



THE DISCRETIONARY PRACTICES IN TAFE: A CASE OF DISABILITY OFFICERS AND ADULT STUDENTS WITH DYSLEXIA

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Abstract:

Internationally, there are gaps in our understanding of the role of Disability Service Officers (DSOs) in education systems. Furthermore, there is limited research on the support that is provided by DSOs in Australian Technical and Further Education (TAFE) colleges. This study found that DSOs became autonomous advocates who cared for students with dyslexia and learning disabilities (LDs) by operating beyond the TAFE position statements to provide much-needed student support. In effect, TAFE DSOs used the discretionary practice to become Street-Level Advocates by using both autonomy and advocacy to give vital support to adult students with dyslexia and learning disabilities. Dyslexia has a significant impact on learning and affects approximately one in ten people. It is essential that educational support is provided for people with dyslexia since those with support can learn strategies to overcome barriers in education. TAFE is undergoing organisational change, which influences the role description and role of the DSOs in these colleges. This qualitative study used semi-structured, one-on-one interview questions to sample both students with dyslexia and DSOs within five TAFEs in Queensland.

Keywords: disability support officer; advocacy; autonomy; learning disabilities; dyslexia

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1. Introduction

This article focuses on the learning needs of adult students who have dyslexia in tertiary contexts in Queensland, Australia. This study utilises Disability Service Officers (DSOs) known as Disability Officers (DOs) to support all students who have a disability. Education Standards in the Organisation for Economic Co-operation and Development (OECD) member countries, such as Australia and other progressive countries, advocate inclusive and equitable access to lifelong learning opportunities (OECD, 2016; 2017, p. 2). Learning requires students to have literacy skills, appropriate for the educational context (Ryan, Mallan, Gwinner, & Livock, 2015), particularly in tertiary contexts, such as Technical and Further Education (TAFE).

Australia has a long history of people with literacy deficits (Perkins, 2009; [The Inclusive Learning Team and Equity and Diversity Queensland, 2011](#)) and in spite of increased awareness, Luke (2018) noted that critical literacy levels within Australian schools had not improved significantly since previous studies in the late nineties (Lipnevich & Beder, 2007; Mellard & Woods, 2007; Perin, 1997). Literacy challenges are common in students who have 'hidden disabilities' (Couzens et al., 2015), such as dyslexia (Berninger, Nielsen, Abbott, Wijsman, & Raskind, 2008; Kirwan & Leather, 2011; Waldie, Wilson, Roberts, & Moreau, 2017). Many people with literacy difficulties include those who have Specific/Learning Disabilities (LDs), such as dyslexia (Washburn, Mulcahy, Joshi, & Binks-Cantrell, 2016).

Hidden disabilities are not an observable difficulty and often remain not diagnosed (Couzens et al., 2015). Many students with an LD or dyslexia learn to compensate for their challenges, and may not be provided with adequate learning assistance (Brendle, Hock, and Smith 2018). In addition to delays in early diagnosis of students with dyslexia, these students require academic aid in a learning context.

Students who have challenges, respond to direct teaching methods (Sarraf, 2014), these methods assist with future educational and career prospects (Draaisma, Meijers & Kuijpers, 2017). The need to evaluate the support provided to students with disabilities is to ensure inclusive and adequate access to learning opportunities, which can lead to a vocation (Gebhardt, Tretter, Schwab, & Gasteiger-Klicpera, 2011). In order to provide education to all, both well trained and able teaching and support staff are essential, within government organisations within Australia. Staff are expected to provide a balance with the increasing demand for educational resources and greater efficiencies in their delivery of inclusive practices (Healey & Jenkins, 2003; Mawer, 2006; Mitchell, Chappell, Bateman, & Roy, 2006). Questions remain about students with hidden disabilities, such as dyslexia and support in educational systems to be able to graduate and transfer into meaningful and rewarding employment successfully.

2. Defining and the Incidence of Dyslexia

2.1 Definition

Dyslexia is often known as a Learning Disability (LD) or Specific Learning Disability (SLD) ([Australian Disability Clearinghouse for Education and Training, 2009a, 2009b, 2009c, 2012](#)) or a 'hidden disability' in Australia ([Couzens et al., 2015; Tanner, 2010](#)). Nicholson and Fawcett (2008) noted that dyslexia has many 'Hypothesised Variants' of the neurological functions within the brain. These symptoms as recognised by adult students with dyslexia as every-day difficulties; such as a) reading; b) writing; c) spelling; d) vision; e) mathematics; f) memory; g) planning; h) organisational skills; i) balance; j) proof-reading work; and h) textual comprehension (Reid, 2016).

Reid (2016) defines dyslexia operationally and broadly as:

"... a processing difference; difficulties in literacy acquisition, cognitive processes, discrepancies in educational performance, individual differences, strengths, as identified in education and work contexts" ([Reid, 2016, pp. 6,7](#)).

In addition to the proposition for a broad definition by Reid (2016), a medical definition of dyslexia should include Paulesu et al.'s (1996) symptoms of developmental dyslexia as a disconnection syndrome of this neurological challenge. Therefore, dyslexia should be recognised as a neurological syndrome, which varies among individuals. Dyslexia has many symptoms that vary amongst individuals, and it should not be known as one specific disability ([Fawcett & Nicolson, 2008; Nicolson & Fawcett, 2008; Paulesu et al., 1996](#)).

2.2 Incidence

The Australian Bureau of Statistics (ABS) (2016a) identified disabilities are categorised as follows: a) physical condition (78.5%); b) intellectual and developmental disorders (6.3%) are second-most commonly reported; and c) depression and mood affective disorders (4.2%) ([Australian Bureau of Statistics, 2016a](#)). Bond et al. (2010) noted that 5-10% of adults and children suffered from various forms of dyslexia that affected their everyday functioning. These are similar data aligned to that of ABS (2016) (noted above) ([Australian Bureau of Statistics, 2016a, 2016b](#)).

Students with hidden disabilities are particularly at risk of being ignored, and this study illustrated that DOs were supportive of adult students with dyslexia in Queensland TAFE. Australia's data on the incidence of dyslexia varies within organisations, in States and Territories, with some using resources from other countries ([Australian Dyslexia Association, 2012, 2017, 2018; British Dyslexia Association, 2007; International Dyslexia Association, 2018](#)).

2.3 Disability Officers in TAFE

In Queensland TAFE Institutes, the DOs are managers, who case-manage students who have disabilities (Caskey, 2017; TAFE Queensland, 2016). In TAFE, DOs are employed to support students who disclose a disability with a medical certificate (Australian Disability Clearinghouse for Education and Training, 2012, 2014). Disclosure of the disability is mandatory for students, wishing to access funding and services from the DO in each college.

Internationally while there are several studies on the roles of teachers in vocational education, who have multiple identities, respectively (Harris & Cooper, 2005; Humphrey, 2003; Josselson & Harway, 2012), indeed, one British study found that teachers tended to be more positive towards students without a disability and more negative toward students with a Specific Learning Disability (SLD) (Woodcock & Hitches, 2017). Teachers' responses to SLDs have the potential to influence student motivation and sense of self-efficacy and also the reverse (Woodcock & Hitches, 2017). Despite the many studies on teachers, there is minimal research on DO roles and their practises, identities and roles within educational contexts (Goodley & Lawthom, 2005; Mungovan, England, & Allan, 1998; O'Neill, Kirov, & Thomson, 2004). Teacher's responses to students with SLDs is having adverse effects on them; this would indicate an increased need for Queensland DOs in TAFE.

Studies on teachers illustrate that staff working in Education Queensland and Universities are professional practitioners, with academic qualifications (Human Resources University of Canberra, 2015; Queensland College of Teachers, 2019; University College of London, 2017). In comparison, TAFE teachers and DOs as recognised practitioners, many have limited graduate educational qualifications, working within TAFE (Caskey, 2017; Wheelahan, 2011). It is essential to understand the differing roles of teachers and DO's, who support and educate students with dyslexia, and the lack of clearly defined roles, which could address appropriate educational support.

Disability practitioners are known as Disability Liaison Officer, Disability Advisor, Integration Coordinator, Teacher Consultant, or DO. Position descriptions vary, the primary functions of DO's are likely to include the following (Australian Disability Clearinghouse for Education and Training (ADCET):

- 1) assisting students to identify the implications of their disability for study and assessment;
- 2) documenting adjustments and services required in the form of a Learning Access Plan (or similar);
- 3) providing information to students and staff about available support services, assistive technology, learning strategies accommodations or adjustments;
- 4) managing interpreting and notetaking services;
- 5) providing disability education, training, and awareness for staff;
- 6) assisting teaching and support staff to problem-solve issues;

- 7) assisting the institution in the development and implementation of action plans, policies and procedures to ensure disability services are main-streamed; and
- 8) *“assisting in balancing the rights of individual students and the interests of the institution”* ([ADCET, 2014, p. 2](#)).

While these role expectations of DOs in TAFE are broad, the last function enables DOs to become advocates for students, through discretionary actions. A recent study illustrated that DOs and their acts of advocacy and autonomy in TAFE were limited ([Caskey, 2017](#)). Furthermore, the role expectation aims to balance two factors, a) the rights of the individual students and b) the interests of the institution.

3. Literature review

3.1 The Vocational Context

This study took place in Vocational Education and Training (VET) contexts within Australia. Vocational Education and Training is the overarching Federal Government body that enforces registration of public and private educational providers. The role of VET is to administer and facilitate the implementation of legislation, policy, and industry standards ([National Centre of Vocational Education and Research, 2012](#)). Eighty-seven per cent of TAFE student who continued in their course in 2017 did so for employment reasons ([National Centre for Vocational Education Research](#) (NCVER 2017). However, 21 per cent of students did not complete their course or dropped out for personal reasons; with another 24.4 per cent who dropped out because the course was not what they expected, the timetable was inflexible or for ‘other reasons’ (NCVER 2017). Almost 50 per cent of students who left their VET training course, did so for non-employment related reasons. It was unclear whether any students registered with Disability Services. This may be an indication that VET does provide some additional funding for students who have disabilities; through the *VET Disability Support Scheme* and the *Disability Apprenticeship Award Wage and Employment Scheme (DAWES)*; which assists in providing support for students who have disabilities ([Department of Human Services, 2014](#); [Department of Industry Australian Government, 2015](#)), despite there being scope for improvement.

3.2 The TAFE Context

TAFE Institutes are Australian publicly owned VET educational providers (Productivity Commission, 2011). Nationally, there are approximately 40 government funded TAFE Institutes throughout the States and Territories of Australia ([Australian Bureau of Statistics, 2016b](#)). In Queensland, there are seven TAFE Institutes, with an average of four colleges per institute ([Queensland Technical and Further Education, 2012](#)), with numbers varying within regions. TAFE is a hierarchical and highly structured educational organisation ([Stringer & Hudson, 2008](#)). This hierarchical system attempts to provide legitimacy in organisations ([Deverell & Moore, 2013](#); [Seabrooke, 2006](#); [Ward & Green, 2000](#)), as was occurring in the five TAFE Colleges.

Reforms in the TAFE sector facilitated by the Australian Government, led to a reduction in TAFE funding with changes to, a) processes (e.g., practical applications of procedures); b) procedures (e.g., are documented within TAFE guidelines, such as Reasonable Adjustment Procedures for Teachers ([Queensland VET Development Center, 2010](#)); c) courses; d) institute goals and expectations; and d) subsequently, uncertainties within the TAFE system for teaching and disability support staff ([Queensland Skills and Training Taskforce Committee, 2012a, 2012b](#); [VERTO Skills to Reform, 2013](#); [Wheelahan, 2011, 2015, 2016](#); [Wheelahan, Arkoudis, Moodie, Fredman, & Bexley, 2012](#)). Caskey (2017) observed and interviewed DOs during this transitioning phase in TAFE contexts throughout 2013-2016; and found that DOs were concerned about their employment and existing roles in TAFE. It was also difficult for them to maintain the competent practice for supporting students when policies and procedures were changing in TAFE throughout that period. The discretion of DOs in TAFE enabled them to provide appropriate support for adult students with dyslexia.

3.3 Lipsky's Discretionary Practises

Lipsky's (1983) research focused on government service organisations in the early eighties. Lipsky coined the term *Street-Level Bureaucrats* for professionals, such as teachers, nurses, social workers and police officers, who were changing policy at the frontline of delivery, interacted with vulnerable clients ([Lipsky, 1983, 2010](#)). This action was termed a discretionary practice (Lipsky 1983, 2010), as professionals were able to change policy in service organisations without organisational documentation. Furthermore, not only were these practises occurring in public service organisations, they were occurring within professions which had ethical guidelines for advocacy and autonomy ([Nursing and Midwifery Board of Australia, 2008- 2017](#); [Singh, Urbano, Haston, & McMahon, 2010](#); [C. A. Walsh, Rutherford, & Sears, 2010](#); [T. Walsh, 2012](#)). These *Street-Level Bureaucrats* had a professional agency, to use their discretion in organisations (Lipsky 2010). Furthermore, Street-Level Bureaucrats, the DOs, were advocates within TAFE.

3.4 Discretionary Advocates

There is much confusion regarding the essence of advocacy, which is a principle of social justice, remaining consistent in the literature ([Paquin, 2011](#)). In this study, the DOs used natural advocacy, that is 'naturally occurring without being realised in the context' ([Noddings, 1995, 2002, 2003](#)). Many definitions of advocacy come from legal justice and nursing practise ([Laney, 2013](#); [Norrie, 1997](#); [Xiaoyan & Jezewski, 2007](#)). The definition of advocacy is broad and differs between professions. Lindahl and Sandman (1998) defined advocacy as:

"... the role of advocacy lies in a moral and existential response to another human being, an expression of caring. Advocacy rests on the patient-nurse relationship and occurs as

an outspoken demand for another human being whose autonomy is threatened.”
([Lindahl & Sandman, 1998, p. 179](#)).

The profession of nursing ([Hatchett, Elster, Wasson, Anderson, & Parsi, 2015](#); [Laney, 2013](#); [Lindahl & Sandman, 1998](#); [Mallik, 1997](#)); social work and community organisations ([Rademaker, 2004](#); [Rosenthal, 1993](#)); have also utilised advocacy in service delivery. Social justice principles should inform equity policy in higher education ([Gale & Tranter, 2011](#)). Despite the range of advocacy, at times, it remains discriminatory ([O’Mahony Paquin, 2011](#); [Xiaoyan & Jezewski, 2007](#)).

Caskey (2017) identified advocacy within the TAFE DO role, where there were opportunities to provide more than support for adult students with dyslexia. The good deeds that DOs were performing throughout their role were identified as advocacy and autonomy in TAFE (Caskey, 2019 unpublished). Queensland TAFE DO’s have some degree of agency because they utilised discretionary practices, not unlike other professionals. Disability Officers advocate for students, and are regarded as *Street-Level Advocates*. Furthermore, DOs became autonomous for adult students with dyslexia.

3.5 Discretionary Autonomy

Lipsky (2010) also identified that professionals often became autonomous in their professional roles; as a result of the overarching regulations within the organisation ([Evans, 2011, 2015](#); [Rice, 2013](#)). Nursing is one profession that mandates advocacy and autonomy through their professional activities and nursing practice ([Australian College of Nurses, 2016](#); [Eccard, 1977](#)). Nurses need autonomy and are given it, to enable them to become caregivers and advocates (Lindahl & Sandman 1998, Xiaoyan & Jezewski 2007). In comparison, DOs become advocates before they decoupled the system and provide external funding and support ([Caskey, 2017](#)).

Autonomy was collaboratively defined by three groups of scholars ([Beauchamp & Childress, 2001](#); [Friedmann, 2000](#); [Mackenzie & Stoljar, 2000](#)). Beauchamp and Childress 2001, MacKenzie and Stoljar (2000), and Friedmann (2000) as, *the ability of an individual to self-rule, self-govern or be self-determined*.

Research has explored the types of autonomy that teachers might use in practice. Wang & Dovidio (2011) and Yang (1998) found that teachers displayed (independence), autonomy, by accessing funding for struggling students when there were no other options in place for supporting students with disabilities.

Furthermore, there is a need to understand DOs discretionary practises, such as autonomy within the Australian TAFE sector, to provide equitable and inclusive access to lifelong learning opportunities for students with disabilities. Caskey (2017) identified that autonomy was not in the role of DOs, despite them going beyond guidelines in practice (e.g., funding for assessments of Meares-Irlen Syndrome, after hours support, and for students they provided psychological and educational diagnosis).

3.6 Research Question

This paper examined the degree of advocacy and autonomy practised by DOs in their new role within TAFE. This research explored gaps in current literature regarding teachers and DOs in providing empathy toward adult students with dyslexia in educational contexts. The research question as addressed below:

How do TAFE DOs use empathy, advocacy and autonomy, to support adult students with dyslexia in TAFE contexts within Australia?

3.7 Research Methods

This qualitative research ([Merriam, 1998, 2009](#); [Yin, 2003, 2009](#)) was utilised to collect data ([Bryman, 2012](#); [Denzin & Lincoln, 2005](#)). The ontology and epistemology utilised was Gergen's social constructionism ([Gergen, 2005, 2009a, 2009b](#)). Gergen's (2005) interactionist research, reviewed relationships ([Gergen, 2010](#)), which were a form of ontological underpinning for this study ([Slife, 2004, 2010](#)). A case-study methodology was used to bound the study (Merriam, 1998, 2009; Yin, 2009). Methods used to explore the challenges of participants, were one-on-one semi-structured interview questions ([Bryman, 2012](#); [Kvale, 1996](#)); taking place in private rooms at each TAFE College. Pseudonyms, as used for all interviewees and colleges, so the identity of participants and contexts were not compromised ([Ogden, 2008](#)).

4. Results

This study found that DOs were utilising a new role in TAFE, in facilitating advocacy. Disability Officers utilised three principles of advocacy (social justice elements, moral and an ethical stance; caring for students' outcomes and futures). This research did not find any lack of social justice principles, as identified by Xiaoyan and Jezewski (2007) in nursing practice, and within the TAFE system. The results determined that DOs were more Street-Level Advocates, using natural advocacy ([Noddings, 1995, 2002, 2005](#)), rather than Street-Level Bureaucrats. Disability Officers had a powerful and positive practice of support, but fewer felt that they could use their discretion to exercise autonomy in going outside the traditional DO role, for adult students with dyslexia.

The difference between the DOs role in TAFE, compared to the professional role which they now performed in this study was evident. TAFE DOs were administrators; they are not professionals ([Australian Disability Clearinghouse for Education and Training, 2017](#)). Disability Officers provide the following: a) adjustments in the form of a learning plan, b) services to other professionals, c) provision of assistive technology, d) learning strategies and e) a range of support strategies, including interpreting and note taking ([Australian Disability Clearinghouse for Education and Training, 2017](#)). Disability Officers provide disability education and awareness for staff, when time permitted, to ensure students with disabilities are mainstreamed, and to assist in balancing the rights of individual students, and the interests of the institution ([ADCET, 2014, p. 2](#)).

These practices were not the professional interactions that were performed by DOs in TAFE. In this study, DOs noted that students needed support both socially and in the cultural context of TAFE. Furthermore, when adult students with dyslexia were employed, DOs became involved with the employers, suggesting adjustments for the student and the future employer.

Caskey's (2017) findings from perceptions of TAFE DOs and the voices of their students with dyslexia, identified that DOs utilised criteria of discretionary practice, which included advocacy and autonomy. The first was characteristic was the support and services DOs provided for adult students with dyslexia needs within classrooms, socially and within TAFE. Results identified that DOs exceeded the specific TAFE role and went beyond their purpose, in the provision of support for adult students, noted below:

"Simone organised the glasses for me, and there was a pool of money ... she accessed for the tests, so I only had to pay for the glasses, I didn't have to pay to be tested."

(Elizabeth, aged over 55 years).

"When students came in with forms not completed, it is usually about their inability to complete it, so then we will do it together, and I'll offer them a scribe if they need it ... it will be difficult for them, so you may look at packaging [disability knowledge] and talking to the teachers." (Emmy, Cityview College)

One student noted, the DO gave her more confidence in her learning activities and the ability to challenge herself in the TAFE program.

"In the course [TAFE Diploma of Fashion Design] Out of 16 girls on stage with their wedding outfits, I was the only one that was approached by anyone there. Not only did she approach me personally behind the stage, and then again in the car park, she gave me her card, and then her boss rang me this morning personally and asked if I would do five samples." (Florence, aged 45–54).

Furthermore, DOs were engaged to provide privacy and confidentiality in their roles, both the TAFE DO ([Queensland Government, 2009](#)); as delivered in practice. Despite TAFE DOs having a form to be completed and signed by students, to permit teachers to talk with and support students' with dyslexia.

"So that's for all people who do have a learning difficulty, aren't diagnosed, but you know they do need the help ... we will give them the help as well, so we normally will not turn them away, just because they don't have a diagnosis, we'll go and assess the situation, see if its, warranted to help them, then we will discuss with them applying to DAAWEs, if we know they have got a disability, know that they'll need some help when

they are coming we will do that as well, but, no, we don't really turn anyone away because they don't have a diagnosis." (Mary, Townclose College)

In addition to working with adult students who have dyslexia, DOs cared for the social and individual needs of all students who have come for case-management and educational support.

"And I think TAFE gives more for me, in talking to (DO) Emmy, she's been amazing ... like everyone at TAFE and my teacher, Lavinia." (Robyn, aged 45–54).

"The young man felt that nobody cared, that he'd been fobbed off ... I went back to VDSS then asked for an appeal of the decision, and they then were able to get the assessment done which proved that he had an LD ... they did agree to it which was good. He then had the assessment, and he now's got the DAWES funding" (Simone, Bayview College)

In caring for the students, DOs also felt a moral and ethical obligation toward the care and support they were providing values to the adult students with dyslexia, as noted below:

"If they have difficulties reading if that they have somebody they trust [they have confidence in another] if they don't have an advocate [advocates care, are good-deeded, make a stand for social justice and are critical friends, as well as being trusted] with them to read it, but it talks about reasonable adjustment, so it talks about that ... we can provide them with assistance to help them with study ... I ask them and if they can't complete forms ... I fill it out for them." (Simone, Bayview College).

"Simone organised the glasses for me, and there was a pool of money ... she accessed for the tests, so I only had to pay for the glasses, I didn't have to pay to be tested."
(Elizabeth, aged over 55 years).

Disability Officers were not only supportive of students with dyslexia; they negotiated for them in workplaces and with teachers. Further to this position, essential support received from TAFE, government organisations, and industrial workplaces. In this study, as demonstrated that DOs were on a mission of autonomy in the provision of services for the adult student with dyslexia.

"I went back to VDSS and said [they had not treated the person equitably or morally] ... and they did what you said and explained his situation, and then asked for an appeal on the decision and they then were able to get the assessment done which proved that he had diagnosed challenges and got funding and support." (Simone, Bayview College).

“Like at some other institutes if you don’t have a diagnosis you don’t get help. However, legally, there’s not really, not really able to say that” (Mary, Townclose College).

One student had a Meares-Irlen Syndrome, which was diagnosed by a professional, using funding that had been sought to access assessment for that particular student. In that TAFE, there were many more students diagnosed with Meares-Irlen Syndrome.

“I put those blue glasses on – I just – I couldn’t believe there was no – what did he call it – he calls it the river effect – I call it the stomach effect where the paper stops moving – I couldn’t believe it - I couldn’t believe it - I nearly flipped - I thought wow – this is how you see paper – this is incredible – it was amazing – the difference was incredible” (Florence, aged 45-54).

The autonomy illustrated by DOs went beyond their role description, having them perform those professional role criteria as adjustments. Furthermore, DOs campaigned from government agencies to support and service all students diagnosed with disabilities within the five TAFE contexts, as noted below:

“They’re phasing it out because, at our RTO, we are using BKSB, which is basically basic skills building and its run as a part of foundation program which is at the beginning of their apprenticeship, so when they come, they do foundations for three days before they start their stage one, and in the three days they have BKSB, which tests their language, literacy and numeracy on the computer, and they also do their basic information for environmental OH and S, and that’s all done on the computer as well, so everyone, they are trying to aim to do the BKSB as the assessment for literacy language and numeracy, that’s run by our learning support” (Mary, Townclose College).

“Irlen Syndrome ... is a visual perceptual problem ... or some people where I know they need it, and they’re severe, and they have no other means, I’ve made referrals to St Vincent de Paul ... and they’ve funded the glasses for them.” (Simone, Bayview College).

Disability Officers and students had a collegial relationship, which developed over-time, where they became critical friends.

“I’ve got mobile phone numbers to call at night ... if I am ever having trouble studying, so she’s just brilliant, I think she’s not in the same position as she was a month ago, so I don’t know whether that will still be available, but she’s just a lovely lady.” (Victor, aged 18–24).

Furthermore, the positive aspects of advocacy became evident in classrooms and learners' independence. Students on arrival at TAFE were not confident and had unfortunate experiences in schools and workplace contexts. There were small steps of success for students through DO advocacy and autonomy.

"They [students] start to have these little bits of successes, and when they start to have a little bit of success, then they'll have a go at a lot more, which gives them a lot more success, which then builds their confidence ... she required quite intense support for her Cert 2; she is now most way through her Cert 3 and quite an independent learner."

(Sally, Cottonvale College).

Disability Officers improved the student experiences in the learning contexts in TAFE. All students interviewed, who had dyslexia, expressed their exceptional experiences in TAFE, solely through the support of the DOs.

"It does come down to the person I think, like Emmy, she's just straight on to it. And she's way open ... she's just not just a disability officer ... to me, I find her as a good counsellor, a good listener." (Gavin, aged 45–54).

"I've learned to use reference points, so when you look at the train timetable, I know most of the places. Just by the looks of the names, so timetables aren't too hard to read, but other things, sometimes I struggle to get words out the right way." (Isaac, aged 25–34).

Further to some of these strategies, DOs were consistently supportive of the adult students who have dyslexia; they became critical friends and mentors for the adult student. Advocacy and autonomy are crucial to students' success in TAFE. All of the 22 students interviewed, passed the courses or the subjects in which they were enrolled.

In regard to advocacy in TAFE, this was not a criterion of the formal role requirement of the DO, as was identified by ADCET, (2017 p.2); their ability to care and give support in social and cultural contexts, made it an adversary role to that of a TAFE DO. All DOs were responsible for providing 'reasonable adjustments' in the form of scribes, readers, interpreters, technology and lecture notes for students ([Australian Disability Clearinghouse for Education and Training, 2017](#)).

However, several DOs were autonomous in their role when they provided private funding for diagnosis and services, not provided by TAFE, such as Meares-Irlen lenses in glasses. Some DOs also gave their private telephone numbers so that students could ring the DO at night.

Throughout this research, changes within TAFE were occurring for DOs. Disability Officers were not administrators as TAFE deemed, as their role (ADCET, 2017 p.2); they were pseudo-professionals utilising their discretion. It is unknown whether these practices occurring in other TAFE Institutes and colleges within Australia. In the

voice of adult students who have dyslexia, there was a positive relationship between DOs and the student.

5. Conclusion

These new characteristics of the DOs included advocacy, social justice principles, caring, knowledge about disabilities, moral and ethical behaviours, respect, confidentiality, and the use of appropriate legislation for people with dyslexia. Confidentiality and privacy, mentoring with lessons, and positive approaches to dealing with a disability, which would increase opportunities for students in classrooms and future employment. Disability Officers became Street-Level Advocates; some became autonomous in their 'new' professional agency.

Disability Officers were a constant for students with dyslexia, throughout their enrolment in TAFE. Furthermore, DOs were not only the advocates for students with dyslexia; they were discretionary and caring, using social justice principles. Despite TAFE having a formal definition for DOs, they were not utilising this practice in full. Disability Officers in the five TAFE colleges were going outside their job description, becoming advocates and autonomous for the adult students with dyslexia. Furthermore, DOs were Street-Level-Advocates in their practice. A relationship formed between the adult students with dyslexia and DOs, enabling students to have a collegial friend, one who would listen to their difficulties throughout their studies in TAFE.

Moreover, DOs would not be deterred as Street-Level-Advocates, throughout the changes taking place in TAFE. In this paper, training and performance measures in TAFE were under threat by the discretion utilised by DOs. The actions of the DOs for equitable and moral change through processes was accomplished due to these measures and principles identified in Legislation and TAFE Policies, yet lacking in individual TAFE colleges. "Mary," told of the importance of adult students' rights coming from legislation and human rights obligations in her role as a TAFE DO. A recommendation that Queensland TAFE changes their role statements for future DOs, because of the services provided to students with disabilities, namely dyslexia; that matches practice with legislative obligations.

Recommendations identified that future research should occur within TAFE, reviewing Inclusion and Equity Policies and their principles, which should be utilised for students who have dyslexia. Furthermore, the TAFE DO 'role' should be reviewed to address their practice of advocacy and autonomy. Moreover, DOs should have a professional stance for working in this educational sector, not as their current employment as administrators in TAFE. Disability Officers require their role to become a profession, as are teachers and social workers.

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