Ethnic disproportionality in the identification of Special Educational Needs (SEN) in England: Extent, causes and consequences

Steve Strand
Ariel Lindorff

University of Oxford
Department of Education

20 December 2018
Executive Summary

Background

For some considerable time there has been concern over the process of special education referral and the differential representation of ethnic minority groups with Special Educational Needs (SEN) both in the US (Dunn, 1968) and in England (Coard, 1971). Ethnic disproportionality exists when an ethnic group is significantly more, or significantly less, likely to be identified with SEN compared to the ethnic majority. A recent major review concluded that disproportionate identification of Black pupils with SEN is "among the most long-standing and intransigent issues in the field" (Skiba et al, 2008, p264).

Extensive research with nationally representative data in the US has established that Black pupils are substantially more likely to be identified with Special Educational Needs (SEN) than other ethnic groups, with the odds of being identified with Intellectual Disabilities 2.8 times higher, and the odds of being identified with Emotional Disturbance 2.3 times higher, than White pupils. In England there have been only two nationally representative studies on disproportionality in the last 25 years (Strand & Lindsay, 2009; 2012) but these also revealed the odds for Black Caribbean and Pakistani pupils being identified with Moderate Learning Difficulties (MLD) were 1.5 times higher than for White British pupils, and the odds for Black Caribbean and Mixed White and Black Caribbean (MWBC) pupils being identified with Social, Emotional and Mental Health (SEMH) Needs were twice those for White British pupils.

MLD and SEMH are the highest frequency SEN, together accounting for nearly half of all identified SEN, but disproportionality is not limited to MLD and SEMH. Studies in the US on the identification of Autistic Spectrum Disorders (ASD) show mixed results for Black pupils but consistent under-representation for Hispanic pupils, with reported prevalence rates among 8-year olds Hispanic pupils of 0.59% compared to 0.90% for White pupils, a relative risk ratio of 0.66 (Travers et al, 2011; Sullivan, 2013). In England, Strand & Lindsay’s (2009) analysis reveals substantial under-representation of Asian pupils with ASD, with the odds of identification for Indian, Pakistani and Bangladeshi pupils about half the odds for White British pupils. Thus the under-representation of some ethnic groups is just as important to understand as the over-representation of others, as it may indicate barriers to accessing services and provision.

In sum, there are positive outcomes of being identified with SEN, such as access to specialist resources and additional support. However, there are also possible negative outcomes, particularly for needs such as MLD and SEMH, which might include an inappropriate or narrowed curriculum, restriction of opportunities because of lowered expectations, or feelings of stigmatisation/labelling on the part of identified pupils. There is a danger that ethnic disproportionality, if not addressed, may through inadequate or inappropriate provision perpetuate the same unequal outcomes in the future.

This issue is increasingly salient as the minority ethnic population in England continues to grow. In the 2016 National School Census ethnic minority groups accounted for almost one-third (30%) of pupils of compulsory school age (aged 5-16) in England, more than double the 14.2% recorded in 2003 (DFE, 2016).

Causes of disproportionality

Some forms of SEN have a clear biological basis, for example sensory impairments, physical needs, or profound and multiple learning difficulties. These categories are often contrasted with categories like SEMH/MLD which are more socially constructed, in the sense that they rely on

\[1. \text{Prior to September 2014 the analogous category was Behavioural, Emotional and Social Difficulties (BESD).}\]
pupils' behaviour/performance being interpreted in terms of expected patterns or norms. A frequently proposed explanation for the over-representation of Black pupils with SEMH/MLD is inappropriate interpretation of ethnic and cultural differences including teacher racism, low expectations and a failure of schools to provide quality instruction or effective classroom management (e.g. Artiles et al, 2010; Waitoller et al, 2010).

However, an alternative hypothesis is that disproportionality reflects the fact that ethnic minority pupils are more at risk of SEMH/MLD because of the substantially greater socio-economic disadvantage they experience relative to the White majority. For example, in England in 2016, 14% of White British pupils are eligible for a Free School Meal (FSM) but this doubles to 25% of Black African, 28% of Black Caribbean and 29% of Mixed White and Black Caribbean pupils (Strand & Lindorff, this report). Some recent longitudinal studies in the US have even claimed that when further controls are included, for example for educational achievement and teacher’s ratings of pupils’ behaviour at Kindergarten entry, Black pupils, rather than being over-represented relative to White pupils, are actually under-represented (Hibel et al, 2010; Morgan et al, 2015, 2017).

The need for this study

Many of the studies in this area have methodological limitations. Most studies in England, with the exception of Strand & Lindsay, have been small scale and unrepresentative. Many of the US studies are large but typically based on aggregate district or school level data rather than pupil level data, or are based on longitudinal studies that are hampered by small samples of ethnic minority pupils with SEN. In contrast, the England National Pupil Database (NPD) offers a complete census of recorded SEN for all pupils in the population (over 6 million pupils each year), is collected at pupil level and is contemporary, not historic, data.

The project addressed the following research questions:

- Considering the most recent (2016) national data, what is the current picture of ethnic disproportionality in England? For which ethnic groups and which types of SEN does disproportionality exist?
- There has been substantial change in the ethnic composition of the population of England over the last decade or so, as well as changes in the rates of identification of SEN. Have patterns of ethnic disproportionality changed between 2005 and 2016?
- To what extent can ethnic disproportionality in different types of SEN be accounted for by age, sex, and socio-economic disadvantage?
- How does disproportionality develop dynamically as children progress through school over time? What can we learn by tracking a primary cohort from Reception to Y6, and a secondary cohort from Y6 to Y11? Can academic achievement or development on-entry to school account for disproportionality?
- What is the variability across schools in disproportionality? Do school variables (such as the socio-economic and ethnic composition of the school) have any additional association with disproportionality when these are modelled alongside pupil level variables?
- What is the variability across Local Authorities (LA) in disproportionality? What data on disproportionality might be reported to LAs to assist in highlighting local issues and needs?
What we did

Main analyses

The research had six main strands:

1. **A comprehensive analysis of the 2016 NPD data** for all pupils aged 5-16 to determine the current extent of ethnic disproportionality, and whether age, sex, and socio-economic factors such as poverty and neighbourhood deprivation can account for ethnic over- and under-representation, looking at all types of SEN;

2. **An exploration of trends over the last 12 years** through analysis of previous NPD datasets back to the 2005 dataset reported on by Strand & Lindsay, to identify trends in (a) the prevalence of MLD, SEMH and ASD over the period, and (b) the level of ethnic disproportionality for these SEN over time;

3. **Two longitudinal analyses, each of over 500,000 pupils, one tracked from age 5 to age 11 and the second from age 11 to age 16**, to assess the emergence of SEN over time using survival analysis, whilst further accounting for attainment and development on-entry to primary and secondary school respectively, as well as pupil background characteristics (age, sex, and socio-economic variables);

4. **Estimation of the relative influence of the pupil, school and Local Authority (LA) in accounting for variability in SEN identification and in ethnic disproportionality.** We consider specifically what role mainstream schools play in the identification of SEN, and conduct analyses separately for the primary (Y1-Y6) and secondary (Y7-Y11) phases using multilevel logistic regression models.

5. **Cross-validation of the NPD analysis using the Second Longitudinal Study of Young People in England (LSYPE2),** which contains a wider range of socio-economic and family background data.

6. **Calculating ethnic disproportionality indicators for each LA**, to help in identifying needs and issues in local areas.

The data

**Level of SEN:** Around 3% of pupils have a formal statement of SEN or Education and Health Care (EHC) Plan. This means a legal document is in place that sets out the child’s needs and the extra help they should receive. However, the majority of pupils with SEN are identified at School Support (12.8% of the school population and 81% of all those with an identified SEN). These pupils also receive provision that is additional to or different from that made generally for others of the same age, and which goes beyond the differentiated approaches and learning arrangements normally provided as part of high quality, personalised teaching. We combined these groups in the majority of our analyses.

**Type of SEN:** Schools are asked to record the primary need of SEN pupils from one of twelve specific types of need. In the initial stages of our analysis we look at disproportionality for all twelve types of need, we later focus in depth on three types:

**Moderate Learning Difficulties (MLD):** this is the most frequently identified SEN, accounting for 4.0% of pupils aged 5-16. These pupils may “learn at a slower pace than their peers, even with appropriate differentiation” (DFE, 2015, p97)

**Social, Emotional and Mental Health (SEMH):** the second most frequently identified type of SEN, accounting for 2.8% of pupils aged 5-16. These difficulties “may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying health difficulties… [or] disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder (DFE, 2015, p98)
Autistic Spectrum Disorders (ASD): this is the most commonly identified need among pupils who have a statement of SEN, and is also a rapidly growing need, increasing from 0.5% of the population in 2005 to 1.3% in 2016. “Pupils with ASD, including Asperger’s syndrome and Autism, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others” (DFE, 2015, p97)

Ethnicity: Pupils’ ethnic group is recorded in 18 categories that were introduced in 2002/03 and are standard throughout education administrative databases in England and also used in the national decennial census. We use White British as the (majority) reference group and compare each of the ethnic minority groups to White British.

Measuring disproportionality
The key measure we employ is the Odds Ratio (OR), which represents the odds of identification for a particular ethnic minority group relative to the odds of identification for the White British majority group. Thus, an OR of 2.0 indicates twice the odds of being identified compared to White British pupils, an OR of 1.0 means the same odds of being identified as White British pupils, and an OR of 0.50 means half the odds of being identified compared to White British pupils. We considered the size of ORs in relation to the following cut-offs:

  OR <= 0.67 “substantially under-represented”
  OR <= 0.75 “under-represented”
  OR >= 1.33 “over-represented”
  OR >= 1.50 “substantially over-represented”.

We avoid emphasis on results for very small ethnic groups as ORs for these groups are more volatile (e.g. Irish and Roma Traveller groups); these results are, however, included in tables in the full report.

Evaluation strategy
We first examine results that only take ethnic group into account (described as ‘unadjusted’ ORs). We then compute statistical models that control for other pupil background factors including year group, birth season (autumn/spring/summer), sex, eligibility for a Free School Meal (FSM) and home neighbourhood deprivation (Income Deprivation Affecting Children Index; IDACI), to produce ‘adjusted’ ORs for ethnic minority groups independent of the effects of those other background factors.

We follow the same strategy for our longitudinal analyses, looking first at ethnicity only, then adding age, sex and socio-economic factors, and then prior attainment / development at age 5 or age 11 respectively. In all our models we have a final step that includes consideration of school level variables, such as the percentage of pupils in the school entitled to FSM or the percentage of pupils from different ethnic minority groups.

Key Findings

There is marked disproportionality for the following ethnic groups and SEN:

- Black Caribbean and Pakistani pupils are over-represented for MLD, Indian and Chinese pupils are under-represented;
- Black Caribbean and Mixed White & Black Caribbean pupils are substantially over-represented for SEMH;
- All Asian Groups (Indian, Pakistani, Bangladeshi and Other Asian) are substantially under-represented for SEMH and for ASD.

The over-representation for MLD can be accounted for by socio-economic factors, but the ethnic disproportionalities for SEMH and ASD remain substantial even after pupil background controls for age, sex and socio-economic deprivation. This is not because of the limited socio-economic measures available in the NPD, as we found the same results after control for parental
social class, parental education and family income using the Second Longitudinal Study of Young People in England (LSYPE2).

Prior attainment/development also does not account for the ethnic disproportionality in SEMH and ASD. Literacy and mathematics measures from the Early Years Foundation Stage Profile at age 5 were strongly predictive of the likelihood of subsequent identification of MLD, and the Personal, Social and Emotional Development (PSED) measure was highly predictive of subsequent identification of SEMH and ASD. However, this did not remove the ethnic disproportionality for SEMH and ASD which remained substantial. The findings for the secondary cohort, accounting for age 11 English and mathematics attainment on-entry to secondary school, led to the same conclusion.

Local Authorities (LAs) account for little (2%-6%) of the variation in the identification of SEN. Patterns of disproportionality vary little in direction across LAs e.g. of 113 LAs with sufficient data for SEMH calculations, 84 show over-representation of Black Caribbean/Mixed White & Black Caribbean pupils, none show under-representation. Similarly, of 94 LAs with sufficient data for ASD calculations, 79 show under-representation of Asian pupils, only three show over-representation. This consistency suggests that variation in LA policy and practice plays a limited role in the over-representation of Black Caribbean/Mixed White & Black Caribbean pupils with SEMH or the under-representation of Asian pupils with ASD.

There is variation between schools in the frequency with which they identify SEN, but schools play a limited role in accounting for ethnic disproportionality, with the notable exception of identification of SEMH in secondary school. In null models, around one-fifth of the variance in MLD is between schools (22%-25%) somewhat less for SEMH (13%-15%) and much less for ASD (11%-12%). Some of this variation can be explained by the socio-economic composition of the pupil intake, and by factors like school size and type (e.g. Grammar schools had very few SEN pupils). However, differences between schools played little role in accounting for ethnic disproportionality, with the notable exception of SEMH in secondary schools. Differences between secondary schools account for a substantial part of the over-representation of Black Caribbean and Mixed White and Black Caribbean pupils with SEMH. i.e. their over-representation occurs much more in some secondary schools than it does in others.

Longitudinal studies, even with large representative samples, can often be under-powered to detect relatively low incidence outcomes like type of SEN for ethnic minority groups. Results from sample studies need to be interpreted with caution and more population level studies, like those reported here, are required.

Detailed findings

Moderate Learning Difficulties (MLD)

Pakistani pupils (OR= 1.36) and Black Caribbean pupils (OR= 1.38) were over-represented for MLD relative to White British pupils. Indian (OR= 0.56) and Chinese (OR= 0.30) were substantially under-represented.

Despite changes in prevalence, the extent of the ethnic disproportionality noted above has not changed notably since 2005. Prevalence rates for MLD increased from 2.6% in 2005 to 4.0% in 2016. In part this reflects the fact that from 2015 onwards type of SEN was requested for all pupils on School Support, not just those on the former School Action Plus, so more pupils are recorded as having a specific type of need. However, the change in prevalence did not alter the extent of ethnic disproportionality.

The over-representation of Pakistani and Black Caribbean pupils could be accounted for by socio-economic factors. Pupils were more likely to be identified with
MLD if they were entitled to a Free School Meal (OR= 2.4), lived in a deprived neighbourhood (OR= 1.9), were boys (OR= 1.7) and were young for their year group (summer-born pupils OR= 1.8). After controlling for these factors, Pakistani and Black Caribbean pupils were no more likely to be identified than White British pupils with similar characteristics.

Accounting for attainment and/or social development at the start of school made little difference to the results by ethnic group. Literacy and mathematics measures from the Early Years Foundation Stage Profile (EYFSP) at age 5 were very strong predictors of a pupil’s likelihood of subsequent identification of MLD during primary school. However, it did not change the pattern of ethnic group difference, with many ethnic groups (particularly Black African, Indian and Bangladeshi pupils) less likely to be identified with MLD than White British pupils with the same prior attainment and socio-economic background. Similar conclusions apply when accounting for reading and mathematics test scores at age 11 for the secondary longitudinal cohort.

Differences between LAs and schools made little contribution to ethnic disproportionality for MLD. Local Authorities (LAs) account for very little (5%-6%) of the variation in identification. There is more variation at the school level (22%-26%), with some schools more likely to have pupils identified with MLD than others, and this partly reflects the characteristics of the pupils attending the school (e.g. more pupils identified in small schools and those with more deprived intakes). Importantly though, accounting for differences between schools did not materially alter the ethnic coefficients for under/over-representation, either at primary or secondary phases.

Social, Emotional and Mental Health (SEMH)

Black Caribbean (OR= 2.29) and Mixed White and Black Caribbean (OR= 1.94) pupils were substantially over-represented relative to White British pupils. Asian groups were all substantially under-represented, as was the White Other group (OR= 0.57).

The extent of ethnic disproportionality for the above groups has remained constant since 2005. Prevalence rates increased from 1.9% in 2005 to 2.8% in 2016, although as stated earlier this partly reflects the increase since 2015 in the number of pupils for whom data on type of need is requested. Importantly, though, the ethnic disproportionality identified above has not altered with the change in terminology from BESD to SEMH. This is perhaps not surprising since displaying “challenging, disruptive or disturbing behaviour” remains central to the description of SEMH (DFE, 2015), whatever the putative drivers of such behaviour.

Demographic and socio-economic variables had very strong associations with identification of SEMH, but controlling for these factors did not account for the ethnic over-representation. The odds of being identified with SEMH needs were much higher for boys than girls (OR= 3.2); for pupils entitled to FSM (OR= 3.1), for pupils from disadvantaged neighbourhoods (OR= 1.9) and for pupils in secondary school, particularly Y10 and Y11 (OR= 2.1 and OR= 2.4 compared to Y1). Controlling for these factors attenuated but did not eliminate the over-representation of Black Caribbean (OR= 1.43) and Mixed White & Black Caribbean (OR= 1.38) pupils.

Similarly, controlling for prior attainment/development at the start of school did not account for Black Caribbean and Mixed White & Black Caribbean over-representation. Literacy and mathematics scores at age 5 had little association with subsequent identification of SEMH, but a below average Personal, Social
and Emotional Development (PSED) score at age 5 raised the odds substantially (HR= 2.54). The mean PSED scores for Black Caribbean and Mixed White & Black Caribbean pupils were lower than the national average, but even after adjusting for this Black Caribbean (HR= 1.42) and Mixed White & Black Caribbean (HR= 1.46) pupils were still over-represented. The findings for the secondary cohort, accounting for English and mathematics national test scores at age 11 on subsequent identification of SEMH during secondary school led to the same conclusion, with Black Caribbean (OR= 1.37) and Mixed White & Black Caribbean (OR= 1.53) pupils remaining over-represented.

**Secondary schools seem to account for a significant part of the over-representation of Black Caribbean and Mixed White & Black Caribbean pupils with SEMH.** In secondary schools the ORs for Black Caribbean and Mixed White & Black Caribbean pupils reduced substantially between single-level and multi-level models, from OR= 1.47 to 1.14 and from OR=1.47 to 1.29 respectively. This indicates that differences between schools play a part in the over-representation of these two specific ethnic groups. Our longitudinal analyses indicate that over-representation was reduced when account was taken of school composition factors, particularly in secondary schools. For example, schools in the top two quintiles of %FSM, and in the top two quintiles for % Black Caribbean pupils, had significantly raised odds of identification, and allowing for this did reduce the Black Caribbean and Mixed White & Black Caribbean over-representation. This suggests a particular focus on the context of, and processes occurring within, schools serving high deprivation communities and with large proportions of Black Caribbean and Mixed White & Black Caribbean pupils. What drives these associations is unknown, and could include unmeasured factors associated with high deprivation (e.g. high levels of crime, violence or gang culture), negative peer effects (such as disaffection or disengagement) or school policies (e.g. preemptive or zero tolerance disciplinary strategies).

**Variation between LAs is minimal, accounting for <2% of variation in identification of SEMH.** Of 113 LAs with sufficient data for SEMH calculations, 84 show over-representation for the combined Black Caribbean/MWBC group, none show under-representation. Nevertheless, there is a range in the risk ratios for 2016 from 0.77 in Newham to 3.15 in Barnsley. Data should be monitored annually to determine if any consistent LA patterns emerge.

**Care needs to exercised in generalisations about ‘Black’ pupils.** Black African pupils represent 3.7% of all pupils in England, a much larger group than either Black Caribbean (1.2%) or Mixed White and Black Caribbean (1.5%) pupils. They experience similar levels of socio-economic disadvantage yet they are not over-represented for SEMH, and are actually under-represented in the adjusted ORs, both in relation to socio-economic disadvantage and to prior attainment. This indicates that in the England context, care needs to be exercised in generalisations about ‘Black’ pupils. Similar differences have been reported for other outcomes such as exclusion from school; attitudes, aspiration and motivation; and academic achievement, and may be related to recency of migration (e.g. Strand, 2011, 2012).

**Autistic Spectrum Disorders (ASD)**

**There was substantial ethnic disproportionality for ASD.** Black Caribbean and Black Other pupils were over-represented (both ORs= 1.34) compared to White British pupils. Asian groups were under-represented, particularly Indian (OR= 0.46) and Pakistani pupils (OR= 0.54) where the odds of identification were half those for White British pupils. White Other pupils (OR= 0.60) were also under-represented.
There was more variation in ethnic disproportionality over time than was the case for other SEN. Black Caribbean pupils were not over-represented 2005-2009 but have been consistently over-represented since 2011 (OR= 1.12 in 2005 to OR= 1.34 by 2016). White Other groups were not under-represented 2005-2009 but have been consistently under-represented since 2011 (OR= 0.96 in 2005 to OR= 0.60 by 2016). On a positive note, the under-representation of Bangladeshi pupils has steadily declined (from OR= 0.38 in 2005 to OR= 0.79 by 2016).

**Demographic and socio-economic variables had strong associations with identification of ASD.** Controlling for these factors accounted for the over-representation of Black Caribbean and Black-Other groups, but did not account for the under-representation of Asian pupils. The odds of being identified with ASD were much higher for boys than girls (OR= 5.4) and for pupils entitled to FSM (OR= 2.3), and were slightly raised for pupils from more disadvantaged neighbourhoods (OR= 1.2). Controlling for these factors had little or no impact on the under-representation of Asian pupils, who were still about half as likely as White British pupils to have an identification of ASD. On the other hand, Black Caribbean and Black Other pupils were no longer over-represented (OR= 1.12 and OR= 1.13), suggesting that their over-representation was largely attributable to socio-economic factors.

**Controlling for prior attainment/development at the start of school did not substantially change the pattern of ethnic disproportionality.** Below average Personal, Social and Emotional Development (PSED) scores at age 5 were associated with substantially increased odds of ASD identification (HR= 3.2), and the mean PSED scores for Pakistani and Bangladeshi pupils were below the national average, but after adjusting for these scores Asian groups remained under-represented. Similarly, for the secondary cohort, higher English and mathematics national test scores at age 11 were associated with lower odds of identification with ASD, but controlling for prior attainment did not alter the Asian under-representation.

**LA and school variability was small, and school composition variables had little impact on ethnic disproportionality.** Around 4% of variance was at the LA level and 11%-12% at the school level, much lower than for MLD or SEMH. Generally, school level factors had little impact on ethnic disproportionality. However, both longitudinal cohorts suggested that pupils were somewhat more likely to be identified in schools in the top two quintiles for % Asian pupils, particularly among secondary schools, indicating that a high concentration of Asian pupils slightly moderated the effect, but overall Asian pupils remained substantially under-represented compared to White British pupils.

**Parental education qualifications may be an important factor in identification of ASD.** Some, predominantly US, research has suggested that high socio-economic families are more likely to receive an ASD diagnosis (e.g. Durkin et al, 2010) while our data indicates the opposite. Our NPD measures are of socio-economic disadvantage, which may be blunt in differentiating at the more advantaged end of the SES range. However, our analysis of LSYPE2, using parental occupation, educational qualifications and family income, broadly confirmed the NPD results, with pupils from low SES homes (parents in routine and semi-routine occupations) more likely to have an ASD identification than those in managerial and professional households (OR= 3.0 and 2.6 respectively). It may be that in England the NHS provides more equitable access to services with fewer financial barriers than in the US, and our study is based in schools where all children can be assessed rather than in clinics or other settings. Nevertheless, we note that once parental occupation was controlled, the odds of ASD identification were twice as high in homes where one or more parent held a degree compared to similar
homes where parents’ highest educational qualifications were below degree level. This does suggest that parental awareness and access to resources may be an issue.

The causes of ethnic disproportionality in identification of ASD are likely to be varied. Less extreme needs on the autistic spectrum can be subtle, identified by nuances in the use of language for social communication. These may be more difficult to identify if the first language of the assessor and pupil are not congruent, as might be the case for many pupils of Asian heritage. It may also be that these are communities with lower awareness of autism, parents’ rights and relevant services; where having a child with SEN is particularly stigmatizing; where cultural or linguistic barriers impede access to services; or where the services available do not meet their needs (Corbett & Perapa, 2007). In any event, there is a need to raise awareness of ASD among Asian communities, improve outreach and review the extent to which services are configured appropriately.

Implications for policy and practice

- LAs, multi-academy trusts (MATs) and schools must have due regard to the Public Sector Equality Duty (PSED) requirements, and should monitor ethnic disproportionality in the identification of SEN.

- LAs or MATs with high levels of disproportionality should further investigate practices in their areas/trusts. Schools should identify priorities for the partnerships within which they work, so they can pool resources and develop effective responses.

- OFSTED should incorporate data on ethnic disproportionality into pre-inspection reports for LA SEND inspections, and include the issue of ethnic disproportionality within the LA SEND inspection.

- The original detailed guidance on data collection by type of SEN (DFE, 2005) no longer exists following the new SEND Code of Practice. The DFE should consider new guidance on definitions and criteria for defining different types of SEN.

- Secondary schools in particular should review their processes around the identification of SEMH needs, given variability between schools is a strong component of ethnic disproportionality in this domain.

- LAs and schools need to raise awareness of ASD among Asian communities, improve outreach and review the extent to which the services are configured appropriately for access by ethnic minority groups.

- Teachers need to be aware of the significant over-identification of summer born pupils for MLD and to consider carefully whether they are making sufficient allowance for the age of the child when forming their judgements.

References


**Acknowledgments**

This research was funded by the Department for Education (DFE) through their highlight to the Economic and Social Research Council (ESRC) Secondary Data Analysis Initiative (SDAI). Grant Number ES/P000991/1.


Professor Steve Strand  
Dr Ariel Lindorff  
University of Oxford  
Department of Education  
20 December 2018