Professional Development: The International Journal of Continuing Social Work Education is a refereed journal concerned with publishing scholarly and relevant articles on continuing education, professional development, and training in the field of social welfare. The aims of the journal are to advance the science of professional development and continuing social work education, to foster understanding among educators, practitioners, and researchers, and to promote discussion that represents a broad spectrum of interests in the field. The opinions expressed in this journal are solely those of the contributors and do not necessarily reflect the policy positions of The University of Texas at Austin's School of Social Work or its Center for Social and Behavioral Research.

Professional Development: The International Journal of Continuing Social Work Education is published two times a year (Spring and Winter) by the Center for Social and Behavioral Research at 1923 San Jacinto, D3500 Austin, TX 78712. Our website at www.profdevjournal.org contains additional information regarding submission of publications and subscriptions.

URL: www.profdevjournal.org   **Email: www.profdevjournal.org/contact**

Disability in Schools of Social Work in Australia: Moving Beyond Existing Theories and Practices

Carter, Hanes and MacDonald

Abstract

The authors explore inclusion, accessibility, and curriculum development in Australian schools of social work with a particular focus on deconstructing the neoliberal gaze into policy formation and its related practices. The research presents findings from 26 accredited Australian schools of social work where, similar to other Western countries, disability policy and practices have relied heavily upon the medical model in which expert knowledge belongs to the medical professional, not the person living with the disability. Shifting this discourse to a critical disability perspective is considered paramount to moving toward inclusive practices. Findings pertaining to the following topics are explored: disability related course content, social work activism and social justice for and with people with disabilities, dominant theories of disability being promoted in schools of social work, field placement issues, accessibility of schools of social work, and availability of field placements for students with disabilities. The authors aim to shift the dominant discourse supported by the medical model to a critical disability perspective, which includes centering the lived experiences of disabled persons; continuing the dialogue about disability inclusion in schools of social work at the international level; addressing issues of accessibility, inclusion, supports and services for students and faculty with disabilities; and ensuring that disability and people with disabilities remain a core focus of social work education, training, and research in schools of social work around the globe.

Disability in Schools of Social Work in Australia: Moving Beyond Existing Theories and Practices

Introduction

Despite fluctuations in academic priorities for schools of social work in recent years the study of disability in most western, industrial countries such as Canada, the United States, and the United Kingdom has evolved from a focus of study rooted in a "charity ethic," wherein social work's traditional priority was to provide care for the "poor disabled individual," to a position wherein social work theory and practice models have become heavily influenced by critical disability studies (Fine, 2019; Goodley, 2012, anti-oppressive social work theory (Carter, Hanes & MacDonald, 2017) and structural social work practices (Hanes, 2016). The shift away from social work theories and practices influenced by charity ethics and medical model approaches to more radical and critical understandings of disability discourse has laid the groundwork for greater inclusion and change in social work education globally (Carter, MacDonald, & Hanes, 2012; Hanes, Carter, MacDonald, McMurphy, & Skinner, 2014; MacDonald, Carter, Hanes, McMurphy, & Skinner, 2014; Carter, Hanes, & MacDonald, 2017).

While the authors recognize that applying a social justice lens to disability has been difficult for many North American and British schools of social work, it is their belief that enormous gains have been made in terms of professional standards, course content, program delivery, and environmental accessibility, but more needs to be done. In recent years the authors have investigated schools of social work in Canada, the United States, and the United Kingdom, and in this article they turn their attention to Australia. Specifically, the effectiveness of social work's commitment to social justice and equality regarding disability in Australian social work education is reviewed. A survey of Australian social work education reveals that medical and rehabilitative modalities tend to dominate, and social work discourse linked to critical disability studies occupies a small, isolated space in social work curricula. The authors emphasize that progressive social work education is required to ensure that disability and people with disabilities remain a core focus of social work education around the globe. Moreover, while attempting not to be overly simplistic and overly prescriptive in terms of Australia, they contend that there could be a shift from a medical model focus to more of an experiential

Irene Carter MEd, MSW, PhD, is a Professor and Academic Coordinator for the Masters of Social Work Working Professionals Program at The University of Windsor
Roy Hanes, BA, MSW, PhD, is an Associate Professor (retired) at Carleton University
Judy E. MacDonald, BSW,MSW, PhD, is a Professor, Director of School of Social Work, and an Assistant Dean of Equity and Inclusion at Dalhousie University

and critical disability perspective which can be found in Canadian, American, and British schools of social work.

Background on Disability Strategies and Policies in Australia

As a result of poverty and social exclusion, persons with disabilities remain one of the most marginalized groups in Australia (Stainton, Chenoweth, & Bigby, 2010). One in five Australians with disabilities did not access needed medical care from a specialist because of costs (Australian Institute of Health and Welfare, 2016). Over one million (1.8) Australians (aged 15 to 64) "have a specific limitation or a schooling or employment restriction" (Athanasou, 2014, p. 100). From the "discursive interplay between governments and sections of the disability movement" (Hallahan, 2010, p. 122) has sprung Australia's National Disability Strategy (NDS) (Department of Social Services, Australian Government, 2016; Hallahan, 2010). The NDS was initiated by the Parliamentary Secretary for Disability and is led by the Commonwealth Department (Hallahan, 2010). The NDS has a mandate for "action, inclusion, and participation" (Hallahan, 2010, p. 119) in developing policies and services related to persons with disabilities. In addition, there is a commitment to ensuring that all decisions are principled and aimed towards influencing government policies that will result in meaningful and lasting change (Hallahan, 2010).

Australia introduced the National Disability Insurance Scheme (NDIS) on July 1, 2016. The aim of the NDIS is to assist Australians under the age of 65 who have a permanent and significant disability with supports. The NDIS includes Individualized Funding Packages (IFPs) as the highest level of support, followed by the Information, Linkages, and Capacity Building Framework (ILC) (Moyle, 2016). The new NDIS programs suggested there would be an increased demand for social workers to have knowledge and skills in working with people with disabilities and that such skills would need to be incorporated into the social work curriculum. A number of barriers exist in reaching this goal. There is a shortage of students entering social work due in part to low salaries within the profession (Crawford, 2012). In Australia, similarly to the United States,

"social work programs have had to justify their existence in market terms" (Crawford, 2012, p. 327) with pressure to increase the number of students and revenues (Karger, 2012). Gray and Fook (2004) explain that "many would argue that what is now being touted as 'universal social work' is 'Western social work' in the same way that globalisation is equated with Westernisation or even Americanisation" (p. 627). When selecting social work students, "programs take on both an educational and a gatekeeping role for the profession" (Ryan, McCormack, & Cleak, 2006, p. 67). Universities in Australia have also been influenced by managerialism since the 1980s. Schools are pressured to create outcomes that foremost serve the university's bottom line (Sheehan, 2001).

Social Work Degree Programs in Australia

Australia offers more than 80 social work degrees in BSW and MSW programs accredited by the AASW (Australian Association of Social Workers). As a response to funding pressures, some Australian universities are redefining social work to align with the health profession in an attempt to secure more funding (Crawford, 2012). Kennedy, Harvey, and Gursansky (2001) explain professions such as social work, nursing, psychology, and occupational therapy are becoming generic case managers, diluting their professional uniqueness. For example, Cortis and Meagher (2012) note that "in Australia's rapidly growing social and community services (SACS) industry, positions are increasingly filled by graduates of human service degrees other than social work or those with vocational education and training (VET) qualifications" (p. 295). Cortis and Meagher found in a research study in New South Wales that in the nongovernmental sector, "social work programs seem to be *distinctive* in that they are significantly more *effective* than other degree level offerings in ensuring workers feel well prepared for practice" (p. 308). Social work affiliations with other professions based on the medical model may not bode well for all populations, particularly persons with disabilities. It is important that social workers develop "critical analysis and problem solving within a framework of ethicality" (McDonald, 2007, p. 90-91). Creating social work programs from a neoliberal market perspective to ensure continued funding may not produce social workers with the ability to critically

analyze the needs of persons with disabilities.

Disability and Social Work Education and Practice

While social workers and the services they provide have the potential to significantly improve the lives of persons with disabilities, the profession has often been critiqued for its lack of progressive understanding of disability issues, and many disability activists have exposed the social work profession as being "part of the problem and not the solution." Simply put, throughout most of its existence, social work has maintained a strong presence in the lives of persons with disabilities (Stainton, Chenoweth, & Bigby, 2010), but it has not always been a positive relationship. Social work education in Australia began in 1929 and developed during the Great Depression in mostly hospital and community settings (Napier & George, 2001). At various times along the historical trajectory one can see that social workers have made decisions in their professional roles which have resulted in "charity at best and incarceration at worst" (Stainton, Chenoweth, & Bigby, 2010, p. 1). Although viewed as supportive, encounters with social workers have also been described as "paternalistic, interventionist, assumed expert, and gate-keeper to flawed service systems" (Stainton, Chenoweth, & Bigby, 2010, p. 1) and limited in empowering persons with disabilities.

In recent decades persons with disabilities and disability rights advocates worldwide have increasingly demanded recognition in law and insisted on nothing less than full self-determination. Examples of disability activism are recognized with the creation of Disability International, the rise of the Independent Living Movement in Canada and the United States, as well as development of the Union of the Physically Impaired Against Segregation in the UK. This disability activism has led to national and international policy and legislative changes such as the United Nations Convention on the Rights of People with Disabilities; but despite these radical developments, social workers, for the most part, have not been part of these struggles either as participants or allies. Indeed, disability activists and scholars remain deeply concerned that not only are the demands for inclusion not being adequately addressed by social work scholars, educators, and practitioners, but social workers are themselves often agents of

this exclusion (Meekosha & Dowse, 2007). Craig and Bigby (2015) found that critical realism should be applied to investigate social inclusion and exclusion of people with disabilities. Craig and Bigby explain that "critical realism's starting point is that both human agency and pre-existing societal structures create the phenomena or social problem under study" (p. 312).

Persons with disabilities continue to be denied their full citizenship (Meekosha & Dowse, 2007). Persons with disabilities "are still being excluded from involvement in the public sphere, as workers, citizens, and consumers, despite their desires to be participants in the organisations of the state and of civil society" (Meekosha & Dowse, 2007, p. 169). Meekosha and Dowse (2007) suggest that the social work profession has been highly influenced by the discourses prevalent in the medical and rehabilitative fields which view disability as something to be treated, cured, or regulated. Briefly stated, the overemphasis on the medical model approaches tends to weaken the relationship between social work and people with disabilities. Moreover, one recognizes the influence of neo-liberal medical model approaches of western industrialized social welfare states wherein medical model approaches dominate and control access to welfare state programs designed to meet the day to day needs of people with disabilities. Western-industrial-democratic welfare states may assert welfare reforms, but the reality has been that a neo-liberal strategy has resulted in significant diminution in much needed disability "entitlements" (Meekosha & Dowse, 2007, p. 170).

Disability and University Students

Australians with disabilities are less likely to obtain a bachelor's degree or higher (14.8%) compared to Australians without disabilities (26.2%) (Athanasou, 2014). Very few persons with disabilities complete undergraduate studies, and they are extremely underrepresented in social work as students, faculty, and practitioners (Meekosha & Dowse, 2007). It is difficult to ascertain the exact numbers of persons with disabilities in the Australian education system because there is not a consistent definition of disability in Australia (Dempsey, 2011). However, there has been a general upward trend in the number of persons with disabilities in the education system, in part attributable to the fact that Australian uni-

versity students with disabilities "show skill in negotiating available disability support" (Papasotiriou & Windle, 2012, p. 935). This increase is also seen as a result of greater awareness of disability amongst professionals to identify disability, wider access to education, and slightly better support of persons with disability in the form of modest federal and state funding increases (Dempsey, 2011).

While it is evident that progressive changes in university policy and government legislation have led to better access for persons with disabilities (Ryan, 2007), with respect to postsecondary education, an examination of the qualitative experiences of persons with disabilities in the education system reveals significant issues related to academic accommodation for students with disabilities (Ryan, 2007). Although students with disabilities are certainly enrolling at much higher rates than ever before, they "find that the promise of equal opportunity is often not kept" (Ryan, 2007, p. 436) as the professors' and the universities's normative expectations and practices have an enormous impact on a student's experience in university (Ryan, 2007). Students describe their needs as not accommodated because their "stories were not believed" (Ryan, 2007, p. 436) and because their disability was negatively portrayed as intrinsic to them, and many stated that they experienced an overall feeling that they "did not belong" (Ryan, 2007, p. 440). In essence there is a significant need for professors to ensure they are also perpetual learners who continue to remain cognizant of the way their own practices play a part "in the construction of learning difficulties in their students" (Gale, 2002, p. 65). Consequently, students with disabilities continue to manage the effects of their impairments, people's perceptions of them, university disability services and staff, and their own perceptions of themselves while also managing school, work, and home responsibilities (Werth, Hammer, & and d'Abadie, 2014).

Disability in the Australian Social Work Curriculum

The failure to accommodate the educational need of students with disabilities may not be a surprise considering the lack of disability-related content in schools of social work curricula, as content often reflects the philosophical framework of a particular school of social work. As Bigby (2013) explains, "disability has had a rela-

tively low profile in the profession, attracting little specific attention in curricula, continuing professional education, practice standards, or policy advocacy" (p.4). The marginalized status of disability is further reflected in the accreditation standards for social work courses (Stainton, Chenoweth, & Bigby, 2010). The Australian Association of Social Workers was created in 1946, and a four-year social work degree program, first offered at the University of Queensland in 1960, became the common credential of social workers in the late 1960s (Napier & George, 2001). In 1974, the AASW published the *Minimum Educational Requirements* document, giving the professional association the power to set educational standards for membership and school accreditation instead of the government (Napier & George, 2001). In 2016, the Australian Social Work Education and Accreditation Standards (ASWEAS) were reviewed by the Australian Association of Social Workers (AASW; Moyle, 2016). The social work curriculum in Australia is based on a 5-year cycle of accreditation for Higher Education Providers (HEPs). Very few schools in Australia offer students the opportunity to take practice courses with disability content (Stainton, Chenoweth, & Bigby, 2010). There may be inconsistent disability content between social work programs because there are no specific guidelines in the ASWEAS such as those provided for core practices (Moyle, 2016).

Few universities offer disability-related courses as a specific field of practice (Stainton, Chenoweth, & Bigby, 2010). Where courses are made available in Australian schools of social work, research has shown that these courses were students' "least preferred option" (Stainton, Chenoweth, & Bigby, 2010, p. 2) due to the students' lack of understanding and fear of the unknown with regards to working with persons with disability rather than with a true lack of interest regarding disability issues (Stainton, Chenoweth, & Bigby, 2010). Bigby (2013) notes that undergraduate students seldom arrive at the university with the same burning desire to work with people with disabilities as they have to work with people who are homeless, have mental health problems, or are caught up in the child and family welfare system. Schools of social work need to ensure that disability education is made available in schools of social work to ensure that the social work profession does not perpetuate the stigma persons with

disabilities experience in society generally. Social work curriculum should include specific skills related to the field of disability and social justice issues (Moyle, 2016).

Perspectives on Disability and their Impact on Social Work Education

Including disability content in social work curricula is not enough, as the manner in which disability subject matter is presented is extremely important. For example, on the one hand if social work educators, scholars, and students identify disability as problematic wherein the social work role is one of therapist and benevolent helper with the aim of fixing or curing, then the profession will continue to perpetuate the belief that people with disabilities and their families are the problem and are in need of professional services and supports. However, if on the other hand social work educators, scholars, and students take the view that disability is a form of human diversity wherein people with disabilities remain oppressed because of ableist ideals which perpetuate negative stereotypes and create problems, then it is more likely that social workers will be advocates and allies for social justice and greater inclusion. While there are exceptions, most disability related texts used in social work education focus on "disability as problematic," continually failing to address discourses on important broader societal issues relating to oppression, structural discrimination, and rights, instead focusing most often on individual impairments (Meekosha & Dowse, 2007), coping with loss, and family dynamics. In this sense, social work education, research, and practice can be an extremely contradictory experience for persons with disabilities. In all of its attempts at being an enabling profession, social work is also disabling as a result of the profession's failure to "take on board new ways of examining the disability experience" (Meekosha & Dowse, 2007, p. 169). The continued use of medicalized paradigms of analysis and intervention promoted in many schools of social work has obviously had a negative effect on service users, but what is less commonly looked at is the extent of the effect this practice has on students with disabilities (Ryan, 2007).

Bay and Macfarlane (2011) use Foucault's theories to discuss how identity categories, such as being a person with a disability, can cause powerlessness when the identity category is viewed as "substantive, fixed, and based on inherent differences" (p. 751). Morley (2008) explains that postmodernism "sees identity as a dynamic, fluid, relative and changing concept, depending on the social context" (p. 416), and "problematises binary oppositional and dichotomous categories" (p. 416). Thus, persons with disabilities face significant challenges as they attempt to work their way through an education system and a profession dominated by medicalized discourses that represent disability as deficiency. The way that social work education incorporates disability perspectives has a profound impact upon the "prospects for disabled people becoming social workers" (Meekosha & Dowse, 2007, p. 171). Meekosha and Dowse (2007) make the point that, traditionally, social workers have been trained to assess persons with disabilities in a way that consequently results in a gatekeeping role in which determination about eligibility is made with limited resource. Indeed, the "gatekeeper role" has become a dominant focus of most social work activities with persons with disabilities and their families in most democratic social welfare states. The problem is that under the auspices of the gatekeeper role, disability is defined as an individual medical problem and solutions are limited to services that are provided through welfare state enterprises and activities. While more emancipatory approaches aim to give individuals more control over their lives, many social work and social service agencies still practice in ways reminiscent of older established medical model approaches in trying to help persons with disabilities adjust or adapt. Rarely are attempts made to address broader issues rooted in ableism and systemic oppression.

As Soldatic and Chapman (2010) note, "the Australian disability movement first emerged as part of a global disability rights movement in the late 1960s" (p. 140), reframing disability from a medical perspective to a condition of social oppression (Soldatic & Chapman, 2010). Australia, the United Kingdom, the United States, and Canada share a common history of radical and feminist social work beginning in the 1960s of working with oppressed groups (Gray & Fook, 2004); but even with this radical influence, social work education remained chronically connected to medical model interpretations of disability. In fact, literature pertaining to disability rights activism noted

that most professionals such as social workers were barriers themselves to emancipation (Dejong, 1978). It has been only since the 1990s that social work scholars and activists within the disability movement and allies took up the afore-mentioned issues and urged institutions to ensure that courses dealing with disability be taught from a more critical perspective (Meekosha & Dowse, 2007). An excellent example of this proactive "activism" was the establishment of the Persons with Disabilities Caucus of the Canadian Association for Social Work Education in 1992. Although the struggle continues it must be noted that critical disability studies have begun to take root in many schools of social work around the world and some Australian schools of social work show evidence of progressive disability course content (Meekosha & Dowse). But these authors also point out that despite the rise in progressive disability course content and research, its impact has been minimal amongst social work professionals and educators who remain at a distance from disability movements (Meekosha & Dowse, 2007) in Australia, which points to the fact that more needs to be done in terms of inclusion and the creation of disability positive teachings and research.

Goodley (2012) writes how critical disability theory provides insights into how disability is entangled with other forms of oppression (Goodley, 2012), moving disability studies beyond the social model of disability by "challenging capitalist conditions of alienation" (p. 632). The social model began to be viewed as lacking in exposing the complexity of disability. The concept of intersectionality in critical disability studies led to new insights. Goodley views critical disability theory as "unpacking and illuminating the complex nature of disability" (p. 641). Goodley views critical disability studies as explaining how forms of oppression such as disablism, racism, homophobia, and orientalism, which negate the existence of Others are justified. He cautions us against disability studies becoming a field of study that fails to recognize disablism. Critical disability theory "involves scrutizing not bodily or mental impairments but the social norms that define particular attributes as impairments, as well as the social conditions that concentrate stigmatized attributes in particular populations" (Hall, 2019, p. 1).

Dunn (2019) reminds us that ableism is an ideology that legitimizes policies and institutions that segregate others and create inequalities regarding schooling, employment, and housing. To challenge and resist ableism, Fine (2019) writes that one must develop a "critical disability consciousness" (p. 974) and consider how "race, gender, sexuality, and immigration status" is "embroidered into our labels/categories/identities" (p.979). Fine (2019) promotes "an intersectional framework" (p. 980) and the use of critical disability studies and participatory action research that involves (dis)abled researchers, and in doing so, moves us beyond inclusion to transformation. For example, Nguyen, Stienstra, Gonick, Do, and Huynh (2019) demonstrate activist-orientated research that explores the inclusion of women and girls with disabilities in Vietnam. In the study the girls and women reviewed their experiences of inclusion and exclusion using critical theory. The participatory action researchers from the global north and south opened up difficult questions; for example, how the academic knowledge has influenced disability studies, perpetuating what Dolmage (2017) and Nguyen, Stienstra, Gonick, Do, & Huynh, (2019), identify as academic ableism that maintains injustice in academia by limiting the voices of those who are disabled. Using critical theory and participatory methods, this research helped to resist the dominant research voices of the global north.

Social work must aim to develop greater awareness regarding "policy, practice and the political dimensions of a disabling society, and… to stimulate more appropriate responses to disabling barriers" (Meekosha & Dowse, 2007, p. 170). Soldatic and Chapman (2010) discuss the manner in which neoliberalism has impacted the Australian disability movement's advocacy for representation, recognition, and redistribution. Soldatic and Meekosha (2012) question how social work in the Australian university environment can "promote enabling discourses and practices of disability rights" (p. 248). They note that there have been few successful attempts wherein social work has attempted to radically alter the status quo by allying with Australian disability organizations. For example, people with disabilities have often asserted the motto "nothing about us, without us," and in the Australian context disability rights activism is noted in the rise of organizations such as the National People with Disability and Carers Council, which is led entirely by persons with disabilities, their carers, and al-

lies within social services agencies, as well as the private sector with the aim of advocating for and influencing "disability politics and policy practice" (Hallahan, 2010, p. 120) This practice raises questions in terms of ensuring those who speak for, or on behalf of, persons with disabilities have the experiential or expert qualifications to do so (Hallahan, 2010), which in turn means that to be effective social work education must be rooted in disability-positive discourses which assert rights and inclusion.

Methodology

The research project, exploring experiences of social work and disability in schools of social work in Australia, was carried out by completing the following four steps:

- A list of e-mails and telephone numbers of accredited schools of social work was generated from the Australian Association of Social Workers (AASW) public website.
- An email was sent to the contact person listed on the AASW website. The e-mail contained a letter that describes the survey and the survey questions. The letter also indicated that the questions may be answered through an interview format.
- One follow-up telephone call was made to those schools that did not reply to the e-mail.
- At the end of the survey participants were asked if they were interested in participating in a draw for a $100 Amazon.au gift card. A separate landing page was used to gather identifying information from participants for purposes of contacting them if they were the winner of the draw. Once the draw had been conducted, all identifying information was destroyed.

Schools that are listed with the Australian Association of Social Work (AASW) agree to have their contact information posted on the Association's public website for contact purposes. An e-mail was sent to the contact person listed on the public website. One follow-up telephone call was made to those schools that did not respond to the original e-mail request using the phone numbers that are listed on the publicly available list through the AASW. Analysis of the data was conducted at the national level, not school level, so none of the responding universities were identified.

Results

At the time of the study (2013), there were 26 universities in Australia offering social work programs. Responses to a survey were received from 14 of 26 institutions, therefore the response rate was 53.8%. The data were summarized in the following categories: accreditation and disability curriculum; field placements; collaboration with other departments; the social model of disability; caucuses or committees; integration into direct practice, social policy or diversity; equity statement; students with disabilities; other work in disability; and research and faculty.

Accreditation and Disability Curriculum

One hundred percent ($N = 14$) of universities who responded to the survey were accredited for either BSW, MSW, or both programs. Forty-three percent ($n = 6$) of respondents indicated their university offered disability courses in their BSW programs either as electives, units, or integrated models. Subsequently, fifty-seven percent ($n = 8$) of respondents indicated that there were no disability courses offered at the BSW level at their university. BSW disability courses have been in existence since the early 2000s to 2010 at forty-three percent of institutions ($n = 6$). One-third ($n = 4$) of respondents indicated that their university offered disability courses at the MSW level. Two-thirds ($n = 8$) of respondents indicated that there were no disability courses offered at the MSW level at their university. MSW disability courses at Australian universities have been in existence ranging from two to 34 years ($n = 3$). The number of students enrolled in BSW-level disability courses at Australian universities ranged from six to 500 students ($n = 9$). The number of students enrolled in MSW level disability courses ranged from two to 200 students ($n = 6$).

Field Placements

One hundred percent ($N = 14$) of respondents indicated that field placements were available in the disability field, including within government, hospitals, and agencies who work with persons with disabilities.

Collaboration with other Departments

Fifty-seven percent ($n = 8$) of respondents indicated that their program collaborated with other departments in offering disability content. Departments noted include health sciences, occupational therapy, arts, medicine, and nursing. Forty-three percent ($n = 6$) of respondents indicated that their program did not currently collaborate with other departments. One reason given for this was that collaboration would decrease funding due to course revenue being split between departments.

Social Model of Disability

Ninety-three percent ($n = 13$) of respondents indicated that the social model of disability or a similar model was used in their social work program. However, seven percent ($n = 1$) of respondents indicated that their institution did not use the social model as it does not relate to impairment or cultural aspects of oppression. Variations to the use of the social model included:
a more nuanced approach with a critical lens, rights-based person-centred perspective, or a more traditional medical model framework.

All respondents who indicated use of the social model elaborated on how the social model is incorporated into courses. One respondent indicated that their institution uses the UN statement on models of disability as a foundation for the program. A second respondent indicated that the social model is used for studying social policy, as well as critical and structural marginalization and counteroppressive practice and recovery orientation. A third respondent explained that their institution taught the structural barriers of persons with disabilities through lectures and readings. Two institutions stated that the social model "underpins the course" or is a "constant theme that runs throughout the program." A sixth respondent indicated that their institution incorporated the social model of disability through a range of models, theories, and case studies. The seventh institution explained that a rights-based approach is incorporated in knowledge content areas, assessment items, poster presentations, abstracts, research, multi-media and group processes, and persons with disabilities guest lecturers and leaders. An eighth institution indicated that the social model is taught through social justice and structural and cultural factors impacting disability. The ninth institution made the distinction that the social model is taught from both a theoretical and definitional standpoint but also "in terms of social practice." A tenth institution explained that the social model and the bio-medical model are explored and critical and post-modern disability is presented "as a way to critique and progress." The eleventh institution noted that their BSW had limited disability content; however, it was included in social work and health courses through lectures, readings, podcasts, and case studies.

Caucuses or Committees

Seventy-nine percent ($n = 11$) of respondents indicated that there were no caucuses or committees related to social work and disability at their university, or none of which they were aware. Twenty-one percent ($n = 3$) of respondents indicated that their university had a caucus or committee related to social work and disability, such as a disability subcommittee and a disability coordinator who liaises with the social work department about accessibility in teaching and learning.

Integration into Direct Practice, Social Policy or Diversity

One hundred percent ($N = 14$) of respondents indicated that disability was integrated into direct practice, social policy, or diversity. Responses included topics on UN models of disability; a curriculum advisory group; content on ethical and moral issues such as consent, advocacy, and corruption of care; direct practice topics; case studies; social policy; case management; case work; diversity; and policy and practice implications of disability. One respondent noted that disability content "needs to be more and articulated clearly in the learning unit outcome."

Equity Statement

Twenty-one percent ($n = 3$) of respondents indicated that their school of social work did not have an equity statement for students with disabilities, while thirty-six percent ($n = 5$) of respondents specifically indicated that their school had an equity statement. Forty-three percent ($n = 6$) of respondents indicated that equity statements exist at the university level. Thirty-six percent ($n = 5$) of respondents mentioned the Commonwealth Disability Discrimination Act of 1992 or other legislation.

Students with Disabilities

The number of students with disabilities enrolled in BSW social work programs at Australian universities is difficult to calculate. Percentages and numbers reported from forty-three percent (*n* = 6) of respondents were 1-15%. The number of students with disabilities in MSW programs, reported by forty-three percent (*n* = 6) of respondents, averaged between 1-5%. Several respondents indicated that the number of students with disabilities in their program may be higher or cannot be calculated due the following reasons: confidentiality, some students choosing not to disclose, "disabilities are not always visible," not all students are informed of disability services or choose to access them, some students may choose not to identify, and students may not access services because "they do not need them or are concerned about stigma." One respondent noted that the highest number of students with disabilities at their university enroll in social work and psychology programs. Another respondent noted that their school of social work has the highest number of students with disabilities accessing support through disability services at their university.

Other Work in Disability

One institution explained that there are four mandatory fields in Australian social work: "child welfare and protection, cross-cultural social work, working with Aboriginal and Torres Strait Islander communities, and mental health." The respondent explained that "this makes it difficult to include disability studies, even though they present an outstanding example of the fight for human rights, social justice, and inclusion generally, as well as policy development, paradigm change, etc." Responses related to other work in disability included a university-wide student committee, a Disability Action Plan, a disability access plan that is lodged with the Australian Human Rights Commission, disability liaison officers, focused work on promoting disability studies, a computer program to enhance community access to disability resources, consciousness raising activities, a student activist group, work integrated learning for disabled students, and space allocated for a new suite of disability programs

Research and Faculty

One respondent indicated that there are two faculty members and one doctoral student with disabilities at their institution. Another institution noted that a number of faculty members research disability and "bring it into their teachings" as well as "work closely with students with disabilities." In another school, a research group on disability and social inclusion facilitates collaboration with occupational therapy faculty at another institution. Several respondents indicated that faculty members research disability topics. Significantly, one respondent indicated that one staff member in the school has long-term involvement in development of disability policy and is currently involved in the evaluation of the National Disability Insurance Scheme. Other schools are focused on building their disability research that is practical and reflects both research of and education about disability.

Discussion of Findings

Curriculum and Integration into Direct Practice, Social Policy or Diversity

In terms of disability-specific courses, four important themes emerge from the research findings. To begin, this study suggests that with less than half to two-thirds of the schools of social work reporting that they do not offer specific courses pertaining to disability, it appears that disability is not a "specialty" priority in terms of social work education, practice, research, and scholarship. Instead, the findings suggest that disability-related topics tend to be covered through "generalist approaches" across a number of courses. Some of the topics covered in the courses include: United Nations disability models, diversity discussions, disability-related social policy, and direct practice case examples of people with disabilities. Questions regarding the breadth and scope of the course materials pertaining to disability were not included in the research, hence it is difficult to speculate as to the depth of the coverage; but one respondent did raise a concern stating that disability content "needs to be more and articulated clearly in the learning unit outcome." Second, the findings suggest that because of the potential lack of detailed coverage, it is quite likely that many BSW and MSW graduates have little or no comprehensive understanding of relevant disability issues, policies, and theories. Third, the invisibility of disability course content has the potential of affecting the enroll-

ment of students with disabilities and the hiring of disabled faculty members as the meta-message may suggest that disability inclusion is not a priority, thus dissuading people with disabilities from applying to a particular school. Fourth, this underrepresentation of disability content in Australian schools of social work and the lack of training of social work students is quite representative of schools of social work in other English-speaking countries such as Canada, the United States, and the United Kingdom (Carter et al., 2012; Hanes et al., 2014; MacDonald et al., 2014), wherein disability remains a low priority in terms of curriculum content.

Field Placements

The research findings indicate that all schools of social work in the study provided field placements in agencies wherein there was ample opportunity for students to be engaged with people with disabilities. The respondents ($N = 14$) noted that field placements were offered in a variety of agencies including hospitals, government departments, and disability-specific agencies. The researchers find no surprise in these findings as they reflect similar findings regarding field placements in Canada, the US, and the United Kingdom (Carter et al., 2012; Hanes et al,, 2014; MacDonald et al., 2014). The researchers do note that a pattern seems to be perpetuated in schools of social work around the world in that students appear to have the opportunity to do field placements in disability-specific agencies, but there is no demand on students that they must take disability-specific courses prior to doing placements wherein the clientele will be people with disabilities. While not conclusive, the findings raise some important questions that social work educators must address. For example, would students wanting to do placements with other minority populations such as with Indigenous Peoples or people of colour or new immigrants or LQBTQ2 peoples be encouraged or permitted to do field placements with these populations without some previous academic grounding on important issues pertaining to the specific group?

The findings highlight another theme which the researchers identify as "disabled student ghettoization." The findings from Australia suggest that students with disabilities are often likely to be placed in agencies which deal primarily with disabled clients even if their interests are working with other nondisabled populations. While there is no hard evidence from the findings, they seem to support a theme of convenience wherein it may be easier to place disabled students in agencies that are already accessible and wherein a "disability-positive" environment may already exist. Unfortunately, the ghettoization does not challenge the status quo where most social service agencies remain inaccessible and thus exclude many potential social workers with disabilities. On their own the results remain speculative in terms of disabled student ghettoization; but when put into the context of previous research (Carter et al., 2012; Hanes et al., 2014; MacDonald et al., 2014), a pattern emerges, and it does appear that students with disabilities are more often than not "encouraged to" or forced to take placements in disability-specific agencies and or organizations.

Collaboration with other Departments

An important element in disability-related capacity building in schools of social work is the unit's ability to collaborate with other university departments and faculty members. The research findings indicate an almost 50/50 split between schools of social work that collaborated ($n = 8$) and those that did not collaborate ($n = 6$) with other departments. The results do not measure the type of the collaboration with other units, but the findings do indicate that the vast majority of the partnerships were with departments which had a medical focus such as health sciences, occupational therapy, medicine, and nursing. Since there is no indication as to the nature of the collaborative activities, the researchers do not know if the partnerships included course development, course teaching, research, or interdepartmental concerns pertaining to accessibility issues. In short, further research regarding the nature of the collaboration is required.

Caucuses or Committees

One of the areas of interest in this research was to discover whether or not there were formal social work bodies which deal with disability issues in terms of education policies, course content, research accessibility, and inclusion. The researchers found that only three of the 14 schools of social work indicated that a persons with disabilities caucus or a persons with disabilities committee existed at their school of social work. No respondents reported on the existence of a persons

with disabilities caucus that might be part of the Australian Association of Social Work and Welfare Education. The lack of formal organizations such as caucuses operated by and for with people with disabilities at the university level, as well as the possible lack of these organizations at the national level, would suggest that instituting progressive change regarding the inclusion, accessibility, and disability-specific course content, while not impossible, is often difficult to bring about when there are no formal bodies advocating for change. For example, the Persons with Disabilities Caucus of the Canadian Association for Social Work Education often advises the CASWE through the Educational Policy Committee on policy issues which impact people with disabilities. It is interesting to note that the schools of social work which had a disability subcommittee or a disability coordinator used these committees and coordinators to address issues of accessibility in teaching and learning within their schools of social work. These are important examples which attest to the fact that organizational bodies such as committees and caucuses can bring about change.

Equity Statement

The concept of equity and the inclusion of equity statements varies from one university context to the next, with some universities having very comprehensive equity statements pertaining to people with disabilities while many others do not have inclusive coverage for people with disabilities. The findings also suggest that some universities might not have comprehensive equity policies which affect people with disabilities, but the social work departments themselves have well rounded equity statements regarding people with disabilities. Findings from this study reflect the diversity and range of equity statements from no existing statements to university and school of social work-based equity statements. For example, three respondents indicated that their school of social work did not have an equity statement for students with disabilities, five respondents indicated that their school had an equity statement, and six respondents indicated that equity statements exist at the university level. And while not related to equity per se, five respondents indicated that their school of social work incorporated principles from the 1992 Commonwealth Disability Discrimination Act. Unfortunately, the data do not show which schools of social work were cov-

ered by equity statements at both the university level and the program level, as it could be assumed that the schools of social work which had the more comprehensive equity statements might be more progressive in terms of accessibility and inclusion.

Students with Disabilities

The findings of this study indicate that for the most part schools of social work which participated in the study have very limited knowledge about the number of students with disabilities enrolled in their BSW and or MSW social work programs. Six respondents indicated that the percentage of BSW students with disabilities ranged from 1-15% of the total BSW student population, and six respondents indicated that the percentage of MSW students ranged, as well, from 1-15 %. Several respondents indicated that the number of students with disabilities in their program may be higher or could not be calculated due to the following reasons: confidentiality, some students choosing not to disclose, "disabilities are not always visible," , not all students are informed of disability services or choose to access them, some students may choose not to identify, and students may not access services because "they do not need them or are concerned about stigma." The respondents provided a number of reasons why they did not know the actual numbers of students with disabilities enrolled in their programs, but the numbers appear to represent an overly large range; that is, 1-15%. And finally, because the respondents used broad percentages to represent possible numbers, it is difficult for the researchers to fully estimate an accurate number of students with disabilities enrolled in social work programs. No numbers regarding total numbers of enrollments were provided.

Progressive Theory of the Social Model Guides Social Work Course Content

The research findings note that there are few schools of social work which offer course content pertaining to people with disabilities but 13 of 14 respondents indicated that the vast majority of the courses that do exist are based on some form of a social model of disability. Two respondents noted that the social model "underpins the course" or is a "constant theme that runs throughout the program." The use of the social model as the base theory suggests that Australian schools of social

work incorporate a progressive ideology of disability, which raises an interesting paradox for the researchers. For example, on the one hand courses adhere to a social model of disability which promotes inclusion and accessibility, and on the other hand there is no consistent strategy which supports greater inclusion of students with disabilities and/or the development of courses pertaining to disability.

Respondents noted that the social model was used in course content to examine social policies pertaining to people with disabilities, and similarly the social model was used to examine practices linked to medical models or recovery orientations. The social model appears to be used in BSW and MSW courses in core streams such as direct practice, social policy, and social justice. In terms of course teaching it appears that a social model of disability is applied in a number of ways including case studies, course assignments, poster presentations, group research and presentations, as well as through the voices of persons with disabilities as guest presenters. From responses gathered about theoretical frameworks, it does not appear that the social model is taught as "dogma," as many respondents noted that the social model was discussed, compared, and critiqued by incorporating a number of other theories into course content, and some of these theories included biomedical models, as well as critical and post modernist models of disability.

Actions toward Inclusion

Although it is difficult to get a clear picture of disability inclusion in schools of social work in Australia, it does appear, according to respondents, that schools of social work and their universities are attempting to address important issues of accommodation, accessibility, and inclusion, and some examples include: university-wide students with disabilities committees, disability action plans, university disability liaison officers, promotion of critical disability studies courses, computer-based programs which can enhance access to resources for students with disabilities, consciousness raising activities to address disability stigma and awareness, and support for students with disabilities activist groups.

Concluding Remarks

While it is not the intent of this investigation to do a comparative analysis between schools of social work in the Canada, the US, the UK and Australia, this research does find some interesting connections which should be mentioned. To begin, the Australian schools of social work seem to adhere to a social model of disability which is very similar to social work schools in the UK and Canada. Similar to schools of social work in Canada, the UK, and the US, there appears to be huge diversity in terms of inclusion, accessibility, and accommodation for students and faculty with disabilities (Carter et al., 2012; Hanes et al., 2014; MacDonald et al., 2014; Carter et al., 2017). In terms of opportunities for field placement for students with disabilities there appear to be very few options for Australian Social Work students with disabilities, and this reflects similar research findings pertaining to Canada, the US, and the UK. To borrow from Michael Prince (2009), who used the term "quilt work" to describe Canadian disability policy, the researchers suggest that the same metaphor can be used to describe disability inclusion in most schools of social work in Canada, the US, the UK, and Australia. And while diversity and discrepancy may best describe disability inclusion, one universal theme that disability remains a low priority tends to underpin research that is shared across most schools of social work—the struggle continues.

Besides the above similarities, it should be noted that the discourse pertaining to disability issues in Australia reflects the point of academics espousing a critical analysis of disability which underpins disability studies and antioppressive social work. This finding is not surprising to the authors considering that the social model of disability is linked to the work of Michael Oliver (1990), a disability rights activist, radical disability scholar, Marxist, and last but not least a social worker. In many ways, despite the historical interference of medical model practices, social work continues to profess the need for progressive and critical approaches to disability which not only advocate for disability celebration as an element of human diversity, but also advocate for change that promotes the human rights of all people with disabilities.

References

Athanasou, J. (2014). The impact of disability status on education and work in Australia. *Australian Journal of Career Development, 23*(2), 100-104.
    doi:10.1177/1038416214527436

Australian Institute of Health and Welfare. (2016). *Disability*. Retrieved from http://aihw.gov.au/disability/

Bay, U., & Macfarlane, S. (2011). Teaching critical reflection: A tool for transformative learning in social work? *Social Work Education, 30*(7), 745-7.doi:10.1080/02615479.2010.516429

Bigby, C. (2013). A national disability insurance scheme—Challenges for social work. *Australian Social Work, 66*(1), 1-6. doi:10.1080/0312407X.2013.771602

Carter, I., Hanes, R., & MacDonald, J. (2017). Beyond the social model of disability: Engaging in anti-oppressive social work practice. In D. Baines (Ed.), *Doing anti-oppressive practice: Social justice social work* (3rd edition), pp. 153-171. Black Point, NS: Fernwood Publishing.

Carter, I., MacDonald, J., & Hanes, R. (2012).The inaccessible road not taken: The trials, tribulations and successes of disability inclusion within social work post-secondary education. *Canadian Journal of Disability Studies,1*(1), 109-142.

Cortis, N., & Meagher, G. (2012). Social work education as preparation for practice: Evidence from a survey of the New South Wales community sector. *Australian Social Work, 65*(3), 295-310. doi:10.1080/0312407X.2012.707666

Craig, D., & Bigby, C. (2015). Critical realism in social work research: Examining participation of people with intellectual disability. *Australian Social Work, 68*(3), 309-323. doi:10.1080/0312407X.2015.1024268

Crawford, F. (2012). Learning cautious pragmatism from American social work education. Commentary on lessons from American social work education: Caution ahead (Karger, 2012). *Australian Social Work, 65*(3), 326-329. doi:10.1080/0312407X.2012.700521

Dejong, G. (1978) Independent living: From social movement to analytical paradigm. *Archives of Physical Medicine and Rehabilitation*, *60*(10), 435-446.

Dempsey, I. (2011). Trends in the proportion of students with a disability in Australian schools, 2000-2009. *Journal of Intellectual and Developmental Disability, 36*(2), 144-145. doi:10.1080/13668250.2011.573777

Department of Social Services, Australian Government. (2016). *National disability strategy*. Retrieved from https://www.dss.gov.au/our-responsibilities/disability-and-carers/program-services/government-international/national-disability-strategy

Dolmage, J .T. (2017). *Academic ableism: Disability and higher education*. CITY, MI: University of Michigan Press.

Dunn, D. S. (2019). Outsider privileges can lead to insider disadvantages: Some psychological aspects of ableism. *Journal of Social Issues*, *75*(3), 665-682.

Fine, M. (2019). Critical disability studies: Looking back and forward. *Journal of Social Issues*, *75*(3), 972–984. Retrieved from https://doi.org/10.1111/josi.12344

Gale, T. (2002). Degrees of difficulty: An ecological account of learning in Australian higher education. *Studies in Higher Education, 27*(1), 65-78. doi:10.1080/03075070120099377

Goodley, D. (2012). Dis/entangling critical disability studies. *Disability & Society*, *28*(5), 631-644. Retrieved from https://doi.org/10.1080/09687599.2012.717884

Gray, M., & Fook, J. (2004). The quest for a universal social work: Some issues and implications. *Social Work Education, 23*(5), 625-644.doi:10.1080/0261547042000252334

Hall, M. C., "Critical Disability Theory", *The Stanford Encyclopedia of Philosophy* (Winter 2019 Edition), Edward N. Zalta (ed.). https://plato.stanford.edu/archives/win2019/entries/disability-critical/

Hallahan, L. (2010). Legitimising social work disability policy practice: Pain or praxis? *Australian Social Work, 63*(1), 117-132. doi:10.1080/03124070903515458

Hanes, R. (2016). Critical disability theory revisited: Developing a post-social model of disability. In J. Robertson & G. Larsen (Eds.), *Disability and social change: A progressive Canadian approach* (65 -79). Winnipeg, Manitoba: Fernwood Press.

Hanes, R., Carter, I., MacDonald, J., McMurphy, S., & Skinner, S. (2014). Exploring social

work and disability in U.S. Schools of Social Work. *Professional Development:The International Journal of Social Work Education, 17*(2), 5-28.

Karger, H. (2012). Lessons from American social work education: Caution ahead. *Australian Social Work, 65*(3), 311-325. doi:10.1080/0312407X.2012.678498

Kennedy, R., Harvey, J., & Gursansky, D. (2001). The response by Australian universities to case management. *Australian Social Work, 54*(4), 29-38.doi:10.1080/03124070108414343

MacDonald, J., Carter, I., Hanes, R., McMurphy, S., & Skinner, S. (2014). Disability and social work education in the United Kingdom. *Canadian Journal of Disability Studies*, *3*(3), 53- 82. doi.org/10.15353/cjds.v3i3.173

McDonald, C. (2007). "This is who we are and this is what we do": Social work education and self-efficacy. *Australian Social Work, 60*(1), 83-93. doi:10.1080/03124070601166737

Meekosha, H., & Dowse, L. (2007). Integrating critical disability studies into social work education and practice: An Australian perspective. *Practice, 19*(3), 169-183. doi:10.1080/09503150701574267

Morley, C. (2008). Teaching critical practice: Resisting structural domination through critical reflection. *Social Work Education, 27*(4), 407-421. doi:10.1080/02615470701379925

Moyle, J. (2016). Including disability in the social work core curriculum: A compelling argument. *Australian Social Work, 69*(4), 503-511. doi:10.1080/0312407X.2016.1216575

Napier, L., & George, J. (2001). Changing social work education in Australia. *Social Work Education, 20*(1), 75-87. doi:10.1080/02615470020028382

Nguyen, X., Stienstra, D., Gonick, M., Do, H., & Huynh, N. (2019). Unsettling research versus activism: How might critical disability studies disrupt traditional research boundaries? *Disability & Society*, *34*(7-8), 1042-1061.

Oliver, M. (1990). *The politics of disablement.* London, England: Macmillan Education. Papasotiriou, M., & Windle, J. (2012). The social experience of physically disabled Australian university students. *Disability & Society, 27*(7), 935-947. doi:10.1080/09687599.2012.692027

Prince, M. (2009) *Absent citizens: Disability politics and policies in Canada.* Toronto, Ontario: University of Toronto Press.

Ryan, J. (2007). Learning disabilities in Australian universities: Hidden, ignored, and unwelcome. *Journal of Learning Disabilities, 40*(5), 436-442. doi:10.1177/00222194070400050701

Ryan, M., McCormack, J., & Cleak, H. (2006). Student performance in field education placements: The findings of a 6-year Australian study of admissions data. *Journal of Social Work Education, 42*(1), 67-84. doi:10.5175/ JSWE.2006.200303106

Sheehan, R. (2001). Readers' response: The place of social work in the contemporary university: Meeting the challenges of the profession and the academy. *Australian Social Work, 54*(4), 79-83. doi:10.1080/03124070108414347

Soldatic, K., & Chapman, A. (2010). Surviving the assault? The Australian disability movement and the neoliberal workfare state. *Social Movement Studies, 9*(2), 139-154. doi:10.1080/14742831003603299

Soldatic, K., & Meekosha, H. (2012). Moving the boundaries of feminist social work education with disabled people in the neoliberal era. *Social Work Education, 31*(2), 246-252. doi:10.1080/02615479.2012.644975

Stainton, T., Chenoweth, L., & Bigby, C. (2010). Social work and disability: An uneasy relationship. *Australian Social Work, 63*(1), 1-3. doi:10.1080/03124070903291886

Werth, S., Hammer, S., & d'Abadie, D. (2014). Disability and study: Layers of management. *International Journal of Pedagogies & Learning, 9*(1), 101-109.doi: 10.1080/18334105.2014.11082023