ABSTRACT

The report describes an Australian project to investigate ways in which gender issues affect adolescent girls with disabilities and associated educational implications. Interviews were conducted with 180 girls and women (ages 12-29) with mild or moderate disabilities. Additional information came from questionnaire responses and discussions with 48 parents and educators at 25 schools in Australia. After an introductory chapter focusing on the rights of the disabled and women, a chapter discusses the background, methodology, and layout of the study and report. Chapters cover results in the areas of: personal lives (friendships and personal/emotional well-being); school lives (e.g., curriculum, career aspirations, harassment at school, positive and negative aspects of school, and sport/recreation); home lives (family life, residential life, fears for the future); the post-school years (future hopes and the 'older' women's post-school experiences). A concluding chapter stresses the need of these women to be treated normally while receiving appropriate services for their special needs. A bibliography of 22 references and an annotated bibliography of 74 print and non-print resources are provided. Appendixes provide details concerning: the informants, the Special School Destination Survey, the format protocol for interviews, and a summary of possible areas of need. (DB)
UNDERSTANDING YOUNG WOMEN WITH DISABILITIES

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The contents of this book were first presented as a report entitled "Understanding the needs of girls and young women with disabilities" to the Commonwealth Department of Employment, Education and Training in October 1988.

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To the women and girls who participated in this investigation we owe special thanks for their honest and open contributions to this report. The good-natured and friendly way in which these young women gave of their time was commented upon by each and every interviewer. We hope that we have succeeded in portraying your lives in a fair and meaningful way.

Although we relied on young women to provide us with much of the material for our report, a substantial contribution was also made by parents, teaching staff, and other professionals right across Australia. We would like to thank all those people who freely gave of their time to share their knowledge and experience with us. Thanks also to the numerous people who took the time to telephone the project team offering their support or information. To the staff of schools who helped us with the administrative side of this investigation, and to the many people who assisted us on interstate visits, we are especially grateful.

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John Elkins (Project Director)
Jenny Bramley (Project Officer)
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INTRODUCTION

In 1987 the Fred and Eleanor Schonell Special Education Research Centre was asked to undertake an investigation on behalf of the Australian Schools Commission. The project's central aim was as follows.

The project will investigate the ways in which gender issues affect adolescent girls with disabilities, the daily problems these girls are facing, and implications for education. Implications for the post-school lives and options of girls with disabilities may also be examined. (Project Brief)

From the outset it has been the Project's intention to seek out adolescent girls and let them describe the issues, needs and implications of being young women and being disabled. In 1985 an OECD report stated that:

It is still very rare to give handicapped young adults the chance to speak directly for themselves, and rarer still to listen. (p.12)

The primary aim of this report is to assist the reader to understand the educational needs and experiences of young women who have a mild or moderate disability. Because a school is not in itself the sole, nor even necessarily the most important, influence on these young women, we have also examined other areas in their lives which may affect their education. The following document is the result of talks with young women at schools throughout Australia, and is presented as much as possible in their own words. The statements of parents and professionals, and the material contained in literature pertaining to young people with disabilities have been included as a means of underpinning the words of the young women, or to highlight issues and needs which the young women we spoke with may not have voiced. Some of the comments made by professionals and parents may contradict those made by girls. We have made no judgement about the validity of the views expressed.

The authors of this report wish to emphasise that we have not undertaken a comprehensive survey of either education systems or educational programs offered to young women with disabilities. The comments made by young women, and by older women with similar disabilities who have left school in recent years, are the statements of individuals, who have had individual experiences. Women with disabilities, even women with the same disability, are not a homogeneous group. However, during the course of the investigation it became evident that certain experiences were shared by most of the women we spoke with. These experiences were both positive and negative, and for the most part relate to the attitudes and values of those people closest to them, as well as to society in general.

The report has been placed within the context of the National Policy for the Education of Girls in Australian Schools (see chapter on Background, Methodology and Layout), and has not, therefore, addressed the experiences and needs of young men with disabilities. Many, though not all, of the professionals we spoke with found it difficult to think in terms of gender when talking about young people with disabilities. Although many professionals did indicate that some differences did exist in the lives of young men and young women with disabilities, disability was nonetheless seen as the dominant factor in their lives. There appears to be, therefore, a tendency to address needs which mainly relate to disability, rather than individual needs. This tendency has been recognised by organisations run by people with disabilities, for example Disabled Persons International, or the
People First movement, and these and similar organisations have in recent years increasingly focussed upon fundamental issues relating to Human Rights. Although this report discusses needs and experiences, as expressed by young women, we would therefore like to briefly draw the reader’s attention to the areas of Disabled Rights, Women’s Rights, and Educational Rights.

**DISABLED RIGHTS**

The rights of disabled persons ought to be no less than those of any member of a community. In Australia, the U.N. Declaration on the Rights of Disabled Persons (1976) is appended as Schedule 4 to the Human Rights Commission Act (1981). The U.N. Declaration states:

Disabled Persons, ... have the same fundamental rights as their fellow citizens of the same age, which implies first and foremost, the right to enjoy a decent life, as normal and full as possible.

The nature of the rights of disabled people that emanate from such a statement include:

- the right to be themselves, be seen as valuable, respected and treated with dignity,
- the right to develop in all areas of their lives - physically, socially, emotionally, psychologically and academically,
- the right to receive appropriate levels of support and services which will allow them to attain a decent level of living,
- the right to engage in choosing lifestyles, occupation, leisure, friends and accommodation and participating in decisions that are part of making choices,
- the right to receive services that permit the highest degree of self reliance and do not restrict their rights and opportunities,
- the right to be protected from exploitation, discrimination, abuse, neglect and deprivation,
- the right to advocacy where appropriate and to pursue grievances against them,
- the right to have a meaningful relationship with a partner or partners of their own choosing, and
- the right to receive acknowledgement (in terms of recognition, status, financial remuneration, etc.) for productive work activities.

While these rights as identified here are human rights they are not necessarily legal rights. The law does not yet commit the Australian community to a number of these principles.

With respect to women’s rights the law, in theory at least, better recognizes the principles which prevent discrimination against women.

**WOMEN’S RIGHTS**

The Sex Discrimination Act of 1984 clearly indicates that the law applies to a woman in the same way as it applies to all others. In particular when we look at the rights of women in the context of this report we can identify the following as crucial:

- the right to use public services in the same way as everyone else,
- the right to have equal educational chances,
- the right to be given equal employment opportunities (e.g., hiring, promotion, pay), and
the right to choose one's own life-style (e.g., choosing whether or not to marry, to have children or remain childless, to work as employees, volunteers, or in the home).

However, the goal of achieving an equitable education for girls has to date been an elusive one for the Australian school system. The Schools Commission working party report, "Girls and Tomorrow: The Challenge of Schools" (July 1984) argued vigorously for a concerted effort to alleviate inequitable practices and attitudes. Similarly, the recent "National Policy for the Education of Girls in Australian Schools" (1987) with its concern to build a policy requiring a national commitment from schooling authorities to reform school practices that perpetuate gender differences is seen as particularly important. The report states:

... the issues relating to links between girls' educational needs and disability are extraordinarily complex. (p. 20).

Therefore while the National Policy identifies a number of areas requiring attention which will meet the educational rights of girls it is necessary to examine also what we might intend when we refer to the educational rights of the disabled.

EDUCATIONAL RIGHTS OF DISABLED PEOPLE

Despite Australia being signatory to various international conventions on human rights, there is relatively little attention given to the right of Australian children to a free public education. If children are disabled, their right to appropriate education does not appear to have been given serious consideration by education authorities, while their education in regular school is even less accepted as of right.

To some extent rights have been discussed more vigorously among adults with disabilities than by parents whose children are disabled. Working within groups such as Disabled Persons International, adults with disabilities have asserted their right to accessible public buildings and transportation, community living, support such as sign interpreters, captioned TV, radio for print handicapped, and employment support. Yet even in the United States, disability rights seem less secure than other civil rights, perhaps because awareness of disability has come later than other movements.

Australian special education has been characterised by the provision of services far in excess of any legal requirement. The primary force is not legislation, which mostly permits governments to provide special education, but policy. As Fulcher (1986) points out, policy reflects the power struggle between professionals and idealists in the context of limited resources. The conflict is most clearly evident in the area of integration where differences between states are substantial. However, while the overall position seems to favour integration, it seems that many students, parents and teachers are uncertain about the basis for present practices. (Gow, Ward, Balla & Snow, 1988)

The young women with whom we spoke were, for the most part, indifferent or ignorant about issues pertaining to rights. Their right to refuse to answer questions was emphasised prior to each interview. However it was felt by interviewers that few of the women appreciated why we made this point. This lack of awareness was further highlighted when we spoke with a representative from Disabled Persons International who had been asked by the organisation to establish a Women's Group. She received such a poor response from women members of that organisation regarding the need for such a group that the idea was abandoned. In compiling this report, however, we considered it important to take into account issues relating to rights, despite the fact that such issues were not raised by the young women we spoke with.

Although we spoke with many women who had left school in recent years, the focus of this report is upon 'adolescent' girls. The use of such a term signals an emphasis on a particular phase of the life span. Our description of the life-phase highlights some of the main characteristics of this period with particular reference to women.
ADOLESCENCE

Adolescence is a time of transition to adult status. Historically, the period referred to as ‘youth’ has been a variable category and is still undergoing change. The extension of schooling beyond puberty has created an extended period of dependency which did not exist in the past, and is certainly not found universally in all cultures. Leaving school and starting work was one of the means, along with marriage and the setting up of a new household, through which adult status was attained. Recent economic factors, however, have resulted in more young people completing their secondary schooling and going on to some kind of tertiary education, thus increasing the period of dependency and delaying transition to adult status. For a significant proportion of unemployed young people the traditional transitions to adulthood have been broken. For this group, increasingly alienated, the future is particularly bleak.

Adolescence is a period of search for an identity. Identity is shaped by social experience and these will vary according to class, ethnic background, and gender. Although family and schooling experiences are influential, youth sub-cultures are also important in shaping identities. Central in these processes is the development of gender identity of which sexuality is an important aspect. This sense of identity is crucial in relation to young people’s perceptions about the future and in relation to their educational and career plans.

Research shows that teenage girls experience a number of conflicts resulting from the contradictory expectations they receive about how they should behave. There seem to be two powerful sources of conflict for this group which are relevant to a consideration of the development of identity. The first source of conflict centres on the tensions experienced in relation to their futures both as mothers and as members of the paid workforce. Although girls now know that they will spend a significant proportion of their lives in paid employment, they also know that they will be likely to have children and bear the major responsibility for rearing them, and it seems to be these ‘domestic’ concerns which predominate. The second, and related, source of conflict centres on sexuality: girls still tread a precarious path between being sexually attractive and being labelled as cheap. Sexuality is still defined for this group in terms of love and romance, and in relation to ‘going steady’, and is ultimately channelled towards monogamous heterosexual relationships and marriage. Thus there are a number of powerful pressures which become central to teenage girls’ lives at a critical stage when thinking and planning for the future is important. Consequently, there is often a conflict between educational achievement and gender identity for young women.

A third set of conflicts relates to age or maturity. The whole notion of adolescence as a time of rebellion and independence has male connotations which conflict with expectations about femininity. Teenage girls are expected to be ‘mature’, whereas rebelliousness in teenage boys is more often tolerated. From first menstruation girls are continually told, “You’re a young woman now”, inevitably causing conflicts for girls in their early teens.

In summary then, adolescence is a period of transition when the search for identity, especially gender identity, is an important task for a young girl. In achieving the ‘self’, the adolescent girl must resolve, or at the very least reconcile, a number of sources of conflict. In our report a number of these sources are evident.
BACKGROUND TO THE INVESTIGATION

The limited educational achievements of many young women in Australian schools have been a subject of concern for over a decade. In a report produced by the Commonwealth Schools Commission (Girls, School and Society, 1975) ways in which girls futures were limited by their school experiences were documented. A further report issued by the Schools Commission (Girls and Tomorrow: The Challenge for Schools, 1984), outlined ways in which girls continued to be disadvantaged and limited within the education systems of Australia, and noted that little change had occurred since the 1975 report. The establishment of a national policy to address the needs of young women in Australia was therefore recommended. State education departments also recognised that differences in the education of boys and girls continued, and that stated aims in the area of equal opportunity were not being met effectively (Education of Girls, 1925; Female Futures, 1985).

Following consultations with representatives of all Departments and Ministries of Education throughout Australia, an interim report was produced by the Schools Commission. This was presented in order to enable further consultation to take place, and to facilitate the development of procedures for establishing a national policy. This document pointed to the need for consultation to take place concerning the needs and interests of special groups of girls (National Policy for the Education of Girls in Australia: Interim Report, 1986, p.14). The Australian Teachers' Federation in a submission to government concerning the educational needs of women and girls, also recommended that further research should be carried out regarding the educational needs of disabled girls (Submission to the Office of the Status of Women in the Department of the Prime Minister and Cabinet on the National Agenda for Women, 1986, p.2). The need for more data on girls with special needs was likewise noted by the Schools Commission, as was the need for consultations with disabled women and girls (The National Policy for the Education of Girls in Australian Schools, 1986, p.21).

The results of the current investigation are, therefore, intended to contribute to initiatives directed towards ensuring that the rights of girls with disabilities are recognised, and to laying the foundation for specific action as the implementation of the National Policy for the Education of Girls moves forward.

OBJECTIVES OF THE INVESTIGATION

The objective of the investigation was to consult with young women with mild or moderate physical, sensory, and intellectual disabilities, and other significant people in their lives, in order to determine:

(a) the ways in which gender issues affect adolescent girls with disabilities;

(b) the daily problems faced by these girls; and

(c) the implications of gender and disability for their education and later life options.
A final objective was to report the findings in a manner which would heighten awareness and understanding of the needs of these young women.

KEY TERMS
The following terms have been used throughout this document:

Disability refers to the reduced function or loss of a particular body part or organ (Heward & Orlansky, 1988, p.4).

Impairment refers to the underlying constitutional condition, though the word is often used synonymously with disability. Because a disability limits a person’s ability to perform certain tasks (e.g. seeing, hearing, walking) we often talk about impairment of vision, sight and physical functions.

Handicap is used to denote the result of the interaction of the individual with a disability and the environment. It is a social construct which to a certain extent is defined by society and by the barriers placed in the way of individuals. The handicapping effects of a disability can change over time and from one situation to another.

Gender is used to denote sex. “It is solely determined by the difference in the physical structure and appearance of the subject (sic), and is used to differentiate male and female” (Wolman, 1973, p.156).

Girl is the term used to refer to adolescent female participants in secondary school. The term young woman has also been used to refer to these participants.

Woman is more typically used for participants who have left secondary school.

Professionals refers to individuals who during their working lives have contact with disabled people (e.g. school principals; teachers; psychologists or medical personnel; employees or volunteers associated with organisations, residences, or institutions; and staff from government agencies or departments).

Special school is used to describe a state or private educational facility catering exclusively for students with disabilities. It is a segregated and self-contained setting.

Regular, integrated, or mainstream school is a term that describes an educational setting where students with disabilities associate with students without disabilities. Varying degrees and kinds of contact occur. For example, the term integration (mainstreaming) may only refer to the social interaction of the students, or to where some instruction is conducted together. It may also refer to a situation where a student with a disability participates fully in all the activities of the school in the same way as non-disabled students.

THE METHOD
The Informants

Information for this report was gained by way of interview and questionnaire. We talked to a total of 180 girls and women with mild or moderate disabilities whose ages ranged from 12 to 29. Nearly 70% of the young women were still at school at the time of the interview. Participants who had left school mostly had done so in the past five years. (A description of the nature of the girls and women’s disabilities can be found in Appendix 1). The total sample included girls from Aboriginal and non-English speaking backgrounds. Where concerns relating to these girls were raised they are included. However, the impact of race and culture on gender and disability was not a major aim of our project brief.

Additional information was gained by way of questionnaires which had been returned during a survey of young people with disabilities in Victoria regarding their transition from school to work.
From this survey, the completed questionnaires of 5 young women still at school, and 11 women who had recently left school were selected for inclusion with our data.

In addition to interviews with young women, we spoke with 48 parents, and informally interviewed teachers and principals from 25 schools throughout Australia. Further information was sought by way of questionnaires to teachers in mainstream schools or special units, and 34 of these were received. Other professionals interviewed included teacher's aides, health workers, residential care workers, staff from employment agencies, personnel from government agencies offering services to people with disabilities, and organisations working on behalf of people with disabilities as well as individuals with specific interests in gender issues, family planning and post-school options (See Appendix 1 for a complete list). As an adjunct to the information collected for the chapter on Post-School Years, a survey of the destination of special school leavers in Queensland was also conducted. The results of this survey can be found in Appendix 2.

First Phase of the Investigation (October-November 1987)

At the outset of the project a preliminary library search was undertaken in order to identify similar studies, particularly those relating specifically to young women with mild or moderate disabilities. (An annotated bibliography of background literature can be found in Appendix 3). Relevant Federal and State Government reports concerning girls and education in Australia were obtained in order to ascertain current thinking on gender and disability issues, and at the same time State Education Departments were informed about the investigation. The material found was then used to generate ideas on methodology, and possible areas for discussion with young women. A preliminary meeting was held with staff of the Schonell Centre, and ideas and suggestions concerning relevant issues and questions was canvassed. It was decided that as a starting point, it would be useful to interview some young women who had recently left school regarding their retrospective views on their education, including problems and other experiences they had had at school. As a starting point letters were distributed through the university disability officer to young women with disabilities on the Queensland University campus, inviting them to contact us for a brief interview. Several women responded, and interviews with them began in November, 1987.

Other activities undertaken at the commencement of the project included a visit to a special school in Brisbane; several news releases to the newsletters and bulletins of organisations representing people with disabilities requesting submissions and/or assistance; and the viewing of several films on the subject of women and disability which were obtained through the National Film Library. Preliminary contact was made with the proposed Steering Committee members, and their names were submitted to Canberra.

Throughout November 1987 we began the task of contacting young women with disabilities who were still attending school, initially in Queensland. The search for relevant material from organisations throughout Australia continued, and a research assistant was employed to commence a review of the literature as it came to hand. In an effort to contact young women living outside urban centres, letters were prepared and sent off on our behalf to students of the Isolated Children's Special Education Unit in Brisbane. The Secondary Correspondence School in Brisbane also undertook to contact students on their books who were known to have a disability.

Initial contact with young women was made through several schools in Brisbane. Visits were made to selected schools by members of the research team at which time the purpose of the investigation was explained, and the cooperation of teachers was requested. An interview format was then drawn up framed around our reading of the literature, the issues highlighted in the National Policy for the Education of Girls in Australian Schools, and initial talks with young women who had left school in recent years. The questions asked were loosely grouped into three categories: (a) school life, (b) social life and adolescent experiences, and (c) future expectations (Appendix 4). Several revisions and additions were made after initial interviews, but the format remained substantially the same throughout the investigation, and formed the basis of the informal talks held with girls and women. Although time-consuming, it was decided that in-depth interviews with individuals was...
the best way of collecting the information we needed. It was, however, also decided that if
interviews with groups of young women proved to be the sole option because of school
arrangements, or time constraints, then such opportunities should be taken. Judgements relating to
the degree of emphasis placed on certain questions, or their relevance to each young woman, were
left to the sensitivity of the interviewer.

An attempt was also made at this stage to observe some young women with disabilities in the
classroom in order to see how they coped, the amount of time spent with them by the teacher,
whether classmates offered assistance, and so forth. Observations began in two schools, but it
soon became evident that this method of collecting information would be very awkward and time-
consuming. There was also no guarantee that the young women we were interested in would
always be present in class. It was therefore decided that because the main purpose of the
investigation was to present as much information as possible in the words of young women, the
collection of observational material in a classroom setting would not be pursued. A specific study
of this nature could, however, offer a valuable adjunct to our investigation at some future date.

Second Phase (December 1987)
The imminent school holidays in December made it imperative to begin interviews with young
women as soon as possible, and once suitable informants had been identified by schools, and
parent permission forms returned, this exercise commenced. Many interviews were conducted
during the holidays at the homes of the young women. Parents (in most cases the mother only)
were often interviewed following the talk with their daughter. It was considered important, where
possible, to talk to the young woman first to avoid any bias or pre-knowledge which would have
been provided by parents, and after explaining to parents the outline of the interview with their
daughter most were quite happy for us to see their daughter alone. In most cases the daughter then
sat in on the interview with her mother, or parents, and was able to contribute or add to their
comments. Throughout December further interviews were also conducted with older women, and
further publicity releases and inter-state contacts were initiated. The first meeting of the Steering
Committee for the investigation was held in December, and views of the Committee on relevant
issues were sought.

Third Phase (January-October 1988)
At the beginning of 1988, with local interviews well under way, the development of a pack-age for
interstate interviewers began, and two research assistants, one in Sydney and the other in
Melbourne, were approached to work on the project. After the emp-loyment of these two
researchers, members of the Schonell Centre visited Melbourne and Sydney to talk with them about
the project and go through the interview framework and method of presentation with them. A tape
of an early interview conducted in Brisbane was also given to the researchers as an example of how
to conduct the questioning. In addition to lists of contacts generated through the Schonell Centre,
both researchers were in a position to generate their own contacts with young women. It was not,
therefore, necessary in either State to go through the more formal channels of the school system in
order to find young women to talk with.

A questionnaire for teachers in regular schools who have students with disabilities in their classes
was developed in January. This was distributed to several of the schools we were working in, with
the request that ten members of staff be selected at random to complete a questionnaire. An
additional questionnaire for staff in special education or support units, was also developed in
January. In the case of the unit questionnaire, we requested staff to complete this as a group.
Discussions also took place in Melbourne with representatives from the Australian Teachers
Federation, and the Victorian Teachers Union. In order to gain a national sample, albeit a small
one, the teacher questionnaires were used when appropriate at various schools throughout
Australia, however no attempt was made to survey large numbers of teachers. The material
resulting from these questionnaires which is presented in the report is, therefore, a sample only and
cannot be said to represent the views of all teachers throughout the nation. A separate questionnaire was sent to itinerant teachers and School of the Air teachers in Queensland, asking them for information on young women with disabilities that they had contact with. We received only one reply, and that from a teacher who had no students with disabilities. An additional questionnaire to Guidance Officers, initially in Queensland and later nationwide, was also developed by a Guidance Officer who was studying for her Masters Degree in the Schonell Centre. (A copy of this study may be obtained from Ms M. Hay, c/o the Schonell Centre).

In early February, Dr Christa van Kraayencord joined the staff of the Schonell Centre. One of Christa’s major roles in her new position was to work with the project. This included taking part in meetings with the Steering Committee, data collection and subsequently assisting with the writing of this report. The following months saw an increase in the number of contacts with young women, not only through schools who had been approached initially by the project team, but also by way of responses to publicity on the project. A number of school personnel contacted us for more information, and with offers of assistance. We also received numerous telephone calls from parents and from some young women with disabilities. In this way a list of possible interviewees developed and, in fact, it was not possible to talk with everyone who expressed an interest in the project, although every attempt was made to at least have a brief discussion on the telephone. By this stage several major themes of the investigation were emerging quite strongly.

Field trips to Western Australia, the Northern Territory, Tasmania and South Australia were undertaken by either the Project Officer or by staff of the Schonell Centre, and interviews with personnel from Education Departments, schools, relevant organisations and government instrumentalities were conducted. Additional interviews with young women were conducted when and where possible. Some planned interviews did not take place resulting in some imbalance in regional representation. In many cases group or individual interviews were conducted on school premises as a way of maximising contact. Schools were extremely cooperative in making arrangements on our behalf, for example in distributing and collecting parental consent forms, setting aside rooms for interviews and arranging for young women to be present. Where possible interviews took place without the presence of teachers or parents.

The collection of material through individual interviews was found to be much more effective, albeit time-consuming, than using questionnaires. The method of recording interviews was left up to the individual interviewer. Some found that the use of a tape recorder was the most satisfactory method for them, and others took notes throughout the interview and wrote them up afterwards. Although more lengthy quotes were obtained by way of tape recording, we found that writing notes was somewhat less intrusive and that often when a recorder was turned off, the young women were inclined to discuss more sensitive issues with the interviewer. A mixture of the two methods therefore proved to be satisfactory. Interviews with the young women lasted between thirty minutes and two hours. Those with parents lasted approximately thirty minutes to one hour. When both interviews took place, this proved to be a somewhat exhausting exercise for the interviewer, if not the young woman; however the majority of people interviewed said that they enjoyed the experience and appreciated the chance to put their views. The informal nature of the interview meant that interviewers were free to explore issues with young women in more depth than may have been the case with a more formal questionnaire style of interview. Informally chatting with young women and their parents, rather than conducting more formal interviews, also made it easier to explore potentially more sensitive areas such as sexuality and family relationships.

Interviewing, literature search, and contacting relevant organisations and individuals throughout Australia for their input and views was, therefore, an ongoing exercise. Analysis of the data began eight months after the first interviews, and continued over a period of three months. The typing up of interview tapes was carried on concomitantly with the coding and initial drafting of the report. In this way researchers were able to progressively analyse almost 300 interviews with women, parents and professionals, as well as assessing the information presented by organisations and by way of questionnaire.
In addition to the Project Director and the Project Officer, seven researchers conducted interviews with young women and/or relevant others. All interviews with young women were conducted by women members of the team. For interviews with hearing impaired women, the project employed two women conversant with signing - one in Brisbane and one in Sydney. In Adelaide, the teacher of girls with hearing impairment was used to sign for the interviewer. Three part-time researchers were employed to assist with the literature review, analysis of questionnaires, and the running of surveys. Two part-time typists were employed to transcribe tapes, and the secretarial staff at the Schonell Centre assisted with the typing of written interviews, letters, and questionnaires as well as the final copy of this report.

Relevant experiences

As a matter of record the project team considered it would be relevant to report on certain experiences and observations throughout the project which had some bearing on decisions which were taken during the collection of data. This includes positive experiences, and some of the difficulties which emerged during the course of the study.

A major difficulty related to the many variables which existed in our investigation. The brief for the project directed us to address the educational and related needs of adolescent girls with mild or moderate physical, sensory or intellectual disabilities. Young women with severe disabilities, multiple disabilities, or learning difficulties were thus not part of the target population. Two decisions had, therefore, to be made before beginning the project, how to define adolescence; and how to decide on a distinction between moderate and severe disability. We decided that because adolescence was possibly delayed or protracted for some young women with developmental disabilities, or indeed for some girls with sensory or physical impairments, the only way in which to survey a spectrum of experiences was to include all young girls with disabilities attending secondary schools as possible participants. We also decided that it would be useful to include interviews with older women, not only for their retrospective views on their educational and social experiences in their adolescent years, but in order to also include women whose transition from adolescence into adulthood may not yet be completed. As far as making decisions regarding levels of disability, the team was obviously not in a position to assess each young woman individually. We therefore relied upon the assessments of teachers, parents, and young women who contacted the team themselves, for if the young woman is seen, or sees herself, as moderately disabled as opposed to severely disabled this seemed to fit within the parameters of the study. An additional factor which was important to the investigation was that the young women had to be in a position to put their own views. The ability to communicate also, therefore, became a criterion.

The development of the interview framework was also a challenge, for it had to be appropriate for young women aged between 13 and 18 with a wide variety of disabilities and levels of disability. For this reason only very broad areas of interest could be set out as guidelines for interviewers, who then had to use their own initiative regarding what questions to ask, and which questions to omit. This seemed to work well, and a degree of uniformity did emerge as a result. The same framework was also successfully used in interviews with young women who had left school in recent years.

We found that interviews conducted at the home of the young woman were more relaxed than those conducted in school. There were fewer distractions, adequate time could be set aside more easily, and the young women were more relaxed in familiar surrounds. Likewise, when interviews took place with the young woman on her own, it was easier to establish a rapport, ask sensitive questions, and keep the interview from getting bogged down on one issue, than was the case when parents or teachers sat in on the interview. This is not to say that there was any attempt by other people to interfere or correct what the young women were saying, but rather a tendency to make suggestions about what was or was not important, or introduce new topics outside the framework of the study.
The project team endeavoured to interview as wide a range of young women as possible. Within the parameters of the investigation, therefore, we spoke with women from different age-groups, with a range of disabilities, socio-economic and ethnic backgrounds, and family settings. A concern is that the needs of two groups of young women were not directly ascertained: (a) those who live in the remoter regions of Australia; and (b) those who may be experiencing major personal problems which may have prevented their participation. Our attempts to reach young women in remote areas through specialist educational services, or through their teachers resulted in only two telephone interviews. Although data collected in the Northern Territory may apply to a certain extent to other remote regions in Australia our information on the needs of young women in these areas is sparse. With regard to young women who may be experiencing extreme difficulties or problems, some of the concerns raised by professionals with direct experiences relating to such areas as abuse and exploitation have been included in the report.

A difficulty in the early months of the project was assessing which areas were the most important to investigate, and which issues were unique to individuals, but which did not apply to most of the young women. It soon became apparent that there were several issues which could form the basis for an entire report in themselves, for example, the importance of sporting and recreational opportunities for young women with disabilities, or the needs of hearing impaired students in terms of interpreting services in classrooms. We therefore focussed on the dominant themes which emerged from the literature, and from early interviews with young women who had left school in recent years, and comment on specific problems where relevant.

During the course of the investigation numerous organisations or individuals connected with groups of disabled people contacted the project team to ensure that their particular viewpoints were not overlooked. This meant that the researchers continually had to seek a balance between the 'agendas' of such groups and individuals and the project brief as provided by the Schools Commission.

THE LAYOUT OF THE REPORT

In the following chapters the results of our interviews with the young women, their parents, and professionals are presented. Quotations throughout the report are indented and italicised. The identity of the speaker either precedes the quotation, or is contained in brackets following the quote. Quotations from literature are indented, and in plain type. In order to maintain confidentiality the particular and precise nature of the disability of each young woman has not been revealed. Instead, codes have been used to identify the age and type of disability of each young woman. The codes used followed common usage, and are as follows:

- HI: Hearing Impairment
- PD: Physical Disability
- VI: Visual Impairment
- ID: Intellectual Disability

HI-14 would therefore indicate that the comment was made by a fourteen-year old girl with a hearing impairment; PD-16, a sixteen-year old with a physical disability, and so forth.

While the overall sample in this study is large, we have not used percentages to report our findings. This is because there are a large number of variables, and the sample is very heterogeneous. In addition, because the sample of girls was not drawn in a representative manner, reporting in this fashion could lead to the misinterpretation of results.

At the end of each chapter the reader will find a summary of conclusions, and following this a list of some possible areas where new services, or improvements in existing services may be required.
INTRODUCTION

The ability and willingness to talk about oneself, and particularly one's personal life, is difficult for most individuals. A sense of caution leads us to censor the unpalatable, and emphasize the positive aspects of our lives, particularly when talking to strangers. Often what is left unsaid, or offered by way of casual comment, reveals more about a person than their answers to direct questions. In the case of the young women who participated in this study, interviewers commented on how readily and freely the women and girls let us into their lives. In most instances the young women were able to discuss a number of aspects of their personal lives without embarrassment or disassembly. In cases where certain areas did prove difficult or uncomfortable for some young women, casual remarks often did reveal underlying concerns or problems. For the most part, however, both parties in the informal discussion enjoyed the experience, and many young women commented that they hoped the investigation would assist people with disabilities.

Each of the young women interviewed was first and foremost an individual in her own right whose personality and abilities derived from a complex set of influences. Family, peers, teachers, the media, pop stars, film stars, books and, to some extent, community expectations, all contributed to the self portrait painted by the young women. In this respect they were quite normal young people. The overlay of a disability did, however, add an extra dimension to the lives of these young women and despite protestations from many that they felt and considered themselves to be quite normal, in certain areas of their lives the influence of disability was apparent. In this chapter the personal lives of the young women are described, and the themes of friendships and activities, personal and emotional well-being, sexuality, coping with adolescence, role-models, and perceptions of community attitudes are discussed.

Friendships

Peer Groups

Adolescence is a time of great conformity and extreme sensitivity and self-consciousness about real or imagined differences or failings. There is a preoccupation with being the same as the peer group and even minor differences in height, weight or speech can be very painful. (Collins, 1978, p.151)

The formation of friendships with peers from school, the neighbourhood, and through cultural or recreational activities is generally accepted as being a normal part of the average adolescent's life. The development of such friendships, and acceptance by a group of peers, can be seen as part of a social and emotional process whereby young people gradually move towards independence and away from family and parental influence. Because of the importance attached to friendships by most young people, and the role that friends play during adolescence, we asked the young women in our study about this area of their lives. We asked where they made friends, when and where they met with them, and the sorts of activities they did together.

As will be seen in the following chapter, School Lives, most of the young women experienced difficulties with many of their peers at school, and particularly so if they were integrated into the
mainstream. Despite this the majority of young women reported that most friends were made at school. Others were made through family connections. It was apparent, however, that these friendships were not as numerous, varied or all-encompassing as is perhaps the norm. For the most part friendships were confined to school hours and did not carry over into holiday times, evenings or weekends. At these times family activities and support assumed greater importance. Friendships outside the school and family were made through church groups or through sporting or recreational bodies, though these sources of friendship were comparatively rare. Difficulties with transport, well documented in the literature, were mentioned by young women with physical disabilities. Feelings of isolation or loneliness were however not often verbalised by the young women currently at school and in general they appeared quite accepting of the limited friendships they had at school, coupled with the support and activities offered by the family. There is, however, a feeling that they are putting a brave face on things, as illustrated by remarks such as

"I don't go out, I don't really care, perhaps if it was a good place, but I'm not really fussed." (PD-15)

"I'm not shy and my friends ask me to do things because I've got guts." (PD-16)

"It's easy to make friends, it's easy to lose them too." (PD-12)

"I've got girl and boy friends, but I don't want a best friend for fear of what might happen." (PD-16)

Professionals attached to residences commented that often the girls with disabilities sought friendships with staff and not friendships amongst themselves. This type of dependency often led to difficulties.

Differences between schools in terms of making friends were remarked upon by several young women, and the words of a 17 year old young woman with a physical disability who is currently attending a regular school are typical:

"At special school I had both male and female friends, but didn't play after school because everyone lived in different areas and no one was near me. I wasn't very social at weekends. At my first high school [regular] I made quite a few friends who understood people with disabilities and were helpful - it was an all-female school and I saw friends out of school and we still keep in touch. At this school I've made quite a few new friends, but I don't see them after school and I don't go out often."

Some young women with mild intellectual disability who are attending a regular school, with assistance from a support unit, remarked on some of the difficulties they have experienced with integration:

"We don't like boys who wear black, smoke and tease boys and girls. It's hard to make friends because when they [other students in the school] know about us, they don't want to know you, they get too bossy. Our best friends are in the Unit." (ID-12,13,14)

The embarrassments and difficulties which may be experienced by visually impaired adolescents when they try to emulate their peers were evident in the words of a sixteen year old girl with partial sight. Contradictory remarks show how confused this young woman felt about her role as a daughter, a teenager, and as a woman.

"I'll never really get along with my peers, people younger than me are fine ... I feel more comfortable with them ... I wouldn't call the other students friends, more like acquaintances really. A lot of boys tease ... I'd like to get out more often than I do, my parents constrain me, it alleviates pressure when you go out ... It's sometimes difficult at the movies, I have to sit at the front and they [friends] want to sit at the back. It's embarrassing when you walk slowly
down steps, it’s OK going up. I enjoy going into town by myself to get a little bit of independence, I go on the bus - it’s hard to see the numbers of buses. I feel very lonely at school because I don’t have friends to confide in ... I’m only allowed out Friday and Saturday, my parents have to drive me, especially at night. My friends get to go out a lot more than I do.” When asked about how she chooses clothes and feels about herself, this young woman went on to say: “My sister helps in choosing clothes. I really can’t stand hair spray, mousse and gel, nail polish, make-up - it looks pathetically unnatural. I’d love to dye my hair brilliant red. Sometimes I would like to be a boy. I’m just a normal teenager, very conscious of myself. Sometimes I think I’m slightly not normal because I like doing things differently.” (VI-16)

Feelings of personal inadequacy were also present in the words of a visually impaired student who talks of a friend who is “normal ... she is fairly popular because she looks nice and, I don’t know, because she is a nice person.” When asked if she feels herself to be popular she replies “no, not really. I mean, I don’t have any enemies, but I’m not really best friends with anyone.”

Young women with hearing impairments have special problems with friendships because of communication difficulties. Cohen (1978) writes about deaf adolescents:

... the deaf adolescent faces several identity issues. Some instantly identify with the “deaf world”, while others may avoid it and, in a sense, aspire to be hearing ... Deaf adolescents who successfully attend mainstreamed schools are successful academically but, for the rare exception, are lonely, lack involvement in the social milieu of the school, and lack the avenues of energy release and identity experiences so crucial at this stage. Deaf teenagers need peers with whom they may feel comfortable. In most cases these peers, too, will be deaf. (pp. 271-273)

These words rang true when applied to the young women we spoke with. Those with partial deafness indicated that they endeavoured to make their way in the ‘hearing’ world and were quite often indifferent to their deaf peers. Young women with profound hearing loss however reported that making friends with other than their deaf peers was difficult. Most reported that in general it was more difficult to make friends with boys. The same problems of isolation experienced by young women with other disabilities were mentioned, and a certain amount of anxiety was evident, apparently resulting from communication difficulties:

“It’s not easy to make friends, just me I think. It’s easier to make friends with girls. It’s difficult to see friends because they live so far away, I ask people over but they say it’s too far. Sometimes I go to their place when they ask me. I don’t go out at night. Weekends I do house-cleaning and baby-sitting for my sister.” (HI-16)

“Lots of kids are very false, they act nice, then talk behind my back. Most of my friends are honest people and don’t act like that. It’s easier to make friends with girls than boys, it depends on the person. With some, if I can’t hear them, it makes it difficult. Some treat me like a normal person, some get uncomfortable and go off.” (HI-17)

“School friends are mostly deaf ... sometimes we fight and talk and punch ... I don’t visit friends on weekends, they live too far away ... I’m not allowed to go out at night, my parents worry that I might get attacked.” (HI-15)

“It’s not easy to make friends, maybe it’s because of my hearing or my personality.” (HI-16)
“Hearing people make me bored because hard to understand ... they snub me, they don’t want me because I’m deaf ... boys make cheeky signs.” (HI-14)

“Some deaf children have different interests from me ... some deaf criticise other people and I don’t like that. Deaf boys here [in a Unit] think more about sex things and bad things.” (HI-16)

“Boys in the Unit, they’re a pain, sometimes they tease you.” (HI-14)

“The deaf don’t mix enough. Too many problems when deaf get too involved. I like to mix with hearing and deaf. Deaf should spread out to make friends with deaf and hearing. If I talk to them [hearing students] then I make friends. If I don’t they don’t talk to me. It’s not easy to make friends with hearing boys.” (HI-17)

Not seeing friends outside school was also mentioned by a young woman with an intellectual disability:

“I have friends at school, all girls, I just keep away from the boys. I have five best friends, I might go out with one of them and my mother to see Crocodile Dundee and to McDonalds. I don’t go out with friends at weekends, but I want to.” (ID-17)

The problems of distance and social isolation were also mentioned by parents and professionals as major factors affecting the teenage years of young women with disabilities. Parents reported that their daughters tended to be lonely and isolated, particularly in school holidays, weekends and after school. Various reasons for this were mentioned: difficulties with transport; geographical isolation from far-flung friends attending the same school or unit; friendships at school not extending beyond the school gate because non-disabled peers did not include the young women in out-of-school activities; difficulties in making friends with neighbourhood children; lack of suitable sporting or recreational clubs in the area; the need to spend more time than others on homework; and, finally, their daughter’s lack of confidence or assurance. Professionals gave similar reasons, with some adding that some parents had difficulty affording suitable recreational outlets for their child, and in addition were sometimes unwilling to let their daughters take risks and experience ‘normal’ activities. This was particularly mentioned in the case of parents of young women with intellectual or sensory disabilities. It was furthermore suggested by a number of professionals that community mores made it more acceptable for a young woman to stay at home watching television or participating in family activities than it would be for boys. Learning from experience, and thus gaining in confidence, was seen as an important part of adolescence which, professionals felt, was denied to many young women with disabilities. Parents were divided in this area, some saying that they were fearful of allowing their daughter to go into town, or to a party, without an adult. Others said that they had to push their daughter into social engagements, and that their daughters made no effort to initiate friendships because of either fear or diffidence. Typical remarks made by parents are as follows:

“Her friends from school live on the other side of town. She only has friends from school ... I’d like to see her in a club to meet other people. She stays with friends and goes into town Friday night. If we don’t let her do that, she wouldn’t have much of a social life. I’m afraid she will lose her friends when she leaves school.” (Mother of a 16 year old visually impaired girl)

“I find it hard to push her to go out, however she has improved in the last six months. She meets a few deaf friends and goes to movies. She won’t join a club or play sport. Working in holidays has given her confidence, she has lots of friends, but mostly deaf ... I took her to the Deaf Club, she didn’t like it.” (Mother of a 17 year old hearing impaired girl)
"Apart from her group of close friends, she doesn't feel confident in a group, especially a big group where there's lots of conversation going on. She doesn't have an extensive social life because she spends so much time on school work. She discourages boys. She has a group of close friends and goes out of her way to make friends with hearing impaired. She is very independent, mature, capable, but when she is down she is unsure of her goals and whether she can fulfil them." (Mother of a 16 year old hearing impaired girl).

"She has no close friends. She feels she's in a group, but would not be missed if she left... she has some friends at the Youth Group, but she goes reluctantly because she's not close enough to friends there. Disability affects her social life, especially not being able to use the phone." (Mother of a 16 year old hearing impaired girl)

"She doesn't have much to do with her sister who finds her slowness frustrating. She doesn't have many close friends. She did join a church youth group by herself, but doesn't go now because she is too busy with homework. She has been spending weekends on school work. She is very passive, and fatigues easily, so sleeps a long time." (Mother of a 15 year old physically disabled girl)

"She lets her disability hold her back, thinks she can't do anything. She'll stand up for herself, breaks down, then retaliates. She's on guard the whole time, misinterprets remarks. Her social life and friendships are normal, though her disability affects her a bit, she lets it be a barrier, puts up defences." (Mother of a 12 year old physically disabled girl)

"Her social life is non-existent because she can't mix after school. She enjoys meeting and talking with people, but there's not much opportunity. She doesn't have many friends, and she doesn't like her own company." (Mother of a 17 year old physically disabled girl)

Some of the social isolation which may be experienced following integration into regular schools may be alleviated by membership of recreational groups for young people with disabilities. The mother of a 17 year old girl with a physical disability felt this had been important:

"She is very isolated and quite lonely. Students are pleasant, but it doesn't carry over into a friendship, she doesn't have that peer group. The [sports group] has been her salvation, kept her feeling OK about herself. She says it's better to be lonely than to have the wrong friends. The group has helped because they seem to talk to each other about problems with disability."

Parents of young women with intellectual disabilities also felt their daughters lack appropriate companions. An additional worry was the fear that their daughter may be vulnerable to abuse or exploitation. The statements made by the mother of a 16 year old girl summarise these concerns:

"She is very affectionate, over-friendly with strangers. She doesn't understand her flirtatious behaviour is inappropriate in many situations. I would like to see her involved in a greater range of social activities with her own peer group, but I wouldn't allow her to go to school discos without an adult. She is interested in boys and flirts with boys and men, and could be taken advantage of. I have problems encouraging her to be more independent."
When we spoke with young women who had left school in recent years we asked them about the friends they had made during their high school years. Again, the theme of social isolation was evident from the comments of young women with an intellectual disability:

"I fought with one boy quite a bit, but he was the only one. I made some good friends and played with them after school ... I made new friends at [a new school] but never had anyone to play at home at the weekends or after school as I was a fair distance from the school and had to catch two buses." (ID-19)

"Friends didn't come to my house ... at school I played with girls. I didn't play with boys. I had a best friend." (ID-17)

"I had friends at school, we mucked around but not after school. We went to the pictures and restaurants at weekends ... I would have liked to go to a school where there were boys, I would have liked to have mucked around with them." (ID-18)

Some of the comments made by young women with physical and sensory disabilities who have left school in recent years revealed the loneliness they had experienced, and convey a sense of resignation to this:

"I used to get jealous of my younger sister going out with boyfriends. I didn't have much of a social life. I worked hard to compensate, to keep busy and occupied." (VI-23)

"I didn't feel kids liked me, my mother said I just had to stick through it, and I'm glad now I did ... friends were going to parties and away for weekends, I was never invited, they didn't think it was the sort of party I wanted to go to, thought I didn't want a social life, and I don't think I did." (PD-18)

"I didn't get invited anywhere by girls in my class. I suppose they didn't know me very well. I wasn't part of a group. Sometimes it bothered me, but I got to accept it. Looking back I wish I had been part of a group. I went round with my older sister and her friends. I had lots of friends, but not really good friends - it was the same right through High School." (PD-17)

A young woman with cerebral palsy, now happily studying at College, also alluded to non-disabled friends who had difficulty coping with her disability:

"I didn't get out often. Friends made excuses. It was OK to be my friend at school, and it was OK to come here, but they wouldn't be seen dead with me in public. I really lacked a social life. Every now and then it got to me, but I concentrated on school work to get to College. Even my best friend made excuses when I wanted to go to the pool."

An older woman who suffered polio in childhood told how lonely she was at school, and how she felt people were talking about her until her father pointed out that she was different and that it was up to her to speak to other students. After she tried this she was able to make friends, but as she rather bitterly pointed out: "Disabled people always have to make the first approach; it never ends."

A similar comment was made by a hearing impaired woman who remarked: "I make friends easily, it's one of the abilities you have to have if you are hearing impaired. You can't sit back and wait for people to pity you."

Older women who had been to special school before the policy of mainstreaming students with disabilities was introduced into State education systems appear, on the whole, to have found it easier to make friends, although the factor of distance meant again that friendships were confined mostly to school. Some young women reported that the only difficulty they experienced followed
integration into regular schools. Many reported that they were still in touch with friends they had made at their special school:

"I made friends easily at special school, and work with my best friend now. Friends were both boys and girls, and I mainly liked hanging around males because I didn't have a brother. The difficulty was distance between different friends, and I had to rely on my parents or get a taxi if I wanted to see friends after school." (PD-25)

"I found it very easy to make friends because I was at a deaf school and all the students were deaf ... at hearing school it would be very lonely ... I still see my school friends." (HI-24)

"I got on pretty well with friends at special school. I was called 'spastic' when I started at able-bodied school, but it didn't worry me." (PD-21)

"I was the only disabled kid at [state school] and I had problems with other kids ... I accepted them, but they didn't accept me because of my disability. I made friends with younger girls. Boys were troublemakers and girls my age supported them." (PD-19)

"I had a lot of friends but could only see them at school. I couldn't go to their houses and visit them or invite them over very easily because most of them were in wheelchairs. I suffered a lot of disappointment and jealousy at not being able to easily see friends like my sister and brother. Everything had to be arranged a week ahead." (PD-20)

Activities

The sort of out-of-school activities pursued by the young women we interviewed were as varied as one might expect in any group of young people, and included visits to discos, shopping centres and cinemas, camping, or just relaxing. However, for many, activities were either passive, such as reading, watching television, or listening to music, or revolved around family members rather than friends of their own age. Some young women said they did very little outside of school hours except help their mother around the house. Young women who did belong to sporting, recreational or church youth groups did in general derive pleasure and satisfaction from those, and comments from parents indicated that these activities assisted the development of self-confidence in their daughters.

Very few of the young women said they went out with friends at night, even those who were aged 16 and above. For some, the world outside school and home is alarming and apart from involvement with youth groups some evidence of discomfort in the 'outside' world was evidenced. For example:

"I go to movies with friends when they're not busy, I don't go into town because I'm a bit scared of crowds sometimes. I'm occasionally allowed to stay out late if I'm at a party, but I don't like being out at night." (PD-17)

or

"I don't go out often. If I do I go into town and sit and talk in a quiet place. I'm mainly a quiet person. I don't like parties, they are too noisy. I like to stay home with a couple of friends. I never come home late by myself." (HI-17).
Boyfriends

A desire for friendships and participation in peer group activities is also frequently coupled with a desire to have a boyfriend. The formation of such a special heterosexual relationship is reinforced by parents, relatives, peers and observation of the world around. These friendships cover the whole range from short-lived, non-committed friendships which are used primarily for "having a good time" to a steady relationship which may lead to a permanent one. Involvement in a boy-girl relationship serves a number of functions. It creates opportunities to test out various roles, offers companionship, provides an arena for engaging in various close personal and sometimes sexual experiences, all of which may contribute to the assessment of one's popularity and social success.

The emergence of an interest in the opposite sex is for many young women an exciting, albeit at times painful and confusing, part of adolescence. This interest provides the basis for much giggling and conversation between girls as they compare notes and identify young men they 'fancy' from amongst their peer group or from the worlds of film and music. Much to the frustration of educators, this interest may interfere with girls' school work, when competition with boys in the classroom may be viewed as 'unfeminine', or when the urge to fulfil romantic dreams of marriage and children becomes a compelling reason to leave school as soon as possible.

In many ways the young women we spoke with were no different from their non-disabled peers, for most expressed an interest in boys. Few however had boys for friends, or had gone out with young men on 'dates'. From the comments they made it was apparent that disability did have an effect on this sensitive area of their lives and this was particularly true of young women with physical or sensory disabilities.

These are the sorts of things young women said to us:

"Friends have boyfriends. Nobody really likes us because of our eyesight. I can't really see their problem, we dress in fashion - if our eyes were normal they wouldn't know we were colour blind. If I get one [boyfriend] I get one." (VI-14)

"I haven't had one, I'm too devoted to school at the moment. It's a bit of a shame really, there is a need for someone to talk to who isn't a girl - it's something to be put aside." (VI-15)

"I may like boys more in the future. If I ever have a boyfriend it will be special and I'm not ready for that yet. I talk about boys to my friends." (PD-15)

"I'm not likely to have one. I'm happy with life. I don't give it much thought." (PD-16)

"My friends have boyfriends. I don't know, sometimes I don't think I'm pretty enough." (PD-17)

"Probably when we're about 17 - Grade 8 boys act like a pain in the neck. No, we don't trust them, they're not proper sensible. They fool around. Sometimes they'll be rude." (HI-14,15)

"I don't like to be tied down, I'm friends with boys, I sometimes get on better with boys, they aren't as catty. I would like to have a boyfriend. I see guys I'd really like to go out with, I get hurt very easily. I had a good friend but we fell out and he moved away. I'm too young - all my friends talk of getting married and having kids. I don't want kids. I've never fancied a hearing boy." (HI-17)
"I've had heaps of them - they go past me like flying coals! I go after boys but I don't really want a steady one." (PD-15)

"I would like to have one, there are a lot of boys around that I like. It annoys me because [girlfriends] have boyfriends and I haven't. They are boy crazy. That's all they think about - I'm not as boy crazy as they are, sometimes I'm not even interested." (PD-16)

"I'm glad I don't [have a boyfriend] because I don't think I could handle it because I have work to do. I'll wait until I am a bit older and a bit more mature - not that I am immature now, but I would rather wait until I am older." (VI-16)

"No I haven't had boyfriends. I couldn't handle what the girls at school go through. Not having a boyfriend is a bit of a worry because nearly everyone else has one." (PD-17)

"I have friends as guys. Boyfriends are just a dream. Sometimes it worries me and I think something is wrong with me. I get along with all the guys." (VI-16)

Young women with an intellectual disability sometimes mirrored their parent's fears:

"I'm scared about boys touching me. Mum tells me to come straight home. She looks after me. I'm too young to be pregnant yet." (ID-15)

"I wouldn't like a boyfriend because they might think I'm a dummy 'cos I'm in a support unit and they won't respect me." (ID-14)

"I don't tell her [mother] that I'm talking to a boy ... I walk to the phone box 'cos I'm not allowed to give the number." (ID-14)

"I'd like one, I'd probably go out more, I stay around the house most of the time. My oldest sister has one, he's OK." (ID-17)

"I've got three boyfriends, they are actually a bit of a nuisance! The one I like best burps, one kisses me, and one holds my hand." (ID-17)

A group of young women with mild intellectual disability were asked what they talked about with their friends. They replied:

"Boys that you like. Boys are my favourite subject. They know that I like them. Boys ring up and you talk about what you did that day." (ID-12,13,14)

Comments made by young women who have now left school continue along a similar themes. In some cases the question of boyfriends and serious relationships have not only been deferred but dismissed. For example:

"I wonder now if I'll ever get married, I can't imagine it any more. I feel I'm much more my own person now, maybe I can't imagine anyone taking that much notice of you. I may marry the ugliest person in the world, though he may be the nicest." (Visually impaired woman)

Another woman who has a physical disability says:

"I was very self-conscious, especially when it came to associating with boys, very reticent, timid, shy. I didn't talk to people unless I knew them and didn't want to get out of cars in case some guys saw my legs - it would have been helpful to have had someone to talk to about it, someone who had been through it. ... I joined a Spina Bifida youth club, it wasn't my scene - there was a young man there with spina bifida who wanted to take me out. I wouldn't have a bar of that. People expect me to go out with or marry a boy with spina bifida - I
couldn't think of anything worse. Marriage isn't so important now that I have a career."

A woman with mild visual and hearing impairment who is taking her Diploma of Education remarked that:

"I never thought of marriage in concrete terms. I don't now after seeing what some friends have gone through. I've got enough on my plate without going out with an over-bearing male."

Two 21 year-old women with physical impairments indicated that having a boyfriend wasn't a major issue for them:

"I'm not really worried. It's a matter of finding the right person."

and

"I'd like a boyfriend but it's not a life and death matter and I'm not going to push all out for it."

A deaf woman who is about to be married to a 'hearing' man says that:

"My mother is happy about this because my fiance is hearing and so will be able to communicate with my mother ... she tries to put my fiance into a father role."

A 17 year old woman with an intellectual disability remarks:

"I used to have a boyfriend, but he has got another girlfriend. There was another one ... one day I went to his mother's house, and I asked Mum if I could go to his house on Saturday afternoon ... I only went once."

Experiences with young men after leaving school were not always easy or pleasant. As a young woman with a physical disability comments: "I had boyfriends at school, but not since school. It worries me now. I didn't mix with boys until Uni and then I was inexperienced at it."

Another physically disabled woman currently living with her boyfriend says: "When I met [boyfriend] I was scared at first, distanced, wouldn't speak, and I recommended other girls. Last year his mother suggested we break up because of my disability."

The experiences of a 27 year old woman with an intellectual disability highlight her vulnerability: "I have had a boyfriend since I left school, he did terrible things to me, and unfortunately it didn't work out."

Some young women misunderstood, or had false ideas about the term 'boyfriend', for example an 18 year old woman with an intellectual disability whose boyfriend is someone she works with whom she sees "just before he goes home." She has never been out with the young man. A 17 year old with a physical disability, who currently lives in a residence said that her boyfriend was an ex-resident who:

"... has muscular dystrophy which is normal, practically normal, just something wrong with his feet. The relationship has been off and on but we're closer now. He comes here on Fridays after dinner and is picked up at 10.15 by his Mum. We haven't been out, his parents have to ring Marion to organise it. I'm going to his 18th birthday party in May." She says that "we sit on the verandah or in the rumpus room and talk. I can kiss him in front of the nurses - we're used to it, them hanging around - once we were sitting on the couch, one of the nurses went out and I wanted to give him a cuddle but [one of the residents] got in the way. Everyone asks me when we're getting married."

From the above statements it appears that many young women with disabilities doubt their ability to establish personal, or possibly sexually intimate, relationships, choosing instead to defer decisions until they feel more able to cope. The reasons for this could be manifold - it may be that the
expectations of society, teachers, their parents and siblings have impressed on these young women that relationships with young men are unlikely. (This will be explored further in the following section). It may be that the young women make such statements as a defence against being hurt or not realising personal hopes. Comments may also be made as a result of hurtful or insensitive treatment by boys of their acquaintance, and may be therefore quite genuinely disdainful.

Parents particularly mentioned the frustration and self-consciousness that they had observed in their daughters when it was felt that an interest in boys was beginning to emerge. Several parents, however, remarked that their daughter was not interested in boys, or was very gullible in terms of personal relationships. Further remarks made by parents concerning their daughters' sexuality can be found in a later section, *Coping with Adolescence*.

**Sex Education**

Attitudes and behaviour relating to sexuality and pregnancy take on a special significance in relation to the education of disabled girls. There is much evidence that sexuality is a difficult and emotional issue for girls with disabilities, because those with disabilities are frequently treated as asexual beings. (*The National Policy for the Education of Girls in Australian Schools, 1987, p.21*)

Young women grow up with no one to turn to for advice or factual information concerning their capabilities and limitations ... this can be very frightening ... It is especially important that disabled women should possess accurate information concerning sexual satisfaction, becoming pregnant and child bearing. (Ball, undated, p.48)

The majority of young women said they had received some form of personal development or sex education from their school and/or from their parents. In the main this related to human biology, and they reported that they "knew enough". If they required additional information the young women said they would ask their parents, in particular their mother. Their sisters and friends were also mentioned as sources of information, however teachers were rarely cited as somebody who would be approached for personal information.

Apart from young women with an intellectual disability for whom specific courses could be arranged through organisations such as the Family Planning Association in most States, few of the young women we spoke to had received information about sexual development relating to their particular disability (e.g. spina bifida, cerebral palsy, hearing or visual impairment). Those who had received such information had, in general, spoken to their doctors with regard to their ability to have children, though this was comparatively rare in the case of the school-age girls. When we asked the same question of young women who had left school in recent years, however, their reflections about their sexual growth and development paint a different picture. The following quotations illustrate the inadequacy of their instruction in this area:

"I got a little at school, I think you just learn it as you go along and sometimes you might hear it from other people, I probably heard it from the nurses. Sometimes I feel I need to learn more things, sometimes I feel that I haven't been taught much." (PD-24)

"I know where I come from, how they're made - it's just, I guess, if I do want to learn more I'll ask for assistance, but up until then I guess I'll be OK because I haven't got involved." (ID-21)

"At [work preparation centre], it is very good. If I had any problems I would talk with one of the staff but I would be a bit scared, a bit frightened." (ID-17)

"I don't know enough ... because I am older now and I think it is about time I can find out for myself from different places." (ID-18)
"At school, but I didn’t enjoy it. Most of it was good because I learnt about my own body, but I didn’t feel comfortable talking about the opposite sex. I don’t need to know any more." (PD/ID-21)

"Mainly at school and from personal experience. I learnt the hard way." (PD-19)

"At school, it was adequate. I learnt a lot with boyfriends, but we had a sex education teacher, she was really good." (PD/ID-25)

"Mum talked to me ... at school lay teachers in dark rooms held up a book and said see these pictures." (PD-21)

"Mum only talked to me if I asked. School ... was all facts like how not to get pregnant, and contraception." (PD-24)

"I’m too embarrassed to discuss it with my family, they would probably say she is disabled, she does not need to know. They look upon me as a child.” (PD-24)

PERSONAL AND EMOTIONAL WELL BEING

Another consistently reported personality characteristic in the handicapped is lack of confidence and low self-esteem. This is not surprising, given that many handicapped adolescents have difficulty impacting upon their environment due to realistic or societal limitations ...

(Ammernan, Van Hasselt & Herson, 1987, pp.415)

In this section we examine how the young women feel about themselves. Many of the professionals we spoke with mentioned that young women with disabilities often have a low self-esteem, and are consequently lacking in confidence. The reasons for this were seen as largely deriving from the life experiences of the young women whose disability rather than abilities had been emphasized.

Self-Concept and Self-Esteem

Self-concept is the sum of all the beliefs that a person has about herself or himself. It is built up from pieces throughout childhood and adolescence to form the picture that a child develops of self. Self-esteem is the value which individuals place on the data of their self-concept. People estimate their own worth and feelings of high self-esteem [worthiness] or low self-esteem tend to promote behaviours which reinforce those feelings. (Wings, 1984, p.3)

Many factors contribute towards the development of a healthy self-esteem and self-concept. In order to gain some understanding of how the young women saw themselves several questions relating to their understanding of their own disability, how they would describe themselves, how people in general treated them, whether they were ever depressed, and whether they would change their lives, were asked.

Self Descriptions

When we asked young women to describe themselves the question was often greeted with embarrassment or horror! The young women with hearing impairments found this question particularly difficult to answer and it was hard to know whether this was due to linguistic handicaps or difficulties in their actual self-perception. Young women with an intellectual disability tended, in answer to this question, to describe the sort of things they enjoyed doing rather than their appearance or personality. Overall, very few references were made to disability, although most did choose to answer the question with a description of their personality rather than a physical description. A few young women with cerebral palsy specifically referred to themselves as "normal", for example:
"I'm glad I've had CP from birth rather than recently, I consider myself normal now, but if I'd had an accident and become like I am now I wouldn't consider myself normal." (PD-15)

"A normal everyday girl, I enjoy life, I have no regrets, I'm a pretty happy person, I only think of myself as normal." (PD-19)

"I walk pigeon-toed, my arm is kinda stiff and mucked up, but otherwise I consider myself normal. There are times when I'm down, put on a happy face, but I'm crying inside." (PD-16)

Common statements related to a desire to please, to make other people happy, or to their ability to cheer people up. When statements relating to physical attributes were made, these were either descriptions of hair colour, eye colour and so forth, with comments about being "skinny" or "pimply" or "average" in looks. Several young women referred to themselves as "quiet", but in the main self-descriptions were as varied and revealing as one would expect from any group of young women. The differences which exist in the area of self-esteem and self-concept is evident in the statements. These are the sorts of things they said:

"Easy to get along with as long as someone makes the effort, understanding - people talk to me, I can be trusted with other people's secrets, very skinny, not very pretty." (VI-14)

"Fairly attractive, zany, outspoken, not afraid to say what I think, well-liked by the people that count. Fairly intelligent, musical, a good actress. I don't have a great self-esteem, put myself down a bit. I get depressed, don't handle it well, grumpy." (VI-14)

"Friendly I suppose, I like meeting people, talking to people, making new friends. I like enjoying myself. I consider other people's feelings. I'm just a nice person. I try to be nice to everyone, sometimes it's hard. I suppose I could lose some weight because I think I'm too fat. I'm average in looks, not a model or anything. Auburn hair, hazel eyes. My nose is too big and my face is too long. I'm satisfied with my ears, they are small. My forehead is awful, too long." (PD-17)

"I'm a private sort of person. I don't really need a close friend. I'm fairly popular. I'm fairly quiet. I'm fairly good at sport too. My hearing doesn't really affect me that much. It's just a slight problem." (HI-16)

"What do you mean? I like working. I like helping people and I like talking to people if they have got problems, things like that. I like walks, I like bike riding, I like very quiet times with my friends. I don't like my bad moods, my bad tempers - it's not nice. There is sometimes I get so mad with myself when I can't do anything right. I get very mad that way." (ID-17)

Some of the young women tried to give positive descriptions of themselves, but revealed elements of uncertainty. Sometimes this uncertainty related to their particular disability:

"I don't know what I look like, I don't take much notice. I'm medium weight and height ... outgoing and outrageous. Sometimes I don't want anyone to come near me, especially men. I will give anything a go, I don't give in easily and I'm a bubbly person." (VI-18)

"I have red hair. I'm deaf. A bit tall. I don't know myself." (HI-14)

"I hope I'm fun to be with. I think I'm not usually a depressing person, fairly active. I like people. I love being with my friends. I get depressed when I don't see my friends on the train." (HI-17)
"I try not to think about what I look like, I'm not too bad. I'm friendly. Mum says I'm highly strung sometimes. I get down about my disability." (PD-17)

"I try to look young, look nice appearance-wise. I dress well. I'm a happy person, I don't let things get to me. I just like to live my life day by day, what I can't do I'll learn tomorrow, I'm not in a hurry to do things. I'd like to get out in the world, go to discos, go through what everyone else went through." (ID-23)

"I'd like to think I have a positive attitude and I think I'll be happy with life if I know I've done something that will help somebody else, something worthwhile. I like talking to people, I watch people a lot, I tend to read autobiographies. I wouldn't know how to describe myself physically." (PD-16)

"Short, I'd rather be tall. Skinny, normal, pimples. Happy. Not really quiet except in class. Sometimes lonely when people are away in the hearing school." (HI-15)

Not many young women gave purely negative descriptions of themselves. Those who did had very poor self-esteem:

"I feel awful, not pretty, can't look in the mirror, wish I wasn't born [she cries] ... feel I want to cut myself, feel awful, not pretty ... I can't find anyone to be a friend." (ID-15)

"Negative, I'm ugly, the problem with my vision, my face, my hair, I'm very negative." (VI-17)

By way of contrast the self-esteem of some young women was high, while others felt that they were average:

"I'm really good at school work. I'm an active person. I'm very enthusiastic at school work. I'm really friendly around people. I never get hot-tempered unless I have to." (HI-17)

"I'm average. I like reading. I like knitting. I like pets, animals. I like going out. I like movies, discos ... I don't like fighting, I have fights with my sister. I'm good at cooking cakes." (ID-19)

Understanding of Own Disability

Adolescence is a time of exploring and developing one's own identity, and gaining a sense of where one fits in the world. It is a time of uncertainty, but also a time when future plans are loosely formulated, based on what one knows about one's abilities, ineptitudes, likes and dislikes. For young people with disabilities planning for the future may be difficult if they do not understand the nature of their disability, and the possibilities and limitations which accompany it. When we asked the young women about their disability we found a high degree of uncertainty. Only amongst young women with a hearing impairment was there some feeling of acceptance and understanding. The question was not posed to girls with an intellectual disability, though as will be seen in the chapter on School Lives, they frequently refer to non-disabled peers as "normal", indicating that they have a sense of 'differentness'. Typical statements made by young women with physical and sensory impairments follow.

Some young women indicated that they would like to know more about their disability:

"I was born deaf. When I was a baby I couldn't hear sounds. I would like to know more about why I was born deaf." (HI-15)
“Nobody knows what causes it (spina bifida). I’d like to know. I’d like to
know what causes hydro – I’ve heard it’s caused by rotten potatoes.”
(PD-17)

“We would like to understand more, we find it hard to explain to other people,
we’ll always be the same. We don’t even know if children will get our eyesight
– if it carries on it’s a kind of burden.” (VI-14)

Many of the young women were able to describe their disability, but were unsure about certain
aspects:

“Can I have children - Mum and Dad say I can, but I don’t know. If I ever get
married I’d like to find out first. I don’t feel I can talk to the doctor at the
Spastic Centre, he’s a middle-aged man. I understand what happened at birth
and what the problems are I’ll always have.” (PD-15)

“Cerebral palsy and children, that’s something I don’t know about. Mum says
I can have babies, but I don’t know if I can cope with a young child. I don’t
think I’ll ever get married anyway. I think I know how it’s caused, I’ve read
pamphlets and books.” (PD-19)

“I don’t like to be deaf. I like to be normal. I’m profoundly deaf. I’d like
to hear. I would like to know more, but it doesn’t matter.” (HI-16)

“I know all about epilepsy but there’s still questions I ask when I think about it.
I recently asked whether CP would be affecting my maths calculations - I think
it does a little bit. I know it won’t affect children unless something happens at
birth. I know it’s not hereditary. Mum usually knows. There’s always
someone to ask. I have problems with my hips, I wonder how I’ll manage.
I’ll probably end up having a caesarian. I tend to think I won’t have a normal
birth.” (PD/Epilepsy-15)

“I was born like this. God made me deaf, like the blind. It just happened. I
don’t know. Sometimes from measles, not me. It just happened.” (HI-16)

“You parents can only tell you as much as they know themselves, if you
really want to know, yes, you’d ask your doctor, but I get too embarrassed ...
when you’re younger it’s not so bad, but it’s harder when you’re older.” (PD-
16)

Some, though not many, young women were upset because they did not understand their disability:

“I don’t know, hardly anything. I think my heart beats three times faster than
normal. I’ve worn a brace since grade 7 - I cried because I didn’t want to wear
it. Kids ask me if I have a hole in my heart and I say no, they say what have
you got wrong with you, and I say I don’t know, I don’t understand. I get fed
up sometimes.” (PD-15)

“I don’t understand whether they will be the same or get worse. My eyes may
be worse later on, but we don’t know exactly. I find visits to the doctor very
difficult to understand. Sometimes I worry because it is better to understand
what he says.” (VI-17)

Finally, some young women accept their disability and feel they know enough:

“A lot of people in wheelchairs find it strange what people call them, high
school kids call them crippled. We’re just like any other human being, our
brains work exactly the same. I’m lazy, most spina bifida are lazy. I feel I’m
like any normal person.” (PD-15)
"I’m profoundly deaf. I don’t want to know more." (HI-16)

"I’ve only got 10% vision. It’s hereditary and it’s just there, it’s so natural I don’t worry about it. I don’t consider myself as disabled.” (VI-16)

**Depression**

From the comments reported thus far, it might be expected that the young women would frequently get depressed or wish to change their lives radically. In a study reporting on the lives of forty-six adolescents with spina bifida, the author reported that:

85% reported depression ... Girls ... were more likely than boys to report frequent misery ... nearly a quarter of the girls had had suicidal ideas in the past year, and one girl had made a suicide attempt. Half the girls ... had on some occasion felt life was hopeless ... less than a quarter of the boys had felt this. (Dorner, 1976, p.442)

However, few of the young women we spoke with reported feeling depressed frequently, although “sometimes” was a common response. As will be seen from the following comments, many of the young women refer to the attitudes of other people towards them as a source of depression; others refer specifically to their disability:

"What upsets me is that [male classmate] gets me really upset and he sees the tears coming down your eyes and he gets me really upset and that’s why I’m trying to leave school.” (ID-17)

"It is just part of life - I do get a bit down in the dumps a few times because you feel you are not up with everybody. You feel that you can’t cope with it. I mean it is worse when you have got hearing as well as blindness because sometimes, it doesn’t happen all the time, it can occasionally get me down. I tend to think how am I going to cope with this because particularly in a conversation and somebody asks you something, and you didn’t hear it because I can’t cope with hearing other people as well ... I tend to be able to get myself out of that or I take it out in other ways. I tend to get a bit down in my work, and people start boosting me up again, and it is just the way I get through things.” (VI/HI-16)

"Not a lot, just when I don’t get my own way at school and with some of the people because of the way they treat me. Also with swimming, I can’t wear my hearing aids when I go swimming, and so I don’t enjoy swimming so much.”

(HI-16)

"I’ve been really depressed about not getting married. I think being a female makes a difference - a lot of guys won’t have anything to do with me because I’m blind.” (VI-14)

"Once or twice a year when I think of not being able to drive a car, ride a bike, or have no one to talk to. Now and again work at school gets on top of you.” (VI-15)

"Sometimes. Last year kids were making fun of me at school. I went and saw the teacher, they made the boys stop. Namecalling - some of it was funny but other stuff wasn’t.” (PD-15)

"Sometimes, about my disability, when I can’t do something, school-work sometimes, when everything gets on top of you. Usually I have a tantrum and then put a tape on.” (PD-17)

"My employment opportunities, should I actually get qualified, because of my disability. Why should people go out of their way to make concessions. I’m
trying to be realistic, prepare myself. I have to think of realities. I find it depressing sometimes to think I’ll only be in school for another year.” (PD-16)

“A lot - my hearing, the school work I have to do, problems with my friends, both my parents have to work to pay the bills and I don’t see them much any more. I hope that in future people will understand more about disabled people.” (HI-17)

“Sometimes, because in my class boys tease me.” (HI-14)

A women of 24 with a physical disability finds she gets more depressed and frustrated with other people’s attitudes the older she gets:

“Yes, and it’s not the disability. It’s frustration more than depression.” She talks about her boyfriend who is going out without her. “Girlfriends go out with boyfriends - I feel I include him in most of my activities and he should include me in his ... I was literally in tears ... Because I’ve got a disability, why should I be treated any differently? It sort of hurts, but what can I do?” (PD-24)

A 21 year old woman, also with a physical disability, voices similar thoughts:

“I feel inadequate sometimes. Sometimes when I am really depressed I see myself as a failure, and not achieving anything at all, and I feel as if I’m a drifter and wasting my life - whatever it is. I don’t want to feel like this but sometimes ... It’s the uncertainty of it all, and I just get sucked up by it. I don’t want to but sometimes it does. It scares me half to death because I’m a person, and I want to do something for myself, but sometimes I don’t know where to turn.”

Other comments made by women who had left school describe physical difficulties, while some indicate that they feel they have come to terms with their disability. Some women continue to find other peoples’ attitudes depressing:

“Sometimes, when my taxi is late, and community care are late. It’s the fact that I can’t do something on my own and have to rely on others. I get over it.” (PD-19)

“Not very often. Hopefully by this stage I’ve come to terms with everything, and because I’m doing things I don’t think about my disability.” (PD-21)

“I was especially depressed in adolescence about my disability, and I was unsure of myself. I’m more at ease with myself now.” (PD-23)

“Sometimes, when I meet with a brick wall in trying to meet goals, or if I come up against attitudes. Sometimes I think, why me, and question my decisions about life.” (VI-29)

“Often - people irritate me, get me upset and angry, and nag me too much. It wears me out.” (ID-22)

“Sometimes when someone is not happy, and you talk to them, and they are not very friendly.” (ID-27)

Changes

When we asked the young women what sort of changes they would like to make to their lives replies tended to be “none” or quite naturally referrals to their disability. The comments made by young women speak for themselves:

“There’s nothing I want to change.” (ID-18)
"The fact that I've got spina bifida. Without spina bifida there'd be no doctors, no hospital. I'd get on better with people, they'd accept me more, they don't really accept you, you are on the outside. Kids ask what's wrong with you and you have to explain it all. I'm thinking of making a tape!" (PD-17)

"My personality, just me, all of me." (HI-16)

"I want to be hearing sometimes, I can't make up my mind - I want to be hearing when I'm 18 or 19 because then I can go out anywhere with hearing people." (HI-14)

"Rich parents so I could buy trendy clothes. Be smarter at school. Get a boyfriend." (PD-15)

"My body, my legs, my arm. I'd make myself taller. I'd make myself more determined. I'd be able to stick up to people, more tough, be able to handle things." (PD-15)

"A lot of things are pretty good. I'd like to walk, not do maths, go back to New Zealand, have a lot of money." (PD-12)

"You mean walk." (PD-13)

"Make people realise that everyone has a disability and that disabled people are people too." (PD-16)

When we spoke with young women who had left school in recent years we received similar responses. Some said they would make no changes, while others made reference to their disability. An additional wish expressed by those young women was the desire for more independence:

"Why should I change my life, I'm happy with the way I am." (HI-18)

"A lot of people would say my hearing. I would change my hearing, but I can't, so it's OK. I wouldn't change anything." (HI-18)

"I'd like to do whatever I want to do, like going on with Biology at Uni. I'd like more opportunities, no hassles, independence, a choice of careers and more sports." (PD-23)

"I'd like to be able to walk, have a boyfriend that really cared about me and not be in so much financial difficulty." (PD-23)

"I'd like a sex change so I could enter the higher echelons." (VI-29)

"I would like to go out on my own into my own unit and live with a friend. I'd like to be able to drive." (ID-20)

"I'd go to a normal school so I can compete. I look normal, I'm learning all the time and I would like knowledge like normal school kids." (ID-23)

**Particular Problems**

The young women were also asked if they had any particular problems. Many replied "no", others made comments about difficulties they experienced using public transport, or with special taxi services which had to be booked a long time before wishing to go somewhere. (These were mainly the women who had left school). Others remarked that some taxi drivers were nasty and rude. Physical difficulties such as toileting, reaching high things, dressing and feeding were also mentioned. Many said that if they had a problem they would discuss it with their parents. Some of the things young women described as problems in their life are as follows:
“Periods ... it's so hard when you can't see.” (HI-14)

“Poor English.” (VI-17 - a migrant)

“I wish I wasn't in a wheelchair. I wish I wasn't so chubby. I wish I didn't have so many scars on my legs. I get embarrassed at remarks about my chubby fingers.” (PD-17)

Young women with hearing impairments reported problems or difficulties in public places, or communicating with non-disabled people:

“I get embarrassed when the hearing aid whistles, mainly when shopping.” (HI-16)

“My hearing makes me very frustrated, it stops me from mixing with people. Quietly I say to myself, “I wish I could hear.” I feel left out. I wish I could get on with people a lot better.” (HI-16)

“I don't like to go out to a restaurant with the family. I like the food but they talk all the time. I think everyone should learn the alphabet [finger spelling].” (HI-15)

“I've found it hard to tell boys you are deaf when you are involved in a relationship. I've found it hard to tell people when you are not really deaf, it's harder with boys.” (HI-17) (This young woman has partial hearing loss.)

A young woman who has lived in a residence for most of her life now has problems relating to her family when she visits them:

“In school holidays ... I hate it, I don't know anyone, I don't go anywhere, I don't want to leave my school friends ... I'm going to tell my parents I'd rather stay in [town] ... they're like strangers really, it's getting worse as I get older.” (PD-15)

Older women mostly commented on physical barriers preventing independence and mobility:

“It's impossible to catch the bus with crutches; I can catch ferries and taxis OK.” (PD-19)

“Transport, taxis don't turn up, or they are late, or not helpful. I want to do too much and I get frustrated when I can't do things independently.” (PD-23)

“Catching trains, and reading the indicators.” (VI-18)

Role Models

Deliberately, or subconsciously, young people tend to model themselves on the people they see both on an everyday basis, or from afar. Amongst these models may be peers, parents, siblings, teachers, characters in books, actors, or singers. They may be people they particularly admire and would like to emulate, or they may be people who seem happy and fulfilled with their lives.

The absence of positive disabled role-models, and the importance of such models to young women, is frequently mentioned in the literature pertaining to people with disabilities. A blind woman, for instance, writing of her adolescent years, remarks that:

Perhaps I could have developed better feelings about myself if I had the chance to talk now and then with an older blind woman whose life was rich and full. (Kent, 1983, p.250)

Other authors remark upon the importance of positive role models in the development of a healthy self-concept and sense of personal worth:
Disabled women in today's society fare worse than non-disabled women and disabled men. Fewer socially sanctioned roles are viewed as appropriate for her, and relevant disabled role models are virtually invisible...without role models to emulate or deviate from, disabled girls grow up feeling not just different, but inferior...the absence of role models and sanctioned roles may introduce feelings of worthlessness which complicate disability. (Fine & Asch, 1981, pp. 233-239)

The staff from a support unit for students with hearing impairment commented on the difficulties experienced by their students because of their poor emotional vocabulary. To help engender a sense of pride in themselves, as well as provide strategies for coping, these teachers introduced their students to the deaf community and where possible, found them work experience with deaf adults.

Most of the young women interviewed for this study however knew of no older women who had the same disability as herself, or indeed of any older women with any form of disability. In fact, the girls often asked the interviewers if they had met individuals in similar situations to themselves. Curiosity was also displayed about the older women we were talking with. Those who did know other women with disabilities stressed the benefits of knowing them, or expressed admiration for them. These are the women they admired:

"A girl with quite severe CP, she was a resource teacher at [a special school] and is now married. She fought to be a teacher, despite all her problems she's got what she wants. If I can do half as well as her I'll be doing well. I don't think I have a role model. I'm living to be me." (PD-19)

"I know some deaf women who are lawyers and vets in Adelaide, some very clever women." (HI-16)

"Marlee Matlin [a deaf actress] because she is an inspiration to me that you can do whatever you want whether you are disabled or not. I admire my parents because they are very stable." (HI-17)

"The doctor arranged for me to meet a girl with the same syndrome, I've lost contact with her now, but it was good seeing someone else with the same problem." (PD-12)

Some young women said they would like to meet older women with the same disability:

"I would like to know about older women." This young woman has read books and seen movies about disabled people and says "I am inspired for a day or two, I think I could do that, but I don't have the energy right now." (PD-15)

"The only person I copy is my sister, she's so outgoing. I would like to meet an older spina bifida who's married and has kids - who's married to a normal man ... I'd like to marry a man without a disability." (PD-17)

When commenting on people they admired, young women often referred to parents, siblings or friends, the majority of whom were not disabled. Parents, and particularly mothers, were often admired because the girl considered they coped well with their daughter's disability. Friends were admired because of perceived abilities to mix and be outgoing, or because they were kind. Typical statements are as follows:

"[A schoolfriend] ... she's OK because she helps me a lot. If I ever get upset she helps me. If I ever cry she helps me get out of the crying. So she is a very nice girl and she helps me. I mean she helps me because I don't hit her. I speak to her nicely, and she never fights with me. We are all friends together and she is just a very nice girl for helping me with my crying." (ID/Epilepsy-17)
"A girl at school who takes everything as it comes, doesn't worry about anything and is friendly and encouraging which helps, and she also gives a lot of constructive criticism." (PD-17)

"Dad ... because he can do what he wants to, he makes the money he wants to, he is very intelligent. I don't want to be like Mum because she is submissive to Dad, she gives in to Dad. Dad is tops - he is better than the rest of the people around him ... I admire people who know a lot." (HI-16)

"I admire my friend because she's friendly, caring, the way she treats me. She's my best friend." (HI-16)

"I admire my friend because she's kind to me because I'm deaf. She likes me a lot." (HI-16)

"I admire my mother because she tries to help me and do her best." (HI-17)

"One of my friends because she won't show off in front of me, she doesn't tease me and she helps me around." (PD-13)

A 23 year old physically disabled woman says that she admires a disabled friend who is slightly younger than she:

"She's the epitome of what I want to be. She's independent, got a car, finished her degree and is going to get a job. She's got a bit of go in her."

Another young woman with a physical disability admires the musician Stevie Wonder:

"He's blind and he's done something that not many disabled kids do. From the time that he was 12 he had this calling. It is just that he has been able to do something with his life that many disabled, or people, don't dream of doing."

(PD-21)

The mothers we spoke with did not volunteer that caring for their daughter had prevented them from pursuing employment outside the home. Furthermore, although it may be true in some cases, we found no evidence that mothers had restricted their career development because they had a daughter with a disability. Consequently, we were not able to determine whether girls' vocational aspirations were either restricted or furthered by their mother's occupation.

Coping with Adolescence

The seeking of personal identity during adolescence is frequently done through the formation of friendships with peers who share similar interests or views. It is a time when family values and attitudes may be questioned, and may be a period of rebellion as moves towards independence are made. As a result adolescence can sometimes be confusing and painful for parents and children alike.

This transitional stage may be different for disabled adolescents. As one author points out:

Those teenagers who appear to their parents to be the best adjusted youngsters because of their obedient, conforming and complacent behaviour often have not attempted to deal with any of the developmental tasks of adolescence. (Winkler, 1983, p. 133)

Parents were asked to comment on how well they felt their daughters were coping with the adolescent years, and answers ranged between "she copes well" to "she is terrified of adolescence." Many remarked that their daughters were more emotional or sensitive than in previous years, and remarked on physical self-consciousness. However, few of the parents we spoke with reported any real difficulties and tended to voice more concerns about their daughters' lack of friends in general or the frustrations their daughters may be feeling regarding friendships with boys, rather than any of the generally accepted moodiness or rebellion traditionally associated
with the period of adolescence. There is, however, an underlying concern about how their daughters are coping, which is evident in their statements. Parents of young women with an intellectual disability appeared more concerned about their daughters’ ability to understand and cope with sexuality, than parents of young women with other disabilities. Some of the remarks made were as follows:

“She is hard to get along with, quite strong physically and more violent than normal. She may be frustrated, she’s getting interested in boys. She’s rather gullible, and thinks everyone is nice. She is dramatic, sentimental, romantic.” (Parents of a 16 year old girl with visual impairment)

“Only normal girl problems. She may be a little more self-conscious, but most friends have known her since Primary. She may be feeling frustrated in boy/girl relationships, her friends have more freedom than she does.” (Mother of a 17 year old girl with a physical disability)

“She’s only just started handling it. We have to get her clothes made and the measuring embarrasses her. She’s starting to get a bit cheeky.” (Mother of a 12 year old girl with a physical disability)

“Adolescence is difficult because they experience the same changes and frustrations of normal adolescents. She’s received a lot of sex education at school because they are all at the age when they are getting their periods. One weekend she came home after getting her first period and said ‘you didn’t tell me I could have a baby now’.” (Mother of a 14 year old girl with an intellectual disability)

“She is unhappy. She has talked of committing suicide and this makes me very unhappy. She gets depressed.” (Mother of a 16 year old girl with hearing impairment)

Some of the remarks made by young women with disabilities, and by their parents, in both this and subsequent chapters, support the statement made by the staff of a support unit in a regular school: “Not many girls are phasing into independence - it is going to hit them one day, if it does at all.” The difficulties for young women with disabilities in the gaining of independence, and the development of their own character and persona, normally an integral part of adolescence, were highlighted by many of the professionals we spoke with. Their comments are reported here at length. Girls, it was said, don’t want to appear different, and tend to be more sensitive than boys. If they don’t feel good about themselves, it is a constant struggle to overcome or deny their disability, and they are all the time conscious of their appearance. The need for counselling in human relations, and specific sex education which relates to particular areas of disability was mentioned by several people. The difficulty in finding the right people with the knowledge and expertise to deliver this information was acknowledged by professionals, but the need was nonetheless stressed.

A further need, which was currently not being adequately met, was that of genetic counselling for both parents and their children. Denial by parents of their daughter’s sexuality often led to young
women with disabilities experiencing problems and frustrations after leaving school. The representative of a bureau serving people with disabilities, herself physically disabled, remarked: "Girls need to be taught the difference between people who like them for themselves and those who like them because they are in a wheelchair. They don't want to discuss problems with non-disabled people. At age 15 or 16 they don't know their capabilities, they need to know the mechanics of sex and nobody can, or wants to, answer questions. They are therefore vulnerable to accepting the first person who comes along." She went on to say: "Disabled girls need to be made aware that pressures outside school will be worse because you are a woman and disabled."

The need to encourage risk-taking and to expand the experiences of young women was explained by the staff of a clinic for adolescents:

"If you are encouraged to be a child and not encouraged to mature, get up, seek direction for yourself, you miss out on the ability to make long-term decisions and plan for the future. The enormous loss of self-esteem that seems to go with disability is an extremely difficult thing to overcome. Those girls who have never had any other experience are the ones who really do get caught in not being able to, or not having the power, to make decisions for themselves. Lack of self-esteem manifests itself in withdrawal more than anything else - not wanting to leave the house, not wanting to be away from the family, afraid to take risks. If all the time you hear "no you don't have to", or "we'll do it for you" even though you may want to have a go, the risk is too great."

The pressures of the modern world and the need for counselling were mentioned by a group of professionals from an adult training centre:

"A lot of girls know very little about their disability and its implications, and it's usually an area that no one tackles. Young people are in a stress situation because of the changes and pressures in the world. Couple those shocks that we all share with the shock of taking a disability out to be stared at, at that most vulnerable age of adolescence or early adulthood, especially young women... we're in a culture that's so image-oriented and you have to cope with a very poor self-image. You feel you're totally inadequate. Counselling is never mentioned as an option in school - we aren't giving them books on popular psychology and yet most of us at some stage during our growing up have been able to tap into those resources, and the needs are the same."

The need for counsellors in schools is echoed by a doctor who has contact with many young women with hearing impairment:

"The ideal would be to have counsellors in schools. Girls need social competence, physical contact is important - affection and sex are perceived as the same. Girls are more vulnerable to sexual abuse and can't tell anyone. There is a high incidence of sexual abuse among deaf adolescents. They aren't taught social behaviours, inappropriate behaviour is not stopped when young, and excuses are made because they are deaf. They have a desperate need for people to love them and like them. Sexual knowledge is very limited and naive and girls do not have a good self-concept about their bodies. Often adolescents become aggressive because of communication breakdown or because they can't argue."

Representatives from a government authority involved in services for people with intellectual disabilities agreed that young women need to be taught appropriate behaviour:

"Touching by girls is a problem. It isn't an issue at a young age when it is appropriate, but with age close physical contact takes on a different meaning."
Sexual exploitation is a most serious concern with nonverbal girls, because of inability to report.

Referring to young women with an intellectual disability, they went on to say:

"Management of menstruation and education on self-care is a major requirement for girls with disability... parent education is as important as client education. The problem of sterilization without consent still looms large. There are more obese females than males, possibly due to less physical activity... and the general appearance of females is poor. There is little use of make-up. Sometimes parents may discourage them from looking good or more attractive. Girls learn attitudes from parents that marriage is not for them, so there is no need to look pretty. When make-up and hair styles are good, self-esteem grows."

A woman with a great deal of experience in counselling young women with disabilities talked at length of her experiences. She said that she had seen young disabled girls come in with medical problems, but in reality these were social or emotional problems relating to sexual and other relationships. She saw the results of a school system that didn't address needs, and considered that some problems could be alleviated if personal development education began at primary level and continued throughout schooling. With regard to young women with an intellectual disability, she says:

"They had no perception of their role, they went straight from school to [work preparation centre] and hadn't developed the role of being female. They didn't see any future for themselves except staying home. Parents often didn't see the point of preparing them for life and they were kept as a perpetual child. Parents tried to keep girls, not so much boys, in special schools, even when this was age inappropriate. The expectations of parents was that there would always be someone to look after girls, unlike the boys. At [the workshop] young women had a sudden awareness of the opposite sex - needs were exclusively sexual, and relationships were a large area of concern. Frustrations at never being allowed to take risks resulted in acting out behaviour. Trying to undo this was difficult."

With regard to young women with visual or hearing impairment, the same expert said that any girl with impairment is susceptible to abuse. They haven't learnt to say "no", haven't learnt to take risks, and are used to adult supervision. In addition, there are not many avenues available to them if they want to tell about abuse. She drew attention to some of the problems Aboriginal girls experienced. At 15 or 16 they are considered to be an adult in the Aboriginal culture, but she had seen many who had been sexually assaulted and who were only identified as having a sensory impairment when they went for pregnancy tests. With visually impaired girls it had proved difficult to teach them about menstruation.

Young women with physical disabilities had come to this professional for advice and specific information about sexuality.

"I ran into problems with parents, who saw their daughters as asexual... another time I couldn't get permission from houseparents to give a girl explicit information on masturbation (it was OK to tell the boys, but not the girls). They miss out on relationships, people are often reluctant to touch a disabled person, pat them on the head, and it's difficult to hug a girl in a wheelchair. They miss out on this important area. They also need teaching about appropriate touching by a stranger, and there is a need to get parents to look at their daughter's behaviour, not treat her as a child."

Finally, it was remarked that: "it is annoying that intellectual gaps are recognised in schools, but gaps in
emotional and relationship skills aren't. Young girls may have an impairment, but their hormones still work appropriate to their age."

The area of sexuality and personal growth and development is thus seen by professionals who are in touch with many young women with disabilities as one of immense importance. The need for counselling, and perhaps more importantly, a recognition of people with disabilities as sexual beings with the same needs and urges as the non-disabled community, is increasingly being focussed on by organisations who provide services for people with disabilities.

Perceptions of Community Attitudes

Much of a healthy self-esteem is based upon one's perception of how others see you, and in the case of the young women interviewed they were very aware of reactions to their disability. Staring and the feeling of being watched was the most common response to a query about how people in general treated them, coupled with a sense of gratitude in cases where people were polite or helpful. Happily, not all experiences are negative.

A succinct summary of other peoples' attitudes was offered by a 14 year old visually impaired girl:

"30-40% are pretty good; 20% are over helpful; 10% cope; 10% treat us like freaks. My favourite group are children of 3-4 years, they don't worry about what they say."

Further comments are as follows:

"They look at you, sometimes you feel like saying "why are you staring?" Most are OK, some short-change you." (VI-14)

"Last year I had a problem, I chose a carriage every day with my friend and one day there were two men teasing me about my eyes, saying nasty things and laughing - we caught a different carriage next day." (VI-17)

"I haven't really had any trouble at all - a Council bus driver actually waited for us to load my chair." (PD-16)

"I've never been spoken to rudely, or as if I didn't exist." (PD-17)

"In the shops some are really nice, others don't give a damn, don't go out of their way. Some people ignore you even when you keep saying excuse me." (PD-17)

"Sometimes I'm quiet in the bus. I don't talk to anyone. Some people see that I'm deaf. They don't say anything, they just walk past." (HI-13)

"People stare at me in shops. Some people are rude and make fun of my signing. In buses they stare. Sometimes people are OK." (HI-14)

"Some people are gentle with me, afraid of hurting me, I don't like that. My friends in the Venturers treat me as other people, it's good, it just makes me feel I can look down my nose if people tease me." (HI-17)

"Sometimes people change when I say I am deaf. It makes me frustrated because they were talking normally to me before. It puts me off talking to people. I'm not outgoing and am frightened to talk to people because I may miss something and they think I am stupid. It's hard to mix with hearing people." (HI-17)

"If you're polite to them, they're polite to you. Some parents pull children away, kids ask you questions, it's embarrassing but it doesn't worry me. That's why they have a lot of problems when they are older - it's important that younger people should be taught about disability." (PD-15)
"Some good, some treat you like a piece of dirt. You ignore them ... or you try." (PD-15)

"When I joined Brownies, the parents complained." (PD-16)

"People shouldn't pick on us, people like me. I hate it when people stare." (ID-14)

The sort of statements made by younger girls are mirrored by the young women who have now left school, although they have noticed an improvement as a result of the International Year of the Disabled:

"A few years ago people would notice me, but not now, except for the kids. The community is more aware, a lot of people are willing to help and I think this is good." (PD-21)

"Before IYDP people would treat you like a zombie. People would see you and cross the street. Some people stare, some talk to you, offer money to me or Mum, but it's better now. My reaction was cranky and defensive and probably reinforced their ideas about disabled persons." (PD-23)

"People ask you if you want help. Some people are bossy and take over, especially older people." (VI-18)

"Sometimes people are polite, but there are times when they are not, and this is when they don't take any notice of you." (ID-19)

"They feel sorry. No one has been rude to me." (HI-18)

CONCLUSIONS

From the statements made by the young women it is apparent that many of the experiences of non-disabled girls are denied or unavailable to girls with disabilities. The freedom to go out with friends on a regular basis, or meet with friends after school, on weekends or during holidays is not there for many young women, for a variety of reasons. The loneliness and isolation resulting from not having close relationships with peers and having to work especially hard to gain and maintain friendships, and their dismissal of the idea of a boyfriend until "later" all indicate a different adolescent experience for many young women with disabilities. As will be seen in the next chapter, for many young women friendships are replaced by putting in extra effort at school in the hope that a good job on leaving school will lead to better social contacts.

It is evident that despite caring families, supportive friendships and some changes in community attitudes towards disability, the personal lives of girls and women with disabilities require great fortitude and courage. Although the majority insist that they are "normal" and that disability (apart from some physical difficulties) does not influence their lives to any large degree, it is evident that their experiences in every-day relationships are not 'normal'. The moves towards independence, perhaps accompanied by a degree of rebelliousness, that may be regarded as normal in adolescence, are not present in most of the young women we interviewed. Instead, there is a strong desire for independence in the sense of overcoming disability, of acting and looking non-disabled, of 'fitting in' with the non-disabled population. Their frustrations with the actions of people who deny them this independence are apparent, and, as will be seen in the following chapter which examines their educational experiences, these frustrations are also, for many, present in school.

There are, however, a number of positive aspects to the lives of the young women. They do, for the most part, have very good relationships with their families, and families offer support, companionship and solace to the extent that gaps in experiences may not be strongly perceived until later years. For the most part they were a joy to talk to - honest, cheerful, personable young women, whose lives are affected more by external factors than by their particular disability.
PERSONAL LIVES - POSSIBLE AREAS OF NEED

The issues arising in this chapter on the personal lives of young women with disabilities have been discussed in the concluding statements above. The findings indicate that the following areas of need may be present for all, or many, young women. Again, however, attention is drawn to the individual nature of each girl's needs.

* The need to encourage the building of peer friendships, particularly in integrated school settings.

* The need to promote the extension of friendships outside school hours.

* The need to cultivate outside interests, e.g. involvement in sporting or recreational groups, so that friendships can be fostered.

* In some instances it may be desirable to create opportunities for groups of disabled youngsters to meet each other in a recreational setting to make friends, share experiences, and to discuss problems.

* Some young women, e.g. the deaf, may require additional assistance with developing communication and social skills.

* There is a need to address transport difficulties in order to maximise the development of friendships.

* Teachers and parents need to be aware that because of a lack of friendships, some young women appear to use school work as a substitute.

* Our findings indicated that a need exists for teaching young women with disabilities about boy/girl friendships and dating. This may overcome some of the difficulties which many young women appear to be experiencing with these adolescent relationships.

* Programs to foster confidence, assurance and positive self-esteem are needed for most girls.

* As a precursor to healthy personal growth and development, parents, caregivers, and professionals need to acknowledge that young women with disabilities are sexual beings, and have sexual needs. This means that they must be regarded as young adults, and not children.

* The need to encourage risk-taking and expand the experiences of young women with disabilities has been mentioned by numerous professionals. However, there is a need to ensure that parents or guardians feel that these risks and experiences are appropriate.

* There is a need for counselling and teaching in human relations and specific sex education which relates to the areas of disability.

* In the teaching of sex education, individual needs must be taken into account, for example, interpreters for deaf girls, alternatives to visual presentation for girls with visual disabilities.
* Where appropriate, access to genetic counselling should be provided.

* There is a need for the young women to have an accurate understanding of the nature of their disability and its implications for their future, for example employment, marriage, children, life expectancy.

* There is a strong indication that young women would benefit from the provision of strategies for coping with teasing, name-calling, staring and the like. Self-assertiveness training is seen as particularly useful in this regard.

* The need to provide positive role-models from the disabled community for young women with disabilities has been recognised as being especially valuable by a number of professionals. For example, women with disabilities who are employed, married, mothers, living independently etc.
INTRODUCTION

A major portion of the adolescent's time, at least until legal school leaving age, and more frequently nowadays well beyond, is spent in school. Due to the considerable time spent in this setting, the school as an arena for socialisation is an important one.

The school is one of the major socializing institutions ... and in the past has perpetuated traditional sex role stereotypes ... Although in recent years advances towards ensuring educational equity for boys and girls have been made, total equity remains a goal rather than a reality. (Kratovil & Bailey, 1986, p. 254)

While the types of textbooks, nature of academic tasks and learning experiences, teacher's attitudes, indeed the very school system itself may contribute to perpetuating particular cultural expectations for females, it appears that the adolescent girl with a disability may also experience additional expectations, or lack of them, which relate directly to her disability.

Little attention ... has been given to the double jeopardy that confronts disabled students when bias and stereotyping based on sex and on disabling condition interact .... Consequently disabled students may face unacknowledged barriers to equitable education - barriers that are the product of stereotyping and bias based both on sex and on disabling condition. (Kratovil & Bailey, 1986, p. 250)

The questions asked of the young women which related to their school experiences were designed to examine the gender issues identified in the National Policy for the Education of Girls in Australian Schools. These include: the narrowing of career options by girls as a result of dropping 'hard' subjects in Grade 10; harassment and bullying; the need to incorporate more specific information on post-school options within the curriculum at an earlier age than is presently the case; under-participation in sport and recreation; poor physical conditions in school, particularly toilets; and the differential treatment of boys and girls in classrooms. We did not seek to ascertain whether such issues existed in every case, but rather framed our questions around them in such a way as to see whether disability further compounded the sort of disadvantages which are reportedly being experienced by many young women in Australian schools. Our discussions with young women were also designed to discover how well they were coping with school. The retrospective statements of young women with physical or sensory disabilities who had left school in recent years were particularly valuable in this context because they were able to be more objective about their experiences and also relate them to their current position.

Discussions with the young women revolved around curriculum choices, and which subjects they particularly enjoyed or found difficult; their school achievement; their career aspirations once they

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1 Some gender issues (e.g. the dropping of 'hard' options in Grade 10), did not apply to the young women with an intellectual disability. Many of these young women also found some of the questions, for example, identifying problems, difficult to answer. While the young women who had left school in recent years remembered specific incidents, teachers, or subjects with antipathy or pleasure, it proved difficult to gain an overall impression about how well their educational needs had been met. We had, therefore, to rely on data provided by parents, teachers and other professionals, and on material found in the literature. Where possible we have, however, included the statements made by young women with an intellectual disability.
left school and the forms of career guidance they had received. We asked about the type of work experience, if any, that they had undertaken or would like to undertake. Questions were also asked about teasing and name-calling at school and how the young women coped with this. We also asked them to identify some good things about school, and some of the things that they found a problem or did not like about school. In addition we asked the young women to briefly describe their experiences at Primary School and, if relevant, to compare their experiences at a Special School with those in an integrated setting. Finally, questions concerning their opportunities for sport and recreation within the school setting were also asked, and any difficulties which were being experienced relating to the physical environment at school were explored.

CURRICULUM AND ACADEMIC ACHIEVEMENTS

That gender differences exist when choices about areas of study are made is apparent in the findings of a number of studies. The occurrence of sex differences has to do not only with ability and achievement in the curriculum areas, but also reflect the attitudes that males and females learn regarding different subjects. The likes and dislikes for particular subjects found in this study were not unlike those reported for girls generally.

In common with findings relating to non-disabled girls the young women with physical and sensory disabilities we spoke to overwhelmingly said they disliked maths. There were few exceptions. Science was the next most disliked subject. Many, but not all, the young women who continued with maths and science in the higher grades were taking them in the form of Maths and Society, Social Maths, Multi-Strand Science and so forth, and they still said that these were the most difficult or least favourite subject. English, Art, Home Science, Typing, and other traditionally ‘female’ subjects were invariably quoted as favourite choices. In the case of young women who were pursuing higher maths and science subjects (and these were rare), most of their career aspirations were either undefined or related to traditional and stereotypical employment, e.g. social worker, librarian, teacher, and they still did not list maths or science as ‘favourite’ subjects. Young women with an intellectual disability did not appear to share the aversion to maths displayed by other girls, but seemed to find English, spelling and reading more difficult. However, abstract maths played no part in their curriculum.

As far as school achievement was concerned, young women with physical and sensory disabilities described their performance as “above average” to “below average”. Most commented that their academic performance was in the “pass”, “consistent”, and “average” range. In order to verify some of these replies we asked teachers in Queensland schools who had participated in the investigation to indicate how well each young woman was doing, and in general we found that teachers’ and students’ views were compatible. If anything, some students slightly overestimated how well they were doing academically. Self-perceptions of achievement by the young women were not therefore on the whole, unrealistic.

CAREER ASPIRATIONS

One of the most important developmental tasks of the adolescent period is the acquisition of self esteem and status in the community. One way in which individuals acquire this status is through finding employment. As well as a means of earning a living, work often provides an identity and a sense of accomplishment for young people, therefore having a vocational objective is an important foreunner to career decision-making. The importance of education is increasingly being stressed by both parents and teachers as the need for more advanced education becomes apparent with the growth of technology in the workplace.

...there is a need to evaluate the balance between an academically based curriculum which may facilitate mainstreaming, and a vocational, living skills curriculum concerned more with post-school adjustment. (Unit for Rehabilitation Studies, Macquarie University, 1987, p.45)

We asked young women about how important they considered school to be. Most replied that they considered it to be very important, and when asked why, the general response was “to help me get
The young women were also asked about the careers or jobs that they hope to have when they leave school. In the same way as their non-disabled peers, most of the young women had thought about what they would aspire to. In the case of girls who answered “I don’t know” to the question relating to career aspirations, no age or disability affects were noted. Most of the young women said that they had decided for themselves what sort of career they would like to pursue, and dreams or ambitions ranged from working with animals or shop assistant, to astronomer or engineer. Young women with an intellectual disability generally related their answers regarding work aspirations to either work experience they had already had, or to jobs held by friends or relatives. In the case of women with an intellectual disability who had left school, their job aspirations were still unclear. Women with physical or sensory disabilities were often frustrated or confused about the sort of job to which they could aspire.

An analysis of career aspirations was undertaken, looking at each group of young women by type of disability. In addition, we examined the students’ current subjects in light of their career choice. The subjects that they had chosen to study at school in most cases were compatible with aspirations. Overall the aspirations were stereotypical and low, and few had long term career goals. Some of the younger girls made obviously inappropriate vocational choices which mirror those of other girls their age but which they would be unlikely to be able to pursue. For example, a 12 year old girl with mild hearing impairment and a spinal disorder wanted to be an air hostess, as did a partially sighted 14 year old. A 14 year old girl with spina bifida said she would like to be a nurse, and a 14 year old girl with an intellectual disability wanted to be a zookeeper. A 16 year old hearing impaired girl said she would really like to be a reporter or journalist, but admitted that this may not be possible because she was deaf.

Young women with physical disabilities tended to see clerical or office jobs as the most appropriate occupations for themselves. Teaching or work in the area of social welfare were the next most popular choices, followed by library work, work with children, and fashion design. Only one young woman, a 12 year old with cerebral palsy, said that she would probably go to university - she anticipated studying literature and computing. Four young women said that they would study at a Technical College when they left school (two would take commercial courses, one “Sports Science” and the other would take a diploma in library technology). In general, the younger the girl, the more ambitious the choice. By the time young women with physical disabilities had reached the age of 15 or over, the career choices had narrowed to office work or a job in the area of ‘social work’.

The ambitions of young women with hearing impairment were a little more varied. Several said that they would like to go to University, while others said they would probably go to TAFE. A 13 year old girl said that she would like to attend Gallaudet University in the United States (a university for hearing impaired students), but she did not know what subjects she would like to study there. In common with young women with physical disabilities, the aspirations of girls with hearing impairment included clerical/secretarial work, social work, teaching and fashion design. A popular wish was to be a chef. Choices relating to photography, art, acting, graphics, screen printing, hairdressing and computers were also mentioned.

Young women with visual impairments also mentioned clerical, teaching, and social work aspirations. Working with young children was a popular choice, and one young woman who is totally blind said that she wanted to teach sighted children, and expressed her determination to travel around Australia until she found an Education Department which would allow her to do this.

When young women with intellectual disabilities who were still at school were asked about the jobs they would like to do when they left, the most popular choice related to work experience they had had at school. Seven young women said they would like to look after children, and five wanted to be nurse’s aides or work in nursing homes. Four young women wanted to work with animals (one said she would like to be a zookeeper, and another a “vet”). Three young women indicated they would like to work in a shop, another three suggested a hairdressers, and a further three said they would like to be a cook or chef. Only two young women said they would like to work in a factory,
and only one suggested a sheltered workshop. The remainder of young women with intellectual disabilities mentioned panel beating, photography, work in a library, work as a mechanic, skating instructor, and, finally, a drummer in a band. While in theory there may be nothing to prevent these young women from achieving these aims, most of the women with an intellectual disability whose post-school lives we were able to ask about were working in sheltered workshops and factories, were attending work preparation centres or were currently unemployed.

For the most part the young women with physical and sensory disabilities had made their own decisions about career choice. If careers staff or guidance officers in school were consulted the young women appeared to have received little in the way of useful assistance. Parents, in general, indicated that they were willing to accept their daughters' decision. In some cases career officers, teachers or parents dismissed the aspirations of the young women on the grounds of their disability, but many times no alternative career suggestions were made. Teachers, overall, played a minor role in assisting the young women we interviewed to make up their minds about post-school options. It may be argued that limited knowledge of career choices and conservative or stereotyped advice from educationalists and families has led, overall, to a narrow range of options being considered by the young women interviewed. Furthermore, while there was a match between the types of subjects undertaken by the pupils and their possible careers, this was either a reflection of the match between the stereotyped subjects and career choices, or coincidence rather than as a result of deliberate and careful planning and specialized counselling that took their needs and occupational possibilities into account.

Typical statements regarding the types of careers girls wanted and how they arrived at their choices are as follows:

"Work in a laundry, I haven't really thought of anything else." (HI-16 - this young woman has had one week's work experience in a laundry)

"I want to be a hairdresser - people do raise problems but I'll cope with it I hope." (HI-16 - this young woman has had one week's work experience in a hairdressers)

"The only thing I ever discussed with the Guidance Officer was my final subjects and she wanted me to do Chemistry. I decided I wouldn't discuss anything else with her, you know how they've been pushing for girls to do Maths and Science - my friends resisted it but some of the other kids did as they were told and they are upset now because they didn't have to do [maths and science] to do what they want." (PD-16 - this young woman would like to be a social worker)

One school did try to broaden the horizons of grade 10 students by asking older students to talk to them about maths and science. The plan to encourage younger students to continue these subjects evidently backfired, at least in the case of one student:

"Older students have advised Year 10 not to take maths and science - if you haven't got the brain to do it, they wouldn't advise it." (PD-15 - this young woman wants to be a fashion designer, or an oceanographer "because I love whales and fish.")

A seventeen year old hearing impaired student, who would like to study fashion design feels her friends are not receiving the help they need:

"I'd like to see more positions available for deaf people, not in noisy areas. Most of my hearing impaired friends need more help than what they are getting now. Before they leave school they need to be more aware of what it's like in a working environment. Many need academic help, they can't be bothered getting it because they have so many problems they wouldn't get anywhere. They do easy subjects because they can't get a lot of help from teachers." (HI-17)
The role of the family is also evident in assisting with career decision-making:

"I think I'll ask Mum." (HI-16 - this young woman would like to do "screen printing or photography.")

"If I can't get a job I'll ask my family to help." (HI-17)

"Dad says I can do what I like. I don't know what Mum thinks. Teachers want everyone to be successful." (VI-14 - this young woman indicated that she would like to work with horses.)

But some young women are just plain confused:

"I've looked at career books with the guidance officer - there are so many, I'll go again." (PD-15)

Some young women have already experienced difficulties:

"I might have difficulty getting full-time work. I tried for part-time at [a supermarket], but they said no." (HI-17 - this young woman says she hopes to stay at school until Year 12, but will leave if it proves too difficult for her)

Similarly when we asked the young women who had left school how they had decided what to do, a lack of guidance was evident:

"I was channelled by the Spina Bifida Association, and Mum and Dad a bit too before they realised better, to take up a nice easy career - not a lot of thought is given to spina bifida girls to do much, guys are encouraged to do tertiary education, girls aren't." (PD-22 - this young woman is currently studying journalism at university)

"The guidance officer was no good, CES were unhelpful and the Careers Reference Centre no good." (VI-23 - this young woman worked as a "tea-lady" for six years, and is currently unemployed)

Some women doubted their own abilities:

"A lot of that was my own initiative. In Grade 11 there was a careers officer, 800 kids and 1 person - I didn't like her and didn't go to her. I didn't know what to do in Grade 12, I wanted to do law but wasn't smart enough, a second choice was Arts." (VI-21 - this young woman is currently studying for her Diploma in Education, after completing an Arts degree)

"The Guidance Officer wanted me to do Psychology, but I didn't think I'd have the brains for that." (HI-23 - this young woman is currently studying for her Bachelor of Social Work)

Other young women fought to prove that they "do have brains":

"I'm sort of average and people didn't think it was a wonderful idea for me to go to university, they would have preferred that I'd worked in an office or on a switchboard, but because I'm a very stubborn and determined ... you have to have some fight in you, otherwise people could walk all over you." (VI-21 - this young woman is studying Psychology at university).

WORK EXPERIENCE

Most schools today maintain that students should be aware of the wide variety of careers available, the types of tasks they involve, the requirements for entering them, and the opportunities they offer. Typically, this awareness and exploration occurs through participation by the students in actual work experience.
Questions relating to work experience undertaken by young women revealed that this area, which is seen as very important by most of those interviewed, was also stereotyped. Typical settings chosen for work experience were retirement homes, offices, kindergartens, hairdressers, and libraries. Some schools were more creative than others in seeking out work experience for young women, but a general method of choosing work experience appears to be ticking choices from a long list provided by a careers teacher with little in the way of explanation or exploration of opportunities. Thus the basic themes outlined in the section on career aspirations were still followed. Work experience was also often little more than observation. Although many young women reported that they enjoyed work experience, and that people were "kind" to them, few of them had the chance to participate in meaningful work or, if they did, it was often at a menial level. Many girls decided on post-school options following job experience, some merely found the experience confusing. As a 15 year old visually impaired student put it "you're only fifteen and you have to plan your life." Typically, work experience did not commence until Year 10 when subject choices were also being decided upon but linking these two areas did not always seem to occur. Difficulties faced by schools in placing young people with disabilities in work experience were remarked upon by many young women, and for some, work experience has not been possible for this reason.

A further source of work experience for many young people lies with part-time jobs. Several young women we spoke with had tried to find this kind of job, but only three had been successful. It appears, therefore, that this type of work experience, as well as the financial rewards that accompany it, is denied to girls who have disabilities.

Some statements describing work experience are as follows:

"In my old school library - it was really good, I knew all the kids. I did cataloguing, computer work, shelving and videoing." (PD-16)

"Clerical work for a week at a cab company - it was a bit boring going through the dockets, I did another girl's work while she went into town. I wouldn't want to do that sort of work." (PD-16)

"I'm interested in child care, but the careers worker told me I'm not suitable. This year I was supposed to go to a preschool in February, but the Director said I need life insurance, so it got stuffed up. I think it was just an excuse." (PD-16)

A young woman who says she would like to work with animals or do mechanics worked for a veterinary surgeon - "it was really good, but I'd never get the marks." She is currently training at a fast food outlet for a part-time job. (VI-16)

An intellectually disabled woman of 17 says that "work experience is more fun than school." She has worked at a fast food outlet, cleaning tables and putting margarine in containers, and in a flower shop putting flowers in buckets, sweeping and taking messages - "it was fun", and in a kindergarten where she "minded children, gave them something to eat and drink and played games with them." This was her favourite work experience.

It seems likely that while special schools may arrange a substantial number of work experience placements, and provide considerable support while students are in the field, regular schools typically offer only a single placement. This may be totally inadequate for young women with disabilities, who may be deprived of knowledge of the world of work by both gender and disability.

The whole area of career guidance, subject choices and work experience can thus be seen to be very conservative, traditional and stereotypical in the case of the young women we spoke to. It is interesting to note that many of the women in their twenties whom we interviewed, who responded to calls for assistance from the project team, or who were referred to us by agencies, were high achievers who had entered university against the advice of school staff and, in some cases, parents.
HARASSMENT AT SCHOOL

One of the widespread beliefs about integration is that closer contact between the disabled and non-disabled, especially in the classroom, will dispel negative attitudes and help create positive attitudes and acceptance of the disabled. We were therefore interested in exploring the social acceptance of these young women with disabilities.

Late primary school years and the first two or three years at high school appear to be the hardest for girls with disabilities in terms of being teased, called names, or bullied. Boys appear to be the worst offenders in primary school and during later years at school. Non-disabled girls in the 13 and 14 year age bracket were often said to be “catty” or “bitchy”. Although support from parents was reported, none of the girls we spoke with had been taught techniques for coping with teasing, and they appeared to believe that putting up with it was part of life. Intervention by teachers was sometimes successful, if it was continuous, but at other times it merely increased the bullying behaviour of other students, or removed it from the school environment. It should be noted that not all non-disabled students act in this fashion towards their disabled peers, but rather small groups of students who perhaps have personal problems of their own. However, there were very few girls who did not report some degree of harassment by other students, and in some cases (particularly in the case of hearing impaired girls) this harassment came from boys with the same disability. Harassment of this nature does not appear to have been present in Special Schools, perhaps because teachers are more aware of the problem, or perhaps because in general disabled students do not indulge in the type of teasing reported.

Statements made by young women regarding teasing, bullying and name-calling are as follows:

“Sometimes my hearing friends see I’m upset I sit alone because someone has been teasing me. They understand me and say “what’s wrong?” (HI-16)

“Girls and boys called me frog-legs but I learned to laugh with them. There is a bit of name-calling now but it doesn’t worry me because they are younger.” (PD-15)

“I was called ‘spastic’ in special school, I tried to ignore it.” (ID-14)

“Sometimes the girls in my tennis team give me looks and they turn away and whisper things to their friends. I just ignore them. I keep it to myself.” (ID-14)

“When I’m in normal class they tease me ‘cos when I read I stutter a lot. I laugh, smile or talk to someone else.” (ID-15)

“They tease me, call me ‘spas’ because I needed help” and “they think I’m being tough, but I’m not.” (ID-14)

Some young women indicated that teasing in primary school had been upsetting, while others referred to harassment in specific grades:

“I was bashed up in primary, mostly by boys, and called ‘spastic’. I used to get called ‘four-eyes’ and when I had braces ‘brace face’. They used to call me some rude words, I can’t say, they’re a bit disgusting. I felt like dying because I couldn’t take any more.” (PD-17)

“At primary people used to tease me, and call me googly eyes (I wore glasses then), it made me feel terrible. I used to come home and cry and say “why do I have to be different?” (VI-16)

“There was a bit of name-calling in Grade 8 - after a while you get used to it. Now and then you get a few comments from Grade 10’s but I don’t worry about it any more. Sometimes other people use the ramps when you’re trying to use them.” (PD-16)
"People call me bad names. I don’t like it. Sometimes the hearing people talk about me and my friend, they’re jealous ... others said we were lesbians. Hearing students thought all deaf girls lesbians ... I couldn’t stop them. It started in Grade 9." (HI-17)

"Students in Grade 8 weren’t talking to me, now they do. They hadn’t seen a disabled person before. I think they found it hard to cope - it took me a while to learn how to cope with them too. I used to come home really upset. There were a couple of girls who picked on me, used to push my chair fast, round corners. I told the principal and after that they called me a wimp. Now I just fix them myself. You have to fight your own battles, turn the other cheek, walk away, keep away from them. Sooner or later they give up.” (PD-15)

"I’ve got heaps of friends. If called names I tell them to go away, girls and boys. It’s usually Grade 10 that do it - bastard, bitch, crippled invalid - cripple is the worst.” (PD-15)

Boys who were rude or unpleasant were mentioned by many young women, particularly by those with a hearing impairment:

"Teasing sometimes makes me sad, but I ignore it. Kids do tease me, they frighten me. Sometimes they come up and say “boo” in my ear - mostly boys. In Grade 9 they slashed my bag. I was pushed by a boy. Lots of groups of kids tease me.” (PD-15)

"Some hearing people call me names. I tell them to stop but they keep on doing it. I ignore them. Sometimes I get angry. Boys tease my name.” (HI-14)

"Deaf boys are silly, not like hearing boys.” (HI-15)

"Hearing boys are rude to deaf girls, make fun of signing.” (HI-16)

"Deaf boys here think more about sex things and bad things.” (HI-16)

"Boys at school call me spastic or ‘spac’. I ignore them, if I cry they say it more. They're stupid for saying it.” (ID-15)

Physical harassment or bullying was not uncommon:

"Some students are really dumb, they stand in your way. The majority are nice.” (VI-14)

"Kids stand in your way or put their feet out to trip you up ... they call you names like ‘headbanger’ because blind kids run into poles ... boys are the worst, some girls are bad - boys get straight into name-calling, girls get on your nerves. Boys call you bitch, dog, moll - they’re easy to handle. It’s when they make remarks about eyesight it’s hard. It’s not easy to make friends, none of them want to make friends.” (VI-14)

"Tough girls threatened to bash us up (after school ... some students have a grudge against the Unit because we have specialised treatment. If only they knew, we have heaps more homework. Other kids in the school think we are good friends. Kids in this Unit have a label on them - deaffies - which used to worry me when guys in Grade 12 called me that - I’m not deaf. Last year it was mainly the guys, the girls would leave us out of things. Some of the girls do look deaf. Inside it really hurts.” (HI-17)

"I cry because I’m 12 and I’m gonna be 13 this year ‘cos children hate me, children hit me all the time.” (PD-12)

"At this school they make comments about the wheelchair and put their feet under the chair deliberately.” (PD-12)
Taking matters into their own hands as a way of dealing with harassment was seen as a solution by some young women, particularly where teachers had failed to prevent teasing:

"I had this guy who used to tease me. I whacked him and he stopped, we're good friends now. Teachers blow up kids about teasing but it doesn't make any difference. Some of the kids in my class tease. I've yelled or hit them. Girls don't tease me, some of the boys do. Call me hunchback, bitch. It's easy to make friends. It's also easy to lose friends." (PD-12)

Some young women found the transition from a special school into a regular school hard, both academically and from the point of view of friendships:

"When I was integrated in primary at first it was like I was a Martian from outer space, the crowds just stared at me." (PD-16)

"It's hard going from special to regular school. Sometimes hearing children ignore us and swear at us." (HI-16)

"I have deaf friends, others often ignore and leave me." (HI-16)

Because many of the girls we spoke to said that they ignored teasing and bullying, and that it didn't bother them unduly, we asked the same question of the older women who had left mainstream schools in recent years. Like the younger women they had experienced similar taunts, and their words illustrate how much worse the normal 'cut and thrust' of school life is for young women with disabilities.

"In Grade 8 and 9 some of the kids were real turkeys and at one stage in Grade 9 I felt like leaving school. I didn't feel kids liked me - my mother said you just have to stick through it and I'm glad now I did. Kids asked my friend (a disabled girl) why she couldn't speak properly. Debbie and I didn't discuss it, just let it build up inside each other. In Grade 10 everybody was really nice, but the disability came first, some of the boys don't talk to you because they don't want to be seen with someone in a wheelchair." (Physically disabled woman)

"At secondary school friends from primary school decided they weren't going to speak to me any more, that's where the problems started, I really hit the books then. The other students alienated themselves too, I let it go, when I told a teacher about it she treated it very lightly, I don't know if they believed me. The principal was hopeless, poor discipline, I was called a goody goody for not disrupting classes, smoking, drinking. My marks went down, I couldn't learn in that environment. I made a point of proving myself to other kids. I was very self-conscious. I used to come home depressed and crying because of what went on, I used to spend lunch hours helping the librarian which didn't help with the other kids. I felt very isolated." (Physically disabled woman)

"In Grade 8 other students were very sceptical because I was getting special consideration - they used to put rubbish bins in front of me, or tie string, to see how much I could see. At the time I felt like a freak - what's the point, God what is wrong with me? We had a video at school about the blind, I felt embarrassed - it pointed out I was different. After that everyone felt they had to help this disabled person in the school, but when I really needed help it wasn't there and to ask for help seemed like a loss of dignity - I feared being smothered." (Visually impaired woman)

"I was teased heaps the first few years (at primary school) about everything, but not about my crutches. Kids can be real brats. I'd come home and cry. I didn't want to go back to school because of the ringleader." (Physically disabled woman)
"The other kids teased me a bit, especially the younger kids because they thought I was an easy target. The boys would try and bash me up."
(Physically disabled woman of her years in primary school)

Again, the transition from special to regular school was mentioned by some of the older women:

"I was very lonely. I'd crawl into the library at lunchtime, others left me alone. There were lots of fights. I was called 'vegie' by one kid." (Physically disabled woman)

"Kids were rude at regular school, I never felt left out at special school!" (Physically disabled woman)

The above comments by young women still in the school system and those who have left it in recent years illustrate the battering that girls' self-esteem and confidence are subjected to at school. Not all girls admitted to being teased or bullied, and most of the young women said they did have a friend or group of friends who accepted them. Nonetheless, most appeared to have nobody to whom they could turn to discuss what was happening to them and the feeling of isolation that this induced is clear. Although parents comfort their daughters, or perhaps offer suggestions as to how they could cope with harassment, the solution rests with the individual school at both primary and secondary level, and with the teachers themselves. As will be seen in the following section, there are individual teachers who are sensitive to the needs of children with disabilities. There are also individual teachers who can be as cruel or insensitive as some of their students, and who may give cues to other students in the school as to how their disabled peers may be treated.

POSITIVE ASPECTS OF SCHOOL

When we asked young women to tell us some good things about their education, and some of things they did not like, the replies ranged between "all the kids are good, everyone is friendly" to "I can't think of any good things". In the following sections we let the young women tell their own story about school, and how it is for them. As will be seen, some of the language used in their comments reveals feelings of insecurity or diffidence about their place in the school, or the role of the Unit that they belong to.

Helpful or understanding teachers, and the benefits of special units, were specifically mentioned by young women as being a good thing about their school:

"Excellent, teachers understand, students are OK, everybody is generally caring, mature and adult about the Unit, which is good because it is their school." (VI-15)

"This school caters more for my needs. The teachers are good, young and easy to get on with." (PD-15)

"I'm pretty proud of the school, it has a generally good reputation. Teachers arrange transport and extra time." (PD-16)

"I feel great. I feel welcome. They help me understand lots of things. If I have any trouble they help me. Hearing friends help me, they know how I feel. I'm happy at school, but I have to study a bit harder." (HI-16)

"It's alright. I like the teachers the most - we can easily talk to them, the perfect part is teachers and students ... really good relationship." (HI-17)

"It's a good school. I'm lucky to come here, they've got a deaf Unit here, netball, bushdancing." (HI-14)

"I love [school], I used to cling to Mum because of my deafness. If I'd gone to a regular school without a Unit I'd probably have worked in a factory or a shop. It's been my main life for the last five years. I want to stay. I feel so
secure here. I hate anything to change - most deaf people are like that, they are set in their ways.” (HI-17)

“I'm doing something, I'm not at home getting bored, being with friends is good. Teachers are alright, I prefer the Unit because the teachers help you more. Regular teachers give me special attention, speak loud, come over and explain things, show me what to do.” (HI-17)

For a number of young women being treated the same as other students, or just feeling ‘normal’, was a positive aspect of their education:

“It was a good learning experience for me. I was glad to be in a proper school, I thought now I might get somewhere. A lot of people push my wheelchair, it's really good, I really like it, a lot of people offer, even some of the younger kids I don't know, I think it's wonderful.” (PD-15)

“Teachers are good, they don’t treat you differently to other students.” (PD-group discussion -13 to 16)

“Some people understand and treat me like nothing is wrong. People help me upstairs if I fall over.” (PD-16)

“It's lovely. We have horses, pets and all that. It's just like a normal high school. Everything is good. I'm happy here.” (PD/Mild ID-14 - this young woman is at a private school for mildly intellectually disabled students)

There is a sense of relief in the words of two young women who had just started at a new school:

“It's a Christian high school, so everybody is really, really friendly. It's heaps easier to get around and not so tiring. I'm not hassled out by the guys. It's a much more peaceful atmosphere. The girls stay in line because the guys are around. They watch out for me over there.” (PD-17)

“There isn't a big emphasis on sport, and it's not all eye/hand coordination. The teachers are more understanding and I have lots more friends. No one teases me anymore, everyone is more understanding. I get a lot more help from my friends. There's more variety in subjects.” (VI-16)

We asked the women who had left school what their good memories of school were. They often referred to the special assistance they had received, or particularly good teachers:

“In Year 2, I switched over fully to a normal school, and I've never looked back since. I liked being at a normal school. We had a visiting teacher who came over three times a term for one period per time who would check my hearing aid and she would talk with my teacher to see if I had any problems, and generally sometimes improve my speech.” (Hearing impaired woman)

“They would encourage me to try new things and even if it was difficult they let me struggle until I achieved it.” (Physically disabled woman who attended a special school)

“I went up there for classes and options ... a lot of the people that do go up there go for options only, but I went for both classes and options and I learnt a bit more that I did when I was in primary school. I really enjoyed going there, the kids were quite helpful after a time, they got used to having us there and I think they enjoyed having us there.” (Physically disabled woman who went to local High School from her residence)

“Teachers made sure I had the right notes and didn't ask me to read aloud, gave me extra time, punished me when I needed it and encouraged me to develop oral skills. Some took a personal interest, motherly, poor little blind girl away from home. Two visiting teachers were fantastic, they were good, offered ‘mother’
type advice.” (Visually impaired woman who went to a private girls boarding school)

“I started with everyone else from the beginning, therefore people from my school always knew me. The principal changed all my classes to be downstairs. Everyone started to look for me. No one said you can’t do this because you’re disabled. I wasn’t labelled. There was another girl with spina bifida.” (Physically disabled woman who attended a girls high school)

“I achieved a lot because teachers weren’t connected to any disability organisation and could use more of their own creativity in explaining things. I was treated like any other student.” (Visually impaired woman who went from a special school to a regular school with a Unit)

“One teacher was good, she helped me in lunchtime.” (Visually impaired woman who went to regular school)

“The camps were good, doing something normal just like every other kid where you could get away from your parents and do something on your own.” (Physically disabled woman who went to a special school)

“I liked the work. I didn’t like getting up and going to school, but once I was there I enjoyed doing the work and different subjects, and learning really. Teachers were really helpful; I was the only disabled person in the school, it was hard but they helped me. I liked it there, more subjects, more work. Teachers were really supportive and helpful.” (Physically disabled woman who attended a regular high school after going to a special primary school)

“I liked the teachers, they were nice teachers. I enjoyed the subjects, but the work was too easy and I didn’t progress past a certain level. I really liked my Art teacher because she was always a very funny person, caring, very helpful and understanding. [High School] was a lot of fun after [Primary]. In the first year I had a very nice male teacher who was also my music teacher - he was very understanding and always gave me a lot of attention and helped me out with my schoolwork. That year I felt I got a long way with my schoolwork.” (Physically disabled woman who attended special schools)

“I enjoyed the last two years, I felt like I was doing something. There was a lot of discipline, I didn’t like it but it was good for me. Most of the teachers would check up to see that I got everything, one teacher used to stay back after school to help me. The school didn’t make a big thing of my disability, they picked up on it, phoned the Epilepsy Association to get more information and then tried to make it easier for me. I wasn’t the only one, so the teachers were used to disabled kids and didn’t see them as different.” (Physically disabled woman who attended a Catholic girls school)

“I enjoyed reading and writing. I liked the teachers.” (ID-19)

“I enjoyed swimming and cricket. I found the subjects easy and liked all the teachers, one teacher in particular was fun. I also enjoyed basketball. I liked cooking and liked playing pool.” (ID-17)

“I liked [special school] because it wasn’t too hard for me. I liked the whole place because we had great fun. They had games and that. We had lots of friends. Teachers were good friends to us, there was no fighting, we did as we were told.” (ID-17)
Moving from a special school into a regular school made no difference to some young women. For example, one woman said:

"I related well to the students at [special school] because they all had similar disabilities. The teachers were understanding because they knew the pressures the students were under because of their disabilities. I found the subjects easy. At [regular high school] they said you know what you can do for yourself. I received support from teachers regarding work problems and they installed a toilet and ramp for me. I enjoyed subjects to do with writing." (A physically disabled woman)

Other women highlighted the difference between special school and regular school:

"At [special school] classes were small with a high student/teacher ratio, there was a lot of 'hands on'. Books were brailled, a lot of tapes, access to information, flat surfaces and no obstacles. A setting where needs were taken into account. It was too sheltered. On one hand it was good to have no stairs, but on the other it didn't teach you to overcome them. At High School [a local co-ed] it was good socially and there were more vocational opportunities." She goes on to say, however, that: "It was difficult to adjust because services were not readily available and brailled books were slow to arrive. Storage space was a problem and so was moving rooms. I was required to study from tapes so still had to learn a specific skill. I had to use the blackboard, and had to ask teachers to verbalise written information. The brailler was noisy in class. I relied more heavily on textbooks." (A visually impaired woman)

NEGATIVE ASPECTS OF SCHOOL

Most of the young women we spoke with had little difficulty in detailing things they didn't like or found difficult about school. Nonetheless, they were overwhelmingly in favour of being "integrated" or "going to normal school like everyone else". However, while the girls favoured integration, some professionals had reservations about its success for all girls. In particular, a group of psychologists, psychiatrists and social workers from a clinic for adolescents cited a number of examples of the "failures of mainstreaming", and referred to incidences where students had been placed in non-mastery situations with resulting social and emotional problems. These professionals considered that the monitoring of students with disabilities in mainstream settings was inadequate.

The problems that the girls experienced related to inadequate special services, insensitive teachers or students, keeping up with the work load as they got into higher grades, and their physical environment. Some complaints were not related to disability, for example having to wear school uniform, the school being vandalised, a teacher that nobody likes. However the majority of statements related specifically to difficulties they have experienced which could be directly attributed to their disability.

Teachers who appeared to be unsympathetic or impatient were mentioned by a number of young women:

"We have to be independent, but sometimes I think teachers and students expect too much from us. Grade 8 students are nasty." (VI-14)

"I don't like signing. People look at me and say I'm deaf. When I can't understand the teacher gets angry. I have a lot of problems with school work." (HI-15)

"The P.E. teacher separated me from my deaf friends - she was trying to broaden our friendships and get us accepted, a lot of teachers tried that, but it never worked, other kids didn't want us and we didn't want to be with them."
because they didn’t want us. We were made to go into regular classes for two weeks in Grade 8. It was humiliating, nobody knew us, I was really scared.” (HI-17)

“Teachers aren’t very helpful. They worry about school work and not much else. If I miss something they either don’t worry or tell me to copy off a friend. The toilets have writing all over, or kids smoking.” (PD-12)

“One of the teachers babied me, I was her class pet. I think she marked me higher than I deserved. She said I didn’t have to do things - I could have done them. I told her I could do it, but she said it didn’t matter.” (PD-15)

“If I have a problem I ask a teacher who says “I’ll see you later” but sometimes forgets because there are too many students. Learning is sometimes difficult... I couldn’t do well in maths and I didn’t like struggling with it, I dropped it last year. Writing essays is difficult - I try to explain and sometimes it’s wrong.” (PD-17)

“Ramps are a bit steep. If you are late for class sometimes the teacher doesn’t tell you what the rest of the class has done, they think you’ve been dawdling, you just can’t go any faster than you go. One teacher calls us “wheelies” and explains something to the class and then says “now you do what you want to do ‘cos I’ll go and explain it to the wheelies” and she tells us in the simplest way possible. Another teacher calls us “the sweethears, possums, darlings, babies” - everything except our names. The Science teacher calls a couple of girls “the girls on rubber” or “the girls on air” - we don’t mind that, he really does it in a nice way.” (PD-13 to 16 - group discussion).

Some young women specifically said they disliked feeling different from other students in the school:

“It’s better not being in a Unit. Everyone watches you the whole time. When you are in the Unit they treat you differently.” (VI-14)

“I don’t like using the Unit, though it’s better than having help in class. Privilege creates a ‘thing’ in Grade 8 and 9. I get the option to do leisure sports, I should be made to do sport like everybody else. It’s too much like an institution, I hate coming down here for lessons, but I need it.” (VI-15)

“I use a transistor but feel left out of class and dependent on the teacher, as though the teacher has power over me. I can’t hear what other students say. Two teachers treat me with special care, I don’t like being made to feel different. There are times when I doubt my own ability, despite good marks - I might have missed something or misinterpreted.” (HI-17)

The frustration being experienced by some young women with hearing impairments is apparent by their criticisms of the interpreting service in their school. Others indicated that they were not receiving enough academic help:

“Some teachers don’t sign ... it’s too hard. Some teachers don’t give me information. They try but they can’t, they don’t understand.” (HI-14)

“Bits of information are picked out of the lesson by the interpreter, it’s too selective. I don’t always understand the interpreter. Hearing teachers can’t help much, I would like more help from deaf teachers. I would like more hearing friends, the deaf are segregated too much.” (HI-15)

“It’s sometimes awful because deaf teachers only give me one example. They don’t tell me everything the teacher says. I want full explanation. Some deaf teachers don’t turn up at my class; sometimes hearing teachers help, sometimes not. My teacher aide sometimes doesn’t turn up, too busy drinking coffee. My
marks would be better if I had an interpreter. I have to learn to accept things.” (HI-16)

“I work very hard. Because in class teachers have conversations I miss out on them, I have to look around a lot. I would do better otherwise. I’m a Prefect, but I don’t always know what’s going on in meetings. If I ask others sometimes they talk to me but I have to make the first move and when they do talk it’s as though I have a problem. I have to lipread all the time and I get very tired and then I can’t do my homework well. It gives me a lot of stress, overall it’s very hard. Friends [hearing impaired] do easy subjects because they can’t get a lot of help from teachers.” (HI-17)

“It’s embarrassing to ask the teacher for help again and again.” (HI-17)

“I was confused when I went from special school to the unit because of different ways of learning and using language. At special school we weren’t allowed to sign. Some subjects were too easy at special school.” (HI-17)

The physical layout or environment of their school handicapped the mobility of some young women:

“I get tired at the end of the day and feel like falling on the ground. I haven’t mentioned it to teachers, Mum knows. Girls smoke in toilets, I don’t go in there, I go before coming to school and then I don’t go until I have my medicine when I get home. I don’t need to go.” (PD-14 - this young woman has a heart condition)

“Going to high school was different, I didn’t have so many friends. I’m not able to do most sports. Because I’m slow sometimes I walk in late, I’m slow on stairs, especially if I’ve got my bag.” (PD-16)

“It was rougher being an all girls school. The school was spread out a lot and moving classes was exhausting. I got wet moving classes in the rain. I get tired carrying my bag. It’s harder to get to [regular school] but worth the effort.” (PD-17)

Some young women expressed their general unhappiness:

“I took a long time to find my way around the school, there was nobody there I could turn to, no friends from Primary School. It’s more emotional for girls than for guys. Teachers get impatient if you don’t understand. I’m getting sick of school, I think the education system takes too long, by the end of it you are sick of it.” (VI-16)

“I’m sad and lonely. It’s hard to see work in class. I get a headache over my homework. Last year I stayed by myself, I think that’s because of my vision, or because I don’t understand English very well.” (VI-17 - this young woman is a migrant)

“A lot of kids were jealous because I got special attention. I felt really alone, had a rotten social life, and put all my energy into schoolwork. One teacher took marks off for messy writing when my typewriter broke.” (PD-17 - this young woman has just left school).

Moving from a special school into a regular school was difficult for two of the girls:

“I got shoved into Grade 8 and nearly had a fit. I was a year behind and still am. The school was enormous, the classes so big ... all those strange faces looking at me, I felt so scared. The work was harder and I used to end up crying, I hated it, I didn’t want to go back ... now I love it. One teacher wouldn’t allow us to take our usual short cut to classes, he made us go the long
way round - there is a bump at the bottom of the ramp. The typing teacher treats me like a baby, pats me on the head. It would be nice sometimes to have more time, just an aide there to help you if you need it." (PD-15)

"I notice the difference after [special school]. The outside world is very mean to you, they don't help you. I don't like it. I don't like any school. I need more hours of aide time for help in science. She comes to classes I don't really need help with. Some teachers, most, ignore me. They check you are doing the work, but they don't check on you personally." (PD-15)

Most of the young women we spoke with who had left school in recent years had attended either special schools, or independent, single-sex schools, where they were quite often the only student with a disability. Their memories of the things they did not like about school mirror the statements made by the younger women. They spoke of intolerance, physical difficulties, social isolation and, in some cases, what can only be described as cruelty. The young women who went from school to further education appear, from their statements, to have drawn on reserves of strength that made them determined to succeed at school. A number of the same young women also stated that they worked extra hard at school in order to compensate for their lack of a social life. An added factor in the lives of these young women, apart from their obvious intelligence and ability, is the support and encouragement that their families have given them.

Women with visual impairment appear to have had additional problems which in the main related to access to suitable material in a form they could use. This was particularly true for young women who had been integrated into regular schools where they were the only student with visual impairment, or where there was no special equipment, although it should be mentioned that many schools did endeavour to overcome these problems. Some of the problems they experienced are as follows:

"I was terrified. I was the only disabled girl in the school. Everyone looked the same in uniform. Finding my way around was scary. I worked hard, I still felt lonely. I didn't have much of a social life - I used to get jealous of my younger sister going out with friends. I worked hard to compensate, kept busy and occupied. I had a tutor in maths because it was hard to keep up if classes were conducted on the blackboard. I was frustrated in music because I couldn't read the music properly. I am very frustrated about music and maths because I feel I have the ability but haven't been taught properly." (A young woman currently studying Arts at university)

"If you couldn't run around and play netball you felt different. They wouldn't let me do PE, said it couldn't be adapted. I had no trouble keeping up with work, except maths. At high school I used to have to study at the expense of social and recreational activities, it would have been nice to have had something at the school oriented towards fitness." (A young woman currently completing her Diploma of Education)

"[At High School] I used to have a lot of injuries. I used to try and outsmart my sight. I didn't do History, Geography, French or German - I took typing instead - I was different again. People couldn't understand why I didn't get 'A's' in typing, I was between two worlds - not blind, not sighted, I couldn't cope with the sighted world and I wasn't a child genius." (A young woman who is currently unemployed)

"It was quite a long way from home, so getting books and things like that was a bit of a problem but, for social level, it was a wonderful experience, I met lots of wonderful people there." (A young woman currently studying Psychology)

For women with physical disabilities the main problems they had experienced at school mostly seem to have stemmed from the attitudes of other students, access problems, tiredness from
steering chairs up steep ramps and difficulties convincing those around them that they were capable of achieving. It is interesting that many of the young women describe their struggles for recognition and opportunity, or their struggle to stay in or enter a regular school as opposed to special school, as very personal. Very few mentioned the input that must inevitably have occurred in such decisions from families or teaching staff. There is a feeling of ‘me against the world’ which has emerged throughout the investigation— a pride in succeeding in spite of the odds. Young women without this sense of esteem from ‘beating the odds’ do not, in general, appear as confident, and do not achieve as well. Young women with spina bifida frequently said that they were lazy and that they found school work at high school hard.

"High school was hard, perhaps I was lazy, I had to put a lot of extra energy into getting around, I was fiercely independent, never asked for help unless really needed. I didn't like school that much. I always played down my disability as much as possible. Teachers criticized me for being lazy. I had lots of friends." (20 year old woman with spina bifida, currently employed as a receptionist)

"The special integration program was actually very segregated, like mini-schools, even punishment was different, I always got off more lightly. I always felt two years ahead, bored and started fighting. I finished a period's work in 10 minutes. Regular school was a bit more difficult. Mainstream teachers were not very involved, all problems were handled by integration teachers. I felt as if I was on 'P' plates and if I did something wrong I'd be pulled out. It was very lonely, I'd crawl into the library at lunchtime." (22 year old woman with a muscular disability currently at Technical College)

"I regret not coping in normal primary, now I'm far behind for my age. Teachers in special schools don't expect enough of the kids. People got too close to teachers, too dependent. The work was too easy. I used to make myself get involved (when she went to regular school), I liked most of the teachers and had my own circle of friends." (19 year old woman with a physical disability, currently studying at Technical College).

"There were not many things that I liked at school because they always put me in a corner and wouldn't let me do things because I didn't have answers to them, and they used to get me to do Maths or English or something else when they were doing cutting and pasting or needlework or something like that because they didn't think I would be able to do them, but I proved them wrong because in a few years time I made a dress. I complained bitterly because I was always pushed in a corner - one teacher helped me with sewing, but other teachers always said I wouldn't be able to do anything because of disability. Teachers used to forget about me and not spend much time with me, which I thought was a bit wrong. In the early days I had to go to physio nearly every day for about half an hour, which interfered with my schoolwork. What I learnt at school hasn't really helped me now because I have learnt more in a short time from a tutor than I did at school." (PD-25)

"At special schools they didn't have grades, they taught us, but mainly they taught us how to survive, like getting on trams and they didn't teach us, you know, reading and writing, they sort of prepared us to survive. Some of the kids couldn't learn I suppose. So I just went on and on and then I left when I was sixteen and in those days you had to leave whether you wanted to or not. I remember we had a big panel where your doctors and physios and parents and you know, they decided. My father wanted me to go on, so we checked around some schools, but in those days there was no integration so it wasn't much
A young woman with cerebral palsy who is currently studying for her Bachelor of Economics described the frustrations of her schooling at length. She attended special schools until she reached School Certificate level when she transferred to the private system to attend a girls school. Of her years in the special school system she says:

“The attitude of other students was rough and rude, a lot of the kids had terminal disabilities and thought they would die at 22, so they didn’t achieve much and thought “why bother?” After 2 months I topped everything. I was the only girl in the class. I never got many friends there except an older girl who is now at Uni too. There was a lot of trouble in classes which made it difficult if you wanted to learn, and we lost a lot of time. We were held back a lot, it took 2 years to do one year, like in maths. You had to wait for help for half the lesson. Other kids needed a lot of help, and because they had a terrible attitude and I wanted to learn and got good marks it wasn’t enough - I spent years and years in Year 8.” After transferring to the private school system she says: “each year was on a specific level with lots and lots of stairs to get there. The science labs were down two flights of stairs - the distance and the time taken to get to the labs was a bit of a hassle so it was decided that I should do science by correspondence. I never saw the correspondence teacher. They never sent me the experiment stuff so I still had to go to the lab to get the equipment. At the end of Year 9 the correspondence school said I hadn’t done enough. I was being criticised for not being able to draw a straight line. I was doing it for over a year before they knew I was handicapped.” After transferring to yet another school in the private system, still an all girls school, she still had problems: “physically the school was very difficult. There were a lot of stairs, I was in a lot of pain. I had to prove I couldn’t do the HSC Exams without special considerations. One day I was required to write four essays.”

Comments made by another young woman with Cerebral Palsy who says she is writing a novel based on her experiences with disability, highlight some of the difficulties for schools in meeting the needs of disabled students:

“Grade 8 is still a blur, I cried every day because I had to go. In Grades 9 and 10 the school changed class arrangements so we didn’t move from the bottom level - I was always made very aware that it was because of my disability, it created intangible antagonism. Grade 10 was the worst year, the animosity of students became tangible. It’s a good thing that schools show they care and are interested, but they should discuss options with students. If things had been left ... everything would have been OK, I could have managed. I was allowed to use a tape recorder in class but didn’t because anything different gets adverse reaction from students. I’m a naturally good student and I was finding a lot of the time I would do less than my best so as not to draw attention to myself. Teachers only had a vague idea about cerebral palsy - one or two asked whether I had spina bifida. If I’d been given the opportunity to tell them about it I would have said don’t go overboard, to know assistance if necessary is enough. The whole thing is a bit of a blur to me, the only memories are hurt feelings.”

Another young woman with Cerebral Palsy felt a misfit in her school:

“It was a regular high school. It wasn’t too bad, but teachers just didn’t want to know about someone with learning difficulties. If I was late for class I got told off - the reason I was late was because the ramp was very steep and had a step at the bottom and I sometimes fell out of the chair when I hit it. If I complained...
about the ramp I got sent out of class. In the Science labs they lowered the table, but it was still too high, not that I enjoyed Science much, it was compulsory. Teachers expected me to cope with writing - another boy with worse CP than me had an aide to take notes for him. I'd have liked one, especially in English. I wasn't allowed to use a tape recorder. Some teachers gave notes, others didn't. One said that wheelchairs had to sit at the back of the class, he didn't like wheelchairs. Female teachers were quite nice, male teachers were a bit standoffish." She explained that there was only one 'handicap' toilet and that you had to go down the ramp to it. She says that people with CP have "bladder problems" and have to go often to the toilet. "I took a long time and the teachers weren't happy with me for disturbing the class." 'Mainstream' toilets were difficult to get in if you were in a wheelchair - this was where the sanitary supplies were kept. When this young woman moved interstate and went to another High School she says: "I didn't like leaving my friends behind. I was accepted [there] for what I was, but when I moved here they didn't want to know, especially the kids. I didn't like it. Teachers treated you like you were something different all the time. It was embarrassing when me and another boy were asked to go out of assembly while the rest of the school was told not to use the handicap toilet. I left at the end of Year 9, I didn't like it, it was hard to cope with attitudes, you're different."

For the women with epilepsy that we interviewed, life at school had its moments:

"Before I knew I had epilepsy I used to get in trouble for daydreaming. When I told the school I had epilepsy one teacher freaked out and would ignore me when I was fitting or would try to get my friend to do something about it when there was nothing she could do. I was physically there but often I wasn't mentally there, so I missed things. I had trouble writing essays. I needed a lot of time off for appointments. I used to fall downstairs with blackouts and schoolmates would let me fall into a brick wall on my face. I needed to have information repeated, one teacher would stay back after school, I'd get home late and then the only time I had to work was after dinner. The drugs I'm on mean I need a lot of sleep, therefore time was always a problem. The school saw this as my problem, not theirs." (Bachelor of Economics student)

"Teachers didn't understand epilepsy. In Grade 9 they decided that I was too old to print, so one used to make me take all my work home and do it in running writing. In Grade 10 my epilepsy got bad, so I dropped typing and business principles. My epilepsy got worse so I dropped maths, science, then eventually dropped home economics. I did English, History and Geography - dropping subjects was the only way I stayed at school. The Principal told me that epilepsy wasn't socially acceptable - I think they wanted perfect children in the school. I had taken a fit, I don't remember, they told me when I came to in her office she was going off her rocker. I stayed at that school because I didn't know of any other, or if they would be better. Some of the teachers in Grade 10 were really good, male teachers coped better. That school had never had a disabled student, I probably wouldn't have been accepted if I had had epilepsy when I moved there. Writing was always a source of contention in school. I used to walk out of class when abused by a teacher. It used to upset me a lot, disrupted me in Grade 11 having a teacher going on about writing. I did badly in all subjects, and it didn't help my epilepsy ... any chance I got I skipped classes. I didn't want to make too many waves because I could see no point in moving and already had made friends." (A Journalism student, who completed her schooling at night school)
Some of the young women with intellectual disabilities don’t remember school with pleasure:

“At one school there was fighting outside the school, some boys and they weren’t very nice to me. I said please, I am not in the mood to fight and they did not listen to me, so I said if you don’t stop fighting with me or all the other girls, I will give you one more chance, and then I think I will go and tell the teacher. Sometimes they pushed you over and made you feel funny.” (ID-17)

“I didn’t like it that much, there was too much, too baby work, like younger kids, you know. It was too babyish for me. I just thought, it is not right to do that, and I just thought to myself I will just have to move on one day. Other children teased me and called me names. I can’t talk properly. I can’t speak properly. I have got this great temper, and I hit this kid, this girl, because she was always teasing me and I was very mad with her.” (ID-17)

Many of the young women we interviewed had experienced both special and regular schooling. We therefore felt it would be useful to ask them to comment on any differences they had noticed. With few exceptions the young women felt that integration was the best option, although many, and in particular the hearing impaired, considered that special assistance in the form of a unit or special teacher was the ideal. For the most part the reasons given for preferring integration were that you had more friends, were able to mix with non-disabled students and the challenge of competing academically with non-disabled students despite difficulties. The smaller number of pupils in special schools and the differing ages and abilities of classmates were seen in a negative light. Typical comments showing their opinions of integrated and/or segregated settings are as follows:

“Kids who have been to special school have a chip on their shoulder, they expect the world owes them a living.” (VI-14)

“Special schools are good for people ‘with very serious problems.’” (PD-15)

“I was supposed to go to [special school], I didn’t. I’m glad. They don’t even teach you stuff that’s your age level. I know one girl who left [regular school] after Grade 8 because she couldn’t cope after being at special school.” (PD-17)

“You didn’t learn anything there [special school], outings and physio twice a day. I prefer regular school, you meet everyone, if you were the only handicapped one in the school they treat you OK - when you start off in special school you don’t know what to expect from other normal, non-disabled people.” (PD-17)

“I couldn’t imagine going to Uni from special school, too intimidating, mixing with people your own age who aren’t disabled. I’m not in favour of special schools unless kids can’t learn.” (PD-19)

“I prefer school with a Unit because I like to get together at lunchtime with deaf friends. Hearing people make me bored because hard to understand.” (HI-14)

“Integration is a good idea because it helps deaf mix with all children.” (HI-16)

“I prefer regular to special school because in a Unit work is very limited, and often there is a range of not very clever to very clever children, so teacher has to find different work for clever and different work for others, very confusing.” (HI-17)

“I don’t think it’s a good idea to segregate disabled students unless they are severely disabled.” (HI-17)

“I think its much better being integrated. I have more friends.” (PD-13)
A woman of 24 with a hearing impairment has mixed feelings about the special school she attended:

"I wanted more education because at school I was always doing the same boring things, copying things off the blackboard all the time. A teacher wanted me to attend regular school but I refused to go because I thought the other kids would make fun of me, and there wouldn’t have been an interpreter. If there was an interpreter I would have gone. If I had attended regular school from when I was very young I would have been at similar levels to hearing children but to make the change over at an older age - there would have been too much of a difference in the levels and the work would have been too difficult for me. I found it very easy to make friends because I was at a deaf school, at a hearing school it would be very lonely. I had deaf friends who used to attend a regular school but I learnt more at deaf school because the teacher signed. I was considered to be lazy at school because the work was too easy - I wanted more challenging work."

The importance of trying things for yourself, as well as the influence of siblings are mentioned by two young women, one of whom went to a regular school, and the other to a special school:

"I was treated like any other normal person [at regular school] ... because my brother and sister went on to further education at university and my marks were good enough for me to go to university and I wanted to go on to prove my ability to get work in the normal community, I had always intended to go to university." (20 year old hearing impaired woman currently at University)

"[At High School] they would encourage me to try new things and even if it was difficult they let me struggle until I achieved it. It was very important to me both emotionally and physically to be able to do the same work as my brother and sisters, because for me to know that I was able to do virtually everything they could do with just a few different modifications to make it easier, it made my disability not rule my life like it would do if I didn't have the right attitude." (20 year old physically disabled woman currently attending Technical College, who attended a special school)

Another young woman with visual impairment, also studying at University, feels that a combination of special and regular schooling was useful for her:

"I think academically it's a very good idea learning braille ... typing, all the skills that are essential. I personally am more in favour of integration from as early an age as possible because I think that it enables you to learn to get on with children because by high school you have developed habits and skills. If you're mixing with blind children a majority of the time, they don't pick up, but if you have been in a normal primary school that would have been commented on and you might have been teased and it would make you more aware. You have to have some fight in you, otherwise people will walk all over you."

A 29 year old visually impaired woman agrees. While saying that her special schooling was "too sheltered" she admits that:

"Special schooling is useful in the early years. It's a setting where needs are taken into account, e.g. typing."

Another visually impaired student who started her schooling in a special school, and then moved into a regular school says:

"It was a closed environment, cut off from the rest of the world ... If I had stayed there I wouldn't be as independent, I'd just be really different. Leaving [special school] was getting out of the ghetto of blindness."
Yet another visually impaired student describes how it was to move from a regular setting into a special school when she moved interstate:

"It was the worst six months of my life. Some of the kids had other problems, other than visual. Classes weren’t disciplined. I was used to going to a regular school. Other kids called me stuck up."

A 27 year old hearing impaired student, who attended special school, doesn’t agree that segregation is bad, at least for the deaf:

"Integration - not for the deaf because it implies normalisation, which means they want the deaf to be like ‘normal’ people, but deaf prefer not to be like others."

From the statements made by young women with disabilities that were interviewed for this investigation, their primary concern lies in the area of friendships and achieving their full academic potential. Whether these are achieved in a regular or special school, in a unit setting or with assistance from a visiting teacher, appears to depend a lot of the individual personality of the girl concerned as well as the services provided. If the young woman is happy and secure, and receiving the assistance she requires, the frustrations related to disability appear surmountable.

The final sections in this chapter relate to the sporting and recreational opportunities for young women with disabilities, and remarks pertaining to the physical environment at school.

SPORT AND RECREATION

Involvement in sport and leisure activities can form an important part of the socialization process of the adolescent. Because these activities facilitate peer group membership, provide opportunities to develop leadership and autonomy, and allow individuals to test themselves they are of particular significance. In addition, participation in sport encourages fit and healthy individuals and healthy life-styles. Good health and physical fitness also have implications for physical appearance. Even though today’s society may place too much emphasis on physical appearance, particularly as far as women are concerned, in the adolescent mind feelings about the self are very much tied up with physical appearance and body image.

While sports and games can be pursued both in school time and outside, there are a number of other activities and groups that contribute to positive adolescent development, and encourage the use of creative and inventive talents. Various hobbies and handicrafts, and associations and organizations provide valuable social contact as well as the development of particular skills.

With regard to disabled youth, the pursuit of sports and other leisure and recreational opportunities has in the past been an area of neglect. Increasingly however, attention has been directed specifically at obtaining a higher level of participation in sport and recreation by people with disabilities and in particular by females. Because this theme has been identified in the National Policy for the Education of Girls we questioned the girls and women about their participation in sport and leisure activities.

The amount of participation in sport or recreation at school varied considerably and ranged from "none" to a wide number of sports. The type of activity pursued was naturally, to some extent, affected by the type or degree of impairment experienced by each young woman. In general, however, they were dependent upon the creativity or efforts of the teacher responsible for sport in their school, or upon the timetabling arrangements made for them. Some schools had special modules or programs for their disabled students, for example, fitness circuits designed with particular disabilities in mind. In other schools teachers adapted or made modifications, for example wheel-chair aerobics, or made more extensive use of hand signals or graphics. However, all too frequently the girls described situations where the time allotted to physical education and sport was used by disabled students to do catch-up work, learn living skills or read in the library. The girls also made reference to their lack of participation in the physical education program being a
result of the sports fields, courts or gyms being some distance away from their classrooms and sometimes even away from the school itself. The distance, time and effort required to get the girls to the sites were typically seen by the teachers or administration as insurmountable. Few of the young women interviewed particularly mentioned sport as an important area of their life. Some "hated" sport, while others bemoaned the fact that they weren't participating in games at school, and wished that they could, seeing it as an important facet of school life and as the 'normal' thing for students to do.

Very few young women participated in any sporting group outside the school setting and were thus dependent upon the school to provide this type of recreation. The girls who did particularly mention sport were either members of a team going to the Paralympics in Seoul, or were active and successful members of other sporting teams. Some of these teams comprised only disabled members, and others were made up of both disabled and non-disabled participants. For these young women their sporting prowess was a subject of pride and evidently contributed greatly to their self-esteem and overall confidence. In the case of girls with hearing impairment, the majority participated in the same sports as every female student in the school, and they were given a wide range from which to choose. Some of the remarks made by young women illustrate the varying attitudes towards sport:

"I hate sport. I used to do gym and jazz ballet in junior. I like volleyball. Most guys keep sport up, you imagine boys playing sport and girls sit back and pretty themselves up." (VI-16)

"We aren't given the opportunity to do sport. We're encouraged to do PE and I work with some students, play ball etc. We just don't have time. I go for a swim at home. I don't think I'll die of hardening of the arteries just yet!" (VI-14)

"We get the option to do leisure sport (swimming, aerobics etc), but we should be made to a sport like everybody else, you have to find your own way to leisure sports and your way home ... we would like leisure sports catered for to give us time to get back here, or even sport here like gym - we don't want to turn into roly polies!" (VI-15)

"Sport? I don't do it, I wouldn't want to do it, not from what I've heard. I'm unfit. I'd like to do something like modern dancing, maybe horse-riding, but they don't have riding for the disabled nearby. I chose not to do sport, the PE teacher didn't encourage it ... they played netball and I just sat there." (PD-15)

The above comments are from some of the girls who didn't like or didn't have the opportunity to participate in sport at school. For some young women opportunities were presented, but, as they put it "I was always the last to be picked for the team", for their non-disabled peers, imbued with the desire to win, would not choose a person with a disability to be in their team. Most, however, have had some opportunities to participate in exercise, and in some instances PE teachers had been able to successfully adapt sports for the young women, as was the case for one young woman in a wheelchair who had just started learning karate. Staff from a sporting organisation for people with disabilities criticised the lack of sporting opportunities for disabled students in some schools:

"A classic example is schools where children have been integrated and teachers haven't been taught how to handle that integration. The child is sent to the library during the sports period. So the options that are open to that child aren't really presented when they are young enough to develop patterns of leisure. Kids we work with are saying the teacher hasn't got the time because of the size of the class. The teacher doesn't know how to make adaptations. It's very difficult and they haven't been in-serviced. It's just a new problem which has been put on them and without the resource of knowing how to deal with it."
States who do have in-service training have come to realise it's not that big a problem."

We spoke to very few young women who belonged to sporting bodies outside school, whether these were specifically designed for disabled people, or for the community in general. Those who belonged to Venturers or church youth clubs spoke with enthusiasm about camps and recreational activities organised by those bodies. When we talked to young women who had left school in recent years, the importance of sport was highlighted by some:

"I belong to the Uni netball club, we train and play a game every week. I'm doing self-defence this term at Uni. I've always played netball from Year 3 onwards so it's been a very good sport for me and I enjoy it. I didn't know anyone when I joined the netball club, but I've made friends ... I would like to play other sports but I don't have time with my studies." (Hearing impaired university student)

Another young physically disabled woman who is going to swim at the Seoul Paralympics says:

"It makes other people with disabilities sit up and take notice, if they can do it I can."

Sport was not considered an option for many of these young women, or their disability caused them such embarrassment that they were diffident about participating. The interface between physical appearance, self-esteem, disability and recreation is clearly seen in this comment:

"I used to wear my hair over the aid, and wouldn't go swimming or any sport where I had to take it off. I didn't want anyone to know." (University student with hearing impairment)

SCHOOL ENVIRONMENT

In order to make school programs for students with disabilities successful, the students' individual needs need to be taken into account. Often physical and technological adaptations, modifications and additions are required, as well as changes in attitudes and expectations. This may mean changing the instructional activities, providing special services or devices in areas of need such as mobility, communication, and basic skills, and/or modifying the physical environment. Changes to school programs and environments should not create a protective situation for the adolescent girl with a disability, but rather should encourage the development of the skills necessary for independence. In line with this aim, expectations should be realistic and geared toward the actual capabilities of the student. We wanted to explore with the participants in our study how well schools were meeting the girls' needs.

Most of the young women interviewed said they had no problems with getting around their particular school. Problems that were experienced by young women in wheelchairs related to steep ramps, obstruction of ramps by fellow students or ramps that were not finished off properly rendering access difficult, or in some cases, dangerous. Some young women said that toilets were too far away from classrooms or not specifically designed for girls in wheelchairs. One young woman who had been taught to care for her toileting by use of a mirror said that she could not manage in the school toilet which did not have one. Mentioned also was an instance where sanitary supplies were only found in a toilet which was difficult to access by girls in wheelchairs. Some complaints were made about teachers who did not seem to understand that trips to the toilet, or moving from class to class using crutches or wheelchairs could take somewhat longer than it did non-disabled students. Many schools had tried to overcome this problem by allowing the young women to leave class five minutes early - this was said to be not always efficient, and appeared to cause some anxiety. Mention was also made about missing the beginning of class because of difficulties getting there on time. Stairs, or the size of the school which necessitated lengthy journeys between classes presented difficulties for some girls with mobility or respiratory problems, and some said they were tired at the end of the day because of this.
Some young women with visual impairments mentioned that schools could be difficult or frightening to find your way around, particularly if fellow students persisted in standing in groups, or leaving school bags on the ground.

The use of specialised equipment to assist young women integrated into regular schools did not appear to be widespread. One of the professionals we interviewed noted that access to mainstream schools for physically disabled students was often poor because integration had only involved a single person. The same person commented that the development of portable modules would enable greater access for physically disabled students. She cited as an example a portable unit for a science laboratory which could be easily transported between schools, thus avoiding expensive modifications. Some young women with hearing impairment were now using transistorised equipment to pick up lessons with varying success. Aids that were used by young women with visual impairment were generally reported by them to be satisfactory. However, in the case of one visually impaired woman, it was only after she was knocked down outside the school where she boarded that mobility and orientation training was arranged for her. Comments made by professionals regarding some of the problems experienced by visually impaired girls touched upon the need for more awareness of modern equipment:

"Itinerant teachers vary considerably. They have a lack of up-to-date knowledge about equipment. If this is so for itinerant teachers, there is no hope for class teachers. There is a need for in-service education to keep up with technology and for the teachers to get together to discuss problems and solutions. Students in integrated settings are at the mercy of teachers. Academic achievement depends on kids asking for help. Average kids drop out early. Students often leave school with poor mobility skills and the provision of transport to school may have contributed towards this. Students are not taught good basic skills at school, and decisions about whether to braille or type are often made too late. Some teachers may refuse to dictate as they write, and some won't let students record lessons. Using braille can be embarrassing because they are noisy."

Typewriters for those who had difficulty writing were permitted in some schools, and in others were not allowed. The importance of young women with a visual impairment learning to type was emphasised by one of the professionals we spoke with, who commented that: "There is a need to convince schools that learning typing at Primary level is as important as Maths or English for the visually impaired." Some difficulties were also reported by physically disabled women in actually learning to type - in some cases girls were allowed to use electric typewriters, in others they had to struggle along on manual typewriters because, they were told, to allow them to use electric would lead to accusations of favouritism. One young woman with a physical disability, who was permitted to use a typewriter, reported that she chose not to because it was a nuisance to carry around, and it also meant she had to sit next to a power point in every class room which she found limiting.

Other girls complained that girls smoked in the toilets which they found uncomfortable. This was particularly so where young women suffered from heart or respiratory conditions.

While these complaints were not universal, they serve to illustrate the sorts of difficulties which may be experienced by some girls. Educational institutions and teachers are also faced with the dilemma of how to solve such problems given the embarrassment evidenced by young women when they are made to appear ‘different’ from their non-disabled peers. It does appear however that in the effort to treat young women with disabilities in exactly the same manner as their non-disabled peers, some schools may be expecting too much.
PARENTS' COMMENTS

The principal message conveyed by parents concerning their daughters’ schooling was that success was largely dependent upon appropriate assistance and understanding by the staff of the school. For the most part, parents were happy for their daughters to be integrated into a regular school as long as support was available as and when needed. Those parents whose daughter received support from a special Unit generally saw this as beneficial. Complaints which did emerge related to: the need for a more varied or challenging curriculum; poor interpreting services for hearing impaired girls; and the poor understanding or acceptance of young women with disabilities on the part of some teachers or principals. Difficulties with the physical environment of school, the amount of homework, and teasing where also mentioned by a number of parents. The need for a link between school and work in terms of providing more vocationally oriented subjects was mentioned as important by some parents, though most said that they were satisfied with their daughters’ curriculum.

Typical remarks made by parents follow.

The parents of a young woman with visual impairment remarked that special school was:

"... good when she was young, but she may have regretted it if she had stayed there. The Unit offers the best of both worlds, mixing and special assistance. The regular school said they couldn't offer enlarging." The parents went on to say that they wished the curriculum was more challenging, and that they felt their daughter could cope with the same number of subjects as other girls in the school. They also said that: "She doesn't get enough time in exams, she gets upset because she can't finish - they could be oral rather than written." The young woman's parents feel that her main problem is "... isolation. She is teased because of her dedication to study. Most of her friends tend to be from the Unit, and she feels like an outcast."

The mother of a 17 year old girl with a physical disability feels she needed more vocationally oriented subjects, and that she should have left school earlier:

"The curriculum is general, not specifically designed for the handicapped, that's a bit of a problem. They don't have enough modern equipment ... she will leave in Grade 12 with no skills. She should have left in Grade 10, but was counselled to stay, now she will be competing with 15 year-olds for jobs in offices or a place in TAFE."

The mother of a 15 year girl with a hearing impairment says that she is happy with the curriculum. However she says her daughter:

"Misses out a lot and misses many instructions. She needs to have more interpreting. There is not enough help in classrooms - hearing teachers don't check to see she has understood all the work covered."

This view is confirmed by the mother of a girl of the same age and disability:

"Subjects are too intense for her perception, particularly English. Unless she has someone signing all the time she misses out a lot and there are many gaps. SL 3 does not have an interpreter all the time. There is a need to employ teachers who can fingerspell and sign. Integration is good, it has helped her."

The mother of a 17 year old girl with hearing impairment concurs with the need for better interpreters, and also agrees that 'regular' school is better. However, the need for better communication with teachers is highlighted:

"It is much harder for her to take information. She misses out a lot. Teachers don't make sure she has all the information. She has to put a lot of effort into
learning, and concentrating - it makes her very tired. Regular schooling is better than special school, there are more opportunities because she is smart. I would like more information on how my daughter is doing."

The mother of an 18 year old woman with a physical disability has many complaints about her daughter's education:

"The lack of better formal education and failure to obtain Grade 10 certificate has resulted in low self-esteem, and has presented problems for her in becoming independent and made seeking employment almost impossible. She has poor eye coordination, and as the volume of work increased, the more difficult it became for her to study. She had no special program, course, or machine. It was never offered. She was left alone when the school went to inaccessible places, told constantly that notes weren't given, and that wheelchairs must go to the back of the classroom. She was told that if she couldn’t keep up there was nothing anyone could do. We requested remedial materials, but nothing materialised - we were told there was a lack of funds."

The mother of a 16 year old girl with hearing impairment also complains that her daughter's school had not provided the best of service:

"When my daughter started [at the school] I went and saw the Student Counsellor and asked her if every teacher could be notified about [daughter's] hearing loss, but this wasn't done. It was five weeks into the school year before the Science teacher saw the hearing aid. The Science teacher didn’t notify anyone. The PE teacher shouted at her and accused her of not paying attention and not listening. The Counsellor didn’t even approach her. There is a lack of awareness - they have to live with a hearing impaired person to know what it is like. She has an aid to assist with videos that are used in lessons, but she’s too embarrassed to use it."

Problems with videos in school were also mentioned by the mother of another 16 year old girl with hearing impairment. Her mother reports that her daughter is achieving well academically, but come home very tired. Some of the teachers do not realise her problems:

"Because her speech is normal and her disability is not at all visible, teachers don’t realise how much she misses out on. Some teachers are uncooperative. We have requested a visiting teacher, but feel that the other teachers resent us."

Parents of daughters with an intellectual disability place a lot of emphasis upon the style of teaching, and the programs offered to their daughter. Some of the girls had attended regular schools, some with support, while others had attended special schools. The mother of a 14 year old girl says that the work at school is at her daughter's "level", but that it is difficult to make plans for the future. Other parents have had to 'shop' around for appropriate schools for their daughter:

"In the beginning it was hard to tell how disabled she was intellectually - it was very hard to judge how much of it was behaviour problems and how much of it was intellectual disability. She has always been very hard to manage, and so I was advised to send her to a normal state school to start with, and then when she wasn’t managing too well, and I thought they didn’t cope with her too well (a couple of individual teachers did, but the school as a whole didn’t deal with her well at all). They were very authoritarian and not very flexible, and when they wanted her to repeat Grade 2 I felt that that really wouldn’t do her much good and when I approached them with the idea of her going to [special school] they couldn’t get rid of her quickly enough. They were just really pleased to get rid of her, they found her a real problem and just didn’t know what to do with
her. [The special school] were more accepting and much more able to deal with the kids on an individual level."

The parents of a 16 year old girl with a visual impairment point to some of the difficulties experienced by their daughter who is integrated into a regular girls high school, but does not have the benefit of a Unit:

"She has to sit at the front of the class, and needs to look close at the board. It's a lot harder having to copy things later, and you miss a lot of practical demonstrations. You have to use other senses more, and rely on memory, hearing and smell. She misses out on a lot of things. The subjects are good, but she would do better if she could see - she's restricted in Maths and Biology, and can't do subjects like Chemistry, Geography and Sport. She can't do a lot of things. There isn't enough feedback from teachers - when you ask them they don't understand and they do more to placate you than help." These parents however still regard integration as the best approach for their daughter: "Integrated education is much better - the kids all help each other, which means they are not so obligated, they can exchange ideas."

TEACHERS' COMMENTS

As outlined in the chapter on Background, Methodology and Layout, we surveyed a number of teachers for their views on female students who have disabilities. For the majority of teachers any differences which may exist between the education of young men and young women with disabilities proved difficult to identify, and many of their remarks therefore pertained to male as well as female students. The questions we asked, and the informal comments made by teachers, fell within the parameters of the questions we asked young women, namely personal lives, school lives, home lives, and post-school options. In the following sub-sections these comments are presented.

Personal Lives

The issues which have been discussed in the chapter on Personal Lives were mentioned by many of the teachers. Poor social skills, low self-esteem, inappropriate behaviour and the need for counselling in these areas were all frequently referred to. Teachers were also aware that their students experienced difficulties with making friends outside school because of distance and transport problems. Very few teachers, however, knew about organisations who offered services to young people with disabilities.

Several teachers noted that the young women they taught appeared to be very sexually aware, but only a small number of teachers considered that specialised sex education programs were needed.

A number of teachers commented that girls were apparently better adjusted to their disability than were boys. It was said that young women developed appropriate social habits earlier than boys, and were more willing to please others. Boys were seen by some to be lacking motivation and were said to experience more difficulties integrating into regular schools. As a result, it was said, boys did not achieve as well as girls in an integrated setting.

School Lives

Teachers were asked various questions relating to how well girls coped academically in school, how successfully they integrated on a social level, what problems teachers considered they experienced, what needs were not being met in school, and what factors led to successful integration.

Teachers overwhelmingly stressed that the personality of the student, rather than gender or the particular disability, was the major factor influencing a successful and happy experience at school. Overall, it was said that students with disabilities coped well with school, the only exceptions noted
by some teachers were students with a hearing impairment. The staff of a special needs unit in a
regular school did, however, comment that although there had been "caring commitment" by that
particular school, this had not necessarily been "educationally driven." This was seen as being
particularly so in the case of young women with an intellectual disability, and the importance of
considering what constitutes good education for these girls was emphasised by these teachers.

Students with disabilities were said by many teachers to have a lower level of academic achievement
because of their disability. Years 9 and 10 were particularly identified as a time when physically
and sensorily disabled students had difficulty keeping up a satisfactory level of academic progress.
The need for extra assistance was frequently mentioned. It was generally considered that disabled
girls do better than disabled boys, and it was noted that more young disabled women than young
disabled men stay on to Grade 12. (Girls without disabilities also, in general, remain to Grade 12
level).

The problems identified by teachers with regard to their disabled students related in the main to
social difficulties, or on the school's part, providing suitable programs. The importance of early
and continuing therapies, when needed, were emphasised by several teachers, and it was
considered that such therapy may be neglected if integration into a regular school was achieved.
Very few teachers specifically mentioned harassment, bullying or teasing as a problem, although
the case of a young woman who was coerced into allowing her non-disabled peers to stick a
compass needle into her leg to see if she could feel pain was cited as an extreme example. This
particular young woman had not, it was said, complained to anyone at school for she wanted to be
accepted into a group. Most teachers did, however, see acceptance by non-disabled peers as an
important factor in successful integration, and it was commonly noted that disabled girls integrated
better than boys with disabilities. One teacher commented that young women with disabilities were
often an "outer" group and tended to make friends with young people who had been rejected by
other groups because of behavioural problems. Several teachers from special schools commented
that it was difficult to meet individual needs. The main problems experienced by young people with
disabilities which were noted by teachers from regular schools included: failure to achieve social
integration; embarrassment; low self-esteem; shyness; problems relating to the opposite sex;
mobility and access problems in the case of young people with physical disabilities; the failure to
participate in some sports; and, finally, difficulties keeping up a good level of academic
achievement. These problems were not noted by all teachers, but do in fact mirror the difficulties
expressed by the young women in talking with us, and by experts in fields outside education.

We asked teachers whether there was a need for specialised programs within a regular school for
students with disabilities. Over 70% of teachers surveyed indicated that they thought these were
needed. Specialised career guidance was seen as the most important need not currently being met,
followed by living skills training (particularly in the case of students who were not achieving good
academic levels). As mentioned earlier, specialised sex education or personal development
programs were not seen as a particular need by many teachers.

When asked what factors contributed towards a successful outcome as far as integration was
concerned, the main factor cited by over 40% of the teachers was the personality and attitude of the
disabled student. The attitude of their non-disabled peers was also seen to be important, along with
a positive school environment and attendance at mainstream classes with support from a Unit. A
quarter of the teachers surveyed noted that teacher awareness, and treating disabled students in the
same way as non-disabled students were important factors. Adequate access for students with
physical disabilities was mentioned by teachers who had such students in their classes. Integration
of young people with mild and moderate physical or sensory disabilities was seen as appropriate in
regular schools, but many teachers considered that young people with an intellectual disability, or a
severe disability would be better served in a special school. Several teachers noted that young
disabled people from a non-English speaking background had more difficulty integrating into
regular schools. Some of the teachers from special education units commented that in their
experience some teachers in mainstream schools were more supportive than others. Some special
education teachers had also experienced difficulties in being accepted by mainstream teachers which
led to problems relating to continuity of programs set up for their students. Difficulties concerning the sharing of information about the needs of students with disabilities between the various members of staff in schools was also mentioned by several teachers.

We asked teachers if they considered integration of disabled students into their school would be beneficial. The majority of teachers expressed the opinion that such integration is beneficial to the non-disabled students in that school, for it was seen to create tolerance, awareness, and an understanding of the needs of people with disabilities. However, one response to this question was: "Schools don't seek to benefit from accepting [non-disabled] students, so why should they expect to benefit from disabled ones?" Only one teacher commented that the inclusion of students with disabilities in mainstream schools gave teachers the opportunity to develop new skills. The benefits for the students with disabilities were noted by the principal of a school which had been successful integrating students with physical disabilities for over seven years: "The more we expected of the children, the more we got from them. People tried so hard. Expectations had an incredible amount to do with success."

A survey conducted in special schools in Victoria in 1985 included questions relating to factors which facilitated integration of students with disabilities on a full-time basis and factors which hindered integration. Similar results to our survey of teachers were reported. The main factors identified which it was considered would facilitate integration related to positive attitudes within the school, collaborative decision making between all parties, the preparation of regular school students, and the support given in terms of aides and special education staff. Commitment of staff and parents, and the participation of parents was also seen as a major factor. Factors which hindered integration on a part-time basis were seen as a general lack of understanding of integration issues which led to fear and negative attitudes, and the lack of support personnel and resources. Difficulties with certain students who had multiple handicap, inappropriate behaviour, poor communication skills, and incompatibility with regular school peers were also cited as factors impeding successful integration (The Progress of Integration from the Perspective of Government and Non-government Special Schools in Victoria, 1986, pp. 29-30).

Home Lives

The importance of a stable home environment, and a supportive family were stressed by most teachers. This, coupled with the personality of the student with a disability, was seen as an essential factor in the successful integration into regular schools of young people with disabilities. It was noted by several teachers that young people who live with their family were more successful at school than those who lived in a residential setting, although again girls were said to be less affected by such circumstances. Parents were seen to influence career choices of young people with disabilities. It was, however, noted that parents of girls, and in particular girls with an intellectual disability, seem to be more satisfied with the education their daughter was receiving than did parents of young men. Several teachers considered that parents of young women with moderate intellectual disability were somewhat over-protective of their daughters. Over a quarter of the teachers surveyed said that they had very little contact with parents.

Post-School Options

Most of the teachers surveyed were pessimistic about the post-school options available to students with disabilities. Over 80% of the teachers in regular schools felt that opportunities were limited because of the attitude of employers, the physical limitations placed on young people by their particular disability, and because of the high level of unemployment currently prevailing for all school leavers. The need for assistance to find work experience and employment for students with disabilities was frequently expressed. Teachers of young women with an intellectual disability were the most concerned about employment prospects for school leavers, and it was said that most parents hoped that their daughters would find jobs in sheltered workshops, but that such placements were disappearing, and there was a danger that many young women may end up just
staying at home. Some teachers felt that most parents were apparently quite happy to accept this situation, but considered that difficulties could arise if both parents worked and the daughter stayed home on her own all day.

Some teachers felt that low expectations on the part of young women led to under-employment, and that many young women settled in one job with no idea how to progress to another. As far as young women with physical disabilities were concerned, the staff of a special unit remarked that these young women often did not know what they wanted to do when they left school, and that it was difficult to place them in work experience or employment because male employers felt more comfortable with boys. Jobs and work experience for such young women were often stereotypical, but the teachers had difficulty finding alternative options for school leavers. An additional problem preventing these young women finding work was poor academic achievement.

The teacher-in-charge of a class of young people with intellectual disabilities who had been partially integrated into a regular school in a rural area of Queensland remarked that girls were often more resourceful and independent than boys. However, the figures he had kept since 1979 indicated that 35% of past female students were now mothers, and only one girl had found full-time employment, while 65% of the boys had at one time or another had full-time employment. There was no work for the young women in that region, and they were not quick enough, or mobile enough to access what work there was. He said that the young women were not highly motivated, though added that they were not lazy. He expressed the opinion that: "Girls can't see beyond having a baby, it gives them the appearance of being somebody. They don't succeed academically, or in sport, but they can succeed in having a baby," and went on to say that 65% of the young women had gone on to live in independent households. As far as their schooling was concerned, this teacher said that by the time young women were 16 they were attracted to the outside world, and it was difficult to encourage them to stay at school. These young women compared favourably to the "...lower level girls in the mainstream school - they are nicer, and better-mannered, but they have a fantasy about leaving school. At about the age of 14 or 15 they are still willing to sit, listen and learn, but school rules and restrictions are starting to bug them. They have a big thing about smoking, and say that at CYSS they treat you like an adult, you can smoke if you want to."

Summary

The statement made by the staff of a special unit referring to "caring commitment" on the part of many teachers is indeed true. Many teachers in Australia are able to cope with a wide range of children in their class. Many teachers are trying hard to do so. However, the statements made by young women indicated that some teachers in Australia are not as sensitive to the needs of disabled students as would be desirable. In most cases it is the teachers who are unpleasant, or unwilling to make some allowances, who are mentioned, rather than the teachers who are aware of students' difficulties. The negative comments about teachers far outweighed the positive. While the survey of teachers that was undertaken for this study can in no way be called representative, the comments made by those teachers who did respond are revealing. Many of the problems experienced by young people with disabilities are apparently recognised, for example, poor social integration within the school, or low academic achievement. Nonetheless, there is a clear feeling that, for some teachers at least, it is the unfortunate nature of a child's personality, lack of support from their family, or simply a fact of life relating to disability which causes difficulties, rather than a lack of understanding or inadequate assistance within the school system. Other teachers are in a quandary because the lines of responsibility for certain areas are blurred, and although they recognise that needs exist they feel unable to improve or change matters. Examples of need identified by some teachers are also identified in this report, for example, career guidance, more appropriate work experience, and specialised programs in personal development. Unless, and until, educators, parents, disability organisations, and government agencies are able collectively to address such needs it may be presumed that the current ad hoc situation will continue.
CONCLUSIONS

This chapter has highlighted some of the problems relating to the integration of young people with disabilities into regular schools, whether these schools have special support Units, visiting teachers, or other means of assisting such students. However, from the comments made by young women, it is clear that they have a clear preference for being integrated, despite any difficulties they may experience. The importance of being like everyone else, of not being seen as different, is particularly important for adolescents, and an aversion to being labelled by attending a school catering only for students with disabilities is, for these young women, most definitely stated.

The gender issues identified in the National Policy for the Education of Girls in Australian Schools are particularly relevant to young women with disabilities who are integrated into regular schools. As has been seen, most of these issues (the narrowing of career options; the limited availability of guidance and counselling about post-school options; harassment and bullying; under-participation in sport and recreation; and, in some cases, the physical environment of the school) can be compounded by the presence of a disability. Further issues arise as a direct result of disability, issues which may be present in a gender sense but which are subtly different for young women with disabilities. These include the time allotted to these young women in class, the quality of teaching, particularly in relationship to adaptations and modifications that help these students compensate for the effects of their disabilities on mobility, communication and instruction, and the expectations that their educators may hold for them. An additional factor is the attitude of teaching staff to students who have a disability.

In the sections above we have described how young women with disabilities tend towards easy options at school - easy options that very often offer no realistic vocational training for post-school life. The subject choices that are made, and the job aspirations of the young women, mirror the stereotypical choices of the vast majority of young women in Australia. The aversion to, or difficulties experienced in, the areas of Maths and Science, and a favouring of arts subjects, are the same as most young women, and access to guidance and counselling concerning the relationship between subject choice and future career or, indeed, the types of careers which may be pursued, is noticeable by its lack in the case of the young women interviewed. Even the young women who were pursuing the ‘harder’ subjects, and who aspired to further education, continued for the most part to choose careers in the ‘caring’ professions such as social work. While most of the girls interviewed were able to answer questions on their job aspirations, their answers could quite often be described as fantasies because the reality of their disability made it unlikely that chosen careers could be pursued (e.g. air hostess, nurse, model). The dilemma for families and teachers of young women with disabilities lies in assessing a fair balance between ‘normalisation’ and adjusting to reality. To encourage young women with disabilities to base their expectations in life on the role models of their non-disabled peers, without a radical change in community attitudes and employment opportunities, may be doing them a disservice. However, it is equally important to maintain reasonable expectations concerning the abilities of the young women and not label them as ‘disabled’ and therefore ‘unable’ to achieve. A continuous effort to change community attitudes towards people with disabilities in general should be pursued by governments, disability organisations, educators, and people with disabilities themselves, but in the meantime it may be necessary to remember that young people with disabilities do often require extra assistance, in terms of time, equipment, or understanding, to complete school programs. From our interviews it appears evident that most young women are diffident about asking for help, or too proud to do so, and that school systems are not sufficiently flexible to allow for difficulties to be either noticed or dealt with. The need for a more sensitive approach to their needs is clear.

The issue of harassment and bullying identified in the interim report on the National Policy for the Education of Girls was also clearly replicated in our investigation. The young women we spoke with are constantly reminded by the behaviour of those around them that they have a disability, and the reminders are often couched in a grossly offensive manner. It is sad that many girls did not
object to being called “bitch, dag or slut” because they saw those as, at least, normal terms used by some boys about girls. Added to these insults however, we gained ample evidence that name-calling related to their (or others’) disability and/or bullying in the form of pushing, tripping, spitting and so forth, is part of school life for many of these young women. There is also evidence that there are some teachers who are unable, or unwilling, to address the needs of their female students with disabilities, or who treat them inappropriately and truly differently from their fellow students. It may be that consciously, or sub-consciously, non-disabled students take some of their cues regarding behaviour towards their disabled peers from the teachers, and a teacher who cannot cope with disability in a straightforward and natural manner may be worsening the situation of their disabled pupils.

With regard to the quality of teaching, and time given to the young women in class which, again, has been identified as a gender issue which needs to be addressed in Australian schools, our investigation showed that in many cases young women with disabilities are not receiving adequate assistance. Young women commented on how busy teachers were, and on how they often relied on other students’ notes to do homework. They complained about poor interpreting services, on their inability to hear or see what the teacher was doing, on small print or difficulties with work on blackboards, on being ignored by teachers, or on their embarrassment at having to ask a teacher for help not just once, but twice or more. They remarked that they were called lazy, or that it was assumed that they would be unable to do something without being given the chance to try. Some told of teachers who were so anxious to treat them as ‘normal’ that they were chastised for being late to class or taking too long to visit the toilet. Further comments were made about being excluded from activities, particularly sport, because they were unable to participate in the games other students were playing. The shortcomings that were perceived by the young women were all, however, overcome by their desire to receive a ‘normal’ education and, indeed, there was also ample evidence that there are excellent teachers in the Australian school system who do meet the needs of all their students. Some of these teachers are trained in special education, but not all. Many of the needs of the young women we spoke to could well be addressed by mainstream teachers with a modicum of creativity and awareness. Other needs require specialist attention, better physical environments, technological aids and perhaps more teacher aide time.

SCHOOL LIVES - POSSIBLE AREAS OF NEED

The need for more services, teachers, resources and equipment is a constant plea by parents and educators of children with disabilities in Australia. During the course of this investigation we found this plea to be substantiated, but more importantly our findings indicate the need for a more effective use of the above. Listed below are the recommendations which arise from this chapter.

* The recognition of most of the young women of the value of education is regarded as an extremely positive finding. Maintenance of this attitude should be sustained.

* In common with all young women in Australia, there is a need to encourage and enable young women with disabilities to continue studying Maths and Science.

* The fostering of high, but realistic career aspirations, a broadening of the traditional career options, and the encouragement of more long term career planning rather than short-term job orientation are seen as extremely important.

* The selection of careers should be undertaken in conjunction with good planning of subject choices as early as possible.
* From our findings it is apparent that young women with disabilities may not seek information or assistance on possible careers. Vocational Guidance Officers and Careers Teachers therefore need to pay particular attention to ensuring suitable information is provided.

* Frequently, methods of choosing work experience involve only the provision of a smorgasbord of choices without providing detailed work descriptions, possible career directions emanating from the experience, or the necessary skills to make realistic and appropriate choices.

* While acknowledging the difficulties associated with securing work experience for young people with disabilities, attempts to break down the stereotypic nature of these experiences should be encouraged.

* There is a need to accurately assess the post-school options of young women with disabilities when determining the type of work experience to be undertaken.

* Parents are frequently called upon to assist their daughter with career decisions. It is therefore important that parents are given opportunities to talk with Guidance Counsellors and Careers Teachers.

* It is suggested that opportunities to work alongside women with similar disabilities may be particularly valuable.

* Schools should actively and sensitively address the issue of physical and verbal harassment. This is particularly so where integration is taking place. While schools may claim that harassment does not occur, is not a serious problem, or is difficult to deal with, the young women we spoke with indicate that they do experience teasing and bullying. The fact that young women do not draw attention to harassment does not mean that it does not affect both their self-esteem and academic achievements. It is seen as the school’s responsibility to ensure that a positive stand against harassment permeates throughout the school from the highest level down.

* There is a need for open discussion and understanding by students and staff alike of the role of special units and support teachers in mainstream schools.

* Where specialist services are required these should be provided in line with individual needs. The need for additional or improved services in some areas has been found during our investigation (e.g. interpreting services for hearing impaired students).

* It is important for schools to provide a positive environment so that young women with disabilities can participate as fully as possible in sport and recreation. Where appropriate, special programs or modifications to instructional methods should be adopted. Greater flexibility and creativity would ensure that assumed obstacles to the girls’ participation would be overcome.
The provision of a comfortable and accessible physical environment at school is necessary for all young people. In the case of young women with disabilities, the onus is on each school to ensure that individual needs are met. These needs may include adequate and easy wheelchair access, appropriate toilet facilities, a smoke-free environment for children with respiratory or heart conditions, and adapted classroom equipment and technical aids.

Instructional and curriculum adaptations which would facilitate learning should be in place. To avoid accusations of favouritism being levelled at students with disabilities, it is important that all students and staff fully understand the reason for such adaptations.

Some young women indicated that they had to work especially hard to keep up academic standards. Others remarked that they found it difficult to ask for help. It is therefore important for schools to ensure that if extra effort does appear to be required by girls with disabilities, the reason for this does not stem from inadequate physical or educational resources.

Many young women remarked that they had difficulty in convincing others that they were capable of achieving. Schools therefore need to be aware that poor academic achievement may not be related to difficulties perceived to result from a particular disability, but rather from low expectations, poor self-esteem or other factors within the school environment.

The experiences of young women who transferred from a special school to a regular school were not always happy. Adequate preparations should be made by schools to ensure as smooth a transition as possible, particularly in the area of staff and student awareness.

It is important to note that the specialised programs and assistance offered to young women in special schools were often seen as beneficial by girls who had attended such schools, for example the teaching of typing to visually impaired girls at an early age. The expertise gained in special schools over the years should not be neglected during moves towards integration.

Several young women with hearing impairments indicated that moves between States had resulted in confusion because differing methods of communication were used or taught in schools. It would therefore be desirable to develop a national policy in this vital area.

To ensure continuity and reinforcement of educational services, there is a need for efficient communication mechanisms within schools to be established, for example to allow for regular consultation between support staff and regular teachers, or to apprise new staff of the needs of their students who have disabilities. In the case of schools who may only have one or two students with disabilities, it is important that all staff are aware of their needs, particularly in the case of students who may have 'hidden' disabilities such as epilepsy or hearing impairment.
* Communication links between schools, parents, government agencies, and relevant organisations should be strengthened so that information and knowledge of new developments in technology or aids can take place.

* There is a need for in-service education of both teachers and personnel responsible for career guidance to ensure that they have an adequate and informed understanding of the needs and abilities of young people with disabilities.

* Many of the needs identified in this list should also be met at Primary school level.

* Finally, rather than expecting students with special needs to adapt to a sometimes hostile environment, every effort should be made to adjust school systems to accommodate the pupils' rights to a meaningful education.
INTRODUCTION

Although many adolescents deny it, parental practices and attitudes continue to play a significant role during the period of adolescence. A number of factors may combine to influence relations between adolescents and their families. These include the family power structure, the socioeconomic status, cultural background, residential mobility, and family stability. An added factor in the case of a person with a disability is the acceptance, or non-acceptance, of their disability by other members of the family.

For a number of girls and women with disabilities their 'homes' are residential settings where other, but parallel, factors play a role in their development. For example, the practices and attitudes of the administration and caregivers, the number and sex of other residents, the relationship between the young woman and her 'natural' family, and the values displayed by the staff of a residence, can all be seen as sources of either assistance or conflict.

The importance of family support and encouragement in the education of young women with disabilities has been alluded to in previous chapters. In this chapter young women talk about their families, or their life in a residential setting. Comments made by professionals regarding the families of young women with disabilities are also included. The fears for the future expressed to us by the young women we spoke with have also been placed in this chapter, for these fears further highlight the degree of dependency that young women experience with regard to their families.

The young women interviewed lived in a variety of home situations - the girls still at school lived with both parents, with one parent and a stepparent, with a single parent, or in a foster home. Some had sibling(s), others were only children. Some young women lived in a residential setting. In the case of women who had left school in recent years, some were living by themselves, while others were living with foster parents, with grandparents or another relative, with a male companion, with their husband, or with other women. As part of our investigation we asked young women about the help and support given to them by their family while at school, and the type of activities they did together. We also asked young women who live in residential settings to tell us about their home life.

A strong, though not necessarily excessive, degree of dependency on the family was evident for a variety of reasons: the social isolation that many young women experienced amongst their peers; an indication that some parents were reluctant to allow their daughters a lot of social freedom because they feared they may be taken advantage of or have an accident; and the fact that many girls had to rely on parents to drive them to meet with friends. As a result families tended to be the main source of social outings and company outside school hours for many young women. Advice on clothes, hairstyles, friendships and 'growing up' was most commonly sought from mothers and sisters. Emotional dependence and, in some cases, a feeling of being a burden to parents, was evident from the statements made by some young women. Some young women felt their parents were overprotective, but most said that they understood the reasons for this. Young women with a hearing impairment appeared to experience some frustration with their families because communication problems led to them feeling left out of conversations and family gatherings.
FAMILY LIFE

Some of the remarks made by young women about their families appear below. A number of young women remarked that they were not allowed to do certain things. This was accepted by some young women, and not by others:

"I'm only allowed out on Friday and Saturday night, and my parents have to drive me - my friends go out a lot more than I do. My disability does bother me at times, especially when my father uses it as an excuse to stop me doing things." (VI-16)

"I don't go out at night, I wish I could but Mum and Dad are worried about me, it's pretty dangerous out there. I don't really mind." (PD-14)

"My family tell me what to do. I don't like it, but sometimes I have to do what they say." (HI-14)

"I get along with my parents alright. Sometimes they don't let me go out because they worry about me. That worries me sometimes. But I understand them. If I tell them where I'm going it's alright. My family help me a lot." (HI-16)

Most young women indicated that they got along well with their parents, or that they felt it was reasonable for their parents to worry about them:

"I ask before I go out, and if I'm not allowed I don't go, I don't feel this is unreasonable." (PD-17)

"I go out at night with Mum and Dad but not with friends. My parents are patient with me." (HI-13)

"I get a lot of understanding. It's amazing the love. They are protective, they won't let me ride my bicycle without someone being with me, but not over-protective, they encourage me to go to parties and are very supportive. I won't be in a hurry to leave home, I'd desperately miss them." (VI-15)

"I get on OK with my parents. I sometimes argue with my father if I want to go out at night or watch more TV. I'm allowed to go to a disco if I'm with lots of friends." (HI-14)

"I have a good family. My brothers and sisters are good fun. I have good times with my family." (HI-14)

"We are very close. I love my parents very much. I love my sisters very much. They have been very good to me. They help me a lot. If I have a problem and I cry, they help me, make me happy, give me advice." (HI-17)

"We are a really, really close family and we can talk about anything." (VI-16)

"Mum wants me to get a full time job. Mum wants me to learn to read and count money. Dad helps me with reading the Bible and telling the time." (ID-15)

Some of the young women indicated that they were having difficulties with some members of their family:

"I have become very distant from them [parents] lately. I don't mean to. I spend a lot of time in my room reading. I used to talk to them a lot and I'm feeling left out at the moment." (VI-14)

"I'm fed up with my sister and her friend. Sometimes I want to talk to her and she tells me to wait because she's watching TV. She watches too much TV."
Sometimes I get angry because my Mum always talks to my sister and I miss out. I ask Mum, but she says it's nothing. Dad doesn't understand me much. Mum doesn't sign much." (HI-15)

"Sometimes Mum doesn't tell me what she is talking about ... I get cranky, I sometimes fight. Sometimes Mum and Dad don't believe me." (HI-15)

"I get on alright with Mum, but not much communication with my father because he is very old and has very different ideas. Only Mum signs at home, she is a little bit protective, but not much." (HI-17)

"Mum doesn't like talking about my disability because she thinks it will upset me. Dad is too tired, or has had a bad day himself" (PD-14)

"I fight with my brother and little sister. They call me spastic - my sister got told off." (ID-15)

A few of the young women referred to their moves towards independence:

"I got to stand on my own two feet. I annoy my brother and sister sometimes." (HI-17)

"Mum and Dad help me the most, but I do most things myself." (PD-16)

One young woman spoke at length about some of the frustrations she was experiencing in trying to be independent:

"I get on very well [with parents] because Mum and Dad have brought me up with a theory that if I have anything that is very pressing, or if I don't really want to tell anyone else, and if I have got a big problem or something like that, I can always go to them. At the moment I am just going through the stage of trying to get through to them that I am not a little kid any more - I'm becoming an adult. I have only got one more year and I become an adult, not that I find that important, but it is to a certain extent. I need to have independence. My Mum and Dad are good to me because they are gradually letting go of me in respect of letting me grow up and that sort of thing, so it is really good. I find that occasionally [they protect me too much], but I don't take it as being a rebellious thing to break away from them. The only thing that ever disturbs me about Mum and Dad is when they tend to forget that I am blind. We went overseas for a holiday for two weeks, and I was just talking to my friend and then Dad all of a sudden said "hey, see that over there" and I looked around and I didn't know what he was looking at, and he says "oh, can you see it?", and I thought, Dad you know I am blind, I can't, and he just looked at me silly. That is just something I have to learn to accept because I do act like a normal kid. I am no different, and that is the thing that people find hard to accept." (VI-16)

Not all families were understanding or supportive of their daughters. A young woman with a physical disability who says she put on weight after spending three months in an institution "lying on a trolley", had unhappy memories of her father and eldest brother picking on her for putting on weight:

"I, hey were always making remarks about how I looked - my father made me feel the lowest. I tried everything to get skinny, but nothing worked."

A university student with a visual impairment says that her mother had three nervous breakdowns when she was small. This young woman blames herself for this:

"I blame myself because of my childhood tantrums, wanting to do things I knew I couldn't do, I played on my disability. I'm curious to know, I'd love
to know the background of the whole thing, how Mum contracted Rubella. I'd like to know the effect of having a disabled child on the family."

Another student with visual impairment looking back at her teenage years says:

"I think a lot of us do miss out on the teenage type years of dating because our parents are very frightened that some man's going to come along and... because a lot of that has happened."

Many of the remarks made by the professionals we interviewed referred to the 'over-protectiveness' of parents, and the effect this could have on the young woman. It should, perhaps, be pointed out here that many of the professionals we spoke to may only see young women or their families in crisis situations, or may have been speaking about young women with a particular disability, rather than in general terms.

The importance of parental support and involvement and the effect of this on the success or failure of services provided for their daughters was mentioned frequently. However, some professionals felt that there was an unwillingness on the part of a number of parents to recognise that their daughter was moving into adulthood, although there was no clear indication of how parents could be assisted in this area, or indeed by whom. The frustration of teachers who would like parents to become more involved in their daughters' education offers a counter-balance to the parents who told us that they felt unwelcome at their daughter's school, or felt they were unable to contribute much in such a specialised area.

The comments made by a wide range of professionals in relation to dependency, and its causes and possible affects are as follows:

"Over-protective parents kill initiative and motivation. Disabled people know they need parental support and are conscious they need to be dependent. The amount of dependency makes a child feel a burden." (Disability organisation representative, herself physically disabled).

Staff of a clinic for adolescents offered the following comment:

"Over-protection from family, nurses, etc. - kids don't want it, but have no power to get away from it because they are so heavily dependent on the family or the hospital. Over-protection is related to the fear that girls could get raped because of their developing sexuality."

The Principal of a special unit remarked:

"Parents are generally supportive. Some parents never accept that their children will develop on into adulthood, and never think of them, even when mildly handicapped, as having boyfriends. When it does occur the parents get very concerned and the school has to discourage normal behaviour because parents: are not happy about the girls looking at the boys and chatting them up. It is hard to explain to parents that every female is at risk of rape. Some parents request contraception or sterilization as early as 14."

The director of an employment agency for mildly intellectually handicapped people felt that parents were more protective of their daughters than of their sons:

"Parents would rather girls were in sheltered employment, and they won't let girls leave home unless their accommodation is supervised. Many clients want to leave home."

Staff of a special school explained some of their difficulties:

"Getting parent involvement is difficult. Groups to discuss respite care, advocacy, sexuality and so forth have been arranged, but parents don't come. They are overwhelmed with the problem of looking after a disabled child, and cynical about attempts to help after years of knock-backs."
Staff from an adult training centre felt that parents may feel left out of their daughters' education:

"We can imagine that some parents feel excluded from special schools, very little is taught to parents after years of occupational therapy, speech therapy etc. in school."

Representatives from a State government body for intellectually disabled people emphasized the importance of parent education as an adjunct to the education of their clients:

"Parent education is as important as client education. Sometimes parents may discourage girls from looking attractive. Girls learn from their parents attitudes that marriage is not for them, so there is no need to look pretty. Sex education is not dealt with well by parents. A common statement, usually by mothers, is "what would she need that for?" Parents tend to keep girls sheltered, so there is little dating and even minimised work experience. Families don't see the need for girls to go into work situations. There is over-protection, the fear of rape."

The same problem may be experienced by physically disabled girls according to a group of social workers from a disability organisation:

"Parents' expectations about sexuality are limited. They need to toughen their kids, they are over-protective."

An occupational therapist from the same organisation agrees:

"Do parents discuss the future with their disabled children in the same way as they would with their able-bodied children? Do they protect their children and themselves emotionally by avoiding certain topics because expectations are non-existent? Young girls with disabilities are more sensitive and protected more emotionally. The involvement of parents is critical to the overall success of integration."

Several professionals alluded to an even greater degree of protectiveness being present in families with a southern European background. It was felt that due to particular cultural mores, daughters from such backgrounds tended to be somewhat more protected than Anglo-Saxon Australians, and in the case of girls with disabilities this was even more pronounced. It was also considered by some people that there was less likelihood that services would be requested for girls from such backgrounds because identification of mild disability may be seen as an indication of the family defect which may affect the marriage chances of these young women. The staff of a clinic for adolescents with disabilities said that they did not see many children from south European backgrounds: "In Italian and Southern European families disabled children are seen as a shame on the family, a punishment, or as having bad blood. Staff from the student services branch of a State department of education also remarked that: "Ethnic groups won't identify girls for special education because disability is a stigma which can spoil marriage chances." The validity of these views needs further exploration.

RESIDENTIAL LIFE

Young physically disabled women living in residences tended to voice more complaints about restrictions placed on their lives. They particularly mentioned how their lives were regimented by the clock and administrative convenience, for example, social arrangements often had to fit in with changes in nursing shift. In some instances they felt they were treated more like young children than young adults. Other young women had experienced teasing or bullying from other residents, and in particular boys. However, one of the positive aspects of living away from home was said to be that they learned to do things for themselves.
We look firstly at the negative aspects of living in residence. Anger at regulations, and frustration at being treated the same as younger residents was reported by a group of young women:

“We have to stick up for whatever we want to do because otherwise they [nurses and staff] just get away with everything.” These young women say they are allowed to go to bed later than the younger children, “but sometimes nurses forget and try to put us to bed earlier. There are other people that can’t stick up for themselves as much as some people can, and some people that are our age [13-16 years] go to bed at 8 or 7.30 ... and they do things for us that we know we can do, and it makes us angry at the nurses. [The residence] is good, but it does need to be probably a bit more independent”. The young women complain that “reports are written about us that we are not allowed to see and we are not allowed to go to ‘case conferences’. Staff make dental and medical appointments for us without consulting us to find out when our free periods are, and so we miss out on school. Things improve if our parents speak to the Matron.”

A 24 year old physically disabled woman who has lived in a residence for most of her life hopes to move eventually into a group home. She reports that one of the difficulties related to life in a residence is:

“... being seen to be growing up. We’re just the same as any other person, we can do things too, we’re adults and we’re not little kids.”

The frustrations of being dependent on nursing staff are evident:

“School socials finish at 11 p.m but we have to be here [at the residence] at 10 because night staff aren’t allowed to drive the vans. It depends which nurse takes us, some will wait for us to finish dancing, some make us go when they arrive. On weekends if we go out it doesn’t matter, the nurses get paid overtime. If outings are on we have to be back at 3.30 when morning staff knock off. Sometimes if we don’t like the activity we have to stay till the end, or if we like it sometimes we have to come back early. The kids hate that.” (PD-17)

Getting “picked on” by boys caused one young woman some anxiety:

“... they call me names like bitch, slut, moll, they’ve written rude notes. I complained to Matron and she said the boy will be out on his ear if he does it again. He hit me really hard a few times, he tells me his grandmother doesn’t like me anymore - if my father [who is dead] was here he wouldn’t lay a hand on me. Before he came they called me names, but he is the ringleader.” (She checks to see if the boy is listening at the door) “I’ve discussed it with the other girls and they try and help me, but that’s why I can’t wait to leave at the end of this year.” (PD-17)

Finally, a positive comment:

“When I first came here I couldn’t do anything, now I can” and “we cook every meal, we have a house mother, she does the accounts and money handling, we do the cooking every night, we do the breakfasts, we do our washing, everything, except we’ve got a cleaner.” However, nobody could get along with one housemother: “She treated you like a child, she told you what to do. They always took her side.” (PD-16)
FEARS FOR THE FUTURE

The willing, or unwilling, dependency of young women on their parents or guardians, and the fear of not being able to live a 'normal' life was highlighted when we asked what they feared most about the future. Not getting married, uncertainty, being alone, having to leave school, being unemployed, and a worsening of their disability were among the most commonly mentioned fears. Nuclear war, AIDS, assault, or dying were the next most commonly mentioned things girls worried about. While many of these fears would be common amongst young women in general, the fear of being alone may perhaps be more prevalent amongst young women with disabilities. Some young women had a string of concerns, while others said that they had no fears or worries at all about the future:

“Nuclear war, the economic situation, not enough housing if I want to leave home, going into the big world to get a job, my disability will affect me.” (HI-17)

“AIDS, meeting someone, being able to pay off a house and support kids, having a job, computers taking over jobs, drugs and normal diseases like cancer.” (PD-16)

“If someone breaks into the unit or robs the train. I was lost on the train once.” (ID-14)

“I don’t know what’s going to happen next. I don’t know if there’s anyone to ask.” (PD-15 - this young woman lives in a residence)

“I don’t think much about the future, I just take things as they come.” (VI-16)

Many young women were worried about being left on their own:

“If Mum and Dad ever died.” (PD-14)

“I’m worried I won’t find the right person.” (VI-14)

“That I’ll never get married. Of being assaulted.” (VI-16)

“I’m frightened I won’t get married.” (VI-17)

“The end of the year, getting a job. I don’t want to be an old maid and not get married. I’m scared I’ll put my career before marriage.” (HI-17)

“Only that I won’t be able to live a normal life, mainly that. Will I live independently? Will I get married? The usual things a girl thinks.” (PD-15)

“I’m afraid of being old and lonely.” (PD-16)

“I’d hate to live by myself, I want to live with the family or with a friend. If the phone rings, it’s hard to hear, or if someone comes to the door.” (HI-15)

For some young women their worst fear is a worsening of their disability and the concomitant uncertainty that this would bring:

“Dying - whether or not they are going to fix our eyes. You only want the operation if they are 100% sure of fixing it. If we lose our eyesight we won’t even be able to ride our horses.” (VI-14)

“Probably now I’d be with people, if I’d be friendly or shy, or be able to go out with them, because I don’t go out now. If they had a solution to my heart, whether to take it or not - I guess that would be scary.” (PD-15)
Being discriminated against, or fear of not living a ‘normal’ life was mentioned by several young women:

“I worry sometimes about housework, I wonder how I’ll handle everything if I’m in a house. That’s why I think I’d like to live with a boyfriend so he could help me. Most things people do quickly round the house, I do them slowly.” (PD-15)

“Going out on dates and a boy will whisper sweet nothings in my ear and I won’t be able to hear.” (HI-17)

“The outside world, leaving school, having to get a job.” (PD-16)

“Maybe having a child with arthritis. I don’t want a child to go through what I did ... and if [boyfriend] and I lose each other, if I can find someone else as nice and caring as him. Not getting a job, and some people not accepting you – telling you there are no vacancies.” (PD-17)

“That I won’t be able to do what I want and I’d be stepped all over because of my disability, put down and discriminated against. It’s hard enough for women to join the ranks and it’s going to be even harder for me. I’m scared that the way I want my life to flow won’t go the way I want it. I wish I could be motivated.” (PD-15)

A certain ambivalence was evident in some of the statements:

“Just getting older, getting closer to dying. I don’t really worry about anything.” (PD-17)

“Sometimes I worry about a change in my eyes, but not much.” (VI-16)

“Rapes, murders. I want to get a good job, not a bad one.” (HI-14)

“Lots frighten me. I don’t want something to happen to me. My first job might frighten me. I hope I have a good future.” (TI-17)

“AIDS, nuclear war. I hope I’m not dead in the future.” (HI-17)

Not getting a job was a worry for some young women:

“Not getting work, just staying at home. Not being rich and having money in your pocket.” (HI-14)

“I’m worried about what to do if I can’t find a job.” (HI-16)

The fears outlined by these young women are mirrored in the statements made by women who had left school in recent years. The same concerns of being alone, not getting married, not finding work, or worsening of disability are the common fears of young disabled women in their twenties.

CONCLUSIONS

The statements made by young women in this chapter strongly indicate fear and uncertainty. Their fears for the future, a future that not many people discuss with them, are evident. Today’s emphasis on ‘normalisation’ is apparently appreciated by young women with disabilities, but as they compare themselves to their non-disabled peers and build dreams for their future based on what is ‘normal’, they worry about bringing them to fruition. A feeling of frustration comes through, coupled with the recognition that rebellion against family influence and help is difficult given the inevitable dependency on family, or residential staff, for daily needs.
HOME LIVES - POSSIBLE AREAS OF NEED

The lack of specialised counselling resources in Australia has been mentioned by several of the professionals spoken with. However, in order to assist young women and their families to plan realistically and perhaps more optimistically for the future, it may be helpful to consider the following areas of need identified in this chapter:

* There is a need for increased communication between parents and professionals so that they may more easily understand each other's perspective. The whole family may need to be counselled in certain instances.

* Parents of daughters with hearing impairment should be encouraged and assisted as much as possible to learn to sign.

* Families and their daughters need up-to-date and realistic information about future possibilities in the post-school years, so that definite goals may be set.

* Young women need to have more information about their particular disability where this is possible. This will enable them to better plan for their future.

* Young women are also evidently in need of more counselling and assistance to help them overcome their uncertainty and fear about their future. Accurate information concerning further education, training programs, accommodation prospects, subsidies, pensions etc. needs to be made easily accessible.

* There is a need to encourage young women to have more interests outside the family circle in order to help them achieve a degree of independence away from the family.

* It would be desirable if more flexibility could be introduced into timetabling arrangements in residences.

* The need to inform, counsel, and consult with young women about their future is also present in residential settings.

* There is a need to avoid 'mothering' or 'over-protecting' young women in residences, and to recognise that during adolescence they prefer to be treated as young adults rather than as children.
THE POST-SCHOOL YEARS

INTRODUCTION

In previous chapters we have discussed the personal, school, and home lives of young women with disabilities, and have identified various means by which their needs could be better met. To complete the portrait we have painted of these young women we focus in this chapter upon hopes expressed for the future - what the young women think they will be doing in five years time, whether they would like to get married and have children, and whether they think they will work or be unemployed. In the case of some of the younger girls not all these questions were posed, although some volunteered information anyway. Most of the young women had no trouble in answering the questions about their future, they had evidently given some thought as to what they would like to happen. However, given their statements about their fears for the future which revealed that they were worried that they may not find a job, get married or live independently, it is probably fair to say that the hopes expressed by young women in this chapter are just that - hopes.

The use of words and phrases such as "hopefully", "maybe", "I'd like", "I may", and so forth illustrate the uncertainty with which they approach their future. Further comments concerning their hopes for the future, such as "I hope I'll have a boyfriend", or "I'll be going out with friends" also serve to underline the current lack of such opportunities experienced by the young women.

Also included in this chapter are some brief biographies of young women who have left school in recent years. Because integration into regular State schools was not an option for most of these young women, the majority of them attended either a special school or a girls independent school. The women who attended independent schools were often the only student in their school with a disability. The experiences of these women in the world of further education, training, unemployment, job seeking and, in some cases marriage, show some of the realities of a world where many of the supports of younger years have been diluted or withdrawn.

FUTURE HOPES AND REAMS

In Five Years Time

In response to a question about what they would imagine themselves to be doing in five years time we received a variety of answers. A theme emerged however - the main hope or expectation was that they would be working. Secondly that they would have a boyfriend, or a family of their own, and/or more friends. The third most common reply was that they would be living away from home. Some young women remained ambivalent, confused or unsure about their future, or could not reply to the question.

Some uncertainty is evident in the following replies:

"Probably people might think it is stupid, but I think that now if I shifted out into a house or a flat of my own I don't think I could handle it. I would probably like it for a few months, then I would want to go home." (HI-16)

"I'll be at Uni, travelling, maybe working. Probably still living at home. I may live for a year with a few friends and then come home - you have to cross a river when you come to it, and take opportunities." (VI-16)
"Hopefully working, enjoying life either in my own house or living with friends - maybe I'll still be at home. A boyfriend, maybe thinking of getting married." (PD-16)

"When you are 16 you are supposed to leave here [residence], go to a flat or group home. I'm hoping to get with my parents. I've always hoped to be with my parents. I have to develop personal hygiene. I want to get a job with babies - I don't know what sort of job you can get." (PD-15)

"I can't imagine. I'd love to have a family of my own. I don't want to go to Uni. I'd like to do motor mechanics, work with animals or be a park ranger. Actually I'd be quite content to stay at home. I'd like to try flatting." (VI-16)

"I truly hope I'm not married. If I could control my life, maybe engaged. Hopefully working, hopefully not living at home - I like to be independent, to do what I like." (HI-17)

"I'll probably be working, driving. No I don't think I'll get my driver's licence. I might be living on my own." (ID-14)

"I don't want to go to college or Uni, don't know if I could handle it." (VI-14)

"Still living at home. I'll probably have a job. I'd like to have a boyfriend. Hopefully there'll be a lot more social gatherings. If I'm still here when I'm 30 I'd have to move out." (PD-17)

For the majority of young women, working was the first thing they imagined they would be doing in five years time. Some mentioned that they would like to have a lot of money:

"I'm aiming for anything with money. I don't want to be working all my life." (VI-15)

"I'll be riding in a Porsche, have lots of money, win Lotto and be outgoing." (PD-14)

"In a job, earning money. Hopefully having a car, meeting a nice boy, being an aunty having a big fat bank account, winning Lotto." (PD-16. This young woman would: "just like to have a good, happy life and live day by day.")

"I'll be a career person and I'd love to be travelling. I'm not sure yet but I'm going to make something of myself." (PD-14)

"Working in art and graphics. Maybe have a hearing boyfriend. Probably living with Mum." (HI-15)

"Working, finding a boyfriend, going out a lot." (HI-16)

"I might have a job then, have a car, have made new friends at work." (HI-17)

"Hopefully I will have a job. I will have started working with a firm in costuming, fashion designer in the theatre or freelance work in fashion designing." (HI-17)

"I will probably work with other people with disabilities, special needs or just the sick." (PD-17)

"I'd like to work at the children's hospital part-time, and go to [a residential]." (ID-17)

"School's hard, but I'm leaving at the end of the year so I can get a job, and to help Mum with money." (ID-15)

"I want to get used to how to work." (ID/Epilepsy-17)
Some young women placed the most importance on having their own family, a boyfriend, or simply more friends in five years time:

"I will be married after 21, not rich but comfortable, a good job, friends and life. Close to home and husband's parents, about half way between. We won't go out too much, drink too much - I'd rather be healthy." (HI-16)

"Have a boyfriend, have a job. I'll be living in a flat with either another disabled person or a friend from school. I don't have to leave here [residence] at the end of the year - I'm so glad." (PD-15)

"I would like to have a hunky, blonde boyfriend, taller than me." (HI-15)

Other young women placed study first:

"I'll be at Uni, studying Music, English, possibly German, or theatre." (VI-14)

"I'll have my degree and hopefully I'll be out working somewhere with disabled people. I hope to specialise in counselling later on in my degree. I'll be in my own place with a girlfriend." (PD-19)

Travel, for some young women, was the thing they dreamed of doing:

"Hopefully I will have travelled. Hopefully I would have worked in a kindergarten or owned one. I'll probably have a boyfriend, but not married." (VI-16)

"My dream is travelling around the world. I'd like to be at college or Uni. I don't think Uni offers a course on fashion. I hope I'll have a boyfriend. I don't think I'd like to be a checkout chick." (PD-15)

Employment/Unemployment

It would seem from the above typical statements that these young women anticipate few problems finding work. We wondered whether they had considered what they would do if they were unable to get a job and found that the majority of young women had not thought of this possibility. Only two girls said that they could live off the pension:

"I don't know. I suppose we'll be living off the pension. We've got a friend who gets $240 a fortnight." (VI-14)

"It will probably get me down. As long as I could get something to occupy me, to help someone else, even on the pension I'd probably get volunteer work and prove to people I'm capable of doing things." (PD-16)

Undertaking further education as an alternative to being unemployed was mentioned as a possibility by a number of young women:

"I don't know what I'd do, probably go back to TAFE and do another course." (PD-17)

"If I can't get a job, I think I'll get my Masters." (PD-19)

"If I can't get a job I will go to TAFE." (HI-14)

"I will try to get one and if I can't I will go back to college." (HI-14)

"If i can't get a job I'll go back to school or stay home." (HI-15)

"If I can't get a job I'll do more study." (HI-17)

"I hadn't thought that I won't get a job. I might start my own business or go to Tech." (VI-16)
Some young women thought that voluntary work would be the answer to unemployment:

"I'll probably do some voluntary work or get a job doing something else. I couldn't handle sitting at home every day." (VI-16)

"I'd scream. I don't know. Probably volunteer work until something came up. You've got to think with a positive attitude." (PD-17)

The possibility of unemployment was not countenanced by some of the young women. They would just keep trying until they got work:

"I'll always try and get a job. If the worst came to the worst I'd go and work for my dad, or do child care, or something like that. I might have to do Special Education teaching - I wouldn't like that - maybe it would be OK with intellectual disabilities but not sensory disabilities." (VI-16)

"I'll try until I do get a job. While I'm at TAFE I'll apply for jobs anyway." (PD-16)

"I'll just try, really try to get a job. I don't want to be a dole bludger, it'll be under sufferance." (HI-17)

"I keep looking. I will nag. I won't sit around the house. Just get out there and nag." (HI-17)

"I wouldn't give up hope. I'd go around to offices and show them my abilities." (PD-16)

The family were seen as a source of assistance in finding work by some young women:

"If I can't get a job I might ask Mum and Dad to help me." (HI-13)

"I will ask my family to help me get a job - one that's not boring, good money." (HI-17)

Some young women said they didn't know what they would do if they were unemployed, others said that they would just stay at home:

"I've never thought of that (being unemployed)." (PD-15)

"I don't know. I have thought about it. I don't know when I'll leave school. I don't think [residential staff] will let me leave." (PD-15)

"If I can't get a job, I will live at home." (PD-15)

It is interesting to note from the above statements that many young women see TAFE as an option only after an unsuccessful job search. Only one girl, a 14 year old with a hearing impairment, said that she would approach CES if she couldn't find a job. It is also interesting that so many girls said that they would find volunteer work if they were unable to find paid employment. A number of the older women we spoke with did, in fact, undertake voluntary work either after completing their education, or in between further education or work. Being a perpetual student seems also to be used by some who may experience difficulties in finding employment.

Others' Expectations

Parents in general were uncertain about their daughters' future, and responses mirrored the comments of the young women in most cases. Many parents felt that their daughter would live independently at some stage, but others commented that they could not imagine their daughter leaving home and coping on her own. Most said they would go along with their daughter's wishes with regards to career or living independently. Few parents had knowledge of the type of vocational assistance, training or career guidance available to their daughter or had found efforts to get information a frustrating experience. The majority said that they encouraged their daughter to be independent, but this was seen in terms of the use of public transport, cooking, and cleaning, rather than in the sense of cutting emotional ties or dependencies on the family. Past uncertainties about
educational opportunities, funding for services, and financial support for families appears to have engendered an understandable attitude of 'take each day as it comes', which militates against the making of serious plans for the future. For most parents, the main aim for the future could be described as finding security for their daughter, and finding work in an office was often seen as the best way to achieve this end.

Typical remarks made by parents are as follows:

The mother of a sixteen year old visually impaired girl who would like to work with children says:

"She could work in an office - she is marvellous with children but people may not choose a girl with visual impairment for a nanny, she would have to prove herself. She could manage word processing. I've tried to encourage her to be independent, she is not treated differently from her sisters, though they think she is spoilt. I've been a little over-protective, I still tend to grab her when crossing the road. My biggest worry is two years after she leaves school - transport, getting a job, socially. I feel she may be isolated, school has been so safe. I know she will live independently, and I imagine she'll get married. The Social Worker and I have agreed that office work would be safer, and have tried to talk her into a Public Service job."

The parents of another visually impaired girl aged 16, who would like to be a physiotherapist, lawyer, or teacher, agree with her aspirations and say:

"We are hoping she will get a job. We prefer she stays at home, and hope eventually she will get married - it's the normal thing to do. If she has to study far away she will naturally flat, but otherwise no."

The father of a 17 year old hearing impaired girl who wants to be a lawyer, or a legal secretary, says:

"A secretary - I believe she'll get it because she works so hard. I don't see her not in the labour force. I hope not. She's working too hard. She could live on her own. She is over-ambitious, but makes her own decisions 90% of the time."

The mother of a 16 year old hearing impaired girl who would like to go into screen printing or photography says:

"She could manage on her own, but I don't think she will leave home for a long time because she won't want to. She is not more frightened than any teenager about the future. She won't do factory work, ideally would work with animals. She enjoyed office work experiences, and I hope she may go into that."

The parents of an 18 year old physically disabled girl who wants to be a social worker say:

"There will come a day when she will leave and do her own thing. We vowed we wouldn't coddle her, and encourage her to keep going. Education is important to her - a government job is most likely, social work or guidance officer. She is interested in alleviating peoples' worries."

The mother of a 17 year old physically disabled girl who is currently studying commerce at TAFE sees her daughter's future as:

"Working, plenty of nice friends, getting out, bringing home money. She'll achieve what she sets out to do, probably get married. I worry about what will happen when I'm not around, and hope her brother and sister will take care of her. I don't encourage independence - unless there is some reason to move out I can't see the point, I don't force them to cook. It's the same for her sister."
Uncertainty and worry about the future are revealed by a mother of a 15 year old physically disabled girl:

"I encourage her to be independent - she'll join her sister in cooking but wouldn't do it herself. She manages public transport OK. She doesn't have motivation or initiative. I'd like to think she'll leave home and talk about 'when you go flatting', but I don't really know what she'll do. I worry, but there's no point. You don't know what's available. She never thinks about her future."

Similar fears are expressed by the mother of another 15 year old physically disabled girl:

"She won't leave home for a long time. We are very concerned about her future when she won't have anyone motivating her. She will try for TAFE and then a job - if she doesn't do that, I don't know, she'll be one of hundreds of girls and may have to rely on her handicap to get a job."

The mother of a 17 year old hearing impaired girl who would like to work in a laboratory after going to university or college says:

"We encourage her to be independent, but she relies on me too much. She has her own money, I'm teaching her to drive, she does her own shopping and has a long trip to school by train. We feel she will go on to further education, not office work, maybe physiotherapy, a library or laboratory medical work. She needs to have a skill. She might be able to marry someone less deaf. We would agree with whatever she chooses to do."

The hopes and fears for the future of a 14 year old girl with cerebral palsy and mild intellectual disability are summed up by her mother:

"Maybe catering, maybe data input - she's good on her cousin's computer and might be OK with repetitive work. She is learning independent living skills at school and I can say very positively that I expect her to live on her own, maybe in a group situation. She sometimes talks of marriage and kids, it frightens me a bit."

The mother of a 16 year old girl with hearing impairment who is reportedly achieving very well at school says that her daughter will go on to further education, and will need a challenging job. Attempts to get information on suitable careers have, however, been frustrating and the people they have spoken to did not know what types of jobs were available for people with hearing impairment. The mother will go along with whatever her daughter wishes to do, and feels she may work:

"... with animals or something on the research side. She will be able to live independently. She has a guard dog which she trains. I would like her to have a contented and fulfilled life and I think she might get married."

The parents of another 16 year old girl with hearing impairment also say they will agree with whatever she wants to do. They consider their daughter is:

"... very academically minded. She will probably do a science degree, and then do a Ph.D. She will be able to live independently."

The mother of a 17 year old woman with a physical disability says:

"She is so restricted in what she can do, and she's got her heart set so much on social work. If she was interested in office work she'd have more opportunities." When asked if her daughter will ever live independently, her mother says: 'I don't think of it. I try not to cross bridges before we come to them. She'd have to have a certain amount of help. There's no reason why she couldn't marry, but the work involved with kids - it would depend on her husband's help. It would be nice to think she could.'"
The mother of a 13 year old girl with mild intellectual disability says that:

"...modelling would suit her, under supervision. She will be happy to stay at home, and I hope that she will get married to a nice Christian boy - she won't go out unless they are engaged."

Finally, the mother of a 14 year old girl with an intellectual disability says that she doesn't want her to stay at school, and hopes that she will get work experience in Year 10, perhaps in a laundry or a hospital. She sees her daughter living with friends in the future:

"...perhaps in a group situation. She wants to get married and have babies. I can't see anything against her getting married. I'd like her in a married situation with a Christian."

The question of employment for young women with disabilities was talked about by many of the professionals that we interviewed. Some concern was evidenced that too much was being expected of people with disabilities in the area of employment. It was felt by some that the thrust towards 'normalisation' could limit opportunities, and that the elimination of sheltered workshops may lead to reduced job opportunities given the current economic and technological climate. As we have seen, the young women and their parents anticipate, or hope, that they will find work when they leave school, or go on to further education leading to career opportunities, albeit in stereotyped areas. Professionals, on the whole, considered that young people with disabilities had a realistic approach to areas such as employment and housing. They were, however, afraid that expectations may be raised that could not be met. Based on current experience the professionals considered that employment opportunities for disabled people in general were poor, and girls in particular were seen to have limited chances of achieving well-paid, full-time work. The lack of adequate vocational guidance, and transition-to-work training schemes, coupled with a reluctance to guide young women into jobs less traditionally associated with particular disabilities, was strongly criticised. Poor preparation at school, low expectations, inadequate work experience, lack of support services and resources, and an underlying notion that young women would somehow always be looked after by the State or by a husband or family, were cited as reasons for the less than satisfactory outcomes for young women leaving school. There was a great deal of concern evidenced by people we interviewed about the post-school options for young women. While many of the remarks could equally well relate to young women without disabilities, it will be seen that the factor of disability does, in the view of these professionals, create additional barriers to successful post-school outcomes. Their remarks are presented below.

A representative of a school health service is worried about some of the changes taking place with regard to sheltered workshops:

"Everyone used to have a very idealistic view about intellectually or physically disabled people working in a normal work environment, but you need the government resources - we've got to change our views and let [people with disabilities] have a worthwhile life maybe without a normal environment - they can have a fulfilling life even if it is in a sheltered workshop with recreation. Staff feel really concerned for some of their pupils going out with no place in a workshop ... this proposal to close workshops, we'd be going back to 1961. I think they can be modified, but not abolished. The assumption that all disabled people can be trained to enter the full workforce is incorrect."

This view is reiterated by staff from a clinic for adolescents:

"Often young people with a disability can do a job, but not in the real environment. They may need to have an interpreter for instance. Other people have been pushing these people to do that sort of work without looking at practical aspects. Social workers, guidance officers, and people like that, should at critical times say "no, your personal attributes and intellect would be very valuable, but perhaps we can channel it into something akin to the work..."
you've been describing, something you can do properly and earn a living at" - what is the point of encouraging a deaf girl to be a hairdresser when it's just not feasible. Girls of 15, 16 and 17 may have the feeling that they do want to get out and do something, but they don't have the power or the knowledge. Unless all the links are there between home, family, school, transport systems, finance, etc., you can be totally stopped by one very minor thing, for instance one young woman who wanted to do computer science was pushed into another course because lifts weren't available."

Staff of a special school for intellectually disabled students say:

"There is nothing for kids at TAFE. Courses aren't adapted for intellectually disabled kids. Many kids go to sheltered employment; open employment is a problem. Some of the children would love to go to open employment where they have had work experience, but the chances are pretty slim. There may be a problem in the future with sheltered workshops ceasing. I despair sometimes for the older girls - they may have nothing after they leave school."

The lack of varied employment opportunities, unrealistic advice and expectations, and low self-esteem and confidence were all referred to by the staff of an adult training centre catering for young adults with physical or intellectual disabilities:

"At 16 you are eligible for disability allowance, and there's this strong feeling that you're not really preparing definitely for anything. Options for young disabled girls are more limited than for anybody else. The only areas the [girls] we've seen have gone into are basic office skills, upgrading literacy and numeracy, horticulture, and catering. They are reluctant to move into computers, they don't even consider it, they don't see they have the capacity to do it. I hear a lot about childcare, everybody, especially the most incapacitated, say "I want to work with children", or in a hospital, or even be a nurse. I've had a number who want to be telephonists or receptionists, but they lack a lot of skills to be able to do even basic first courses because they aren't literate enough to even take a message. People make allowances for them, which is really bad, and so if they don't turn up they don't get into trouble. They also get really depressed when they can't get a job, but more often than not they won't do anything positive, just talk about how horrible it is being unemployed, and how they really want to work with children. What can they do - the problem went wrong so far back about learning to begin, to concentrate, and to finish your task. Also at the other end, where people have succeeded in courses, the outcomes aren't what they anticipate, or it's not their ability to learn or do specific tasks, it's their inability to show up on time. They need someone to tell them the truth and the realities. There's obviously not enough being done, or cases of wrong advice. They're conditioned to think it's not really worthwhile pursuing anything vocational, but haven't learnt to cope with the alternative. They can't define their problems, just make excuses for not doing something."

An occupational therapist observed that most of the young women with physical disabilities that she had had contact with were not just sitting at home. Some were in open employment, some were doing voluntary work, some were at workshops, Commonwealth Rehabilitation, or undertaking further education. She did, however, comment that: "many are in part-time employment. Girls are less careerist and TAFE is their vision for further education. Jobs for girls are fairly sedentary - typing, reception, library, cataloguing."
Restricted opportunities and problems in defining an appropriate school leaving age were mentioned by professionals assessing young women with hearing impairment:

"Once they get into employment, their inability to communicate makes them work rather harder, and most of these girls seem reasonably happy with their jobs unless they get stuck in something, like washing dishes because they are good at it. Girls tend to be restricted, especially at night, in such areas as going to night classes. Girls who want to work in child care are told they can't because of deafness. When people are put into trades, it is outside influences rather than because they really want to be there - services restrict their choices by 'sloting' them in. Kids seem to be pressured to leave school early and take a job. Because the general community is leaving school after Year 10 and going to secretarial or training courses, for our girls the longer her education (and it is needed) the more difficult it is for her to compete at age 18 with 16 year olds."

Special school staff, also referring to hearing impaired girls, said that:

"...deaf girls are often underemployed. When they are looking for jobs they are very unrealistic. They should be trained to use computers, as technology is destroying traditional women's work."

A doctor, who sees many hearing impaired girls, says that:

"They are often not taught social behaviours, are ill-prepared socially and exhibit inappropriate behaviour. They aren't stopped when they are younger, and excuses are made for them because they are deaf. There is a need for work preparation earlier in the school. There is a tendency for the deaf to go into unskilled jobs, many stereotyped and chosen by parents, e.g. hairdressing. They should be encouraged to go to university and think about jobs for which there is a course at college (although there is a need to improve interpreting services). Many have lacked role models."

Referring to young women with an intellectual disability, several people drew attention to unrealistic expectations. The Director of an employment agency for mildly intellectually disabled adults commented:

"Most clients are from special school, and have had work experience in nurseries. They are interested in child care and office work and there is no employment in these areas. They have unrealistic expectations. Their typing skills are not sufficiently good to get a job, and they have poor reading skills. Seventeen is too young to leave education. Expectations are usually too high, and this causes friction in the family. 99% of the girls are unrealistic, it takes a long time to get them to be realistic about jobs. Boys have a more realistic idea of work, they will take any job and are willing to try anything."

Staff from a support unit for girls with an intellectual disability did not concur with the view that they should stay at school longer:

"It's not appropriate for all. We know from employment agencies that employment prospects are at a peak for students with disabilities between 15 and 17, so if you keep a kid at school longer you are minimising their employment opportunities, the chance to get into the market and develop skills other kids might not have."

And perhaps the best advice of all:

"You have to look at the individual kid."

The director of a sheltered workshop remarked that in her experience "girls have no fixed ideas. They are apathetic and protected."
Staff at another employment agency complained that:

"Girls want to work with small animals or children. They have to look at realities. Some girls have been placed in Child Care Centres, but generally they need diplomas. Women are mostly placed in part-time jobs, and not many placements are made through work experience programs. We have to spend time getting girls to look at career options."

Staff from a work preparation centre add:

"It is painfully difficult to get employment for young people. Girls coming from special school are still little girls in terms of behaviour and dress. They aren't taught to keep up with their peers, and their social and emotional development is held back. Special schools are an authoritarian model, the freedoms and expectations are different from regular schools. We often spend a year or so teaching adult behaviour."

Representatives of a government body serving people with intellectual disabilities point to gender differences in post-school options:

"In terms of employment, if four jobs are available in a workshop, three to four would be given to males. Workshops tend to be gender oriented, males do the woodwork and females the sewing. Only in the area of electronics are females given the same preference as males. There is serious sex-role stereotyping in jobs."

Members of an organisation providing services for the visually impaired pointed to some of the difficulties being experienced by their clients:

"Extra time for study prevents the visually impaired student from taking on casual work. Also goal setting about jobs is a very real problem for many people ... students with visual impairment get very few opportunities to test out what they can and can't do because they are 'treated nicely'. We have to do far too much remediation when it comes to work placement."

They also point out that jobs like telephonist are disappearing because of mechanisation and computer access, and complain that they are often seen as an appropriate place for schools to place visually impaired students for work experience. A visiting teacher of the blind commented: "Some students have high expectations and have to be carefully guided into other areas."

Sometimes girls 'do the rounds' in looking for work. A representative from Commonwealth Rehabilitation remarked:

"When they have been at CES for a while and haven't got a job, they are referred to us. Girls are generally reluctant to take up further study, they are looking for immediate work. If they get a job, it's unskilled, and they are the first to go when there is a downturn in the economy, or if it is seasonal employment. Employment seems to be the highest priority, and employment with status, not cleaning. The job situation isn't good without qualifications."

The relationship between work and independence was referred to by some professionals, and difficulties in finding appropriate accommodation were mentioned:

"A lot of teenagers, because of their parents' means, are not on a full pension and not eligible for community support. For them to leave home is extremely difficult from a financial point of view. It's only those people who do have the education behind them, the training, and the employment, who can then think of going on to proper independent living. A lot become isolated and lonely."

For people in remote areas the ability to travel to find work is undercut by the need to find accommodation in major centres. It was pointed out by professionals in the more remote areas of
Australia that there was little in the way of accommodation for people with disabilities from outlying areas: "The more independent clients seem to stay in lodges, not shared accommodation. If they are unemployed the money they have isn't enough for cheap long-term accommodation." The director of an employment agency also remarked that: "There are not so many hostels for girls as there are for boys, so girls get trapped at home."

Marriage and Children

Finally, we asked the young women their thoughts on marriage and children. We found in interviews with young women in their twenties that they had by that time dismissed or continued to defer thoughts of marriage which they had entertained while adolescents, or perhaps accepted that marriage for them was unlikely. Some had thought about the practical aspects of marriage and children as it related to their particular disability. A common statement was "I am a career woman" or "I’m not sure I could cope with kids." It is perhaps relevant here to note the comments of a counsellor from a centre providing advice and workshops for people with physical and intellectual disabilities and their parents in the area of sexuality. This counsellor remarked that many people with disabilities needed to grieve about the impact of their disability on their lives, in particular the possible lack of an intimate relationship.

Recent studies have shown that teenagers, despite statistics on divorce and single parenthood, expect to marry and have children at some stage in their lives. For this reason, we confined ourselves to questions about marriage and children, and indeed found that most of the young women we spoke with did aspire to this conventional and traditional role. Alternative living arrangements or lifestyles had rarely been considered, or at least were seldom voiced, by the young women we spoke with. Although most of the girls had certainly thought about getting married, the reasons given were linked either to having children, or to having someone to look after them, rather than perhaps more conventional dreams of romance. As with boyfriends, however, for most the question of marriage was deferred. Apart from girls with a hearing impairment (where communication assumes paramount importance) few of the young women had considered marriage to a man with the same disability as themselves. This is what they said:

"I would like to get married, but I don't know whether to have a garden wedding or a church wedding." (PD-15)

"Mum and Dad don’t want me to move unless I have a definite plan. I don’t think I’ll be allowed to move out until I’m married.” (PD-17)

Some of the young women were quite definite:

"I'd like to get married and have wo kids.” (ID-14)

"I want to get married about 22 or 23 and I’d like to have four children.” (VI-16)

"I hope to get married within the next 10 years and have at least two children. I’ll go to the Northern Territory and adopt a child if I don’t get married.” (VI-16)

"I’d like four children, but nobody wants me at the moment. Four girls, I don’t want boys - they are too immature.” (PD-14)

Other young women were unsure, or deferred making decisions about marriage:

"If it happens, it happens. Not until I’m about 26, I want to have a free life. I don’t even know if children will have our eyesight.” (VI-14)

"I don’t think I’ll be married for at least 10 years.” (PD-14)

"I have given it some thought, but it’s not my priority at the moment. But I would like to get married and have children one day - about age 25, after I’ve seen a bit of the world.” (PD-16)
"I don't want to get married too young, about 21 or 22, and kids whenever." (PD-17)

"Hopefully, probably about age 20." (HI-17)

"I don't want to be married, I'd rather be on my own for 10 years, establish a career and be independent. When I find the right guy I'll settle down and start a family, but I won't give up my career. I'll have kids when I'm 30." (PD-15)

"Married? Not yet, because I am a bit young and I've got to get the right guy, and just love me a lot and care for me a lot, and I have got to like him a lot, and I don't want to get married just yet. I am not ready for things like that." (ID-17)

Some young women made it clear that they would like children, though some worried about 'passing on' their disability:

"It's very sad to leave father and mother, everybody leaves parents. I don't think of marriage. I'd like to have kids." (VI-17)

"Yeah, but I definitely want to have a little boy and a little girl, a quiet baby. Doesn't bother me if my husband is deaf or hearing, as long as he understands me." (HI-14)

"Yes, I can't wait to have kids. I wonder if my kids might hate me because they got my congenital nystagmus." (VI-16)

"I'd like to be able to control my urine, it's not very nice going to the toilet and that - I worry about whether my children will have it." (PD-14)

The benefits of marriage to a non-disabled person were mentioned by a few young women, for example:

"Having a sighted person - it would be harder to explain [problems], but easier if you can't do something and they can help you." (VI-14)

"I think I'd like to live with a boyfriend. Sometimes I think I'd like to have kids, other times it would be better not to. If I had a husband they may be like him - I think they'd be more normal." (PD-15)

Other young women worried about their ability to cope with marriage and/or children:

"If I ever did get married and have kids, especially having kids, that would be a bit of a hassle I think because as kids get older and grow up they will ask questions like "why can't you do this, and why can't you do that?", and then you have to sit down and explain to them that you can't see and with my hearing impairment that will be the same thing. I think that will be a little bit of a challenge if I ever did have kids. That would be just one of those things that I would just have to face. I'll probably get married. I have been sort of thinking about it, I don't know. I would rather marry someone who is sighted because if you marry someone who is visually impaired - well, OK it would be easier to tell him all your problems, but I think: it is better if you get somebody who doesn't have that problem, then they can probably give you help, whereas that other person may not be able to give you help." (VI-16)

"Mum says I can have babies, but I don't know if I can cope with a young child. I don't think I'll get married anyway. I would rather have a career. If the right guy comes along I'll get married." (PD-19)

"I'd like to get married and have one kid. I could look after one. It doesn't worry me who I get married to as long as it's somebody and for the right reasons, not for them to want my money." (PD-15)
The thought that their disability could have an impact on their chances of marriage and/or children was voiced by several young women:

“If I was interested in the person and thought it would work out. It depends how disability affects it.” (PD-16)

“My disability will probably affect my chances.” (PD-17)

In a group discussion with some young women aged between 14 and 17, who have an intellectual disability, there was general agreement that they would like to get married. These were their remarks: “Some day, about 18. I wouldn’t like to have children for at least three years when we’ve settled down.” Most of the girls felt that you shouldn’t wait for three years to have children: “He’d leave you” and “all men want women to have children.” Deferring marriage until they were older was mentioned by most of these young women, although ‘older’ in reality meant age 18, 19 or 20: “I’d like to travel the world young, then when I’m about 18 or 19 settle down and get married, and yes I’d have kids.” “Yes, about 17, take him around the world, then about 18 or 19 settle down and have a kid.” “Yes, I don’t know what age. I like kids.” Not all were sure they would like to have children: “About 20, I’m not desperate for kids.” “After my 21st birthday. I’m not sure about kids.” One of these young women said she wouldn’t like to get married until she was about 25 or 26 and that she would like to have children, but “I want more time to travel.” These remarks were greeted with derision by the group, who said that leaving marriage until that age was too late, and that by the time her child was 10, she would be aged 35, in other words ‘old’!

Finally, some young women were against the idea of marriage and/or children:

“I don’t want children.” (HI-17)

“No way I’ll get married and have kids.” (PD-15)

“I don’t want to get married because it means having a boyfriend.” (ID-14)

“No, no way. I’m ugly, that’s why I don’t want to get married.” (ID-15)

THE ‘OLDER’ WOMEN - POST-SCHOOL EXPERIENCES

The women who had left school in recent years were asked to describe their post-school experiences in the area of further education and/or employment. Because we had asked young women on the Queensland University campus to contact us, the proportion at university is higher than would otherwise be the case.

Out of a total of 68 young women, the majority of whom were aged between 17 and 23 (77%), 32% had done or were doing TAFE courses (mostly office skills); 20% had been or were at a University (mostly studying Arts courses); 16% were unemployed; 19% had experienced periods of unemployment at some stage; and 16% were working in full-time, paid employment. Most of the women who were employed were working in clerical, receptionist or telephonist positions, and it was quite common for these women to be working for organisations providing services for disabled people. In some cases the women worked at such organisations, but received only the pension as income. Only 2 women had attained professional jobs - one as a liaison officer for disabled students, and the other as a teacher in a special education unit.

Three of the young women were married. None had children.

Their school backgrounds were as varied as those of the school students we interviewed - there were women who had spent all their school years at a special school, and there were women who had attended a mainstream school until Year 12. Their disabilities included the same types of disability present in the school-age students. For the most part the older women remained optimistic about their futures. Presented below are the stories of some of these women. Examples have been chosen from a range of backgrounds and experiences, and have also been chosen because they are typical of the experiences of other women. Names have been changed to protect identities.
Julia is currently studying an arts course at university. She lives at home with her parents. She has a brother and a sister, both older than she. Julia has cerebral palsy. Her schooling started at various special schools: "My academic ability wasn't brought out by a special school, they didn't emphasise learning much - the emphasis was to get out and mix with people. The teachers were not allowed to help me with going to the toilet because it was too dangerous, so I developed a wonderful bladder. It was a bit silly because there were 5 stairs into my classroom and they helped me with that. I don't think that happens any more." When Julia was 14 she transferred to a private church school, where she did her school certificate. Her main problems there related to accessing classrooms because of stairs. English and History were her favourite subjects. Maths was her worst subject. She was allowed to take exams in a room on her own where she could use a typewriter, and she was given more time. She won academic prizes: "Some kids were really surprised at my academic ability." The teachers were, according to Julia, excellent, except for one who was "too nice - she gave me high marks based on me rather than on my work. She gave me books to read about disabled people and found it difficult to understand why I had different attitudes. She'd try and put me together with disabled people." Other students were generally helpful, although "there was one group that didn't associate with me at all, and some got a bit fed up and complained that I didn't appreciate their help enough, they expected more open appreciation." Julia had a week's work experience in an office, organised by her uncle. She participated in an overseas trip with the school: "This was the first time I'd gone away without mum and dad on a really big holiday - there was some resentment that I was going, they [other students] thought time spent with me would detract from the tour."

Julia completed Years 11 and 12 at another private school, also with a lot of stairs. She was, at this stage, using splints to get around and says: "every day I was in agony and I wonder how I comprehended. I was so driven, I pushed through." During school holidays she had intensive physiotherapy. She remarks: "It was more difficult as I continued on, because I've needed time to catch up for the next onslaught." Looking back at her school years Julia says: "I feel I owe a lot to school for helping me achieve what I have done. Physically it was very difficult and I don't think I'll ever experience anything as hard as that again. It broadened my vision of the world and opened a lot of doors that have enabled me to live as normal a life as possible."

Julia describes herself in the following way: "My walk is a bit strange, but I don't consider I look all that different. I use a stick, I've got normal facial features, basically normal features. My left hand is curled up under my wrist - I've never taken much notice of it. I have the advantage of being intelligent and able to communicate. I'm pretty outgoing, like to mix in with people. I'm fairly happy about things, and I take life as it comes. Because I'm doing things I don't think about my disability."

Julia went straight from school to university: "I always wanted to do English and History teaching. I did a year then I went to the Department of Education to find out if I would be allowed to teach. I was told I would have to pass a medical and that it was highly unlikely I would because I had had my disability since birth. Therefore I had to change my aspiration after a year at uni. After fighting so much to get through the system I wanted something secure, so now I'm doing economics." Julia says she would like to work in a bank in policy analysis, research, or "perhaps for a company, even the public service." She feels that eventually she would like to be an academic, thus achieving her goal of teaching.

Julia does not have a boyfriend: "If someone goes out with me they must accept me and by the time we marry it wouldn't be an issue. I haven't investigated kids. I would like to have them but it is difficult to know if I could look after and manage them, like being able to walk and carry the extra weight of a child because one arm doesn't have much strength. I certainly wouldn't discount it." She says she will continue living at home for a while because she is not sure she could manage on
her own. Her main fear about the future is: "leaving the seclusion of the educational world and how easy or how hard it is to get a job."

**PATRICIA**

Pat attended special schools until she left at age 16. She is profoundly deaf. She says that she had good teachers at school, but that she was changed around into different groups a lot because they could not decide on her academic level. Pat considers herself lucky because she learnt all methods of communication while at school: lipreading, cueing, signing. Pat says that she liked school but wanted more education because: "I was always doing the same boring things, copying things off the blackboard all the time." A teacher at the school suggested she try a regular school, but she refused to go because she thought students at that school would make fun of her, and also there would not be an interpreter in lessons. She says she was considered lazy at school because the work was too easy: "I wanted more challenging work." For work experience at school Pat worked in an office, and did some graphics at the Public Service Board.

After she finished school, in Year 10, Pat went to a TAFE to study office procedures for 1 year full-time. She says she only had one interpreter, and really needed more. She wanted to study graphics, but couldn't because there was no interpreter. While she was at college, she had two weeks work experience with the public service - she says they wanted her to stay on and not complete her course, but she did complete her course and got a job in the same department on leaving college. She worked there for three years. During this time she went to Melbourne for the Australian Deaf Games and participated in netball, athletics, and swimming.

A visit to a theatrical workshop in Sydney gave her impetus to join the Theatre of the Deaf - she says she met a lot more deaf people while in Sydney, but missed her family and returned to her home town. There she was out of work for a while, but eventually found another job, again with the public service doing clerical work. She would prefer to have a job working in the theatre. She says she may go back and complete Grades 11 and 12, but is "too lazy now."

Pat reports no problems making her way in a 'hearing' world. In fact she says: "I feel more comfortable with the hearing than with deaf, the problem with deaf is everyone knows too much about everyone else."

Pat lives with her boyfriend, who is hearing. She says that if she had a daughter she would prefer her to be hearing because she would have better educational opportunities. She definitely "would not want my daughter to attend a school with only deaf children, or be the only deaf child in a hearing school."

Pat says "I am happy with life."

**JANET**

Janet was born in a rural area of Australia and attended a small local school. She has an older brother and two older sisters. She has congenital cataracts, and, after 20 operations is now termed legally blind. She lives on her own in a flat, and is unemployed.

At primary school Janet says "the main difficulty was convincing teachers I had a disability, there was no enlarged material, or assistance with reading from the board. I was put in a remedial class with slow learners. I had no challenge but needed the extra time with reading - I always topped the class."

For her high school education, Janet was sent to a private school as a boarder. She says: "It was a big shock, the first time I discovered I had a sight problem, I felt different from everyone else, isolated, felt the differentness." Other students, she says, were sceptical about her sight and tried to trick her by putting rubbish bins in front of her, to see how much she could see. In Grade 9 she had a car accident outside the school, and after this had orientation lessons. She says: "After that everyone felt they had to help this disabled person in the school, but when I really needed help it
Janet says her marks were average. She didn’t know what to do when she left school and didn’t know the questions to ask of the careers teacher. Her Speech and Drama teacher suggested she study Speech and Drama and she says “I decided to make that my career. I was only thinking of what I was able to do, I wanted to do tertiary study Speech and Drama and she says ‘it was difficult to take the tablets at bubblers [drinking fountains].’ She says she made a few friends, and achieved 2nd place in year 6.

BARBARA

Barbara’s epilepsy was diagnosed when she was 9 years old, although she had her first seizure at the age of 3. She has partial sight following an accident when she was 4 years old. She is currently studying for a Welfare Diploma and learning signing. It is 2 years since she had a major seizure, but says she is “pissed off because the small ones have hung around.”

Barbara attended a co-educational primary school where she says she was teased about her eye and about the tablets she had to take. She says: “It was difficult to take the tablets at bubblers [drinking fountains].” She says she made a few friends, and achieved 2nd place in year 6.

After this she went to a private girls school. The positive things about school for Barbara were: school plays, different sports, and a job she was given as assistant in the school’s audio-visual section which she says: “gave me a feeling of self, because I’d felt like a failure educationally.” Barbara left school in the middle of Year 11 “because I got to the point where I couldn’t do the Higher School Certificate.” She says that epilepsy affected her schooling “drastically”, and that frequent seizures during Year 9, which she was often unaware of, meant she missed work and started to do poorly. The school, she considers, coped badly with her condition: “Once, when I was having a seizure, the nursing sister asked me addresses and phone numbers of my parents, and when I couldn’t tell her she got shitty, put me to bed, and got my friend to help. Eventually they got my mother.” In Year 11 she studied Economics, German, Biology, English, Maths and General Studies, and achieved below average to average passes. She remarks that her self-esteem
was low, that she felt she was losing her grasp of schooling, and that because she feared failing the HSC she left. She says: “I needed help with all my subjects, but I didn’t get it. I needed more help than I got and a bit more than other students, like one extra lesson a week. School is like building blocks, when you miss out on some you have nothing to build on later.” Barbara’s work experience while at school was ‘nursing’ at a hospice for a week which she enjoyed. She describes the sex education she received as: “tampon education - 75% was about your own body and IUD’s. It was the same talk every year, I’ll never forget it!” Of her years at high school she says: ‘I survived. I don’t know whether I coped. Perhaps it would have been better if I’d asked for help.”

Barbara describes herself as “overweight, brown eyes, dark brown hair, just glasses and I’m 5’3”. People always seem to see me as good old reliable. I’m a bit serious at times, easy going and a caring person I suppose. I don’t have confidence all the time. My disability affects the way I feel about myself, as well as being a low achiever, both make it hard to believe in myself.”

When she left school Barbara went to work in a bicycle shop, selling and repairing bicycles for 6 months. After this she did a secretarial course, which was interrupted by a bout of glandular fever. Following this, she worked as a junior typist/receptionist for 6 months “and then had a seizure and was sacked.” She was then unemployed for a few months, and had some unsuccessful interviews through the CES. She then became a houseparent at a residence for hearing and visually impaired children for a year, and spent the following 3 years doing a Welfare Certificate Course at TAFE. She looked for a job following this, and eventually went to work for a disability organisation. She says “all my jobs have been modified, therefore I’m scared shitless when it comes to the real world.” She is now converting her certificate into a diploma. In five years time she thinks she will be “working in a different job, living in my own unit, have a steady boyfriend and be thinking about kids.” She is aged 25. When asked about marriage and children she is ambivalent: “I do and I don’t. Medication means I’m tired and it’s difficult to fit in with other people’s routines. I don’t want to be a housewife. I’m more a career type - others drop work more easily. It would take a special person. Kids would be a pressure.”

Barbara sees herself as “relatively average and not particularly good at anything. I’m good at dealing with people on the phone and problems - I’ve battled myself”. Her fears for the future are poor job prospects and “being alone.”

**ANN**

Ann attended a local primary school. At the age of 7 she contracted Juvenile Rheumatoid Arthritis, and now uses an electric wheelchair to get around. She is 23 years old. She found that her stay in hospital meant that friends she had prior to her illness had moved on, and she says “I became more introverted.” Ann is currently studying psychology at university. She lives with her parents and a brother.

Ann’s high school years were spent at a special school because her condition was getting progressively worse and she experienced difficulty moving between classes and carrying a bag. She could also receive hydrotherapy treatment at the special school. She says the pace was a lot slower and she wasn’t as tired, and felt better because of the treatment. She made a lot of friends, and was able to do more sport which was geared towards children with disabilities. Of the academic side of her schooling she is not as complimentary: “education was by correspondence - it was boring, tedious. My teacher was also the Principal and he was always busy in the office so we didn’t work.” After a year at the school her education was again interrupted because of a ‘flare up’ in her condition. She was in hospital for a year, which she says was fun because there were two wards of teenagers, but the correspondence lessons she took were boring. After this she returned to her old school, but did not achieve very well - “my marks were down and I knew I could do better.” In Year 9 she moved to another special school which had ‘face-to-face’ teaching rather than correspondence lessons, and found she improved academically. She did, however, have to give up her hydrotherapy, and had to have treatment outside school. She says: “the choice of subjects was limited by the small range of teachers, some classes were off, they depended on the teacher. In
Year 10, some kids didn't want to learn and they stood out because it was very small. Instead of preparing for Years 11 and 12 our course was changed to Australian History. I was really mad about that. Since coming to Uni, I've found that kids from [special schools] can't stick up for themselves. Everything was done for you at school. I didn't realise this until I came to Uni. I don't think it is the right way to treat disabled kids. When I look back I see the difference in my education - my parents thought it was good that we were looked after." Ann was the only student in the school who took Year 12, so she had one-to-one teaching and achieved an aggregate mark of 345 out of a possible 500. English and Biology were her favourite subjects, Maths her least favourite. She says: "I didn't need more help than I got. I probably got too much help, you never found out about things, they were just done for you." Of sex education at school, Ann says "half the class sniggered or looked at the floor. The person who ran it was religious and she did the best she could. I had questions I would have liked to ask, but she was unapproachable. We learnt nothing about sex, contraception or feelings. All the kids were fairly neurotic in this area. The idea was that if you didn't think about it, it would go away. It was always on everyone's mind because being disabled you were not sure what you could do anyway. I had two boyfriends while I was at school. They both died. You grow up deficient as an adult."

After leaving school Ann went to university to study biology, but again her education was interrupted by a 'flare up' of her illness (this appeared to happen each time she started at a new educational institution). She spent two years in and out of hospital and on return to university sought advice from the careers advisor there. She felt she could not complete Biology competently enough to get a job, and was advised to study something "where my disability would matter less, like counselling in psychology and then go on to rehabilitation counselling." She took this advice, and is now studying psychology. She says: "I find I can't do much else because it takes a lot to keep up and I'm pretty goal directed."

Of her future, Ann says she would like to move into a group home after she leaves university - she is independent, but needs nursing care. She would like "an independent life away from home, with my own friends, and a boyfriend." She is uncertain about marriage and children, but says she is looking forward to the future, and that "I'd like to do whatever I wanted to do, I'd like more opportunities, no hassles with dependence, a choice of careers, more sports. It would be horrible to be old and lonely and dependent on family. If something happens to Mum ..."

TANYA

Tanya is aged 19. She has an older sister and two younger brothers, and lives with her father, stepmother and older sister. She has an intellectual disability. She attended a special school from the age of five until she was sixteen, and then briefly went to another special school. At school Tanya says she enjoyed reading and writing, but did not like maths. She liked all her teachers. She says she made some good friends at school, but does not see them now because they are working.

Tanya did some work experience in a hospital kitchen at the suggestion of one of the teachers at her school. She reports it was "alright." After she left school, Tanya's mother arranged for her to go to a sheltered workshop. She was there about a year, and left because of "bad headaches, and I was also in fights which got out of hand. I fought with one girl over friends." Her mother then arranged for her to go to a centre which is teaching her living skills, and she has been there for nearly two years, and has one more year to go. She is learning things like "marketing, collating, homemaking, shopping and banking - I enjoy marketing." Tanya also receives a personal development program at the centre and says the classes she attends are adequate. She indicated that her parents had not discussed these sorts of things with her, and that she had nobody to discuss them with if she had any questions. She does not want to get married. Tanya says she doesn't really have any close friends at the centre. She goes to the cinema with her sister every second week. She uses public transport all the time, and travels to the centre by bus and train. She has never been to the CES or to any of the organisations which provide services for people with disabilities.
Tanya describes herself as "average. I like reading, I like knitting. I like pets, animals. I like going out. I like movies, discos and other things like that. I don't like fighting, I have fights with my sister, but she's away on camp. I'm good at cooking cakes."

Tanya's main source of income is the pension. Her mother handles this on her behalf. She spends holidays with relatives around Australia.

Tanya says she has no worries about the future, and doesn't get depressed. She has no desire to change her life. She likes clothes and would like to work in her mother's shop. When asked about what she might be doing in five years time, she replied: "You've got me on that one."

CONCLUSIONS

Optimism and uncertainty have been intertwined throughout this chapter. On one hand the young women hope for, or anticipate, a post-school life which is still seen as the norm, namely work, then marriage, and children. On the other hand the liberal use of words like 'hope', 'may', 'possibly' and so forth reveal their fears that aspirations may not be achieved, or that their lives will not, as one young woman said, "go the way I want it." The influence of disability on their lives is evident, not merely from the point of view of physical or intellectual difficulties and problems, but also from the point of view of society's acceptance of these young people as ordinary citizens who happen to have a disability. The message they are receiving is double-edged - society encourages them to be 'normal' teenagers, but cautions that disability may prevent them from living 'normal' lives. This may particularly be so for young women with physical or sensory impairments. The fears that many girls have displayed are quite rational, and based upon previous experience or perhaps other peoples' fears for them, but the majority were not imbued with the means of changing their lives to any extent. We found that the young women displayed courage, determination, optimism, hope, and apprehension, but not many of the young women appeared to have any sense of control over their lives.

As far as the young women who have left school are concerned, some have grasped the opportunities to go to university that have emerged in recent years. Others have done TAFE courses, or are still doing them. They still, however, worry about the possibility of getting work at the end of their degree or course. A number of the young women we spoke with are enrolled in their second tertiary course after failing to find work following the first. Most of the young women who are currently unemployed had undertaken TAFE courses, and many of these had studied commercial subjects. The assumption that young women with physical or sensory impairments are most likely to find work in an office is to some extent backed up by the data we collected which identified young women working as clerical officers, typists, telephonists and receptionists. However, these jobs were all in the public service sector, or in disability organisations, which means that choices are somewhat limited. Choices may be further limited in the future as technological change increasingly affects office work, leaving behind those who cannot operate new machines, or who cannot afford to adapt them to their disability.

Interviews with young women with an intellectual disability who had left school were conducted through the auspices of four organisations who offer work preparation programs or living skills training to people with an intellectual disability. There was, therefore, little variety in terms of occupation. It was also difficult for these young women to discuss their future hopes and dreams. Most of these young women said that they would like to get a job. Their replies concerning marriage varied, some would like to, some definitely stated that they would, and others said they did not want to get married.

For young women with physical or sensory impairments, whether aged 14 or 24, the two main hopes were finding a job, and getting a boyfriend. Worries about whether they are physically able either to have children, or to cope with them if they do, are also very common and have been explored in the chapter on Personal Lives, as well as briefly in this chapter. Assumptions are made
that it should be possible to get a job after leaving school or further education, but the whole area of marriage and/or children is obviously one which young women are left to ponder and worry about.

THE POST-SCHOOL YEARS - POSSIBLE AREAS OF NEED

The need for more information, assistance to prepare and plan realistically for the future, and, in certain instances to provide more programs teaching living skills has been indicated. The following areas of need may be present for many young women with disabilities:

* There is a need for realistic and expert appraisal of each young woman's abilities as these relate to further education, employment, independent living, marriage and child-bearing. This may assist in overcoming the current state of passive acceptance and feeling of lack of control over their lives that many young women appear to experience.

* Employment has been identified as a high priority by most young women. There is a need therefore to provide them with strategies for seeking employment, and a realistic matching of their abilities with their aspirations.

* Few young women with disabilities contemplated unemployment. There is a need to discuss this in conjunction with vocational guidance, in order to develop mechanisms for coping with this possibility.

* There is a need to ensure that all young women leave school adequately prepared in the areas of social skills, sex education, appropriate behaviour and dress. There are indications that some young women with disabilities are not receiving enough training or assistance to help them adjust adequately to their post-school years.

* There will be a need for many young women to receive appropriate and sensitive counselling in the area of sexuality, and the implications of their disability on their future. There may also be a need in some instances for specialised counselling to assist young women with grieving when they perceive that an intimate relationship may not be possible.

* There is a need to make information available to parents concerning further education, training opportunities or careers. This will enable them to help their daughters make important decisions about their future.

* There is a continuing need for employer education, and an expansion of post-school training and vocational opportunities for people with disabilities.

* Finally, furtherance of community awareness programmes is an ongoing need.
Portraying the lives of young women with disabilities has not been an easy task, and has not been a responsibility undertaken lightly. Every attempt has been made to remain true to the young women we spoke with, to let them tell the reader about their lives, in their own words. As stated previously, each young woman is an individual, who happens to have a disability. In many respects each young woman is a typical adolescent. The only real commonality, however, is gender. There are many variables present in an investigation of this nature, for example, age, type of disability, level of disability, abilities, cultural background, socio-economic circumstances, home environment, school experiences, type of school, and the individual's understanding of the expectations not only of those around her, but of the community in general. This has meant that it has only been possible to operate in very broad generalities. Some of the issues we have discussed may not be relevant to each type of disability, some may not be relevant to each age group, but by isolating the broader issues, certain themes that are present in most of the young women's lives have emerged. It should again be stressed that our investigation was not a survey - interviews were too few, and insufficiently representative of each variable, to say with any confidence that our findings are true of most young women with a disability. What is provided, however, is a profile of a number of young women whose experiences may help the reader to understand the needs of adolescent girls with disabilities. This report has been written by the young women themselves through their statements to interviewers. Input from teachers, parents, organisations and agencies, and a reading of the literature, serve to underpin statements made by young women. In some cases, differences in the perceptions or priorities of young women and those people who care about them are evident.

The formulation of the questions we asked young women was based on three sources: (a) the literature; (b) interviews with older women with disabilities; and (c) the gender issues identified in the National Policy for the Education of Girls in Australian Schools. Naturally, some issues relate more to certain types of disability (e.g. access or interpreting services), or to certain age groups (e.g. choice of school subjects, boyfriends). However having completed somewhere in the region of 200 interviews with girls and women, we feel confident that those issues and areas of discussion chosen were particularly relevant factors in most of the adolescents' lives.

The conclusions contained in this chapter highlight the fact that the young women we have spoken with during this investigation often experience educational disadvantages in common with their non-disabled female peers. However, our findings indicate that all too frequently these disadvantages are further compounded by factors relating to disability to the extent that additional resources, special programs and a more sensitive approach to their needs may be required. The need for a more sensitive approach also pertains to the general community, where additional awareness programs teaching about disabled persons could usefully be employed to change attitudes and actions relating to disabled people. (A summary of the possible areas of need identified throughout this report can be found in Appendix 5).

We did, during the course of our investigation, attempt to define whether these young women are doubly disadvantaged by being both female and disabled. Many of the professionals we spoke with found it difficult to identify specific gender issues, and tended instead to focus on perceived needs relating to all or particular disabilities. Certainly very few of the girls indicated that they saw being female as a disadvantage, and many of the young women stressed that they also did not consider themselves to be anything other than 'normal'. Their statements, however, leave the reader in no doubt that many young women with disabilities are, in fact, disadvantaged, but it has been left to other
informants to formally discuss these disadvantages. Our findings indicate that disability is the dominant factor affecting the lives of these young women, but that gender is also an important consideration.

Some of the areas covered in our discussion about the personal lives of the young women have been the subject of previous research (for example, social isolation, low self-esteem), while other areas have only recently emerged as important issues (for example, acknowledgement of the sexual needs of people with disabilities). Because the influences and demands of gender and disability overlap and intertwine, it has been concluded that the young women may experience more problems than their non-disabled peers in the adolescent task of defining ‘self’. The absence of positive role models, particularly from the disabled community, could also compound the difficulties experienced by disabled adolescents in their search for a personal identity. Additional factors, such as cultural differences or atypical family environments, may serve to further confuse and muddy the search for ‘self’. The young women still at school did not generally voice the opinion that their personal needs were not being met, being more concerned with being seen to be the same as their non-disabled peers. However, the comments made by older women and the remarks made by the younger women in answer to questions relating to personal development and emotional well-being, revealed some of their conscious or unconscious concerns. The need for better counselling services to assist young women with disabilities in the areas of personal growth and sexuality, along with genetic counselling was apparent.

The range of life experiences normally available to adolescent girls is often limited or absent for young women with disabilities. Joining clubs, dating, going to parties, making silly mistakes, defining oneself through fashion, travelling with friends, going to rock concerts - many of these experiences are denied to disabled adolescents. As has been seen, opportunities for the development of friendships through outside school interests, for sport or for maintaining a reasonable level of fitness are also often limited in the lives of these young women. The need to overcome disability, and to do things that other people do, was stressed by many of the young women we spoke with, and may thus be viewed as the first steps towards building a positive self-esteem and moving towards independence. However, without appropriate support, and the removal of barriers preventing these young women from achieving these goals, the development of self-confidence and an image other than that of ‘disabled girl’ may be difficult to achieve or, may be retarded. Such support is vital at all stages in the girls’ development, but is particularly so during the years of adolescence. Such support does not mean, however, that realities should be ignored. It seems highly likely, based on the statements of the young women we interviewed, that in the desire to ‘normalise’ their lives the seeds for frustration in later years may be planted. At present, the young women see themselves as ‘normal’ teenagers who have ‘normal’ desires, expectations and dreams, and indeed they are. However, unless they are given the strategies and confidence to cope with the barriers to living a ‘normal’ life which may be evident once they leave school we may be doing them a disservice. Indeed some of the statements of women who have left school in recent years reveal their dissatisfaction with educational and other services hitherto offered to them. How the necessary assertiveness skills, strength and confidence can be developed in these young women, and at what stage in their lives, requires directed and systematic study.

Gender-related issues in education, such as the dropping of ‘hard’ subjects, limited career guidance, under-participation in sport, inequitable quality or insufficient quantity of teacher time, and harassment or bullying, may apply equally to many young women with disabilities, particularly where integration has taken place. However, there may be subtle differences, or different needs, or disadvantages relating to gender which are further compounded or exacerbated by the low self-esteem which often accompanies disability, or by the inability or unwillingness of other people to cope with the needs of the disabled. For instance, it has been shown that young women with disabilities may be denied valuable teacher time because of their diffidence or embarrassment at having to ask for assistance. A further example could be seen in the area of subject choice as it relates to post-school opportunities. In common with their non-disabled peers, the young women we spoke with were nearly united in their dislike of Maths and Science, and had dropped or intended to drop these subjects at the first opportunity. This was particularly true for girls with physical or sensory disabilities. Their career aspirations were, for the most part, very conservative and modest, and most young women held the belief that they would be able to find a job upon leaving school. However, given the apparent
limitations in post-school options for women with disabilities which have been discussed in this report, it may be doubly important to enable and encourage young women with disabilities (and indeed the same would apply to young disabled men) to expand rather than restrict their career options.

The objectives stated in the National Policy for the Education of Girls should have positive results for all girls in Australian schools, however, individual needs will continue to require special services or programs. As has been highlighted in this report, integrating young women with disabilities into regular schools does not fulfill all their needs. For instance, the need for more appropriate career guidance has been demonstrated during this investigation, and a number of professionals pointed to the need to offer young women with disabilities realistic and expert counselling in this important area. However, there would be no guarantee that improvements or expansions in school guidance services would meet the special needs of young people with disabilities any more effectively than current services, unless specialized counselling is provided. Until all barriers to further education and employment for young people with disabilities are effectively and fully removed, the need for such counselling will continue. Likewise, it has been shown that young women with disabilities often miss out on sport at school because their inclusion is seen as too difficult or even impossible. General efforts to improve girls' participation in sport may not therefore benefit young women with disabilities unless specific and relevant programs are designed.

To overcome these and similar disadvantages, a first priority must surely be to acknowledge the rights of young people with disabilities. These include the right to equal educational and related services. Once this right is commonly accepted, ways to include girls in all spheres of school life, even if this necessitates changes or adaptations to current programs, will be found. The acknowledgement of educational rights also has implications for the quality of education received by young women with disabilities. Efforts should be made to ensure that young women with disabilities can participate fully in all aspects of the curriculum, rather than being relegated to those aspects where the school finds it easy to provide for them.

The current situation with regard to academic achievement appears somewhat dismal. The young women who do achieve good school results report that they work extra hard, and spend a long time on homework. While this may be true of young achievers in general, it has been shown that the extra assistance, specialized equipment or aids needed by many young women with disabilities are not always available. For this reason, these ambitious young women may, therefore, have to put in more effort than their peers, or may abandon their attempts. In our investigation the majority of the young women reported only average to below average results at school. Various reasons given for this included difficulties relating to their disability, self-confessed laziness, problems keeping up with the level of the work, or not wanting to bother busy teachers. In general, academic expectations for such girls seemed to be lower than those held for their non-disabled peers. To avoid the frustrations many young women have experienced as a result of this, and because of the importance of teacher expectations in influencing student achievements, it is considered important that positive expectations should be held for all children. This applies equally to young women with intellectual disabilities, although deciding upon realistic expectations and defining an appropriate and adequate education is more difficult. Two main areas of concern were identified by these young women, and by their parents and professionals who knew them. These were firstly the building and maintenance of friendships, and secondly, difficulties relating to finding and keeping work after leaving school. It has been shown that for many young women their 'special' schooling has failed to equip them to form friendships, or find employment, and opportunities to continue their education are often limited. From our talks with professionals, it appears that there remains some uncertainty about what is the most appropriate education for young women with intellectual disabilities. Whatever the nature of the disability, however, the need to treat each student as an individual, with individual abilities and needs, rather than as a person with a disability, should be the overriding factor.

The chapter on school lives has highlighted many of the disadvantages experienced by young women with disabilities. Despite strongly stressing that they valued the opportunity to be integrated, they are by achieving 'normalcy', for many young women their school experience is far from normal. Harassment and bullying has been identified as an issue for many girls in Australian schools, but disability
exacerbates this for the young women we spoke with. It was extremely rare to meet a young woman who had not suffered teasing, name-calling, or in many cases cruelty or physical abuse. The young women say that this does not matter, that they accept this as part of their lives, and are willing to put up with it, particularly if it means they can have a ‘normal’ education, but the impact on their self-esteem and confidence must be considerable. Because low self-esteem is commonly held to be a characteristic of young women with disabilities, the eradication of factors leading to this should be pursued wherever possible. It is therefore important that schools address the issue of teasing and ensure that disabled students are treated fairly.

The desire to remove or ameliorate perceived disadvantages in the education of girls is often, though not solely, linked to improving post-school opportunities. While the removal of gender-related disadvantages may, and indeed should, benefit young women with disabilities, the need for additional expert and specialised assistance will remain. While we did not specifically review current teacher pre-service and in-service programs, it appears that disability and gender are still inadequately addressed. More effective professional development for teachers in both areas would greatly enhance the lives of these girls and young women. It is recognised that some compensation in terms of reduced class sizes or workloads for teachers may be necessary to effectively meet the needs of students with disabilities.

In the course of our investigation we did not receive many complaints about the physical environment of schools. However, there were indications that improvements in some school environments would be of assistance to young women with disabilities. Comments we did receive related mostly to young women with a physical disability. Steep ramps, or not enough ramps, were perhaps the most common complaints. Some young women complained that school toilets were full of smoke, which is particularly unpleasant, and perhaps potentially dangerous, for young women with respiratory or heart conditions. Other girls remarked that the toilet for people in wheelchairs was not easily accessible or was a long way from their classroom. Where alterations in schools have not yet been made, teachers should be aware of the difficulties some of their students may be having. For it is clear that the young women will not complain directly, either because they are embarrassed or because they don’t wish to ‘make waves’.

The importance of a stable, caring and supportive family environment was repeatedly emphasised by professionals during the course of our investigation. The young women also frequently alluded to the importance they placed on family life, as well as the degree of dependency on parents and siblings. The withdrawal of this support was viewed with anxiety on the part of many young women, and although statements were made by both girls and their parents about anticipated future independence there was clearly a degree of uncertainty about how this could be achieved. Little knowledge about post-school opportunities relating to supported or purpose-built accommodation was evidenced, and very few of the young women, or their parents, knew a great deal about the availability of government subsidies or other financial supports.

As far as parental involvement in the education of their daughters was concerned, this appeared for many to be minimal, although most parents considered that they had adequate consultations with teaching staff. This was particularly so when the young woman was integrated into a regular school. Many parents considered that their daughters’ school was offering appropriate programs and curricula. Some parents were, however, diffident about ‘interfering’ in such a specialised area, while other parents talked about the need for better services (e.g. interpreters) or an expanded curriculum. Discussions between teachers and parents regarding the education of the young women, and its implications for their post-school years, were conducted on much the same basis as for non-disabled students. Because the young women we spoke with tended to consult their parents on many aspects of school life, including subject and career choices, the need for parents to be better informed and involved in their daughter’s education is indicated.

A number of professionals referred to ‘over-protective’ parents, and indicated that many young women with disabilities were denied normal adolescent experiences and opportunities to move towards independence. The concerns of parents also, however, have to be taken into account, for it is they rather than teachers, social workers, medical personnel and so forth who have the ultimate
responsibility for their daughter until she attains adulthood. The need for parents and professionals to understand each others point of view, and to work together for the benefit of the person they are trying to assist is commonly asserted, and is reiterated here.

The issue of stereotyping regarding the employment opportunities of young women with disabilities was most strongly evident when we examined the options available to young women with an intellectual disability. Sheltered employment is often the only option for these young women, and even this type of work is decreasing. Clearly, initiatives in supported employment are not widely known to disabled girls, their parents and career advisers, or they are sceptical about such new approaches. The statements made by personnel from sheltered workshops, employment agencies, and by school teachers and principals indicate their concerns about the limited opportunities. Launderies, factories, and sometimes catering jobs, were cited as being the main sources of employment outside sheltered employment. There were many complaints that the work experience given to girls with an intellectual disability was incompatible with what was in fact available to them upon leaving school. For example, work experience is often offered to girls in areas such as child-care or nursing homes, areas which the young women we spoke with indicated they would like to work in. However, such employment generally requires diplomas or experience to enter; except at a very menial level, and jobs at the menial level are few and far between. Complaints were also made by staff of work preparation centres that young women with intellectual disabilities were not being adequately prepared at school to enter the adult world of work. It was remarked that many young women are still very childish in dress and behaviour, and that a lack of emotional maturity often leads to difficulties when friendships with young men are formed at work. On the other hand, teachers talked about how difficult it was to find realistic work experience for young women with intellectual disabilities. Such work experience was either not available, or the young women did not want to do it. What is an appropriate education for such young women, how long such education should last, and who should assume responsibility for employment and/or further education and training beyond the current school-leaving age are issues currently in a state of flux throughout Australia. The young women seem, on the whole, quite ready and happy to go along with whatever other people arrange for them. Very few of the women we spoke with who have an intellectual disability voiced unhappiness or discontent with their current status, whether that was school, work preparation centre, or sheltered employment. These views suggest that the impact of self-advocacy is far from widespread.

For young women with a physical or sensory impairment, both gender and disability stereotyping and discrimination does affect their transition from school to post-school options. Young women who are integrated into regular schools frequently use their non-disabled peers as role-models, and tend to aspire to similar jobs or careers. This sometimes results in unrealistic aspirations. Careers teachers, or vocational guidance officers do not appear to have adequate or relevant information for young people with disabilities. It is a commonly held notion that 'office work' or 'telephonist' positions are the only, or the most suitable, occupations for young women with physical disabilities. These factors, coupled with low expectations, mean that many young women leave school with no clear goal in sight. They, and their parents, may be unaware of options, or where to go for information. Often when information is sought, for instance from a careers guidance centre, it is not appropriate to people with disabilities. There is a clear need for improvements in the whole area of career guidance as it relates to young women with disabilities.

When we talked with women who had left school in recent years we found a high degree of unemployment, or under-employment. We also found that many of the women who had gone on to further education, whether this was vocationally oriented, or career and tertiary oriented, were caught in a cycle of programs and courses which in most cases had not led to employment. There are various reasons for the lack of employment opportunities for such young women, for example, employer attitudes, difficulties with transport, the lack of adequate interpreters or the extra costs involved in using them, financial considerations when there would be a need for enlargers, modified equipment, and so forth. The Public Service, which in recent years has been viewed as an area of employment for people with disabilities is reportedly less accessible now than in previous years. The fact that new technology is replacing traditional work opportunities for young women in general is also a factor. Despite the fact
that many disability organisations have pointed to new technology as being of assistance in expanding job opportunities for people with disabilities, very few of the young women we spoke with had used computers or specialised equipment at school, or expressed an interest in learning about new technology. The need to explore and expand the use of technological developments for use both at school and in the workplace is essential if young people with disabilities are to gain meaningful and fulfilling employment.

It was noted by several professionals that parents of children with disabilities are more likely to encourage their daughters than their sons to stay on at school. The reason for this may well be that they can see no other options for them. We were told that there were a wider range of opportunities in the workforce for young men with intellectual disabilities than for young women, for instance in the area of labouring. In most cases, this appeared to be the result of gender-related stereotyping rather than disability-related discrimination. We understand from our discussions with professionals that there are a number of job creation schemes relating to people with disabilities currently underway in Australia. Whether such schemes continue to operate within traditional gender-oriented guidelines largely depends upon whether attempts to educate employers are successful.

SUMMARY

The basic aim of this document has been to raise the reader's awareness and understanding of the needs of adolescent girls who have disabilities. Our findings indicate that the overwhelming need of these young women is to be treated normally. It is unfortunate, however, that in endeavours to do just that, some of their other needs are apparently overlooked or neglected. Whether a disability is of a physical, sensory, or intellectual nature, and whether such disability is a mild or a moderate one, these young women have a right to an education which is both appropriate and relevant to their present and future needs. If they are constantly harassed by certain sections of their school, or if teachers are unable or unwilling to offer assistance when it is needed, rather than when it is asked for, their rights are being abused. If these young women are not achieving reasonable academic results, or appropriate vocational training, because of a lack of resources rather than difficulties relating to medical problems or time off school for therapy treatment or operations, then their needs are not being met.

Any positive changes within schools which occur following implementation of the National Policy for the Education of Girls in Australian Schools should benefit all young women, including those with disabilities. However, it is apparent that if the additional special and distinct needs which have been discussed in this report remain unmet, then the right of of any young woman with a disability to a fair and equal education will not be fulfilled.
BIBLIOGRAPHY


APPENDIX 1

THE INFORMANTS

Girls and Women

Table 1

Girls and Women - Number according to disability and location

<table>
<thead>
<tr>
<th>Type of Disability</th>
<th>Still at School</th>
<th>Left School</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physically disabled</td>
<td>32</td>
<td>31</td>
<td>35</td>
</tr>
<tr>
<td>Intellectually disabled</td>
<td>46</td>
<td>9</td>
<td>30</td>
</tr>
<tr>
<td>Hearing Impaired</td>
<td>29</td>
<td>8</td>
<td>21</td>
</tr>
<tr>
<td>Visually impaired</td>
<td>13</td>
<td>7</td>
<td>11</td>
</tr>
<tr>
<td>Slow learners</td>
<td>2</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>122 (68%)</strong></td>
<td><strong>58 (32%)</strong></td>
<td></td>
</tr>
</tbody>
</table>

(In addition to the above, data from 16 questionnaires returned to the Victorian Working Group’s Project ‘Young People with Disabilities - Education to Employment’ (1988) was included in this investigation).

Table 2

Girls and Women - Age of girls and women (% of total)

<table>
<thead>
<tr>
<th>Age Groups</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-14</td>
<td>29</td>
</tr>
<tr>
<td>15-17</td>
<td>39</td>
</tr>
<tr>
<td>18-22</td>
<td>19</td>
</tr>
<tr>
<td>23 years and over</td>
<td>12</td>
</tr>
</tbody>
</table>
### Table 3
Types of Disabilities*

<table>
<thead>
<tr>
<th>Disability</th>
<th>Mild to Moderate</th>
<th>Mild to Profound</th>
<th>Severe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hearing Impairment</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Visual Impairment</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Intellectual Disability</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Physical and Medical Disabilities</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cerebral Palsy</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Spina Bifida</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Juvenile Rheumatoid Arthritis</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Heart condition</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Scoliosis</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Epilepsy</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Osteogenesis Imperfecta</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Phocomelia</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Epidermolysis Bullosa</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Muscular Atrophy</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cerebral Haemorrhage</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Post-viral infection</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Poliomyalitis</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Klippel-seil Syndrome</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

* Several young women had more than one mild disability, e.g. hearing/visual impairment, cerebral palsy/intellectual disability, intellectual disability/epilepsy

### Parents

The mother, father, or both parents of 48 young women were interviewed for the investigation. Parent groups were also consulted, and several parents wrote to the project team.

### Table 4
Parent Participation

<table>
<thead>
<tr>
<th></th>
<th>Interviews</th>
<th>Letters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent(s) of hearing impaired daughters</td>
<td>18</td>
<td>1</td>
</tr>
<tr>
<td>Parent(s) of visually impaired daughters</td>
<td>3</td>
<td>-</td>
</tr>
<tr>
<td>Parent(s) of physically disabled daughters</td>
<td>20</td>
<td>2</td>
</tr>
<tr>
<td>Parent(s) of intellectually disabled daughters</td>
<td>7</td>
<td>2</td>
</tr>
</tbody>
</table>
Schools

- A total of 34 questionnaires were received from teachers in regular schools and units attached to regular schools.

- A destination survey conducted in Queensland Special Schools resulted in 47 replies. (See Appendix 2)

- In addition, informal talks or interviews took place with the staff and/or the principal of the following schools:

**New South Wales**
- Rowland Hassall Special School

**Northern Territory**
- Henbury Avenue Special School - Darwin
- Acacia Hill Special School - Alice Springs

**Queensland**
- Corinda High School - Special Education Unit
- St Peter Claver High School - Hearing Impaired Unit
- Kedron High School - Special Education Unit
- Rochedale High School
- Cavendish Road High School - Special Education Unit
- Morayfield High School - Education Support Unit
- Newstead Special School
- Andrews Special School
- Aspley Special School

**South Australia**
- Marion High School
- Dover High School
- Gepps Cross Girls High School

**Tasmania**
- Lady Rowallan Special School
- Bruce Hamilton Special School
- Huon Special School
- Cosgrave High School

**Western Australia**
- Buckland Hill School
- Gladys Newton Special School
- Mirrabooka High School - Education Support Centre
- Sutherland High School - Education Support Centre
- Girrawheen Senior High School
- Durham Road Special School
- Cyril Jackson Senior High School - Education Support Centre
- South Kensington High Special School
- Hollywood Senior High School

**Australian Capital Territory**
- Woden School

- Further information was received from staff at various schools who rang the Schonell Centre to talk about the project.
Other professionals, agencies and organisations

New South Wales
- Disabled Persons International
- GIDAY (Group on Issues of Disability and Youth)
- NSW Crippled Children's Society
- Disabled Students' Association, Macquarie University
- Uppercrust Coffeeshop
- Disabled Youth Employment Project
- Helpmates
- Royal Blind Society
- Active Job Services
- Subsidised Work Experience programme for Handicapped Secondary School Leavers
  (NSW Department of Education and NSW Department of Employment, Education and Training)
- Women's Coordination Unit, NSW Premier's Department
- NSW Deaf Society
- Unit for Rehabilitation Studies, Macquarie University
- NSW Department of TAFE
- Association for Positive Integration into Regular Education (ASPIRE)
- Commonwealth Office of Disability
- Social Welfare Research Centre, University of NSW
- Dr Paul Finlayson, Community Physician, Preventive and Mental Health, Hornsby & Ku-ring-gai Area Health Services, Department of Health.
- Australian Council for Rehabilitation of the Disabled.

Northern Territory
- Northern Territory Department of Education, Student Services Branch
- Northern Territory Department of Education, Curriculum & Assessment Branch
- Disabled Persons Bureau, Northern Territory Department of Health, Alice Springs/Darwin
- Handicapped Persons Association/Kakoda Industries
- Department of Health and Community Services - Division of Sport and Recreation
- Darwin Institute of Technology
- Project Employment/CYSS
- Equal Opportunity Unit, Northern Territory Public Service Board
- Department of Community Services and Health, Commonwealth Rehabilitation Service
  (Alice Springs/Darwin)
- Bindi Centre
- Women's Adviser, Department of the Chief Minister
- Northern Territory Spastic Council
- Ms D. Manhood (ex-Family Planning Association)
- Special School staff (General meeting)

Queensland
- Catholic Social Welfare
- Disabled Persons Service
- Department of Employment, Education and Training
- Merv Hyde, Senior Lecturer, Brisbane College of Advanced Education, Mt Gravatt Campus
- Queensland Deaf Society
- More Opportunities, Recreation and Employment for People with Disabilities (M.O.R.E.)
- Dr Heather Mohay, Lecturer in Medical Psychology, Department of Child Health, Mater Children's Hospital
- Red Cross Training Centre for the Intellectually Disabled
South Australia

South Australian Department of Education - Education of Girls Unit; Special Education Division; Directorate of Studies.

Tasmania

Department of Education, Regional Superintendent; Student Services Branch;
Regional Special Education Officer (South)
Department of Community Services and Health, Commonwealth Rehabilitation Service
Disabled Persons International
Hobart Technical College
Special School staff (General meeting)

Victoria

Department of Community Services and Health, Commonwealth Rehabilitation Service
- Women’s Rehabilitation Action Committee

Krongold Centre, Monash University
Convener - National Women’s Consultative Council
Social Biology Resource Centre
Vera White Disability Centre, Deakin University
Victorian Teachers’ Union
Australian Teachers’ Federation
Disability Resource Centre
Yooralla Society Learning and Living Centre
Victorian Advocacy Collective, Victorian Federation of State Schools Parents’ Club
Council of Adult Education
Disability Employment Action Centre
Montague Continuing Education Centre, Department of Education
Royal Victorian Institute for the Blind

Western Australia

Authority for Intellectually Handicapped Persons
Selby Child and Adolescent Clinic, Health Department of Western Australia
Crippled Children’s Association / Rocky Bay Village
Spastic Welfare Association of Western Australia / Sir David Brand Treatment and Training Centre
National Centre for Research in Rural Education, University of Western Australia, Nedlands

Association for the Blind
Disability Resource Centre
Equal Opportunities Board of Western Australia
Project Employment
Child Health Services, Department of Health
Hearing Assessment Centre, Department of Education
Ministry of Education, Equity Section, and Education Support Section of the Curriculum Policy Branch

Western Australian Disabled Sports Association
Catholic Care Services for Intellectually Handicapped Persons
West Perth Regional Unit, Commonwealth Rehabilitation Services
Department of Community Services and Health, Commonwealth Rehabilitation Service
Counselling Services, University of Western Australia, Nedlands
APPENDIX 2

SPECIAL SCHOOL DESTINATION SURVEY (Queensland)

In May 1988 a survey of all special schools in Queensland was conducted with the assistance of the Queensland Special Schools Principals' Association. In the survey, principals of special schools were asked to identify the destination of students aged 15 years or over with a mild or moderate intellectual disability who had left their school the previous year. Approximately 50% of all special school principals returned the survey form, covering a total of 312 school leavers in 1987. Of these, 163 boys and 112 girls were identified as having a mild or moderate intellectual disability. The results of this survey are shown in Table A.

As will be seen from Table A, more boys than girls were successful in gaining full-time employment. Also evident is the larger number of young women who receive the disability pension on leaving school. A wide discrepancy also appears in comparisons between boys and girls regarding placements in other special, or regular schools once they leave their present school at age 15. A possible reason for this may be that girls who fail to gain employment, or entry into a further education or training program, may be encouraged to remain at school, rather than stay at home. Where young people did find employment, the types of jobs found by young men were reportedly more varied than those found by girls. The men found work in labouring, supermarkets, nurseries, meatworks, and as a circus hand, a truck driver and a station hand. Girls' jobs included grocery store assistant, farm hand, factory hand, supermarket and domestic work. TAFE courses taken by both girls and boys in general related to living skills training, or programs in the area of food service and preparation.

We asked schools to note any differences between boys and girls. Many said that there were no differences, that only the mildly handicapped students were able to find employment, and that many students were unable to keep jobs for more than one year. There appeared to be more opportunities for unskilled employment for the boys. Some of the comments made by principals follow. It will be noted that several remarks mirror the statements of other professionals interviewed for the investigation.

"There do appear to be more full-time employment positions for males than for females, but there are generally more mildly intellectually handicapped males than females."

"This city appears to offer more job opportunities for unskilled males - the main industry for girls with few skills is the hospitality industry. Girls with an intellectual handicap have even less chance of job opportunities because their skills are very low, the jobs that are available are quickly taken by students and married women with little skill training. Our figures reflect that almost one-third went to High School, but would have taken up employment if it had been available."

"It appeared more difficult to place girls in employment for substantial periods. A substantial number of positions are held by people who enjoy a second family income. There seems to be a gap developing between provision of 'sheltered' and 'open' employment, and some of the girls from earlier years have fallen between the two - they cannot handle employment and are not accepted by welfare."

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1 Because we had indicated that only schools with a mild and moderately disabled student population should return the survey form, it may be that some of the remainder had only severely disabled or multiply disabled students in the school.
"There is, and always was, far more places in open employment for boys than for girls. This is exacerbated by an unemployment problem, there are not as many low-skilled openings for girls."

"Girls are a little harder to place, but we keep them with us until we do."

Some suggestions were offered as to why girls did not find it easy to gain employment:

"Employment opportunities have lessened in the past two years. There is little difference between boys and girls, ability and job vacancies around the time students do work experience seem to be key factors. Students need interpersonal skills and working speed to maintain employment."

"The disabled girl's ability to handle her menstrual hygiene has limited entry to workshops, and parents' fear of sexual abuse due to limited understanding has tended to overprotect the 18 year old plus female from independent travel to ATC or workshops."

"TAFE food preparation courses are more attractive to girls. The boys were inclined to have higher ideals, carpentry or brick-laying."

There were some indications that young women find it difficult to remain in employment:

"Girls do not remain employed. Generally they enter a relationship and/or have a child."

"After initial placements, girls appear to have greater difficulties finding another placement. It's harder to keep in touch with girls."

The principal of one special school, who had kept records on leaving students since 1974, considered that girls who stayed with their first job appeared to have a good employment record. Girls who changed jobs seem to have greater difficulty in retaining employment. As a general philosophy pursued by that school, students were placed in open employment at age 15 where possible, so that they could have three years of employment on a junior wage before the employer was faced with the increased cost of paying a senior wage. Of 43 females identified by this principal, 15 had gone on to factory process work, 5 had become canteen assistants, 5 had taken up sewing jobs, 2 had become shop assistants, and one had gone to work in a nursing home. Seven female students had subsequently married. The destination of other young women was not known.

As was the case with the general survey, the employment opportunities for young men were more varied than those for the girls. Although the great majority had exited to factory process work, other male students had gone into labouring, grounds maintenance, nurseries, spray painting, kitchen hand, shop work (packing), and cleaning. Other men had found employment as a rigger, tiler, forklift operator, driver, mechanic, car detailing, carpet layer, lawn mowing and office worker.
TABLE 5
Destination of 1987 Special School Leavers (Queensland)

<table>
<thead>
<tr>
<th></th>
<th>Mild Intellectual Disability</th>
<th>Moderate Intellectual Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Boys %</td>
<td>Girls %</td>
</tr>
<tr>
<td>Regular High School</td>
<td>7.5</td>
<td>15.0</td>
</tr>
<tr>
<td>Special School</td>
<td>6.0</td>
<td>14.0</td>
</tr>
<tr>
<td>TAFE</td>
<td>4.0</td>
<td>5.0</td>
</tr>
<tr>
<td>Work Preparation Centre</td>
<td>2.0</td>
<td>3.0</td>
</tr>
<tr>
<td>Open Employment:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Full-time</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Part-time</td>
</tr>
<tr>
<td>Job Start (CYSS)</td>
<td>7.5</td>
<td>9.0</td>
</tr>
<tr>
<td>Sheltered Workshop</td>
<td>5.0</td>
<td>6.5</td>
</tr>
<tr>
<td>Unemployment Benefit</td>
<td>12.0</td>
<td>8.0</td>
</tr>
<tr>
<td>Disability Pension</td>
<td>3.0</td>
<td>8.0</td>
</tr>
<tr>
<td>Activity Therapy Centre</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other*</td>
<td>19.0</td>
<td>6.5</td>
</tr>
<tr>
<td>Unknown</td>
<td>-</td>
<td>1.0</td>
</tr>
</tbody>
</table>

* For girls this included: Supporting Mothers' Benefit; terminally ill; at home; living with boyfriend. For boys: withdrawn by parents because of behavioural problems, and living at home with no employment; given money by parents; State Ward; possibly employed by father; parents to arrange jobs, but still unemployed; working on family property; seeking employment.
APPENDIX 3

A SELECTED ANNOTATED BIBLIOGRAPHY

At the beginning of this project, a great deal of material was collected, read and reviewed. Much of it influenced the direction and thinking in the project. During the year, people we consulted suggested additional material, and on our travels, we collected more. Some of the articles we have cited in the body of the report (see separate Bibliography), but there are a number of other articles that may be valuable as resource and background reading. We have collected them here in this selected annotated bibliography. The bibliography is not exhaustive; for example, it excludes a number of significant books and articles on adolescents in general. It contains an alphabetical listing of articles under the following categorical headings. Where an article referred to a particular type of disability by name or focused on a particular sample, the bibliographical entry was located by disability group.

A. Adolescents and Young Women with Disabilities
B. Adolescents with Intellectual Disabilities
C. Adolescents with Visual Impairments
D. Adolescents with Hearing Impairments
E. Adolescents with Physical Disabilities
F. Transition from School to Work and Employment
G. Schools, and Pupils with Disabilities
H. For Parents
I. Work Programmes
J. Magazines and Bulletins.

A. Adolescents and Young Women with Disabilities


A report describing aids and appliances suitable for coping with menstruation, incontinence, mobility and posture. One section deals with the issue of clothing, social image, and sexuality. A number of suggestions for design modifications based on the experiences of women with disabilities are included.


A book written by women with disabilities each describing their experiences and view of life. Themes which emerge include personal relationships, sexuality, motherhood, education and employment. Practical issues related to the British scene are also included.


Study of the behaviour of 180 mentally retarded, behaviorally disordered, learning disabled and nonhandicapped girls between 12 and 16 years of age in Illinois and Wisconsin.


A comprehensive volume of articles including chapters on the issues of disability, sexism, isolation, assertiveness training, and peer counselling.

A feminist view of the subject of disability focusing on the adverse social position of the disabled and the double disadvantage of the disabled woman.


A discussion of the ways disabled boys and girls are treated differently because of stereotyping. Areas of bias include: identification, provision of services, curricula and materials, and vocational opportunities.


The individual stories of nine people with disabilities. The issues of labelling, paternalism, attitudes, and sexuality are commented on by the contributors.


A Canadian book providing a personal perspective on the lives of disabled women.


Discusses the importance of role models for women with disabilities, in particular for socialisation, dating, and understanding sexuality.


A collection of writings by women with disabilities. Topics include normalisation, housing, sheltered workshops, sexuality, rape, and death.

B. Adolescents with Intellectual Disabilities


This paper examines the issue of schooling for intellectually disabled students after age 15 by describing existing practices, alternative approaches, and further education.


Interviews with 12 individuals with intellectual disability residing in community hostels. The nature of home life, the tenants role in the move, reasons for leaving home and future expectations were explored.


A literature review and comparison of the development of intellectually disabled and nonintellecually disabled adolescents in terms of physical, social and cognitive development, sexuality, family relationships, vocational and educational issues.

A study of 25 mildly retarded individuals who describe the "adolescent life stage".


A study of 130 learning disabled and mildly retarded students in California to determine how well they fitted into their social group.

C. Adolescents with Visual Impairments


The autobiographies of these blind individuals are examined to assess the influence of gender upon disability.


A Canadian study examining the relationship between visual impairment or blindness and educational and occupational expectations. The study then further explored the degree of visual impairment and variability of expectations in the sample of blind students.


A discussion of the difficulties encountered by blind women in the United States because of their disability and gender. The author considers the rehabilitation of blind women, and how their situation can be improved.


A visually impaired woman writes about her adolescence and draws evidence from literature and examples from the lives of other women to show that her experiences are not unusual.


Describes how an assertiveness support group was established for 5 women with visual impairments at university. The types of skills developed by the group are outlined.


A discussion of the needs of visually impaired adolescent girls, and the role of parental and professional support, including practical suggestions.

An article outlining the difficulties in the relationships and interactions in families with a member who has a visual disability. Main points can also be generalized to other disability groups.

D. Adolescents with Hearing Impairments


A study of hearing and hearing impaired women aged 17 to 25 in Minnesota investigating the hypothesis that "deaf women have a more traditional view of their sex role than their hearing peers."


The writer identifies the following needs or issues that require attention: recreation, public awareness, service provision, affirmative action in employment, government appointments in positions relating to disability and accommodation.


The place of deaf women in society is examined with reference to how early experience influences personal development.


A book describing ethnographically the lives of deaf pupils in a US residential school. The issue of language, in particular the sociology of language and its relationship to this community is investigated.


The author asserts that the following needs of the hearing impaired are obvious: counselling, interpreters, educational needs, speech, and community facilities and services.


Report discusses findings of a survey on the educational needs, features of employment, personal/social skills and the demand for interpreters and notetakers in TAFE students. Also includes findings of a survey of organizations employing supporting or training individuals with hearing impairment.


A research study exploring the experiences of 48 deaf adolescents attending an occupational educational programme with non disabled students. Study examines the quantity and quality of the interaction and describes the social climate.

A collection of individual chapters including emotional illness and the deaf.


A book examining a number of facets: Chapters include: The deaf adolescent: who am I?, developing the capacity for independent living, postsecondary education opportunities, training personnel for hearing-impaired adolescents.


A comparison of information about sex and deafness stereotyping by deaf and hearing girls and boys in Year 10 in Sydney.


A description of the scope, nature and incidence of abuse in the deaf population in the US, with an examination of the behavioural/emotional characteristics of the sexually abused group. Issues of prevention, intervention and reporting of abuse are discussed.

E. Adolescents with Physical Disabilities


A study of 119 15-18 year olds in the UK with spina bifida or cerebral palsy covering the period prior to leaving school and a followup after leaving school. Investigates factors associated with adjustment and provision made for transition to adult life.


Study of 93 physically disabled American university students examining the physical environment, academic program, extracurricular life and social environment.


A discussion of the interface between being a woman and physical disability. The relationship between physically disabled women, disabled males and able-bodied females is discussed.


A study of 46 adolescents with spina bifida. Focuses on their schooling, social and family relationships, attitude towards their disability, employment, sex and marriage.

A description of various community programs which exist for the physically disabled in New York City. Programs organised by parents and the Institute of Rehabilitation Medicine (NY Medical Centre) are also described.


A very comprehensive article describing the problems of adolescents with spina bifida. These difficulties include medical problems, adjusting to adolescence and psychosocial-psychosexual problems. Ways in which some of these problems can be minimized and how adolescents and their families can be assisted are discussed.


Factors affecting the handicapped adolescent are described, with particular attention being paid to those with cerebral palsy, muscular dystrophy and spinal cord injuries.


This South Australian study describes the problems experienced by children with physical disability, (e.g., toileting, mealtime management, etc.) the frequency of the problems and a rating for solvability. Its results provided foci for solving the problems with the aim of integrating these children into regular schools in the future.

F. Transition from School to Work and Employment


The interviews of people with disabilities attending 7 Australian TAFE colleges furnish the basis of this report about course provision and considerations. A number of recommendations make up an agenda for change.


Conference papers dealing with employment issues pertaining to people with disabilities.


The implications for counsellors of the following factors in increasing the participation of the disabled in the community are described: beliefs and values about disabilities, social and political developments (e.g., disability activism, the independent living movement) and technological developments.

Investigation of the vocational activities (type, duration and sequence) after leaving school of people with moderate or severe disablement in England. Differences between disability groups are evident. Implications for this transition phase are discussed.


Examines the employment of disabled persons in the open job market describing the positive aspects of their employment. The author identifies sources hindering this employment and makes suggestions for improving employment opportunities.


Case studies of the lives of handicapped adolescents in Norway, France, UK and West Germany focusing on the problems experienced as they enter the workforce. Identifies the barriers to employment.


Provides case studies of disabled adolescents in Norway, France, UK and West Germany. Individuals describe their lives and how the move from adolescence to adulthood has been affected by their education and social adaptation.


A report of discussions and views of conference participants on the following themes: education preparation, employment, community services and personal growth with suggestions for implementation.


A report of discussions and views of conference participants on the following themes: education preparation, employment, community services and personal growth with suggestions for implementation.


This article looks at vocational preparation, public policies and institutional practices, rehabilitation practices and the contributions of employers, as well as providing a number of recommendations regarding the employment of individuals with disabilities.


An examination of the financial position for disabled people working part-time versus full-time in the US. Indicated that net disposable income is roughly the same for the two groups.

Paper examines the employment status of women with disabilities in the USA. The author discusses the problems, job and career options, and directions for progress in the area.


An executive summary of a project which examined the educational and employment opportunities of some 97 young people with disabilities in the State of Victoria, Australia. Themes emerging from the study include lower achievement outcomes of the disabled, careers guidance, work experience, mainstreaming, advocacy, skills training, ignorance about disability, gender, transport, income security, and service provision.


A book describing the situation disabled individuals encounter in the UK when seeking employment. Discusses the role of "class" in employment and unemployment. Also examines job aspirations, vocational guidance, training and further education.


An examination of the forces for reform in the public sector and the nature of that reform in Australia. The impact of the forces and possible responses to them are discussed.

See Anderson & Clark (1982) - Adolescents with Physical Disabilities Section.

G. Schools, and Pupils with Disabilities


Conference proceedings arranged around the following chapters: Issues in integration, service provision, and research.


An examination of problems facing the adolescent with disabilities e.g., tasks of adolescence, separation, body image, achieving independence etc. and describing programs suited to meet these needs (e.g., school and work and social programs, sexual counselling etc.)


A survey of high school special education programs in the state of Oregon for students with mild disabilities and the implications for the curriculum. Report contains anecdotal comments from administrators, teachers and children regarding focus and content of the curriculum, discrepancy between availability and utilization, barriers to integration and suggested conditions for improvement.

A research study involving 450 secondary school careers guidance counsellors from Wisconsin high schools. The study compares the reactions to case notes of a fictitious client. Stereotyped attitudes towards disability and gender are evident in the results.


A review of the integration issue in Australia, including chapters on the models of integration, implications for school organisation, and the relationship between the disabled child’s academic attainment, social adjustment and integration.


This article discusses the reasons for the provision of resources to support the integration of pupils with special needs in the school. Practical suggestions about the operation of the support system are made.


This study compares the social integration of 22 mainstreamed disabled students with nondisabled students. Examines the sociometric status, locates difficulties in achieving social acceptance; identifying causes and suggesting remedies.


A teaching model for improving the self-concept of those with intellectual or multiple disabilities adapted for the Australian context.


A series of articles examining the nature of various disabilities and their educational intervention.


H. For Parents


Conference proceedings and documentation of issues arising from the open session of the conference, for example information sharing, family pressures and service provision.


An account of the personal experiences of attitudes of parents towards handicapped children, including the views of Itshak Perlman, the musician with paraplegia.

A survey of 660 parents/guardians of children with an intellectual disability receiving vocational services. The study looks at parental satisfaction in terms of their children's program, working conditions, wage levels and placement.

NSW Ministry of Youth and Community Services, Family and Children's Services Agency. (1988). This agency has produced seven booklets in a series for parents of children with special needs written in consultation with parents of such children. Themes include: initial discovery that a child is disabled, early intervention, the involvement of professionals, parent support, family dynamics, schooling and planning for the future.

I. Work Programmes

ASWO: Association of Supported Work Organizations (Aust).
PO Box 427
Granville NSW 2143

An association of supported work organizations, work support centre and interested individuals. A contact point for other Australian states also.

The Subsidised Work Experience Program for Secondary School Students with a Disability.

NSW Department of Education and Commonwealth Department of Employment Education and Training, c/- Schools' Committee
Rowland Hassall School
Hassall Street,
Parramatta NSW 2150

J. Magazines and Bulletins

Breakthrough: The National Bulletin of Disabled People

Linkup: The bimonthly magazine of Disabled Peoples International (NSW)
DPI Resource Centre
7 Franklyn Street
GLEBE NSW 2037
Ph: 552 1411

Matrix: A magazine for disability education and employment issues.
Matrix, DEAC
Ross House
247-251 Flinders Lane
Melbourne 3000
Ph: 650-2533

Streetwize Comics:
Redfern Legal Centre Publishing
18 George Street
SYDNEY 2016
Ph: 698 3066

No. 10: Home Sweet Home. Looks at the rights of the physically disabled in residential setting

No. 12: Girls Just Wanna Have Fun. A story about coping with physical disability.
APPENDIX 4

FORMAT FOR INTERVIEW WITH YOUNG WOMEN

The following list of topic areas were suggested as a basis for the informal talk with young women. Questions were framed around these topics, and were posed by interviewers where appropriate.

Background:

Previous schools; family configuration. Ask about terms like 'disabled', 'handicapped' - are they offensive or upsetting?

School:

- Likes.
- Dislikes.
- Importance of school.
- Problems in school environment (layout, getting around, toilets etc.)
- Subjects studied, favourites and most difficult.
- School achievement - marks and consistency.
- Anything not included in school curriculum that girl would like to study.
- Pro's and con's of regular -vs- special schools (where appropriate).
- Special help given by teachers.
- Sport and recreation at school.
- Differences observed between male/female teachers.
- Work experience - where, when, how chosen, enjoyment level.
- Relationships with other students; friends.
- School holiday activities.
- Overall coping with school.

Adolescence /Social and emotional well-being:

- Activities and friendships.
- Where friends are made.
- Boyfriend(s).
- Family relationships and type of assistance or advice offered to young woman by family members. Type of housework done by young woman.
- Sexuality: sex education - where received, adequacy.
- Personal decision-making (e.g. shopping for clothes, hair cuts etc.)
- General community attitudes (e.g. in shops, public transport etc.)
- Self-description.
- Understanding of own disability (explain to interviewer).
- Particular problems.
- Depression - frequency, reasons, solutions.
- Any changes to life desired.
- Person(s) admired - who and why.
- Knowledge of other women with disabilities.

Aspirations and the Future:

- Post-school aspirations.
- Affect of disability on these aspirations.
- Who will help girl decide what to do.
- In 5 years time - where, and what doing.
- Question of unemployment.
- Marriage and children.
- Fears for the future.
APPENDIX 5

SUMMARY: POSSIBLE AREAS OF NEED

PERSONAL LIVES

* The need to encourage the building of peer friendships, particularly in integrated school settings.

* The need to promote the extension of friendships outside school hours.

* The need to cultivate outside interests, e.g. involvement in sporting or recreational groups, so that friendships can be fostered.

* In some instances it may be desirable to create opportunities for groups of disabled youngsters to meet each other in a recreational setting to make friends, share experiences, and to discuss problems.

* Some young women, e.g. the deaf, may require additional assistance with developing communication and social skills.

* There is a need to address transport difficulties in order to maximise the development of friendships.

* Teachers and parents need to be aware that because of a lack of friendships, some young women appear to use school work as a substitute.

* Our findings indicated that a need exists for teaching young women with disabilities about boy/girl friendships and dating. This may overcome some of the difficulties which many young women appear to be experiencing with these adolescent relationships.

* Programs to foster confidence, assurance and positive self-esteem are needed for most girls.

* As a precursor to healthy personal growth and development, parents, care-givers, and professionals need to acknowledge that young women with disabilities are sexual beings, and have sexual needs. This means that they must be regarded as young adults, and not children.

* The need to encourage risk-taking and expand the experiences of young women with disabilities has been mentioned by numerous professionals. However, there is a need to ensure that parents or guardians feel that these risks and experiences are appropriate.

* There is a need for counselling and teaching in human relations and specific sex education which relates to the areas of disability.

* In the teaching of sex education, individual needs must be taken into account, for example, interpreters for deaf girls, alternatives to visual presentation for girls with visual disabilities.

* Where appropriate, access to genetic counselling should be provided.

* There is a need for the young women to have an accurate understanding of the nature of their disability and it's implications for their future, for example employment, marriage, children, life expectancy.

* There is a strong indication that young women would benefit from the provision of strategies for coping with teasing, name-calling, staring and the like. Self-assertiveness training is seen as particularly useful in this regard.

* The need to provide positive role-models from the disabled community for young women with disabilities has been recognised as being especially valuable by a number of professionals. For example, women with disabilities who are employed, married, mothers, living independently etc.
SCHOOL LIVES

* The recognition of most of the young women of the value of education is regarded as an extremely positive finding. Maintenance of this attitude should be sustained.

* In common with all young women in Australia, there is a need to encourage and enable young women with disabilities to continue studying Maths and Science.

* The fostering of high, but realistic career aspirations, a broadening of the traditional career options, and the encouragement of more long term career planning rather than short-term job orientation are seen as extremely important.

* The selection of careers should be undertaken in conjunction with good planning of subject choices as early as possible.

* From our findings it is apparent that young women with disabilities may not seek information or assistance on possible careers. Vocational Guidance Officers and Careers Teachers therefore need to pay particular attention to ensuring suitable information is provided.

* Frequently, methods of choosing work experience involve only the provision of a smorgasbord of choices without providing detailed work descriptions, possible career directions emanating from the experience, or the necessary skills to make realistic and appropriate choices.

* While acknowledging the difficulties associated with securing work experience for young people with disabilities, attempts to break down the stereotypic nature of these experiences should be encouraged.

* There is a need to accurately assess the post-school options of young women with disabilities when determining the type of work experience to be undertaken.

* Parents are frequently called upon to assist their daughter with career decisions. It is therefore important that parents are given opportunities to talk with Guidance Counsellors and Careers Teachers.

* It is suggested that opportunities to work alongside women with similar disabilities may be particularly valuable.

* Schools should actively and sensitively address the issue of physical and verbal harassment. This is particularly so where integration is taking place. While schools may claim that harassment does not occur, is not a serious problem, or is difficult to deal with, the young women we spoke with indicate that they do experience teasing and bullying. The fact that young women do not draw attention to harassment does not mean that it does not affect both their self-esteem and academic achievements. It is seen as the school's responsibility to ensure that a positive stand against harassment permeates throughout the school from the highest level down.

* There is a need for open discussion and understanding by students and staff alike of the role of special units and support teachers in mainstream schools.

* Where specialist services are required these should be provided in line with individual needs. The need for additional or improved services in some areas has been found during our investigation (e.g. interpreting services for hearing impaired students).

* It is important for schools to provide a positive environment so that young women with disabilities can participate as fully as possible in sport and recreation. Where appropriate, special programs or modifications to instructional methods should be adopted. Greater flexibility and creativity would ensure that assumed obstacles to the girls' participation would be overcome.
* The provision of a comfortable and accessible physical environment at school is necessary for all young people. In the case of young women with disabilities the onus is on each school to ensure that individual needs are met. These needs may include adequate and easy wheelchair access, appropriate toilet facilities, a smoke-free environment for children with respiratory or heart conditions, and adapted classroom equipment and technical aids.

* Instructional and curriculum adaptations which would facilitate learning should be in place. To avoid accusations of favouritism being levelled at students with disabilities, it is important that all students and staff fully understand the reason for such adaptations.

* Some young women indicated that they had to work especially hard to keep up academic standards. Others remarked that they found it difficult to ask for help. It is therefore important for schools to ensure that if extra effort does appear to be required by girls with disabilities, the reason for this does not stem from inadequate physical or educational resources.

* Many young women remarked that they had difficulty in convincing others that they were capable of achieving. Schools therefore need to be aware that poor academic achievement may not be related to difficulties perceived to result from a particular disability, but rather from low expectations, poor self-esteem or other factors within the school environment.

* The experiences of young women who transferred from a special school to a regular school were not always happy. Adequate preparations should be made by schools to ensure as smooth a transition as possible, particularly in the area of staff and student awareness.

* It is important to note that the specialised programs and assistance offered to young women in special schools were often seen as beneficial by girls who had attended such schools, for example the teaching of typing to visually impaired girls at an early age. The expertise gained in special schools over the years should not be neglected during moves towards integration.

* Several young women with hearing impairments indicated that moves between States had resulted in confusion because differing methods of communication were used or taught in schools. It would therefore be desirable to develop a national policy in this vital area.

* To ensure continuity and reinforcement of educational services, there is a need for efficient communication mechanisms within schools to be established, for example to allow for regular consultation between support staff and regular teachers, or to apprise new staff of the needs of their students who have disabilities. In the case of schools who may only have one or two students with disabilities, it is important that all staff are aware of their needs, particularly in the case of students who may have 'hidden' disabilities such as epilepsy or hearing impairment.

* Communication links between schools, parents, government agencies, and relevant organisations should be strengthened so that information and knowledge of new developments in technology or aids can take place.

* There is a need for in-service education of both teachers and personnel responsible for career guidance to ensure that they have an adequate and informed understanding of the needs and abilities of young people with disabilities.

* Many of the needs identified in this list should also be met at Primary school level.

* Finally, rather than expecting students with special needs to adapt to a sometimes hostile environment, every effort should be made to adjust school systems to accommodate the pupils' rights to a meaningful education.

**HOME LIVES**

* There is a need for increased communication between parents and professionals so that they may more easily understand each others perspective. The whole family may need to be counselled in certain instances.
Parents of daughters with hearing impairment should be encouraged and assisted as much as possible to learn to sign.

Families and their daughters need up-to-date and realistic information about future possibilities in the post-school years, so that definite goals may be set.

Young women need to have more information about their particular disability where this is possible. This will enable them to better plan for their future.

Young women are also evidently in need of more counselling and assistance to help them overcome their uncertainty and fear about their future. Accurate information concerning further education, training programs, accommodation prospects, subsidies, pensions etc. needs to be made easily accessible.

There is a need to encourage young women to have more interests outside the family circle in order to help them achieve a degree of independence away from the family.

It would be desirable if more flexibility could be introduced into timetabling arrangements in residences.

The need to inform, counsel, and consult with young women about their future is also present in residential settings.

There is a need to avoid 'mothering' or 'over-protecting' young women in residences, and to recognise that during adolescence they prefer to be treated as young adults rather than as children.

THE POST SCHOOL YEARS

There is a need for realistic and expert appraisal of each young woman's abilities as these relate to further education, employment, independent living, marriage and child-bearing. This may assist in overcoming the current state of passive acceptance and feeling of lack of control over their lives that many young women appear to experience.

Employment has been identified as a high priority by most young women. There is a need therefore to provide them with strategies for seeking employment, and a realistic matching of their abilities with their aspirations.

Few young women with disabilities contemplated unemployment. There is a need to discuss this in conjunction with vocational guidance, in order to develop mechanisms for coping with this possibility.

There is a need to ensure that all young women leave school adequately prepared in the areas of social skills, sex education, appropriate behaviour and dress. There are indications that some young women with disabilities are not receiving enough training or assistance to help them adjust adequately to their post-school years.

There will be a need for many young women to receive appropriate and sensitive counselling in the area of sexuality, and the implications of their disability on their future. There may also be a need in some instances for specialised counselling to assist young women with grieving when they perceive that an intimate relationship may not be possible.

There is a need to make information available to parents concerning further education, training opportunities or careers. This will enable them to help their daughters make important decisions about their future.

There is a continuing need for employer education, and an expansion of post-school training and vocational opportunities for people with disabilities.

Finally, a furtherance of community awareness programmes is an ongoing need.
The aim of "Understanding Young Women with Disabilities" is to create an awareness of the educational needs and experiences of adolescent girls and young women in Australia who have a mild or moderate disability.

The book comprises the words of over 150 young women talking about their school and home lives as well as their post-school lives and options. In addition, we have included the comments that parents and professionals have made about these young women.

The findings in the book suggest ways of ensuring that young women with disabilities receive equality in every area of their lives. We are hopeful that Australia will meet the needs of all young women, including those with disabilities.
Restricted opportunities and problems in defining an appropriate school leaving age were mentioned by professionals assessing young women with hearing impairment:

"Once they get into employment, their inability to communicate makes them work rather harder, and most of these girls seem reasonably happy with their jobs unless they get stuck in something, like washing dishes because they are good at it. Girls tend to be restricted, especially at night, in such areas as going to night classes. Girls who want to work in child care are told they can't because of deafness. When people are put into trades, it is outside influences rather than because they really want to be there - services restrict their choices by 'slotting' them in. Kids seem to be pressured to leave school early and take a job. Because the general community is leaving school after Year 10 and going to secretarial or training courses, for our girls the longer her education (and it is needed) the more difficult it is for her to compete at age 18 with 16 year olds."

Special school staff, also referring to hearing impaired girls, said that:

"... deaf girls are often underemployed. When they are looking for jobs they are very unrealistic. They should be trained to use computers, as technology is destroying traditional women's work."

A doctor, who sees many hearing impaired girls, says that:

"They are often not taught social behaviours, are ill-prepared socially and exhibit inappropriate behaviour. They aren't stopped when they are younger, and excuses are made for them because they are deaf. There is a need for work preparation earlier in the school. There is a tendency for the deaf to go into unskilled jobs, many stereotyped and chosen by parents, e.g. hairdressing. They should be encouraged to go to university and think about jobs for which there is a course at college (although there is a need to improve interpreting services). Many have lacked role models."

Referring to young women with an intellectual disability, several people drew attention to unrealistic expectations. The Director of an employment agency for mildly intellectually disabled adults commented:

"Most clients are from special school, and have had work experience in nurseries. They are interested in child care and office work and there is no employment in these areas. They have unrealistic expectations. Their typing skills are not sufficiently good to get a job, and they have poor reading skills. Seventeen is too young to leave education. Expectations are usually too high, and this causes friction in the family. 99% of the girls are unrealistic, it takes a long time to get them to be realistic about jobs. Boys have a more realistic idea of work, they will take any job and are willing to try anything."

Staff from a support unit for girls with an intellectual disability did not concur with the view that they should stay at school longer:

"It's not appropriate for all. We know from employment agencies that employment prospects are at a peak for students with disabilities between 15 and 17, so if you keep a kid at school longer you are minimising their employment opportunities, the chance to get into the market and develop skills other kids might not have."

And perhaps the best advice of all:

"You have to look at the individual kid."

The director of a sheltered workshop remarked that in her experience "girls have no fixed ideas. They are apathetic and protected."