Access refers to the following: physical infrastructure; public transport; and access to the learning environment including Information and Communication Technology (ICT) and assistive devices (see **Annexure D**).

The accessibility of the physical environment remains a big challenge for students with disabilities in PSET institutions, with many buildings being very old and some even with historical status. Creating an accessible environment thus remains high on the agenda when looking at accessibility. If the physical environment is not accessible, it belies the point of creating an accessible learning and teaching environment. Although physical access issues are often considered, some may never be implemented due to misconceptions that the cost is too high to cater for only a small number of users. If accessibility audits to identify and remove potential environmental barriers are done at the beginning of infrastructure development, they will ensure an inclusive, safe and secure environment from the start and allow for cost-saving by minimising the need for expensive modifications later.

In ensuring an accessible environment, universal access principles should be used. Universal access is a concept that addresses the issue of accessibility by offering an integrated philosophy which observes inclusion and accessibility as key components of developing barrier free environments. Universal access can be defined as the design of products, environments, programmes and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialised design.

Public and campus transport should be accessible to students with disabilities. The DHET and the Department of Transport should ensure proper effective and accessible transport provision for students with disabilities.

In order to remove barriers in the learning environment and to accommodate students with disabilities it is important to ensure that the necessary assistive devices, including ICT programmes and the appropriate teaching and learning methodologies are in place. Without this, students with disabilities will not be able to compete on an equal level with their peers.

Broader access will remain a challenge without the necessary funding. It is important that sufficient funding is available to institutions to ensure an accessible environment.

RECOMMENDATION 10

The following measures are recommended:

- The standardisation of guidelines for physical infrastructure (see Annexure C);
- The standardisation of guidelines for the minimum assistive devices; and
- The provision of sufficient funding to DRUs to ensure an accessible environment.

14 SPORT AND RECREATION

The ability of sport to transcend barriers makes it an excellent platform for transformation and inclusion strategies, particularly in terms of persons with disabilities. Stigmatised and discriminatory perceptions of persons with disabilities in society as a whole and particularly at PSET institutions form the basis of exclusion. However, sport can help to reduce such stigmas and discrimination by highlighting the skills and abilities of persons with disabilities. The research conducted by the Ministerial Committee highlights the gaps and challenges in the PSET sector in terms of the inclusion and mainstreaming of students with disabilities in sport and recreation. In order for disability sporting codes and the athletes participating in these to grow and develop (particularly at national and international levels), specific initiatives are required.

Although some universities have a disability sport policy and many universities a disability policy (although this often does not address sport and recreation), this is not the case for TVET and CET Colleges. There is thus a clear need for support and assistance to all PSET institutions to create, maintain, implement and evaluate standardised sport and recreation policies for students with disabilities. This process should be based on strategic planning and include the clarification of roles and responsibilities of the various role-players and particularly PSET institutions.

RECOMMENDATION 11

The development of a shared vision for disability sport at PSET institutions, which includes assistance to the institutions to create, maintain, implement and evaluate standardised sport and recreation policies for students with disabilities, is recommended. The DHET should take the lead in this regard.

15 FUNDING

Funding is needed for students (including tuition fees and assistive devices), DRUs and for providing accessible infrastructure. However, there is no uniform funding model to provide sufficient funds for services to students with disabilities.

The current scenario for eligible students is that they can apply for National Student Financial Aid Scheme (NSFAS) funding, including a once-off payment for an assistive device. Some students are not eligible to apply for NSFAS funding with the effect that the DRUs need to find funding to support the students with disabilities. Many DRUs do not obtain dedicated funding from their institutions to provide the required services. This highlights the need for dedicated, ring-fenced funding from the DHET/government to the DRUs in PSET institutions. Further to this, funding is also needed to ensure an accessible physical infrastructure. Many buildings are old and need appropriate renovations to ensure accessibility. Accessibility audits to identify and remove potential environmental barriers are needed. In order to ensure that the same standards are adhered to, a set of universal access criteria should be used when doing audits.

RECOMMENDATION 12

The recommendations are the following:

- The development of a funding model for the entire PSET sector;
- Revision and implementation of NSFAS guidelines to include increasing the cap per student and removal of the means test to accommodate for students with disabilities and disability services at PSET institutions; and
- Dedicated, ring-fenced funding from the DHET/government to PSET institutions for the resourcing of DRUs.

16 MONITORING AND EVALUATION

Monitoring and evaluation (M&E) is a process that helps improve performance and achieve results. The goal is to improve the current and future management of services to students with disabilities. It is suggested that an implementation matrix (which includes targets for performance) should be developed and used to monitor and evaluate progress. Statistical data on students with disabilities should be obtained from the DHET databases. As mentioned in Sections 5 and 6, statistical data can only be considered once the data is standardised and reflects accurate figures.

RECOMMENDATION 13

The recommendations are the following:

- DRUs should publish annual reports against the targets set in the implementation matrix. These reports should be submitted to the DHET;
- The DHET should evaluate the performance; and
- Funding must be allocated to the DRUs to ensure that M&E is operationalised.

17 STRATEGIC IMPLEMENTATION PLAN

A three year implementation plan in line with the medium-term expenditure framework for policy implementation, monitoring and evaluation as well as supporting programmes and training about the disability policy is recommended.

The following points propose the elements of the Strategic Implementation Plan. A detailed Implementation Plan will be developed after the Policy Framework is finalised. The proposed policy directives for implementation are:

- 1. Develop a working definition to define disability
- 2. Develop a classification model for disability

- 3. Develop a cooperation and coordination mechanism for students with disabilities in PSET institutions
- 4. Develop norms, standards and guidelines for implementation
 - a. Develop a standard for disability implementation policies of the different PSET institutions
 - b. Develop norms/standards/guidelines for physical infrastructure for students with disabilities in PSET institutions
 - c. Develop norms/standards/guidelines for minimum assistive devices for students with disabilities in PSET institutions
 - d. Develop norms/standards/guidelines for professionalising the operations of DRUs
 - e. Develop guidelines for bridging and extended programmes for students with disabilities in PSET institutions
 - f. Develop guidelines for participation in sport for students with disabilities in PSET institutions
- 5. Develop a standardised reporting system (including indictors) for people with disabilities in PSET institutions
- 6. Develop funding mechanisms for implementation
- 7. Implement services for students with disabilities
 - a. Assessing needs of students with disabilities
 - b. Institutions ensuring access for students with disabilities
 - c. Aligning services according to minimum standards
 - d. Reporting against standards/indicators
- 8. Develop awareness and advocacy programmes
- Include career development for students with disabilities in DHET initiatives
- 10. Monitor progress and evaluate implementation

- a. Publishing annual progress reports against set targets
- b. DHET evaluating the performance of the PSET system against set targets

ANNEXURE A: CODING FRAMEWORK

CODE	WASHINGTON GROUP	CATEGORY OF DISABILITY	DESCRIPTION OF DISABILITY
01	Sensory Disability	Blind	No functional vision
02	Sensory Disability	Partially-sighted	Functional vision with limitations that may be reduced through the use of electronic or manual low-vision devices. (Vision cannot be fully corrected through the use of prescription lenses.)
03	Sensory Disability	Deaf (capital D)	Little or no hearing: generally makes use of South African Sign Language and typically subscribes to Deaf Culture.
04	Sensory Disability	deaf (lower case d)	Little or no hearing, does not make use of Sign Language as a medium of communication, makes use of various means of communication such as speech, speech reading/cochlear implants or a combination of these. Aligns with impairment/disability and the hearing world.
05	Sensory Disability	Hearing Impaired/Hard of Hearing/Deafened	None, little or some hearing, generally makes use of appropriate hearing technology e.g. cochlear implants, hearing aids, and other assistive listening/living devices and typically uses verbal communication.
06	Sensory Disability	Deaf-blind	No functional vision and no hearing.
07	Specific Learning/ Developmental Disability	Neurodevelopmental Disabilities	Intellectual disabilities, communication disabilities, language and speech disability (e.g. stuttering), autism spectrum disorder, attention deficit/hyperactivity disorder (ADHD), specific learning disabilities
08	Psychosocial/Psychiatric Disabilities	Psychosocial Disability	Such as depression, schizophrenia
09	Physical Disability	Physical Disability	Loss of a limb or makes use of crutches, wheelchair user, person with cerebral palsy
10	Physical Disability	Chronic Illness	A long standing medical

			condition/illness that affects daily functioning. Such as chronic heart condition, chronic diabetes, cancer
11	Any disability not mentioned above	Give details	Any disability not mentioned above
12	Physical Disability of a Temporary Nature	Temporary Disability: disability of no longer than 6 months duration	Physical disability of a temporary nature

ANNEXURE B: OUTLINE OF DISABILITY POLICY

1. STATEMENT OF COMMITMENT

The (Name of Institution) recognises that access to education is a national imperative in South Africa and that it is vital that educational institutions put measures in place to redress the inequalities and disadvantages created by prejudice and discrimination, and contribute to a democratic vision which is respectful of human rights. The (Name of Institution) recognises that students with disabilities must be integrated into the learning experience at the institution in a manner that allows for their full participation.

2. POLICY PURPOSE

3. SCOPE OF APPLICATION

4. **DEFINITIONS**

- a. Disability
- b. Students with disabilities
- c. Reasonable accommodation
- d. Universal design

5. POLICY PROVISIONS

- a. Disclosure of status and confidentiality
- b. Access and admissions
- c. Reasonable accommodation
- 6. DISABILITY RIGHTS UNIT
- 7. DISCIPLINARY PROCEDURES
- 8. CONCLUSION

ANNEXURE C: UNIVERSAL ACCESS STANDARDS

UNITED NATIONS CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES (UNCRPD) Article 9

ARTICLE 9 - ACCESSIBILITY

- 1. To enable persons with disabilities to live independently and participate fully in all aspects of life, States Parties shall take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communication technology and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to, inter alia:
 - a. Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces; and
 - b. Information, communications and other services, including electronic services and emergency services.
- 2. States Parties shall also take appropriate measures to:
 - a. Develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open or provided to the public;
 - b. Ensure that private entities that offer facilities and services which are open or provided to the public take into account all aspects of accessibility for persons with disabilities;
 - c. Provide training for stakeholders on accessibility issues facing persons with disabilities;
 - d. Provide, in buildings and other facilities open to the public, signage in Braille and in easy to read and understandable forms;
 - e. Provide forms of live assistance and intermediaries, including guides, readers and professional sign language interpreters, to facilitate accessibility to buildings and other facilities open to the public;

- f. Promote other appropriate forms of assistance and support to persons with disabilities to ensure their access to information;
- g. Promote access for persons with disabilities to new information and communication technology and systems, including the Internet; and
- h. Promote the design, development, production and distribution of accessible information and communication technology and systems at an early stage, so that these technologies and systems become accessible at minimum cost.

ANNEXURE D: BENCHMARK FOR ASSISTIVE DEVICES

Universal items that benefit students with disabilities with any type of disability and nondisabled students

- Interactive whiteboard
- Whiteboard pens
- Radio/tape recorder/CD player
- CDs and DVDs
- Widescreen TV
- MP3 player
- Tablet
- DVD player
- Computer projectors/PowerPoint projector
- Voice amplifier and microphone
- Photocopiers (with size enlargement)
- Desk top computers and screens
- Laptop computers
- Software user licences
- Printer
- Toner cartridges, paper
- Extension cable
- Trolley for moving equipment
- Laminator
- Ibico binder
- Lamination sheets, ring binders

Area of Specialisation One: Students that are blind

- Braille writers
- Refreshable braille devices
- Computers with Text-to-Speech and Speech Recognition Software
- Daisy reader
- Braille slates
- White canes
- Book reader
- Braille display
- Headphones
- Software for architectural audio-visual integration devices
- Braille translation software
- Text reader and voice synthesiser software

- Optical corrector recognition software
- Maxtrack
- PC accessories (Leadteck WinFast TV 2000 XP PCITV, capture card)

For students with low vision

- Electronic Max Magnifier
- Hand held magnifying glasses
- Computers without screen reading software and magnification
- Computers with screen reading software and magnification software
- · Daisy reader
- Lecture rooms equipped with CCTV and magnification camera
- · Electronic desktop magnifiers

For use in DRUs

- Computers without Duxbury
- Computers with Duxbury
- Duxbury user licences
- Braille embossers
- Braille graphics embossers
- · Computer scanners
- Scanning software
- MS Word Drawing and View Plus
- Software for design and translation of braille graphics
- Book reader
- Braille book binder

Area of Specialisation Two: Devices and Equipment to overcome the barriers related to Deafness and Hard of Hearing

- Audio logical equipment
- Diagnostic audiometer
- Diagnostic tympanometry
- Screening audiometer
- Otoscope
- Auditory brainstem response screening
- Otoacoustic emissions machine
- Loop systems
- Laptops with webcam and DVD player/recorder
- Data projector
- Interactive whiteboard

- Video/DVD recorder
- Digital camera
- Tripod
- · Tablets with appropriate applications
- Memory stick
- Hearing aid
- Telematics broadcasting solution network to lecture rooms
- Sound proof room for audiometric testing
- Lecture rooms that have low ambient noise levels
- Lecture rooms that have low reverberation levels
- Lecture rooms fitted with FM systems
- Room for production of South African Sign Language DVDs and learning and teaching support material (LTSM)

Area of Specialisation Three: Devices and Equipment to overcome the barriers related to Mobility Impairments

- · Seating equipment
- Crawler
- Walker
- · High support self-propelling wheelchair
- Push buggy
- Upright wheeler
- Electronic wheelchair with customised seating support
- Wheelchairs (electric)
- Wheelchairs (manual)
- · Wheelchair cushions
- Crutches/walking sticks
- Walking frames
- Callipers
- Prostheses
- Artificial limbs
- Computer mouse alternatives
- Roller-ball mouse
- Head pointer
- Large button keyboard
- One handed keyboard
- Switches
- Switch interface
- Joy cable and button click switch small amplifier and GEWA programme

- E-tran
- Dial-scan
- Voice recognition software

Area of Specialisation Four: Devices and Equipment to overcome the barriers related to Communication Impairments

- Computers fitted with alternative and augmentative communication software
- Laminator
- Computer attachments (e.g. big keys, big key guard, switches, joy sticks, etc.)
- Simple message systems/communication boards
- Multi-message systems/multi-level message devices
- Complex voice output communication aids
- Software for a computer-based output device system

Area of Specialisation Five: Devices and Equipment to overcome the barriers related to Intellectual Impairments and Learning Difficulties

- A range of software to prepare LTSM and activities in accessible format
- Tablets loaded with applications that mediate learning of:

Literacy, Mathematics, complex content in simplified format, story creation, sequencing, routines, adapted lesson materials, games, typing, social skills, basic concepts, surfing the internet, sending and receiving email messages

Computers equipped with learning support software and access to the internet

Area of Specialisation Six: Devices and Equipment to overcome the barriers related to Cerebral Palsy, Autism, Foetal Alcohol Syndrome, Traumatic Head Injury, Stroke, Epilepsy, Attention And Hyperactivity Disorder, Dyslexia, etc.

- A range of software to prepare LTSM and activities in accessible format.
- Communication aids for text and symbol based communication: Portable
 communication device for text and symbol based communication for those who have
 control of their hands (including students with a disability with autism, Down's
 syndrome, cerebral palsy, stroke/aphasia, etc.). Device that has capacity to generate
 speech from both words and symbols through synthesised speech and text with
 optional capacity to be linked to email, internet, send text messages and chat.
- Peripheral eye tracker that enhances computer accessibility through gaze interaction
 with the speed, power and accuracy of gaze interaction. The device replaces the
 standard mouse, allowing navigation and control of a desktop or laptop computer using
 only eyes (for students with a disability with limited motor skills due to Amyotrophic
 lateral sclerosis (Lou Gehrig's disease), spinal cord injuries and other impairments.

- Dyslexia: Software that offers an individualised learning mechanism to help students with a disability with reading difficulties to catch up with their peers
- Software designed to help build vocabulary, literacy and reading comprehension.
- Software through which students with disabilities create typed or written text with their fingers to make speech visible.
- Note taking or reading pens that have scanning capabilities, designed for reading comprehension. They scan the text, enlarge the font to make it easier to read, read the text out loud and display syllabic breakdown of the words.
- Hand-held devices that read textbooks and study materials aloud.
- Speaking dictionary
- Hand-held, mobile text-to-speech device that highlights the words while reading aloud that can take a picture of text to have read aloud.
- Low-tech devices such as notebooks and dividers to record and organise tasks.
- Low-tech devices for older students with disability with ADHD such as personal digital assistants, dictating machines and a variety of computer programmes that can perform the same task.
- Software programme that converts text and symbols into clear speech, gives computer access and allows user to control devices and appliances.
- Programmes that are able to create page sets and communication boards.
- Programmes that are suitable for all levels of cognitive and physical ability, featuring symbols and pictures for users who cannot write or the choice of keyboard layouts for text, telephone and computer access for users who can.
- Text-to-speech provider that is applicable to any website and can with a click of a button convert any text on a website to speech, summarise Word documents, PDF files and web pages.
- Software for students with a disability to create documents faster than normal typists by using voice dictation technology with compatibility.
- Software designed for students with a disability who have difficulty with writing that suggests words while the user writes, creating easy word-flow, giving spoken feedback, which makes it easier for students to detect their mistakes and correct them.
- Software that enables the keyboard to type better and faster, keeping track of all of mistakes and words-per-minute (wpm), creating graphs of day-by-day performance.

Area of Specialisation Seven: Devices and Equipment to address barriers related to Chronic Health Conditions

 Laptops fitted with modems and with access to internet and email and communication software to enable lecturer to communicate with students with a disability who are hospitalised or absent due to illness. A range of technology and software to support students with a disability with limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment due to acute or chronic health problems including mental health problems

Area of Specialisation Eight: Devices and Equipment to address barriers related to Challenging and Anti-social Behaviour

- Pagers that can be used to send messages that remind students about behaviour expectations as well as positive reinforcement messages.
- Educational board games that enhance social interaction skills.
- Assistive technology that can be used to help with disorders characterised by behavioural problems such as ADHD, autism, oppositional defiance disorder and emotional disturbance. Assistive technology allows students with behavioural problems to function successfully in the lecture rooms/devices reminding students with disability about behaviours so that they can self-monitor their behaviour throughout the day. Watch-minder is worn like a wrist watch, but it has many special functions that help students with behavioural disorders throughout the day.
- Organisational aids
- Some options might include devices such as pagers that send messages about important events. Also, handheld computers or palm pilots with calendars may be helpful as well.