

**AUTISM SPECTRUM DISORDERS (ASD) AND INCLUSION:
AN EXPLORATION OF LEARNING FACILITATORS' EXPERIENCES
IN MAINSTREAM SCHOOLS**

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**Submitted in fulfilment of the requirements for a Masters in Educational Psychology at
the University of KwaZulu-Natal, Pietermaritzburg**

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Declaration

I, Jennifer Swift, declare that the work presented in this thesis is my own work and that any work that is not mine has been rightfully and properly acknowledged and referenced. This thesis has been submitted in partial fulfilment for the requirements of a Masters in Educational Psychology at the University of KwaZulu-Natal, Pietermaritzburg. It has not been submitted before for any degree or examination at any other university.

Jennifer Rose Swift

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Signature

29.06.2018

Date

Supervisor's approval of this thesis for submission: As the candidate's supervisor I have approved this thesis for submission.

Dr Carol Mitchell

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29.06.2017

Date

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Abstract

The rates of Autism Spectrum Disorders (ASD) have risen exponentially within the last decade with the Centres for Disease Control and Prevention (CDC) identifying 1 in 59 children as having ASD in the United States (CDC, 2018). These dramatic prevalence rates are thought to be increasing worldwide. As the rates of ASD are rising, more children with ASD are being enrolled into mainstream schools as a result of the state's inclusion policy, White Paper 6 (2001). Whilst past studies have illuminated the experiences and perceptions of educators who have taught ASD learners in inclusive environments and their experiences with working with learning facilitators, scarce information has been provided pertaining to those who work with these ASD learners as learning facilitators within a South African context. This interpretive qualitative study explored the perceptions and experiences of six learning facilitators who facilitate ASD children in mainstream schools. The results of the study suggest that the participants had doubts regarding the feasibility and implementation of the state's legislation concerning educating ASD children in mainstream classrooms. Furthermore, in order to include ASD children more successfully into a mainstream classroom, a number of changes would need to be made. These changes include the restructuring of the schooling curriculum to cater to the atypical learning styles of ASD learners, an increase in resources or provisions to support services such as learning facilitation, the promotion and implementation of in-service training opportunities for mainstream educators and the fine tuning of the job definition and description of the role that teachers and facilitators respectively play in the mainstream classroom. Overall, the participants of this study were of the belief that ASD children should have the right to be included in mainstream schools and that this can be achieved should these areas of concerns be addressed.

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Chapter 1

1.1 Introduction

With the launching of Education White Paper Six (Department of National Education, 2001), the South African Department of Education (DoE) aimed to radically transform the education system. Intentions to remove barriers to learning and to include disabled children and youth into a mainstream school environment have presented many challenges and have brought into question the achievability and practical implementation of this policy (Roberts, 2007).

Autism Spectrum Disorders (ASD) are currently considered to be the fastest growing disability in the world (Collins, 2014). As the rates of ASD are dramatically increasing, more children with ASD are being enrolled into mainstream schools. With the inclusion of ASD children, educators are “faced with the challenge of teaching, managing social and behavioural development whilst ensuring academic success for all learners in the classroom” (Lindsay, Proulx, Scott, & Thompson, 2014, p.1).

The placement of a learning facilitator within a classroom, could allow for learners with ASD to be included more successfully (Collins, 2014; MacIntosh, 2013; Roberts, 2007). Whilst there is a modest amount of research that explores the experiences and perspectives of teachers’ who teach children with ASD in a mainstream setting, there is limited research pertaining to the experiences’ and perspectives of those who facilitate in a mainstream environment, specifically with regards to ASD within a South African context. Examining the experiences of learning facilitators who work in a mainstream school with ASD clients, can provide further insight into the current reality of inclusive education. This in turn may contribute to further research in developing an effective inclusive education curriculum whereby both learners and teachers benefit as a whole in an inclusive classroom environment.

1.2 Objectives

The objectives of this study were to:

- Explore learning facilitators' experiences of facilitating ASD learners who are enrolled in mainstream schools.
- Identify factors that help or hinder learning facilitators' abilities to support their clients' effectively and constructively in mainstream school settings.
- Explore learning facilitators' observations of classroom practices implemented by mainstream school teachers.
- Explore learning facilitators' general insights towards current school curricula and inclusive education, specifically for ASD learners.
- Explore learning facilitators' perceptions and understandings of their relationships with teachers in mainstream schools.

1.3 Research Questions

The study focused on answering the following research questions:

- What are the learning facilitators' experiences of facilitating their clients in mainstream schools?
- What factors influence the learning facilitator's attempt to support their ASD clients effectively and appropriately?
- What are the learning facilitators' observations on classroom practices implemented by teachers in mainstream school environments?
- What are the learning facilitators' perceptions and opinions of inclusive education and the current curriculum for ASD children?
- What are learning facilitators' perceptions and understandings of their relationships with teachers in mainstream schools?

1.4 Methodological approach

The researcher employed an interpretive paradigm throughout the study in order to gain first-hand accounts of learning facilitators' experiences of facilitating children with ASD in mainstream schooling environments. Purposive, non-probability sampling was used throughout the investigation. Six participants consented to taking part in the study and were individually interviewed at the participants' convenience. Flexible semi-structured

interviews were conducted with the participants. These interviews were audio recorded and then transcribed verbatim. The raw data collected was analyzed via the process of thematic analysis and then were coded for themes. Patterns of themes emerged from the participants', which in turn contributed to the total experience of facilitating a child with ASD in a mainstream school setting.

1.5 Terminology

Terms and concepts which have been used throughout the dissertation are defined as follows:

1.5.1 Autism Spectrum Disorder (ASD)

In 2013 a new version of the Diagnostic and Statistical Manual of Mental Disorders was introduced (DSM-5). Unlike the DSM-IV that allowed for individuals to be diagnosed with separate disorders: Autistic Disorder, Asperger's Disorder, and Pervasive Developmental Disorder- Not otherwise specified, the revised addition allows for a single diagnosis of Autism Spectrum Disorders (American Psychiatric Association, 2013). Previously in the DSM IV, ASD was seen as a triad of impairments in socialisation, communication and imagination. On the DSM-5 social and communication problems have merged into one category: deficits in social communication. The second area of impairments is fixated interests and repetitive behaviour. Characteristics of such a behaviour could include being overly dependent on routines, intensely focused on inappropriate items or being highly sensitive to changes in an environment (American Psychiatric Association, 2013).

1.5.2 Learning facilitator

Internationally a variety of names have been given to describe a person whom is hired to assist in the support and inclusion of learners with disabilities within a mainstream school such as; a learning support assistant, teacher aide, paraprofessional, para-educator, special needs assistant and a learning or school facilitator (Bergstedt, 2015; Giangreco, 2007).

The term "learning facilitator" and in some cases the term "paraprofessional" are terms used throughout the research study to refer to an adult whom facilitates a child with a

disability, specifically ASD, in a mainstream schooling environment. This facilitation takes place on a one-on-one basis.

In most international schooling contexts, children with disabilities in mainstream schools are provided with paraprofessionals or learning facilitators whom have been employed either by the school in question or the state government (Bergstedt, 2015; Brummer, 1998). This however is not practiced within South Africa as the Department of Education (DoE) does not allocate funds to the employment of facilitators (Bergstedt, 2015). It is found that the employment of facilitators are done so privately and at the expense of parents whose children are in need of facilitation in an inclusive classroom (Collins, 2014).

1.5.3 Teacher

The Employment of Educators Act, 76 of 1998 state that a teacher or educator is “any person who teaches, educates or trains other persons or who provides professional educational services, including professional therapy and education psychological services, at any public school, departmental office or adult basic education centre and who is appointed in a post in any educator establishment”.

1.5.4 Inclusive/mainstream classrooms

The Guidelines for Full-service/ Inclusive Schools (2010) defines mainstream establishments as “schools with an inclusive orientation that provide education to all” (Bergstedt, 2015, p. 13). The objectives of implementing an inclusive education system is to adjust the former mainstream practices in such a way that all learners are catered to within the same general educational setting as their peers, thereby promoting a sense of diversity within classrooms (Collins, 2014).

Whilst the implementation of inclusion in South Africa is underway, it appears that many mainstream schools are not fully user-friendly or are able to accommodate those whom experience barriers to learning (Geldenhuis & Wevers, 2013). Due to the lack of support services offered and state funding, privately employed facilitators have become pivotal to the successful inclusion for many children (Bergstedt, 2015).

1.5.5 Neuro-typical

The term neuro-typical refers to individuals who do not have ASD. Neuro-typical people think typically rather than those who exhibit autistic traits and those whom represent a broader diversity of thought (Jordan & Cadwell-Harris, 2012).

1.6 Outline of the study

In this chapter, the background and the rationale for this study was introduced.

Furthermore, the objectives of study were stated and frequent terms or concepts used in the study were defined or explained. Chapter two provides literature that is relevant to the study, this mainly concerns: the history of ASD; the roles that facilitators/paraprofessionals play (both locally as well as internationally) and lastly inclusive education, and the implementation of White Paper 6 (2001). In chapter three, the methodology details the research design, sampling method, data collection, data analysis and ethical considerations that needed to occur. The findings of this study are then relayed in chapter four and then are further discussed in chapter five in conjunction with relevant literature. Chapter six concludes the dissertation with final remarks pertaining to the results found within the study, the implications of such findings and how these findings can influence the course of future research.

Chapter 2

Literature review

2.1 Introduction

Within this chapter ASD will be described and explained in terms of its epidemiology, etiology, characteristic features, and impairments. In addition to this, the diagnostic criteria as set out by the DSM-5, will be provided. This chapter also aims to focus on how the launching of Education White Paper 6 (2001) has presented many challenges that have brought into question the achievability and practical implementation of this policy, especially with regards to the successful inclusion of ASD learners.

2.2 Defining Autism Spectrum Disorders (ASD)

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental disorder that is becoming more prevalent in our society (Koegel, Kim, & Koegel, 2014; Korkmaz, 2011; Sinzig, Morsch, Bruning, Schmidt & Lehmkuhl, 2008). ASD is an umbrella term used for autism and pervasive developmental disorders. The term 'spectrum' places emphasis on the fact that whilst autistic people share certain difficulties, their condition affects them in varying ways (American Psychiatric Association, 2013). Depending on the severity of their condition, some people may be high functioning and have the potential to live a relatively autonomous life, whilst others may be lower functioning and may require much greater specialised support (The National Autistic Society, 2012). With the implementation of Education White Paper Six (Department of National Education, 2001), it is likely that children who are higher functioning and who are placed at the more social and communicative end of the spectrum, will have the opportunity to be educated in mainstream schools (Collin, 2014). Those who are higher functioning are the focus of this study.

2.3 DSM-5 Diagnostic Criteria for ASD

In 2013 a new version of the Diagnostic and Statistical Manual of Mental Disorders was introduced (DSM-5). Unlike the DSM-IV that allowed for individuals to be diagnosed with separate disorders: Autistic Disorder, Asperger's Disorder, and Pervasive Developmental Disorder-Not otherwise specified, the revised addition allows for a single diagnosis of

Autism Spectrum Disorders (American Psychiatric Association, 2013). Previously in the DSM IV ASD was seen as a triad of impairments in socialisation, communication and imagination. In the DSM-5 social and communication problems have merged into one category: deficits in social communication. Examples of these deficits include; rarely using language to communicate with people, not responding when spoken to, not being able to speak at all, and non-verbal imitation (American Psychiatric Association, 2013). The second area of impairments is fixated interests and repetitive behaviour. Characteristics of such a behaviour could include being overly dependent on routines, intensely focused on inappropriate items or being highly sensitive to changes in the environment (American Psychiatric Association, 2013). The combination of these impairments make the disorder an “ultimate learning disability because of its associated language and social difficulty” (Lindsay, et al., 2014, p. 2).

The new DSM-5 has placed emphasis not only on the symptom criteria but also on the level of severity of the disorder and the level of support required to compensate for the impairment of social communication, repetitive behaviours and associated symptoms (Sadock & Sadock, 2015). As previously mentioned, children who are categorised as high functioning are more likely to be included in mainstream schools (Collins, 2014). The DSM-5 symptom criteria and the description of levels of support (Table 2.1) can be found on p. 9 and p. 10 (APA, 2013).

A. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by the following, currently or by history (examples are illustrative, not exhaustive; see text):

1. Deficits in social-emotional reciprocity, ranging, for example, from abnormal social approach and failure of normal back-and-forth conversation; to reduced sharing of interests, emotions, or affect; to failure to initiate or respond to social interactions.
2. Deficits in nonverbal communicative behaviours used for social interaction, ranging, for example, from poorly integrated verbal and nonverbal communication; to abnormalities in eye contact and body language or deficits in understanding and use of gestures; to a total lack of facial expressions and nonverbal communication.

3. Deficits in developing, maintaining, and understanding relationships, ranging, for example, from difficulties adjusting behaviour to suit various social contexts; to difficulties in sharing imaginative play or in making friends; to absence of interest in peers.

Specify current severity: Severity is based on social communication impairments and restricted, repetitive patterns of behaviour (see Table 2.1).

B. Restricted, repetitive patterns of behaviour, interests, or activities, as manifested by at least two of the following, currently or by history (examples are illustrative, not exhaustive; see text):

1. Stereotyped or repetitive motor movements, use of objects, or speech (e.g., simple motor stereotypes, lining up toys or flipping objects, echolalia, idiosyncratic phrases).
2. Insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behaviour (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat same food every day).
3. Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).
4. Hyper- or hyporeactivity to sensory input or unusual interest in sensory aspects of the environment (e.g., apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).

Specify current severity:

Severity is based on social communication impairments and restricted, repetitive patterns of behaviour (see Table 2.1).

- C. Symptoms must be present in the early developmental period (but may not become fully manifest until social demands exceed limited capacities, or may be masked by learned strategies in later life).
- D. Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning.
- E. These disturbances are not better explained by intellectual disability (intellectual developmental disorder) or global developmental delay. Intellectual disability and autism spectrum disorder frequently co-occur; to make comorbid diagnoses of autism spectrum disorder and intellectual disability, social communication should be below that expected for general developmental level.

Note: Individuals with a well-established DSM-IV diagnosis of autistic disorder, Asperger's disorder, or pervasive developmental disorder not otherwise specified should be given the diagnosis of autism spectrum disorder.

Specify if:

- With or without accompanying intellectual impairment
- With or without accompanying language impairment
- Associated with a known medical or genetic condition or environmental factor
- Associated with another neurodevelopmental, mental, or behavioural disorder
- With catatonia

Table 2.1
Severity levels for ASD (Autism Speaks, 2018)

Severity Level	Social Communication	Restricted, repetitive behaviours
Level 3 "Requiring very substantial support"	Severe deficits in verbal and nonverbal social communication skills cause severe impairments in functioning, very limited initiation of social interactions, and minimal response to social overtures from others. For example, a person with few words of intelligible speech who rarely initiates	Inflexibility of behaviour, extreme difficulty coping with change, or other restricted/ repetitive behaviours markedly interfere with functioning in all spheres. Great distress/ difficulty changing focus or action.

Severity Level	Social Communication	Restricted, repetitive behaviours
	interaction and, when he or she does, makes unusual approaches to meet needs only and responds to only very direct social approaches.	
Level 2 “Requiring substantial support”	Marked deficits in verbal and nonverbal social communication skills; social impairments apparent even with supports in place; limited initiation of social interactions; and reduced or abnormal responses to social overtures from others. For example, a person who speaks simple sentences, whose interaction is limited to narrow special interests, and who has markedly odd nonverbal communication.	Inflexibility of behaviour, difficulty coping with change, or other restricted/ repetitive behaviours appear frequently enough to be obvious to the casual observer and interfere with functioning in a variety of contexts. Distress and/ or difficulty changing focus or action.
Level 1 “Requiring support”	Without supports in place, deficits in social communication cause noticeable impairments. Difficulty initiating social interactions, and clear examples of atypical or unsuccessful responses to social overtures of others. May appear to have decreased interest in social interactions. For example, a person who is able to speak in full sentences and engages in communication but whose to-and-fro conversation with others fails, and whose attempts to make friends are odd and typically unsuccessful.	Inflexibility of behaviour causes significant interference with functioning in one or more contexts. Difficulty switching between activities. Problems of organization and planning hamper independence.

2.4 Epidemiology

The rates of ASD have risen exponentially within the last decade with the Centres for Disease Control and Prevention (CDC) identifying 1 in 59 children as having ASD in the United States (CDC, 2018). ASD affects people across all cultures and socio-economic groups worldwide. The prevalence rate is thought to be increasing globally (Eapen, Mabrouk, Zoubeydi, & Yunis, 2007). South Africa makes use of the international rate of prevalence, as there are currently no reliable prevalence studies that provide accurate statistics with regards to the South African population (Association for Autism, 2012). The onset of ASD happens in the early developmental period of a child however, in some cases the symptoms or signs are not picked up until the child is older. As a result of this delay between the onset of the disorder and the later diagnosis, the prevalence rates increase with age in younger

populations (Sadock & Sadock, 2015). Furthermore, research indicates that ASD is diagnosed four times more frequently in boys than in girls. Although boys are more prone to develop the disorder, girls with ASD are more likely to exhibit cognitive impairments than boys (Sadock & Sadock, 2015). A reason for this phenomenon is that girls with ASD who are not cognitively impaired are less likely to be identified as having problems and therefore are not referred to the appropriate professionals. As a result of this, a diagnosis is not given (Sadock & Sadock, 2015).

2.5 Etiology

During the 1940's Kanner concluded that the root cause of ASD was due to caregivers' 'emotionally absent' child rearing practices (Roberts, 2007). This understanding of ASD has since been refuted as studies have compared the parents of children with ASD with parents of neuro-typical children. Results of these studies indicate that these two different groups showed no overt differences in child-rearing skills (Sadock & Sadock, 2015). Currently no single cause for the disorder has been determined however, empirical evidence suggests that ASD may be a result of genetic, neurobiological and environmental factors that manifest in the behavioural symptoms relevant to an ASD diagnosis (Sadock & Sadock, 2015).

Research has placed a significant emphasis on genetics as a likely predisposing factor for ASD. Family studies have indicated that there is an increased prevalence of ASD in siblings who have a brother or sister diagnosed with ASD (Sadock & Sadock, 2015). Some family studies have demonstrated that the increased rates of ASD are as high as fifty percent for relatives of a person diagnosed with ASD (Sadock & Sadock, 2015). In addition to this, those related to someone with ASD have an increased risk of experiencing developmental impairments in language, cognitive abilities, speech and language disorders, even if they do not meet the set criteria for ASD (Sadock & Sadock, 2015).

It has also been suggested that prenatal and perinatal factors can be linked to infants who are later diagnosed with ASD (Hill, Zuckerman & Fombonne, 2015). Prenatal factors that are associated with the development of the disorder include an advanced maternal and or paternal age of the parents when the child is conceived, gestational diabetes, and maternal

gestational bleeding (Hill et al., 2015). Perinatal factors associated with the neurodevelopmental disorder include birth trauma, foetal distress, low birth weight, a low APGAR score, and congenital malformation (Hill et al., 2015). Although these prenatal and perinatal factors are thought to increase the likelihood of the development of the disorder, there is no substantial evidence to suggest that there is only one single prenatal or perinatal factor that allows for an ASD diagnosis (Sadock & Sadock, 2015). It is rather understood that these factors, in addition to a genetic predisposition, increase the likelihood for a child to develop ASD (Sadock & Sadock, 2015).

From a neurological perspective, Electroencephalography (EEG) abnormalities and seizures are observed to occur at a greater frequency for those diagnosed with ASD (Sadock & Sadock, 2015). Other neurological or biological abnormalities seen in ASD individuals include an enlarged brain mass, neurotransmitter imbalances, deficits or impairments in the left temporal lobe and an impaired functioning in the left hemisphere of the brain (this area of the brain is responsible for the ability to communicate verbally) (Roberts, 2007).

2.6 Treatment of ASD

ASD is an incurable and lifelong disorder (Collins, 2014). There are however behavioural intervention strategies that attempt to target core behavioural problems in order to improve social communication and interaction skills, increase long-term skills in independent living and strategies that allow ASD children to be integrated into schools (Sadock & Sadock, 2015). In addition to these interventions, that aim to develop social conventions in order to increase socially acceptable behaviour and decrease inappropriate behaviour, many intervention strategies include language and academic remediation (Sadock & Sadock, 2015). Treatment goals often include the lessening of disruptive and aggressive behaviours that may take place in both the schooling and home environment, especially when an ASD child is faced with a change in routine or the adaptation to a new environment (Sadock & Sadock, 2015). Research largely concludes that a comprehensive treatment program that include intensive behavioural programmes, parent psychoeducation training and input, and academic interventions yield promising results and allows the child to develop and function to his or her full potential (Sadock & Sadock, 2015). Furthermore, ASD children who start intervention programmes at a young age have a better

prognosis and are believed to acquire greater social and communication skills, thereby exhibiting reduced behavioural problems at a later stage compared to those who begin the intervention process when they are older (Lovaas, 2003).

Empirical evidence suggests that behavioural therapy (in the form of Applied Behavioural Analysis (ABA)) is the most successful approach to reduce repetitive behaviours and associated symptoms of the disorder (Foxy, 2008; Lovaas, 2003; Sadock & Sadock, 2015). ABA strategies are used to achieve the mastery of various skills such as the development of social skills, language use and other target play skills. A key component in using ABA is teaching complex skills in small and manageable steps. Each step builds to a level of mastery before moving on to the next (Sadock & Sadock, 2015). The ABA behavioural approach is derived from operant conditioning (Lovaas, 2003). The intervention is concerned with “the manipulation of environmental stimuli to help individuals efficiently and effectively emit specific responses that are important to clients or society” (Cooper, 1982, p.114). In the manipulation or modification of behaviour, reinforcements can be used to achieve a desired outcome (Cooper, Heron, & Heward, 2007). A reinforcement in this situation can be considered to be anything that is high on a child’s value system (their favourite toy, game, food etc.). Reinforcements can be both positive as well as negative. A positive reinforcement is when one adds something to the environment to increase the likelihood of a behaviour occurring again. A negative reinforcement is when something is removed from the environment to increase the likelihood of that behaviour occurring again (Cooper et al., 2007). In order for ABA to work most effectively: the child in question should ideally start the therapeutic process at an early age (between the ages two to five); the child should receive therapy on a one-on-one basis for up to forty hours a week; the length of treatment should extend over a long period of time (up to two years or longer); a one-on-one relationship with the child’s teacher, therapists and facilitators should be encouraged; and therapy should be included in spaces known to the child (such as their school or at home environment) (Lovaas, 2003). Rigorous and competent training in ABA is strongly recommended for those who choose to use ABA as a form of intervention, as ABA competencies allow for direct-care staff to implement intervention plans more successfully (Luiselli, Bass, & Whitecomb, 2010).

Cognitive Behavioural Therapy (CBT) is a different form of intervention that may be adopted to reduce or modify repetitive behaviours (Sadock & Sadock, 2015). Whilst research pertaining to CBT provides significant evidence regarding the effectiveness in treating the symptoms for depression, anxiety and obsessive compulsive disorders in children, there have been fewer controlled trials of this treatment in children with ASD to ascertain its overall effectiveness (Sadock & Sadock, 2015). It is therefore thought that ABA is the most effective way of modifying repetitive behaviour and is an intervention that can aid greater social and communicative skills (Sadock & Sadock, 2015).

Psychotherapeutic approaches such as play therapy are often not recommended for ASD children due to the children's impaired ability to engage in imaginative or symbolic play. For this reason, behavioural therapy or intervention plans are considered more appropriate as a form of intervention (Sadock & Sadock, 2015).

Psychopharmacological interventions are often used simultaneously with behavioural or psychosocial interventions. Psychopharmacological interventions are usually aimed at reducing behavioural problems and target symptoms such as aggression, self-injury behaviours, irritability, hyperactivity, impulsivity and inattentiveness (Sadock & Sadock, 2015).

2.7 Challenges associated with educating children with ASD

As the rates of ASD are dramatically increasing, more children with ASD are being enrolled into mainstream schools. With the inclusion of ASD children, educators are "faced with the challenge of teaching, managing social and behavioural development whilst ensuring academic success for all learners in the classroom" (Lindsay et al., 2014, p.1).

ASD children's preference for predictability and routine, and their dislike of higher sensory stimulation, makes the task of teaching an ASD child in a mainstream school problematic as classroom environments are often busy, loud and do not always follow a set routine (Emam & Farrell, 2009). Given such conditions of a mainstream classroom, an ASD child can easily feel overwhelmed. The experience of being fully included in a regular classroom allows for the child to be exposed to social pressures and demands that they are not used to nor feel

particularly comfortable with (Rao, Beidel, & Murray, 2008). As a result of this, ASD children cope with the situation through the use of self-stimulating behaviours 'stimming' (Sinha et al., 2014). Stimming behaviours are outwardly shown to increase pleasure or to calm/soothe oneself when a child is feeling overwhelmed or when the child in question is having difficulties expressing their emotions (Sinha et al., 2014). Stimms can be exhibited through different sensing manners using auditory, tactile, smell, taste, vestibular and proprioceptive processes. Stimming behaviours (whether they are manifested as humming, screaming, the inappropriate touching of objects or inappropriate body movement) can be disruptive to classroom activities and can increase the stress and tension levels of an educator as they have to accommodate ASD learners and work with the child's ASD related repetitive and intensive routine manifestations whilst accommodating the needs of the child's neuro-typical peers (Emam & Farrell, 2009). In addition to this, an impairment in social and emotional understanding allows the quality of interactions between the teacher and ASD learner to be jeopardised (Gutstein & Whitney, 2002). ASD children commonly find social communication and interaction difficult and often appear to be immersed in their own world, thereby they rarely attempt to interact with the teacher and their fellow peers (Gutstein & Whitney, 2002). Characteristics such as fixating on interests outside of the classroom tasks at hand and providing limited eye contact further puts strain on the teacher as their role becomes increasingly frustrating and demanding (Lehohla & Hlalele, 2012). Lastly, as ASD children have atypical learning styles, they often need a specific instruction that differs from their neuro-typical peers (Collins, 2014). Providing a different teaching strategy can prove to be extremely challenging if a teacher has no additional help (teacher's aids or paraprofessionals/facilitators) in the class (Emam & Farrell, 2009).

2.8 White Paper 6 as outlined by the Department of Education

The post-apartheid era allowed for the restructuring of the education system within South Africa. The Department of Education (DoE) now stipulates that all South African children are required to attend school. Moreover, apartheid segregated schooling practices have been eliminated, and the promise of inclusivity and educational equality has become central to educating practices in the country (Hyman, 2014). In the attempt to redress the educational inequalities that previously existed, the DoE outlined a policy in the Education White Paper 6 (2001). This policy aims to shape and influence the state's new policies for a single and

unsegregated educational system for all learners, including those with disabilities (Hyman, 2014). The implementation of an integrated system would allow for a flexible curriculum that would cater to the varied abilities and needs of South African learners. The policy additionally looked to develop support structures for teachers within each schooling district and further develop the skills of South African teachers so that they would be able to cope with more diverse classes (Roberts, 2007). White Paper 6 (2001) works off the premise that disability is not only a medical issue but is a human right concern (Bergstedt, 2015). The policy looks to promote social justice and improve the lives of individuals who have been marginalised in the past due to debilitating levels of disability, social, economic and political systems (Bergstedt, 2015). Key factors that have been asserted by White Paper 6 (2001) include that: people of all ages (children, youth and adults) have the potential and capacity to learn and therefore should be given the necessary support when needed, learners should be allocated the time to work at their own pace and lastly, not every learner is the same and therefore some learners may require specialised and intensive levels of support so that they are able to work and develop to their full potential (Kempthorne, 2018).

2.8.1 Implementation and practical problems with White Paper 6 (2001) on inclusive education

Within a South African context, there appears to be a persistent gap between recommendations made or initiatives stipulated in the state's policy, White Paper 6 (2001), and the current functioning of mainstream schools (Hyman, 2014; Prinsloo, 2001). Engelbrecht's (2006) study *'The implementation of inclusive education in South Africa after ten years of democracy'* argues that although many years have passed since the White Paper 6 policy has been in place, the implementation of inclusive education itself continues to fall short in current practice. Reiterating this argument, a South African study looked at a learner's move from a mainstream school to a special school (Pillay & Di Terlizzi, 2009). The study indicated that there appeared to be a discrepancy between policy and the current practice of South African public schools. It was thought that the mainstream school personnel and the overall resources offered did not cater to the needs of the child in question (Pillay & Di Terlizzi, 2009). A successful inclusive school requires certain amenities such as professionals or therapists who specialise in disability, adequately trained staff who

can cater to all classroom needs and access to teaching assistants (Pillay & Di Terlizzi, 2009). As such services are lacking, South African learners who have special needs are more inclined to enrol into special schools as they have access to better support services (Pillay & Di Terlizzi, 2009). It is thought that special schools are able to provide greater individual support to a learner with special needs as special schools are financed to a greater extent when compared to mainstream schools. As a result of this they are able to “offer support and therapeutic interventions as part of a fee structure and the learner’s individual needs can then be more appropriately met on site and during the school day” (Hyman, 2014, p. 15).

In addressing current teaching training practices Collins (2014), Hyman (2014), Kempthorne (2018) and MacIntosh (2013) have reported that most teachers who graduate from university teacher training programmes have little training and experience in working with children with ASD. With a noticeable lack in pre-service and in-service training, one can argue that the majority of mainstream educators within a South African context, still lack the appropriate level of training and experience to adequately support learners with ASD, even though an inclusive policy has been put in place. Roberts (2007) study on *‘Teachers perspectives in the mainstreaming of Autistic Students’* further illustrates that whilst the DoE acknowledges the importance of in-service training, mainstream teachers still feel inadequately prepared to take on special needs students in a mainstream environment and that in order to successfully include ASD learners, they need appropriate practical exposure to ASD children, they would need to have a smaller number of children in each class and that resources or provisions would need to be made so they would feel supported in the inclusive classroom (Roberts, 2007). It was also said that teachers would welcome external help in the form of learning facilitators/paraprofessionals in order cope with classroom demands (Roberts, 2007).

Although there is a need for learning facilitators, White Paper 6 does not mention the need for trained learning facilitators or paraprofessionals (Collins, 2014). It appears that the role of a learning facilitator has been neglected in the DoE’s inclusion policy, therefore parents are forced to employ learning facilitators at their own expense as additional one-on-one assistance is not made available by the state (Collins, 2014). Costs incurred in the

employment of a learning facilitator are substantial and not every parent has the means to provide their child with a learning facilitator (Kempthorne, 2018).

2.9 Schooling options for children with ASD

Mainstream education may not be appropriate or in the best interest of an ASD child if they are “low functioning” and present with more severe symptoms of the disorder whereby greater assistance/support is needed. However, those who are “high functioning” (meaning that they possess an average or above average intellectual functioning) and who may have received early intensive behavioural and developmental interventions, exhibit fewer behavioural symptoms and should have the opportunity to enrol in mainstream schools (Collins, 2014). Children in these circumstances have a greater capacity for learning and may function productively in an inclusive classroom (Collins, 2014; Whitby & Mancil, 2009).

Unfortunately, within a South African context, there are only a few special and remedial schools that cater to ASD learners and whilst many higher functioning ASD learners have the capabilities to cope in a mainstream school, not all are afforded the opportunity. It has been reported that several mainstream schools in Kwa-Zulu-Natal “restrict their acceptance of children with ASD” (Collins, 2014, p. 22). The refusal of admission into these mainstream schools often results in the home schooling of an ASD child whereby the parent or a trained ABA facilitator/paraprofessional take on the role as an educator (Collins, 2014). Parents who are knowledgeable of South Africans inclusion policy, and of their child’s educational rights, will often insist that mainstream schools enrol their child into the school (Collins, 2014). However, parents who are not aware of their ASD child’s rights do not challenge the school’s decision to deny admission and are therefore left to “accept whatever outcome the school decided about the child’s placement.” (Collins, 2014, p. 22)

In comparison, first world countries such as the U.S.A, Canada, Australia and the United Kingdom have greater resources to accommodate ASD children enrolling into mainstream schools and more ASD children are being included into an inclusive environment. International research largely depicts this movement (MacIntosh, 2013). Whilst a number of developing countries are moving towards the inclusion of ASD children in mainstream schools, few studies have been conducted to describe this occurrence (MacIntosh, 2013).

With this in mind, there is a need for studies to be conducted within a South African context that will further illustrate the realities for ASD children with regards to their educational rights and schooling options.

2.10 Curriculum models for children with ASD

Broad based approaches call for the blending of teaching strategies that can be used in conjunction with ABA to reduce behaviour and provide language remediation (Jensen & Sinclair, 2002; Sadock & Sadock, 2015). In an educational setting, teachers or learning facilitators can reinforce academic skills of a learner with encouragement, praise, privileges and a point system (i.e. star charts). Educators can also provide consequences for inappropriate social and academic behaviours of their learners such as using verbal reprimands, removing the child from the class, or limiting their break time (Sadock & Sadock, 2015). “Teachers use the principles of behaviour as demonstrated in applied behaviour analysis because they have been effective in improving academic and social growth of students” (Cooper, 1982, p.115). Whilst ABA strategies can be, and often are, used in the classroom by teachers, teacher’s aides, facilitators/paraprofessionals etc., other educational interventions for children with ASD may be used. These educational interventions include: The Treatment and Education of Autistic and Communication-related Handicapped children (TEACCH), and approaches that are computer-based or make use of virtual reality (MacIntosh, 2013). Unfortunately over the years, research has rather focused on the nature of the disorder rather than focusing on curriculums that would be most beneficial to ASD children. It is thought that more research should be conducted within this domain (Olley, 1999).

TEACCH involves structured teaching and is based on the assumption that ASD children have difficulty with perception and therefore require teaching methods that make use of visual aids in the attempt to teach academic work as well as to encourage appropriate social skills (Sadock & Sadock, 2015). The physical environment is detailed in a way to encourage visual learning, promote autonomy and social relatedness (Sadock & Sadock, 2015).

A computer-based approach, or one that uses virtual reality, provides computer-based programmes, games and other forms of interactive programmes to teach reading and language skills (Sadock & Sadock, 2015). Given that South Africa has a challenging economic climate whereby limited resources and funds are allocated by the Department of Education (DoE) to mainstream schools, a TEACCH approach or approaches that incorporate virtual reality/computer based programmes might not always be feasible or accessible, especially in public schools. It can therefore be argued that behavioural interventions such as ABA are likely to be implemented more successfully within a South African context.

2.11 Implementation of teaching strategies and techniques for ASD children in mainstream schools

As previously detailed, ASD children are atypical learners who at times experience academic difficulties due to the characteristics of their disorder (Rao, Beidel & Murray, 2008). Educators therefore need to identify effective strategies or teaching instruction in order to make sure that the ASD child is performing at their optimal performance level with regards to learning (MacIntosh, 2013). Ways in which to aid an improved performance include making use of visual aids, utilising prompting, priming and modelling techniques (Kempthorne, 2018). These techniques not only aid academic and social performance but also encourage the ASD child to learn to work independently. Independence in the classroom is a critical skill to learn when an ASD child is integrated into a mainstream schooling environment (Jones, 2014; Neitzel & Wolery, 2010).

Individuals with ASD appear to possess strengths in processing visual stimuli (Shah & Frith, 1993). Due to strengths in visual processing (compared to an often weak/impaired auditory processing) many instructional techniques emphasise the use of visual cues (Ganz, 2007; Ganz, Kaylor, Bourgeois, & Hadden, 2008; McCoy & Hermansen, 2007). With this in mind, instructional strategies and learning material should be encouraged in visual form (Dunn et al., 2002). The key use of visual aids is for communication and the understanding of tasks (Jones, 2014). Examples of visual aids include creating visual schedules for the child (allows for a sense of predictability for the school day), creating social stories (these will help an ASD child understand a series of event that will happen in the near future and that may require a certain level of social communication from them), and the use of the Picture

Exchange Communication System (PECS) (Jones, 2014). PECS encourage both communication and peer interactions (Jones, 2014). Whilst some international mainstream schools make use of these visual aids, studies within a South African context do not describe the implementation of systems such as PECS in mainstream schools (Roberts, 2007). The researcher speculates that shortcomings in teacher training, lack of ASD awareness, and scarcity in resources prevents the use of these effective visual aids.

Prompting encourages an individual to perform desired outcomes/ behaviour through added stimuli (prompts) (Kartsen & Carr, 2009). A prompt is a precursor or antecedent that is provided when an ordinary antecedent does not elicit desired results (Kartsen & Carr, 2009). Hayes (2013) suggests that prompts should be direct and strategically timed thereby demonstrating to the child in question what is expected of them. Additionally, prompts are used to encourage social interaction skills and language development (Hayes, 2013). Pennington, Ault, Schuster and Sanders (2011) further reiterate that response prompting methods serve as a crucial element of instruction for learners with disabilities. These methods have been extensively researched and evaluated (Pennington et al., 2011). Prompts used are usually gestural, verbal or make use of a model to elicit the desired behaviour (Bryan & Gast, 2000).

Harrower and Dunlap (2001) deem priming as an effective classroom technique. The purpose of priming is to familiarise the learner with material before it is taught again at school. It typically consists of pre-practice activities. Priming helps lessen feelings of anxiety or stress for the ASD child as the technique provides a level of predictability to the new task at hand. In order for priming to be successful, priming should take place in an environment known to the learner (either at school or at home) (Harrower & Dunlap, 2001).

Lastly, peer modelling is thought to be an effective way in which an ASD child can learn appropriate social and language skills and has therefore been introduced as a learning strategy in many inclusive educational settings (Atherton, 2005; Garfinkle & Schwarts, 2002; McCory & Hermansen, 2007). In the effort to improve an ASD child's social skills, level of independence and the command of a specific language, teachers will pair up neuro-typical children, who exhibit good behavioural skills, with an ASD child (McConnell, 2002). Research

has shown that “these peer-mediated interventions can significantly increase the social and communication skills of targeted children with ASD” (Kasari, Locke, Gulsrud, & Rotheram-Fuller, 2011, p. 1). Beidel, Turner and Morris (2000) further substantiate that the acquisition of social skills in early childhood has been associated with academic achievement and encouraging developmental outcomes. Peer modelling therefore provides the opportunity for ASD children to socialise with others thereby supporting academic and childhood development.

Internationally, these instructional strategies or techniques are evidence based with ample literature supporting the various techniques used to enhance learning and socialisation within an inclusive classroom. However, within a South African context, little research has been conducted on the implementation of these strategies within mainstream schools, strategies are merely commented on or are recommended. Given the effectiveness of such interventions, one may question why they are not utilised more frequently by educators in the attempt to include ASD learners more successfully.

2.12 Neuro-typical peers and the inclusion of ASD learners

Research suggests that children at a kindergarten level are more inclined to accept people of difference in their elementary schooling years and will often associate with peers of all types. However, as the children progress in age, there appears to be a decline in the social interaction and integration between a child with ASD and his or her neuro-typical peers (Bauminger & Kasari, 2002; Kasari et al., 2011).

It has been reported that ASD children are at least three times more likely to be bullied than their neuro-typical counterparts (Kasari et al., 2011). Studies further suggest ASD children report receiving less social support from classmates and friends. Due to behaviour that others may find inappropriate or ‘odd’ ASD children become easy targets for bullies (Kasari et al., 2011). It has also been reported that they are less likely to report bullying incidences to school personnel because they either assume that others are aware of the situation or because they do not understand that they are actually being bullied (especially with regards to subtle forms of bullying (Kasari et al., 2011). Lastly, Dissanayake and Macintosh (2006)

have further indicated that ASD children are more susceptible to lack assertiveness in their day to day life.

Although children and adolescents in inclusive environments receive daily opportunities to interact with their neuro-typical peers, which allows them to build a social network, it is thought that these interactions may prove to be overwhelming at a high school level when classmates and classrooms change with each different subject taught (Locke, Ishijima, Kasari, & London, 2010). As a result, adolescents with ASD may experience feelings of loneliness (Bauminger & Kasari, 2002; Macintosh & Dussanayake, 2006). In situations where higher-functioning adolescents are navigating the complex domain of high school many are “tremendously aware of their social status and often desire a reciprocal high-quality friendship. When these expectations are not met, feelings of loneliness and isolation may surface, perpetuating the cycle between these interrelated constructs” (Locke et al., 2010, p. 4).

In dealing with issues such as loneliness, bullying and stigmatization, it is recognised that social support is an important resource that protects children from stressful and challenging situations (Humphrey & Symes, 2011). It has been proposed that the implementation of social support systems allow for a buffer against certain life stressors for a child with ASD and instil a sense of resilience in children who are subjected to bullying or social exclusion within inclusive settings (Bergstedt, 2015; Humphrey & Symes, 2011).

Whilst incidences of bullying have been reported for ASD learners who are enrolled in inclusive schools, it should also be mentioned that research has demonstrated that there are also positive social aspects to enrolling ASD children into mainstream schools (Humphrey & Symes, 2011). Children who attend inclusive classrooms from a young age have been shown to gain improvements in their overall social skills in school (Humphrey & Symes, 2011). It is thought that increased social interaction among children promotes social play, behaviour and language skills (Rogers, 2000). Furthermore, neuro-typical peers are often viewed as more effective social role models than adults. Their ability to encourage an

ASD child make use of and generalise social skills has found to be more successful than when using an adult role model (Humphrey & Symes, 2011).

2.13 Overview and definition of a learning facilitator

The role of a facilitator is complex and multifaceted (Kempthorne, 2018). Duties include reducing behavioural problems, helping the learner focus on tasks at hand, encouraging the learner to socialise and cooperate with others, providing modifications to the environment if needed, minimizing social or academic anxieties that a learner may experience, and helping a learner work in small groups with other learners (Robertson, Chamberlain & Kasari, 2003). Internationally, the title 'paraprofessional' is commonly used to describe the same role and duties required of a South African 'learning facilitator' (Bergstedt, 2015). Moreover, within a South African context, the role of a learning facilitator differs from that of a class or teaching assistant. A class or teaching assistant would usually provide assistance/support to the class as a whole (Bergstedt, 2015). The teaching assistant is a staff member hired by the school and receives an income from the school in question. A learning facilitator however, provides one-on-one attention to a learner with a disability. As previously mentioned, they are often privately hired by parents who pay them at their own expense (Kempthorne, 2018).

2.14 The roles and responsibilities of both teachers and learning facilitators and associated challenges

A review on research pertaining to paraprofessionals in inclusive schools has indicated that paraprofessionals feel that they play an important role in being the "connectors among and between students, parents, teachers and community service providers" (Giangreco, Suter, & Doyle, 2010, p. 46). Whilst believing that part of their role is to act as a mediator between the parents, teachers and students, conflicting studies have shown that there is still a level of ambiguity as to what the role of the paraprofessional/learning facilitator is and what boundaries should exist between the teacher and learning facilitator in an inclusive environment (Riggs & Mueller, 2001). In Riggs and Mueller's (2001) study paraprofessionals expressed feelings of being taken for granted, not being respected or valued by members of the school community and frustration as they were frequently asked to assume teacher duties without being properly prepared, trained or directed. Feelings of frustration were

amplified by either being over, under or improperly utilized in their job description. This was coupled with not having their pay reflect their hard work and best efforts (Riggs & Mueller, 2001).

The lack of clarity regarding roles and boundaries between paraprofessionals and teachers was also reported by Simpson, Mundschenk and Heflin (2011). They observed that as ASD students often had more of a difficult task in attempting to use the same learning materials or struggled to adapt to the same class environment as their neuro-typical peers and they were often placed in an area on the periphery of the classroom. It was in this situation that paraprofessionals frequently made decisions that would affect students without involvement or oversight from the teacher (Simpson et al., 2011).

Kempthorne's (2018) South African study on "*exploring educators' experiences of in-class learning facilitators for children with ASD*" shares similar results that further indicate a lack of clarity regarding boundaries or role description allowed for challenges in the classroom. Results of this recent study further detailed how educators anticipated difficulties that may arise from sharing a small intimate space with another adult (Kempthorne, 2018). Allowing for someone else to be in the classroom suggested that some of the participants would feel threatened or vulnerable by having to teach in front another adult and that such exposure could potentially allow for judgement with regards to their teaching methods. Lastly, issues concerning power and authority transpired. It was thought that a lack in clear boundaries had the potential to cause difficulties (Kempthorne, 2018). The research indicated that a balance between feeling comfortable in their teaching space along with being able to collaborate with a learning facilitator was purely dependent on whether a structured relationship and boundaries were put in place with the learning facilitator (Kempthorne, 2018). A clear understanding of what each role entailed would allow for a positive collaboration or partnership to be formed. If a level of ambiguity regarding job description and boundaries remained, challenges would transpire for both the educator as well as the learning facilitator (Kempthorne, 2018).

2.15 The training of facilitators

A systematic review titled *“Training paraprofessionals to implement interventions for people autism spectrum disorders”* articulates that although the rates of ASD continue to increase, there are a limited number of specialists trained to provide specialised forms of interventions for ASD children (Rispoli, Neely, Lang, & Ganz, 2011). With the rising statistics of children diagnosed with ASD, a growing number of paraprofessionals are being utilized by schools internationally (MacIntosh, 2013). There is currently a growing concern that paraprofessionals typically lack the adequate training and necessary experience (Rispoli et al., 2011). When untrained paraprofessionals are unemployed by schools, serious repercussions may transpire and the paraprofessionals’ input may lead to the creation of prompt dependency, the allowance of ill or inappropriate behaviour, and potentially hinder the academic and social progress that the child is capable of making in the inclusive classroom (Rispoli et al., 2011). Although such concerns have been raised, “research has demonstrated that well-trained paraprofessionals can have a positive impact on intervention programmes” (Rispoli et al., 2011, p. 379).

Kempthorne (2018) further comments on literature that suggests that pre-service and in-service training for learning facilitators is severely lacking. As a result of this, challenges are created between the educator and the learning facilitator whereby the teacher is often reluctant, ill prepared and untrained to supervise the facilitator placed in their class. Chopra et al (2004) describe frustrations that paraprofessionals experience due to the lack of in-service training, citing that many paraprofessionals learnt on the job by watching other educators or professionals work in the classroom. They would also frequently draw upon their own knowledge and skills to help the learner in the class (Chopra et al., 2004).

Within South Africa, it is thought that the training of facilitators is also lacking, particularly with regards to managing behaviour and making curriculum modifications (Kempthorne, 2018). The ability to manage behaviours is crucial as acquiring behavioural techniques is twofold. Implementing effective behavioural techniques not only reduces undesirable behaviours, but also can be used to teach new skills to a client (Harchik, Sherman, Hopkins, Strouse, & Sheldon, 1989).

In South Africa, there are few organisations that recruit and train learning facilitators however, these organisations are private entities and are not initiatives of the state (Kempthorne, 2018). The increasing need for trained learning facilitators is evident, both locally as well as internationally, yet limited movement has been seen in improving upon these concerns (Kempthorne, 2018). It has rather been found that an 'on the job' training approach has dominated many schooling facilities to train learning facilitators (Carter, O'Rourke, Sisco, & Pelsue, 2009).

2.16 Collaborative relationships among paraprofessionals, parents and other educational teams

White Paper 6 (2001) stipulates that collaboration between schools, families and educators is needed to ensure that the required level of support is given to those with diverse educational needs (Bergstedt, 2015). It is thought that the interactions that take place between educators, specialists and families influence the dynamics of a successful working relationship (Tucker & Schwartz, 2013). As a result of this, the working relationships formed between learning facilitators, teachers, parents and other professionals, who form part of a multidisciplinary team, are instrumental to the successful inclusion of ASD children in mainstream schools. Multidisciplinary teams commonly consist of members of different professions who contribute their individual knowledge and skills to benefit or help the individual/service user in question (Dillenburger et al., 2014). Consultation from a range of specialists is important as it is not possible for one person to be fully trained or competent in all areas of need (Cremin, Thomas, & Vincett, 2003; Dillenburger et al., 2014). "Working together in inclusive support teams, classroom teachers and support specialists can use their complimentary skills and knowledge to plan, implement and evaluate the benefits of instructional practices for all students in their classes" (Gavaldá & Qinyi, 2012, p. 4075).

Along with the support and services offered by professionals or trained specialists, it has been noted that the active involvement of parents, who have a child with ASD, is crucial for the successful inclusion of the child in a mainstream school (Gavaldá & Qinyi, 2012). It is recognised that parents play a fundamental role in ASD treatment, as parents are often regarded as being experts in their child's life (Gavaldá & Qinyi, 2012). Positive relationships and communication between all parties is therefore fundamental to the inclusion of a

student (Bergstedt, 2015). Moreover, Chopra et al (2004) found that paraprofessionals reported that “positive school environments were characterized by paraprofessionals’ working as a team with teachers, being viewed as educators, being treated respectfully by all school personnel and parents, and feeling rewarded by their work with children.” (Chopra et al., 2004, p. 225). Qualities such as respect and enthusiasm from different parties have been reported to significantly influence the extent to which a child can thrive in an inclusive classroom as there is a general belief that students perform to a higher standard when educators display a sense of enthusiasm (Gavaldá & Qinyi, 2012). It would appear that mutual respect for each counterpart is needed within a collaborative partnership in order for common goals to be achieved.

2.17 Conceptual framework

Bronfenbrenner’s (1979) eco-systemic conceptual framework was useful in attempting to understand how a learning facilitator experiences the role of facilitation in mainstream schools. This framework illustrates how a person’s development could be shaped or influenced by their surrounding environment. Such factors or forces can be categorised into five systems namely; microsystems, mesosystems, exosystems, macrosystems and chronosystems (Bronfenbrenner, 1979). By identifying the factors that exist within and between these systems one can comment on the interconnectedness of the different levels (classroom, school and government) and how the influence of interactive individuals in their social environments can construct or constrain certain practices (inclusive education) (Singal, 2006).

The first system is the microsystem. The microsystem focuses on the immediate interaction between an individual and the people within their direct environment/surroundings (Bronfenbrenner, 1979). Such surroundings may include places such as a school, home or working environment. By examining the microsystem one can explore the effect that the other systems have on school/learning facilitators and how these systems influence their experience of working with ASD children in a mainstream school setting.

The mesosystem refers “to the relationships that develop and exist between two or more microsystems at a point in an individual’s life” (Bergstedt, 2015, p. 31). When exploring

these systems, one would look at effective collaborations or partnerships the learning facilitator shares with parents, teachers and other professionals found within the inclusive educational setting.

The exosystem usually explores how an individual is impacted indirectly by other people (Bronfenbrenner, 1979). Such factors relevant to this study include entities such as the training of facilitators and teachers and the knowledge and acceptance of ASD in an inclusive environment. The macrosystem is concerned with societal norms, and the state's legislation (inclusive education) and how such policies, and the allocation of resources may influence classroom practices and experiences (Bronfenbrenner, 1979).

Lastly the chronosystem focuses on the changes that occur over a period of time in any one of the systems (Bronfenbrenner, 1979). In this circumstance could refer to the understandings of neurodevelopmental disorders at this time in our history.

This eco-systemic framework allows for the exploration of the various systems and the way in which they influence learning facilitators experiences and their perceptions of facilitating ASD learners in mainstream schools.

2.18 Summary

In this chapter ASD has been defined in terms of its epidemiology, etiology, characteristic features, and impairments so that an in depth understanding of the spectrum disorder can be understood. Furthermore, inclusion of the diagnostic criteria as set out by the DSM 5 has been provided. It is critical to look closely at the disorder, especially within a South African context, so one can see the prevalence of the disorder within our society and how it will affect the education process for South African children diagnosed with ASD. The chapter also aimed to focus on how the launching of Education White Paper 6 (2001) has presented many challenges that have brought into question the achievability and practical implementation of this policy. Whilst the DoE acknowledges the importance of in-service training, mainstream teachers still feel inadequately prepared to take on special needs students in a mainstream environment. It is evident that one needs to examine how children with ASD can thrive in a mainstream setting and what modifications are needed to

the current mainstream schooling environment. As there is no published research available within a South African context that solely explores the experiences of ASD facilitators in mainstream schools, it is crucial that one takes into account international research that explores this phenomenon. In understanding this available research, it is hoped that paraprofessionals/facilitator role may be better understood in the work that they do within a South African context, particularly with regards to facilitating ASD clients in an inclusive environment. Furthermore, by looking at the experiences of these facilitators', deeper insight and evaluations can be made regarding the advantages and shortcomings associated with inclusive education and what factors help or hinder an ASD learner's ability to thrive in an inclusive environment in South Africa.

Lastly, one should note that as the work of a learning facilitator takes place in an inclusive educational setting, it can be considered appropriate to apply Bronfenbrenner's (1979) eco-systemic conceptual framework to this research project as the facilitator's individual experiences are influenced and shaped by their surrounding environment (classroom, school and government). Adopting this framework allows for a better understanding of inclusive education and its development as a system, as well as the development of individuals (learning facilitators) within these systems.

Chapter 3

Research Design and Methodology

3.1 Aim and Rationale

Autism Spectrum Disorder (ASD) refers to a group of complex neurodevelopment disorders whereby the symptoms are present from early childhood and affect daily functioning (Koegal, Kim, & Koegel, 2011). This childhood disorder has a growing prevalence globally and is a disorder which has become increasingly common within an inclusive schooling environment (Koegal et al., 2011). Whilst there is a modest amount of research that explores the experiences and perspectives of teachers' who teach children with ASD in a mainstream setting, there is limited research pertaining to the experiences' and perspectives of those who facilitate in a mainstream environment, specifically with regards to ASD. The need to identify how learning facilitators have experienced and perceive facilitating ASD children in an inclusive schooling environment was explored in this study. This was done in an attempt to gauge: factors that influence a learning facilitator in successfully supporting their client in a mainstream school; how they have observed classroom practices implemented in an inclusive classroom; what the facilitators' overall views are regarding inclusive education and South Africa's current school curriculum and lastly; what the learning facilitators' perceptions and understandings are of their relationships with teachers in mainstream schools.

3.2 Research Questions

The objectives of this study were to explore learning facilitators' experiences in mainstream schools, specifically pertaining to school facilitation for children with Autism Spectrum Disorders in an inclusive environment. The primary research questions that this study sought to address were:

1. What are the learning facilitators' experiences of facilitating their clients in mainstream schools?
2. What factors influence the learning facilitator's attempt to support their ASD clients effectively and appropriately?

3. What are the learning facilitators' observations on classroom practices implemented by teachers in mainstream school environments?
4. What are the learning facilitators' perceptions and opinions of inclusive education and the current curriculum for ASD children?
5. What are learning facilitators' perceptions and understandings of their relationships with teachers in mainstream schools?

3.3 Research Design

An interpretive, qualitative methodology was used in this study so that rich and authentic data could be obtained. "Interpretive methodologies focus primarily on understanding and accounting for the meaning of human experiences and actions" (Fossey, Harvey, McDermott, & Davidson, 2002, p.720). The interpretive paradigm is based on the premise that there is no single reality in the world and that peoples' knowledge and understanding of reality is constructed in context (Terre Blanche, Durrheim, & Painter, 2014). The underlying nature of this theoretical framework is to understand a specific phenomenon, with no intention of generalising such understandings or experiences to a population (Tuli, 2011).

In order to gain first-hand accounts of learning facilitators' experiences the researcher needed to interact with them with the aim of gaining and understanding their (learning facilitators') everyday interactions and experiences. The aim of the researcher was to obtain rich in-depth data regarding the experiences of ASD learning facilitators in mainstream environments.

3.4 Sampling

Purposive, non-probability sampling was used throughout the investigation. This allowed the researcher to obtain the most suitable population sample where the participants were selected according to a particular criteria as well as their ability to provide relevant and in depth information pertaining to the research topic at hand (Terre Blanche et al., 2014). Inclusion criteria for this particular study were such that selected participants (learning facilitators who work with ASD children) must have facilitated a student with ASD for at least one school year in a mainstream school environment within the greater eThekweni

area. This ensured that they were suitably acquainted with the role of facilitation in mainstream schools. Such set inclusion criteria further increased the validity of the study.

The sample consist of six participants. This sample size was small but not so small that it was difficult to achieve data saturation (Bryman, 2012). The use of a number of participants increased the study's reliability as themes that were produced by each participant often proved to be similar in nature when compared with other facilitators' who had taken part in the study. By using this sample size of six people, the researcher was able to collect rich, detailed data from each participant during their individual interviews.

Snowball sampling was used as a method of sourcing participants. This method of sampling allows the researcher to identify subjects that are relevant to the study. These subjects are then asked to refer the researcher on to other potential participants (Atkinson & Flint, 2001). In this case, snowball sampling was used to invite facilitators known to the researcher to participate, and further to invite other suitable candidates to be part of the study. The use of snowball sampling provides a way in which the researcher can access a target population that is concealed or hard to reach (Atkinson & Flint, 2001). As there is a small population of facilitators who have experience with facilitating children with ASD in mainstream schools, it was thought that this was an appropriate method of recruiting participants for the study. In addition to this, a letter was sent to a company that specialises in school/learning facilitation for ASD children (see appendix 4). This letter sought permission to source the company's facilitators for the study. Once permission was granted to contact the facilitators, the researcher invited the facilitators to participate in the study (Appendix 5). Four of the six participants were recruited from this company.

Individual interviews with the participants were arranged once participants had willingly agreed to participate in the study. It was stressed that these interviews would only take place at the participants' convenience. Prior to the interviews with the participants, the participants were required to sign informed consents forms (Appendix 2). Informed consent forms ensure that the participant is aware of the nature of the research and that confidentiality is held in place by the researcher (Terre Blanche et al., 2006).

3.5 Data Collection

Flexible semi-structured interviews were conducted with the participants. Semi-structured interviews are an appropriate means of data collection as interviews provide the opportunity for the researcher to acquire the complexity and depth of the subject matter regarding the experiences of learning facilitators in mainstream settings (Braun & Clarke, 2006). Interviews also allow the participant's account to be heard in a detailed and graphic manner, which may not be captured if one was to use another type of method (Braun & Clarke, 2006). The interview schedule was related to the research questions and focused on the participants' experiences, perceptions and understandings of facilitating children who have ASD in a mainstream school setting (Appendix 1). The interview questions were not meant to lead or constrain the participants into answering in a certain way but merely guided the interview process and provided structure to the subject in question (Bryman, 2012). Had the researcher chosen to conduct completely un-structured interviews during the data collection process, she may not have been able to elicit themes or areas of interest that would have been appropriate or relevant to the research questions (Horton, Macve, & Struyven, 2004). Each participant was interviewed for approximately one hour. The interviews were audio recorded, only once consent to do so was given by all participants, then later transcribed verbatim.

3.6 Data Analysis

The process of analysing the raw data collected was done via thematic analysis. Thematic analysis is a six stage process that systematically organises and describes the researcher's data in rich detail as it identifies, analyses and reports patterns and themes within the data (Braun & Clarke, 2006). Thematic analysis reports on the experiences, meanings and the reality of a participant, allowing the researcher to analyse and theorize experiences, motivations and meaning in a straight forward way. Other beneficial elements of thematic analysis include that this method is highly flexible which allows one to determine themes in a number of different ways and helps provide the authentic, complex and a detailed account of data that is sought after by the researcher (Braun & Clarke, 2006).

Once the interviews were conducted and transcribed, they were coded for themes that relate to the research question. Themes constructed were then looked at in terms of similarities and differences found between participants and whether certain patterns emerged that would contribute to the total experience of facilitating a child with ASD in a mainstream school setting. When writing up the data, each theme was explicitly explained. In addition, phrases and key concepts from the interview were included to ensure that there is a strong link between the participants' meanings and experiences and the interpretation made by the researcher. These themes were then analysed in relation to existing theory pertaining to inclusive education and school facilitation, particularly theory that examines ASD within a South African schooling context. Themes produced showed similarities to MacIntosh's (2013) study on *Teachers' experiences of teaching learners diagnosed with Autism*. Themes constructed, via the process of thematic analysis, included Training, Identifying Autism, Challenges and Need for Support (MacIntosh, 2013).

3.7 Validity, Reliability and Rigour:

3.7.1 Credibility

The credibility of this study was strengthened by the use of an interview schedule that focused on topics and themes that were relevant to the study and the research question. The researcher was open to "peer scrutiny of the research project" (Shenton, 2004, p. 67). Feedback from the researcher's supervisor allowed the researcher to refine research methods and strengthen her arguments as her work was critiqued and observed from a detached viewpoint, allowing for a fresh perspective on the research in question (Shenton, 2004). The qualifications and experience of the researcher are pertinent to the study as she has had practical experience facilitating children with ASD in remedial and mainstream schools. Prior experience gained in this area of interest enhanced the credibility of the researcher as it gave her insight into the context and terminology of those in the field.

3.7.2 Transferability

Detailed description of the phenomenon being studied promotes its credibility and transferability as it aids in conveying the context and conditions that are being investigated. Insight into the actual situation allows the reader to conclude to what extent the

researcher's findings correspond with reality (Shenton, 2004). Whilst findings in this study are limited to that of its sample and cannot be generalizable to other facilitators in South Africa, a detailed account of the study could connect previous research findings of projects that are similar in nature (Shenton, 2004). The inclusion of previous studies will heighten the credibility and transferability of this study.

3.7.3 Dependability

Dependability of the study was increased through the detailed and up to date record keeping of how the research design was planned and implemented (Shenton, 2004). The researcher is not able to guarantee that the study's findings can be repeated as the classroom situation is vulnerable to change. With this in mind, the auditing of one's work throughout the research process allows the reader to determine whether proper research protocols have been followed and the findings are congruent to the methods in which data was collected and analysed (Bryman, 2012). The researcher has provided a description of the interview method used, to enlighten the reader as to how the data was collected, showing that it was done appropriately, even though it was done within a context that is subject to change and is not necessarily repeatable.

3.7.4 Confirmability and reflexivity

Throughout the research process it was critical that the researcher took steps to ensure that personal values or theoretical predispositions did not alter the way in which the research was conducted (Bryman, 2012). It should be noted that the researcher has had experience in facilitating children with ASD in mainstream schools. With this in mind, the researcher took care not to impose her opinions or experiences on the participants she interviewed and data she collected and analysed. During this time reflexivity was a fundamental concept and practice that needed to be undertaken when using thematic analysis as a methodology. The researcher needed to take reflexivity into consideration as it weighs heavily on the legitimisation of the research. It was critical that the researcher remained open, perceptive and sensitive throughout the study (Attride-Sterling, 2001). In order to obtain authentic and sound data, the researcher needed to specify how the findings have been grounded. This was done by identifying and clarifying the theoretical, analytical and the methodological

process used throughout the study (Attride-Sterling, 2001). Furthermore, by acknowledging that the data can be observed through an “insider”, “outsider” or via “the space between” positioning, the researcher enhanced her own reflexivity (Kerstetter, 2012).

An “insider” positioning refers to the instance where the researcher will admit to her own individual knowledge or awareness of the research setting and context (Le Gallais, 2008). As researchers we are predisposed to a level of subjectivity (Jootun, McGhee, & Marland, 2009). As previously mentioned, the researcher was familiar with the role and duties of a learning facilitator for children on the spectrum, as she was once employed as a learning facilitator in the greater eThekweni area. By identifying the shared experiences and understandings that the researcher had with that of the participants, the researcher was given the opportunity to further explore her own personal beliefs, values and constructs of what it is to facilitate in a mainstream schooling environment (Le Gallais, 2008).

Whilst there are many benefits in taking on an “insider” position there is also the possibility that such familiarity with the subject matter could lead to difficulties in separating one’s own experiences from that of the participants’ experiences (Le Gallais, 2008; Palaganas, 2017). Eliminating personal biases could be achieved if the researcher took on an “outsider” position (Kerstetter, 2012). In doing so the researcher would detach or distance herself from the relevant subject matter and view findings ‘objectively’ as she is experiencing the situation as someone who is an “outsider” or stranger to the community in question (Kerstetter, 2012).

As the researcher was unable to fully commit to an “outsider” position due to her experience within the field, she, like the majority of researchers, practised the role of being situated between an “insider” and “outsider” position (Kerstetter, 2012). This region is commonly referred to as “the space between” (Kerstetter, 2012). “The space between” is multidimensional whereby the positionality of the researcher is in constant flux (Kerstetter, 2012). By positioning one’s self between the two extremities of being an “insider” or an “outsider”, the researcher is more likely to produce a project that is authentic and one that may potentially lead to other studies that focus on inclusive education, specifically within a South African context.

3.8 Ethical issues:

During the course of the research project, it was the researcher's responsibility to adhere to the ethical code of conduct and to ensure that such requirements stipulated by this code of conduct were maintained and followed at all times.

In order to fulfil ethical obligations, the researcher implemented Emanuel et al.'s (2008) framework of practical principles, as cited in Wassenaar and Mamotte (2012). Throughout the research process it was important to account for practical principles that would enhance the scientific value and ethical understandings of psychological research (Wassenaar & Mamotte, 2012). The following elements of ethical research were accounted for: collaborative partnership, social value, scientific validity, fair selection of participants, favourable risk/benefit ratio, independent ethics review, informed consent and ongoing respect for participants and the study community (Wassenaar & Mamotte, 2012). Wassenaar and Mamotte (2012, p. 279) indicate that an additional element of 'professional integrity' should also be carried out for the duration of the study, thereby sensitising the researcher to the "ethical implications of their decisions concerning authorship, falsification of data, misuse of research funds, mentorship of junior researchers, plagiarism and failure to publish research findings".

3.8.1 Collaborative partnership

Research should involve the community in all stages of the research. A company that specialises in ASD and facilitation was approached for advice regarding the relevance of the study and whether it was something worth pursuing. This company was also approached in the attempt to recruit participants. Findings of the study will be provided to the organisation upon request. The organisation could potentially use these findings to inform their own practice should they feel inclined to do so.

3.8.2 Social value

The researcher attempted to address questions that are of value to the autism community. Examining the experiences of learning facilitators who work in a mainstream school with ASD clients, can provide further insight into the current reality of inclusive education and

the role of facilitation. This in turn may contribute to further research in developing an effective inclusive education curriculum whereby both learners and teachers benefit as a whole in an inclusive classroom environment.

3.8.3 Scientific validity

A concerted effort was made by the researcher to ensure that research design, sample, method and analysis of the study is rigorous and is one that is concerned with finding valid answers that pertain to the research questions.

3.8.4 Fair selection of participants

A vulnerable population was not considered for this research study. The population required for this study was one that fits the research question, namely learning facilitators. Non-probability sampling was therefore chosen as the participants were selected according to particular criteria and for their ability to provide relevant and in depth information pertaining to the research topic (Terre Blanche et al., 2014). It should also be noted that unjustifiable incentives were not offered at any point to potential participants during the recruitment process. Those who wished to participate in the study did so purely on a voluntary basis.

3.8.5 Favourable risk/benefit ratio

In the unlikely event that a degree of harm, embarrassment or offence was experienced by a participant, certain precautions were taken into consideration and planned for. Should the occasion have arisen where the participant was left feeling uncomfortable as a result of the interview, the researcher would have referred the participant to the Child and Family Centre (Appendix 6).

The researcher believed that harm towards participants was unlikely during the duration of the research process. Furthermore, the research procedure was justified as there have been no previous accounts or studies done within South Africa pertaining to the experience of learning facilitators in mainstream school settings. Findings in the research project could potentially add to further research in the field and aid other studies similar in nature.

3.8.6 Independent ethics review

This study was ethically reviewed and given full approval by the UKZN Humanities and Social Sciences Research Ethics Committee on the 10th June 2016, prior to the commencement of all data collection which took place in August 2016.

3.8.7 Informed consent

The researcher provided detailed and factual information about the study to the participants and clearly stated what was required once they had volunteered to take part in the research. Prior to any data collection the participants read, understood what was required of them, and signed a consent form allowing the researcher to interview them on their individual experiences. The consent form clearly stipulated that the participant had the right to refuse or withdraw from the study at any time and as a result would not incur any penalties, that their participation was voluntary, and that confidentiality would be upheld by the researcher at all times. Throughout the research process, total transparency was crucial regarding the nature of the study thereby eliminating any threat of deception.

3.8.8 Ongoing respect for participants and study community

Respect for the participants' privacy was maintained through confidentiality. Every participant's wellbeing was monitored throughout research process. On completion of the study, participants have the opportunity to receive the findings of the research. The research findings will be sent to the participants via email upon request. Furthermore, all research data will be secured in a locked cabinet for the duration of five years. After such time has lapsed, the research data will be shredded and disposed of. Audio recordings of the participant interviews will also be erased.

The name of the company used to recruit participants, participants themselves and the names of schools have not been divulged at any point in time during the write up of the study. They will also not be identified in presentations or publications of this research. The creation of pseudonyms for all parties involved (company, schools and participants) further ensures confidentiality of those involved in this research.

3.9 Limitations

Whilst purposive, nonprobability sampling was used throughout the investigation (allowing for rich and authentic data to be obtained), the small and homogenous make-up of the sample (young females) will largely limit the extent to which the researcher's findings may be generalised to other South African learning facilitators of different ages, gender, race and culture (Roberts, 2007).

Additionally, there is also the potential for research bias as the researcher is familiar with some of the schools/context in which the facilitators' work. This could exert an influence on the direction the research could take, as well as the collection and analysis of the data (Roberts, 2007). In the attempt to minimise research bias, the researcher very carefully recorded and analysed all data, valuing the importance of consistently practicing the process of reflexivity throughout. Furthermore, throughout the study frequent consultation with the researcher's supervisor further reduced the potential for research bias to take place.

3.10 Summary

This chapter gives a synopsis of the study's research question, the theoretical mode of inquiry, the way in which the research was carried out, as well as the way in which data was collected and analysed. In addition to this, the chapter addresses the limitations of the study with regards to the research design and data collection, however also argues as to why certain methods were used and considered appropriate for the study in question. All ethical considerations were accounted for and the role of the researcher was explored.

The study's results are addressed in the following chapter.

Chapter 4

Results

4.1 Introduction

The intentions of this chapter are to provide relevant background information pertaining to the six participants of the study. Results from the semi-structured interviews have then been assimilated into themes via the process of thematic analysis. Direct quotes from the participants have been provided in order to accurately represent the participants' perceptions and realities of facilitating in a mainstream schooling environment.

4.2 Description of research participants

All participants involved in this study were female and were given pseudonyms to uphold confidentiality. Six learning facilitators in total volunteered to participate in semi-structured interviews. Two of the six facilitators had experience working in the same school, the four others facilitated at different mainstream schools. In order to volunteer, it was stipulated that the participants must have at least one year's worth of experience as a facilitator. This requirement ensured that participants were suitably acquainted with the role of facilitation in mainstream schools. This set inclusion criterion further increased the validity of the study.

The length of the participants' mainstream school facilitation experience ranged from one to five years. Two of the six facilitators were employed to work solely with one child, and worked directly for the children's' parents. The other four were employed by a company that specialises in behavioural therapy (Applied Behavioural Analysis) for ASD children. These four facilitators work or have worked with multiple clients and therefore do not necessarily go to school with one particular child every day of the school week. The child would often have more than one learning facilitator that attends school with them, during different days and times in the week. The above has been tabulated on the following page.

Table 4.1
Description of participants

Participant	Age Range	Years of experience working with a child with ASD	Relevant Qualification/s	Number of mainstream schools experienced	Number of school children participant has facilitated	Type of school
Participant A	20-30	2	B.ED degree, with an elective inclusive education module	1	1	Private. Co-educational Primary School
Participant B	20-30	5	B.A Honours in psychology, PGCE	1	1	Independent Secular, Co-educational Pre-Primary School
Participant C	20-30	3	B.ED degree, ABA trained instructor, Supervisor for ASD company	6	5	Private, Secular, Government
Participant D	20-30	1	B.A Honours in Psychology, ABA trained facilitator	2	2	Private and Secular co-educational primary schools
Participant E	20-30	2	B.A Honours in Psychology, ABA trained facilitator	1	1	Government Primary School
Participant F	20-30	1	ABA trained facilitator	1	1	Independent Secular, Co-educational Pre-Primary School

4.3 Background information of the research participants

Participant A worked with one child for two years as an “untrained learning facilitator”. She worked directly for the child’s parents but occasionally helped the classroom teacher with the other children if need be, as she had a B. ED foundation phase degree. Facilitating the child came to an end in Grade four, as facilitation at the school was discouraged as children got older. Facilitation in the school was not allowed all together after grade 6. Subsequently the child was then home schooled after completing grade four.

Participant B is also an “untrained learning facilitator” but has five years’ experience working with an ASD child. She too worked directly for the child’s parents. Facilitation was concluded when the child finished Grade R. Following this, the child started home schooling. It proved highly beneficial having Participant B take part in the study as not only was she a learning facilitator, but currently is a teacher who has experienced working alongside an ASD learning facilitator in her classroom. As a result of this she was able to provide a full account of what it was like to be both a learning facilitator, as well a teacher who worked with a learning facilitator whilst she was in a teaching position.

Participant C is a trained behavioural (ABA) instructor and is a supervisor for a company that works with ASD children for therapeutic and school facilitation purposes. Participant C is highly trained, receiving training both here and in the United States. Apart from accumulating a great deal of knowledge with reference to ASD over the years, she has also had many experiences of facilitating children in different mainstream schools (six schools in total). These schools have been both public and independent. It therefore proved to be of great use when comparing the different mainstream schooling environments for children with ASD.

Participant D is a learning facilitator who also works for this company that specialises in school facilitation and ABA therapy for children with ASD. She has worked for the company for a year and has recently extended her contract as she thoroughly enjoys her role as learning facilitator. Participant D has had experience in facilitating in two mainstream schools and provided detailed and informative information during her interview.

Participant E is a former learning facilitator and was positioned at a public school where she spent a year facilitating a client until it was decided that child no longer needed school facilitation to as he had adapted adequately to his inclusive schooling environment. Working with Participant E allowed the researcher to listen to an account of working in a public school setting, as opposed to the learning facilitators who primarily work in private or secular schools.

Participant F has just finished her first year as a mainstream learning facilitator for an ASD child. She too has been trained to facilitate children with ASD and provides therapy using ABA as a form of intervention.

4.4 Themes and subthemes produced

Transcripts were coded for themes that related to the research question. Themes constructed were looked at in terms of similarities and differences found between participants and whether certain patterns emerged that contributed to the total experience of facilitating a child with ASD in a mainstream school setting. Themes and subthemes found have been tabulated on the following page.

Table 4.2

Themes and subthemes produced

Themes	Description of theme	Subthemes
1. Role of the facilitator	Experienced and perceived role of the facilitator detailing the skills that were built within the child, techniques used to facilitate, the interpersonal relationships that exist in the inclusive environment and the experiences of collaborating with other professionals.	<ul style="list-style-type: none"> - Skills (build or modify in the child) <ul style="list-style-type: none"> - Academic - Behavioural - Techniques <ul style="list-style-type: none"> - Operant Conditioning - Additional tuition/therapy - Use of prompts - Visual Cues - Peer modelling - Interpersonal relationships <ul style="list-style-type: none"> - Teachers - Parents - Client - Other children - Multidisciplinary team
2. Role of teacher	Experienced and perceived role of the teacher detailing the overall management and responsibility that they have for both ASD class members and the child's neuro-typical peers. Further insight is given regarding the blurred lines that exist in job description and duties found between a facilitator and class teacher.	<ul style="list-style-type: none"> - Responsibility for learning and classroom management - Abdication of responsibility
3. Training	How the facilitator has experienced and perceived the training of teachers and facilitators and whether the individual needs of the client have been met.	<ul style="list-style-type: none"> - Perceptions of teacher training - Experiences of facilitator training
4. Views on the inclusive classroom	The participants' overall views on inclusive education within a South African context, as outlined by policy. The also reflect on qualities and skillset that is needed in order to successfully facilitate in a mainstream schooling environment.	<ul style="list-style-type: none"> - Practicalities of legislation - Qualities and traits needed

4.4.1 Theme One: The role of the facilitator

The role of a facilitator is multi-faceted. An international understanding of what the role entails includes: Being able to keep the learner motivated and focused on academic tasks, to help reduce academic or social anxieties or problems that are being experienced, to provide modifications to an environment when necessary, to help the learner interact and work productively with other learners and to reduce behavioural problems (this being key for facilitating a learner with ASD) (Robertson, Chamberlain, & Kasari, 2003; Bergstedt 2015). Research participants in this research study either reiterated or expanded on these duties and described building or modifying skills within the child with ASD, utilizing various techniques within the classroom, and forming interpersonal relationships with those relevant to the autistic child's inclusion in a mainstream schooling environment.

4.4.1.1 Skills

The focal point of learning facilitation for ASD children is to instil skills that will equip the child to perform both socially and academically in a mainstream classroom, specifically to the level of their neuro-typical peers. This is done whilst slowly decreasing the dependency of a facilitator and promoting autonomy within the child. Building and modifying academic and behavioural/social skills within the child were deemed to be instrumental in optimising the likelihood of success in this inclusive setting.

a. Academic skills

When interviewing the participants, skills that were built and modified in order to enhance academic performance and independency in classroom included; improving the ability to listen to instruction and to listen to what is being taught, enhancing concentration skills and equipping the child with the confidence and capacity to ask others, specifically their class teacher for help in an appropriate manner.

Participant A describes how assisting the child with his listening skills worked hand in hand with improving his ability to concentrate on classroom tasks:

I would assist him in his listening skills. Like he could get distracted very easily because he is not only autistic but ADHD. So um he would listen but then a few seconds later he would be... his mind is like somewhere else. So my role was basically bringing him back to the classroom as such and helping him to concentrate more. He was also on Ritalin but I was helping him to concentrate more on his work...

Participant D explains how educating the child as to why certain rules or skills were to the child's benefit:

If the kid is not listening to the teacher, I would... I'd actually explain to the kid, like "why you have to listen", and "why you have to do this".

The ability to listen to an instruction as well as listen to what was being taught was a skill that Participant E deemed necessary in promoting academic improvement:

Well he has to listen to her (the teacher) whether she is giving him instructions or they doing work...

Lastly, increasing the appropriate interaction with the teacher is a skill that all facilitator's worked on when the child in question needed help regarding academic help. Participants noted that often the child they were facilitating would not like to ask for help or did not know how to do so in an appropriate manner. This would often hinder the child's academic performance, therefore it was a skill that needed to be improved upon, as Participant E remarks:

He was not inclined to go up to the teacher and ask questions if he didn't know something, so he was just leaving it and they were moving on when he wasn't understanding anything, so it just got worse (his academic performance).

b. Behavioural Skills

One of the toughest challenges that the facilitators' faced was to instil socially appropriate skills within the child. ASD children tend to exhibit behavioural problems due to their lack of social awareness and their deficits in social communication. These impairments are accompanied with abnormalities in fixated interests and repetitive behaviours, as outlined by the DSM-5 (APA, 2013). Characteristics of such a behaviour could include being overly dependent on routines, intensely focused on inappropriate items or being highly sensitive to changes in an environment. As these children are highly sensitive to change in an environment and sometimes experience a sensory "overload", the facilitator has to be able to curb behavioural problems and build socially appropriate skills whilst also being empathetic and understanding to the child's experience of a situation, which may prove to be overwhelming to them at times.

Participant F describes how the learning environment can be difficult for her client and behaviours arise out of his difficulties of being in an inclusive environment. Whilst she would attempt to remedy the situation by calming him down, she would also use it as an opportunity to improve upon his behavioural skills, explaining that he could not act in an inappropriate manner:

He just gets very stiff and frustrated so... lots of screaming, so it just depends on the situation as well. Like if he is grabbing another kid, roughing him up and like pulling them, I tell him you know, "you can't do that, it's not normal, you can't pull other people. Would you like it if he did that to you?", so I would try get him to understand that if he doesn't want people pulling him, then he can't pull somebody. Sometimes he doesn't listen, when he is crying, he is in a state and he runs around. I take him outside and calm him down outside.

A way in which ASD children self-soothe/reduce anxiety, express excitement and regulate their emotions is through the process of self-stimulation (stimming). Although it can be a self-soothing mechanism used to cope with a situation, it can often be viewed as socially

inappropriate and at times disruptive to the rest of the class. In these situations, the facilitator needs to remove the child from the immediate environment that is affecting the child as well as the other children or find a way to reduce the inappropriate stimming.

*Participant D: sometimes we do see stimming, certain things like tapping the table or constantly wanting to babble or verbally stimming or... so in that situation I would step in and ask the kid to stop or if they continue we are going to go outside...sometimes it would make a very big disturbance. Like in the situation when the kid at *school name*, um his bubbling stimms are very loud, so it's mostly like dinosaur noises or whistling and uh car noises as well, so it all causes a very big disruption...*

Participant C also voices how it is her role to teach socially appropriate skills whilst also reducing the behaviours that may disrupt or affect the other learners:

Some of them (the children) find it difficult at first, especially if it is the first time they are with other children. They don't know how to interact with other children and don't know how to take certain things that other children do. For example, if the child takes a toy from them, they don't know how to deal with that or if they have to share. They don't know how to deal with those actions, so some find it difficult but a facilitator is there to help them to deal with it, how to learn from it so after time the children are fine once they know what to do in the situation and how to interact socially, but some find it difficult at first when they have no idea. They just focus on themselves they don't see from other children's perspective.

The facilitator is there definitely to stop the child having any inappropriate behaviours in the classroom and disrupting the other learners who are learning.

We have to correct his behaviour in order for him to manage school better and function better with other kids.

4.4.1.2 Techniques

a. Operant Conditioning

Various techniques were described by the participants which aided them in successfully facilitating an ASD child in a mainstream school setting. Operant conditioning or the use of positive reinforcements appeared to be the most popular and greatest way to achieve encouraging results from their clients. The use of Applied Behavioural Analysis (ABA) proved to be the most successful form of intervention for four of the six participants, as they believed this was the best way to receive compliance from their clients:

Participant C: ABA therapy is the way to go because it is the only proven therapy out there and from what I have seen from what other institutions do with the children on the spectrum you don't see the same results. Like we see results, we see our children progress from one grade to the next and we continue to work on it and we see that our methods do work, so I would say that ABA therapy is the way to go and it does make a difference, it does help the children to progress.

Participant F: Some of the behaviours he has in class, can be dealt with one on one, so we can coach him into... "When we talk to you, you don't walk away" or he can't run around and make sure that he understands that. So when he goes into the classroom, he knows that there is a certain limit. He can't run because we have reinforced it or told him. He will understand that.

b. Additional tuition/therapy

The facilitators who used an ABA format for therapy unanimously agreed that therapy after school allows for rapport to be established between the child and facilitator. This in turn allows for a greater level of co-operation which is a fundamental factor in preventing or stopping adverse and inappropriate behaviour:

Participant F: One on one (after school ABA therapy) is very important. You can't have one on one if don't have compliance. If you don't see him one on one... so he had holidays, or when he started with us. He had one on one the whole

holiday. So he got a chance to know who he was working with and we got a chance to gain compliance from him so that he knows that we are there. He knows who we are, he knows what we are about so going into the classroom was much easier then because he knew us.

Participant C: I find that when I am there, the client performs better. They know they have to listen and because we have that extra one on one therapy as well you know so they know what is wanted from them, they know what is expected when I am around and so when I am in the classroom they do tend to have less behaviours. They know that if I am there I am watching them, they need to comply and do certain things like perform in social activities with the other children and not just sit in the corner and do nothing. They have to do their work properly because they know that is what I expect of them you know.

The reinforcement of concepts that the child battled with was also a common learning strategy used by facilitators when they saw them after school for one on one therapy or tuition:

Participant D: It (school work) needs to be reinforced because we gain more compliance that way, you know in our one-on-one sessions. Because in a school environment, they're actually more free, they have more freedom, and in a one-on-one environment, they know it's like, well, you know its work time, you got to work. Whereas in school, if the lesson's over, and you're trying to explain something to the kid...the lesson is over now, so it means stop it and you won't be able to come back to it until like the next time you do the lesson. And then you have the same problem because it wasn't reinforced, like later on in the day.

4.4.1.3 Use of prompts

Using various prompting techniques is important in facilitating the inclusion of students with ASD, as these learners may not respond to traditional instructions delivered in general educational settings (Harrower & Dunlap, 2001). Participants frequently spoke about how

prompting was an effective strategy within the classroom and was also a way in which the facilitator was able to reduce the level of dependency placed on them from the client:

Participant B: she got to a point of stringing these sentences together, but obviously with lots and lots of prompting and lots of hard work.

Participant F: I don't always help him with his work, if he knows what he is doing... but if he doesn't, I will prompt him to ask her (the teacher) if he needs to know something that he forgot... His listening is getting better as you prompt him to ask the teacher "what do I do?" or to listen when she is giving an instruction.

4.4.1.4 Visual Cues

Three of the participants interviewed believed visual cues to be most beneficial when teaching their clients. Processing auditory instructions was thought to be difficult for a child with ASD, therefore one way of coping with this was to get the child to repeat the instruction set out by the teacher back to the facilitator.

Participant D: Also having more visual lessons/aids because sometimes explaining something to a kid, our kid would be a bit difficult to figure out but with a visual aid you are able to see A and B equal C . She can see that, it helps her a lot more. Obviously explaining it, we obviously do that. We explain certain things and yeah, I think more visual aids.

Participant A: Uh it is a lot more difficult and you have to prepare them a lot more because they don't deal with change easily. So when they go through change, we have to prepare a picture book and say this is what is going to happen. Visually seeing something helped him.

4.4.1.5 Peer modelling

The facilitators interviewed often encouraged and experienced modelling as a technique in which their client could effectively learn or adapt to a certain environment. Modelling from their peers helps their clients to act in an acceptable manner, and is a process that allows the child to complete work that they have been given, as Participant D explains:

“If they have to colour something in a certain colour, he wouldn’t necessarily listen to the teacher first, he normally just looks around to see what the other kids are doing and then he does it himself. So he’s...as a small class, he gets his individual attention from the teacher as well but um...he also thrives when the children help him, so it’s a very helpful environment where he has visual cues or kids helping him or telling him what he should do.”

Participant C describes how the technique of modelling other children, whom are placed in a mainstream school, is more beneficial to their client as they are forced to behave and perform to a higher standard:

“Our clients in particular... they need mainstream schools more than a special needs school because in a mainstream school they learn from the other children and so they learn what behaviours, academics and social skills... um... the other children have. So it’s actually better that they are in an inclusive environment in a mainstream school where they learn from other children. They are not just separated from others.”

4.4.1.6 Interpersonal relationships

Given the nature of facilitating a child within a school, a facilitator experiences many interpersonal relationships. Not only is the facilitator communicating and collaborating with the child, but is also in communication and is forming relationships with the child’s teachers, the child’s neuro-typical peers, the child’s parent’s as well as other therapists whom may form part of a multidisciplinary team for the child.

a. Teachers

When interviewing the research participants, it appeared that those whom received support from the teachers and the school they worked at, enjoyed their time facilitating and saw greater academic and social progress for the child they were employed to work with:

Participant C: Mostly I have had good experiences, um there was one school I was at for the longest time. A year or a half or so and they were very accommodating and welcoming and um, they were a private school so they let the child come. But they were very welcoming towards the facilitators. They were happy that the child was taken care of though. I enjoyed working there.

Participant A: But the relationship with the teacher I would say was a good relationship because we worked together instead of working apart or me just being you know.... for the child. Although, yes, I was there for the child, um I shared knowledge with the teacher and she shared her knowledge with me so it was more like sharing and communicating with each other.

In some instances, facilitators experienced times where they did not feel that a constructive nor positive relationship was formed with the educators at the school. This in turn had implications on how the child progressed in the classroom:

Participant E: Most of his lessons were with one teacher and then only for one or two other subjects did he change teachers and some of the teachers were a lot more understanding and worked a lot better with him but that wasn't the case for his teacher.

Participant F describes how there appeared to be a barrier to forming a good relationship with schools and educators as the school would have concerns pertaining to the enrolment of a child with ASD:

One of the schools is not as welcoming as the school that I am at. So, there is a gap. Some schools are going to accept it and be ok because they want the child

to thrive and others won't because they are worried about their reputation or are worried about what the other kids are going to think, or what the other parents are going to think.

b. Parents

The relationship between the learning facilitator and the client's parents is an important one. The facilitator is essentially employed by the parents and often is the messenger between the parent and teacher. Feedback to the child's parents occurs on a daily basis by the facilitators:

*Participant D: The kid at *School's name* relies heavily on us to provide information, because a lot of information is left untold. So if the teacher said at the end of the day "take this information and tell it to your parents". Like with our kids, when they don't pay attention, they struggle to remember certain things, so the message wouldn't get to the parents. So what we do at the end of the day is we write a note with all the important information. So the parents rely on us for this and um, for like a lot of things, like upcoming school work, the parents will ask us to ask the teacher. We would normally do that as well...*

Unfortunately, sometimes the feedback given to parents is not always positive and when there are concern's regarding academic work, some facilitators felt that questions and answers that should be directed towards the school or teachers, was often directed at the facilitator, as Participant F explains:

I think we were being spoken more to about school related things than the teacher was. Blamed for certain school related things that weren't really part of our job description. If anything went wrong, we always had to speak to the teacher or the principle. It was never a case of the parent dealing with the teacher, we were always involved and that wasn't really fair.

c. *Client*

There appeared to be mixed experiences with regards to how the client reacted to having a learning facilitator. Participants commented that often the child would ignore their presence in the classroom but in some instances would appear to be jealous if attention was given to another child:

Participant B: At times she got very annoyed with me (laughs) you know what I think, with being with her for five years, she almost became too comfortable with me.... other times she just kind of pretended that I wasn't there and it was fine.

Participant A: In the beginning when we first did it. He was like jealous because he was like "hey, that's my helper! My helper is going to someone else!" you know but after that ja... like after maybe a few weeks he was absolutely fine.

Participant E commented that because her client was older, at times he appeared to feel self-conscious in having to have a learning facilitator monitor him at school. Whilst he would address the facilitator when he needed help, he still felt uncomfortable with having a facilitator present in the class most of the time:

I think he was generally quite self-conscious of it, especially being a boy and me being female, it made him feel uncomfortable about it with his friends, made him feel self-conscious but in a way as well he might have felt a sense of security with us being there as well as he had someone to talk to, someone to help but it was more in the class that I don't think he really liked it but then at break time he liked to come up to us whenever he had a problem or issue. He knew that we were always there so...

As dealing with behavioural issues was often a daily occurrence for the facilitators creating and maintaining compliance with the child was important. Compliance was achieved via operant conditioning (controlling the antecedent prior to the behaviour and controlling the consequence of such behaviour). Rewards and praise were often used to reinforce good or

socially acceptable behaviour, whilst bad or inappropriate behaviour would be eliminated or reduced by introducing 'consequences. All of the facilitators described how boundaries would be set within the client-facilitator relationship and how a "firm but fair" approach to the relationship was needed.

Participant C: Hold them to the same standard and follow through but they need to have boundaries in the class and know that our children, or the children with ASD, they need boundaries. They need to know, like the behaviour needs to be kept in check just like all the other children. They can't be made exceptions.

Participant F: The facilitator who was with him previously, she would let him... if he did not want to work she would let him go out and run around and play or whatever. He wouldn't sit and do his work. He doesn't like drawing on the screen, so with me on my first day with him and computers, he said "I don't want to do my work". So then I said that you have to do your work. There wasn't as much behaviour as I was expecting but there was that initial (makes noises sounding of moaning/whining). So he was used to thinking that he could do whatever he wanted.

d. Other children

When asked to comment on the interaction between an ASD child and his or her classroom peers, both negative and positive reviews were given. It appeared that the younger children were less aware of a child having a disorder and were kinder in the situation as opposed to older children:

Participant B: I think that because they were at that level so young and so oblivious to things like that, it didn't really bother them then. Obviously as we moved up, as the children moved up they were realising that this girl is a little bit different and some would just sort of get annoyed and not bother with her, not be ugly to her but just wouldn't bother to interact or involve her.

Participant F on the other hand describes how peers were willing to include and help her client in the classroom:

The other kids don't know that there is something wrong with him... wouldn't say that there is something wrong with him, but know that he's not normal, typical. He doesn't do things the way they would do it, he doesn't talk the way they talk. So they know that... they are prepared for his behaviour and they are prepared to help him with his work.

It was not unusual for the facilitators to be mistaken as teachers by the other school children. Overall it did not seem to create too much of a disturbance with the facilitator in the classroom as the children would soon lose interest with another adult being present:

Participant E: With regards to me being there I think it was quite confusing for them because they didn't realise that I was there for one person, so a lot of them were coming up to me and asking me questions so a lot of them thought I was there for the whole class, which obviously had to be explained to them and once they had understood that they sort of left me alone. They didn't seem that distracted by me being there. Eventually they just kind of ignored me.

Participant B: The children as well, would see me as one of the teachers.

e. Multidisciplinary team

ASD children often have different professionals whom work within a multidisciplinary team to enhance the child's well-being. Due to social communication problems associated with the disorder, it is not uncommon for a child with ASD to go to Speech Therapy, Occupational therapy as well as receive other various forms of treatment. It is therefore important that facilitators whom work with the child are able to communicate efficiently with other practitioners so that an all rounded understanding of how the child is progressing is made apparent to all whom work with him:

Participant A: We would have a remedial teacher come in once a week and would see him for half an hour or an hour and the rest of the time I was with him. I wasn't allowed to go into the remedial with him, so I was told what he did and I could see what he did. She gave me the report afterwards.

As three of the facilitators were employed by a company that provided facilitation services, they were required to work together with other facilitators both in overlapping behavioural therapy sessions once a week and would also co-facilitate a child at a school. These company requirements necessitate good communication and teamwork among the facilitators that worked with each child:

Participant E: Well I think having more than one person is good, they don't get too used to one person, they don't get too dependent on one person, a specific person because if they left it would really have an impact on them. So if there is a few people and he can get used to having a change of routine and then he won't just be set on the one person and he gets also different styles, styles of instructions although we all had the same aims.

Participant D: I think we have a very good relationship. We are both on the same level, we both on the same page in relation to the kid. So we always discuss what the kid needs and what problems he is facing so I can take that information and hand it to the other therapists that work with him one on one. So we deal with it in one on one and we will see what we can change at school.

4.4.2 Theme Two: Role of the Teacher

Diversity and inclusivity is a reality in today's mainstream schooling system. It is therefore important to note the role of a teacher in this environment and what their duties are in an inclusive environment. "For the teacher, the move from the acknowledgement of diversity in the classroom to the positive management of singularities requires a paradigmatic change. He or she has to adopt a model centred on the search for diversity which is no longer a problem to be overcome, but an opportunity to be seized" (Thomazet, 2009, p.

558). When discussing the role of the teacher, participants discussed their understanding of the teacher's role in the classroom and how they feel that the teacher is ultimately responsible for the child's academic needs. Unfortunately, at times, the facilitators believed that the roles of both the facilitator and teacher would become blurred in the diverse classroom. This in turn resulted in the abdication of responsibility and hindered pragmatic change.

4.4.2.1 Responsibility for learning and classroom management

Ultimately, all participants believed the teacher held overall responsibility for the child and the other children's educational needs. Whilst the facilitator is there to correct adverse behaviour and provide further one on one attention when necessary, it was the teacher's duty to teach concepts to all the children and to intervene when possible:

Participant B: If it was a teacher directed activity, if you know she was having a lesson and I was sitting next to her observing, and the child acted inappropriately, she would discipline her like any other child but if it got to a point where it was affecting the teaching, I would step in and take her outside. It depends on the situation.

Participant F: Well he has to listen to her whether she is giving him instructions or they doing work or.... Some of the behaviours that he has, I don't necessarily have to intervene, she does sometimes correct him so... I don't always help him with his work, if he knows what he is doing but if he doesn't, I will prompt him to ask her if he needs to know something that he forgot.

4.4.2.2 Abdication of responsibility

Parents employ facilitators at their own expense as additional one-on-one classroom assistance is not made available by the state. As the facilitators are employed by the parents and not the school, some facilitators noted that they were only to interact with their client and not assist the class teacher. Unfortunately, some of the facilitators interviewed felt that their role and job description provided to the school was not always made clear. In these

circumstances they believed that their and the teacher's role in a situation became blurred and sometimes crossed a fine line, as indicated by two participants:

Participant E: the whole role was sort of abused. I think the teacher thought that by me being there, he could completely ignore the child and not have to be involved with him at all as he had me there, he didn't really need to do anything with him which was wrong in a sense because eventually what started happening was that the child would stop listening to the teacher because he was never really involved with him so, that's what eventually happened.....it was more like being a teacher's assistant for one person rather than just dealing with behaviour which is what we were there for. We were actually teaching as well.

Participant C: The teacher forgets that, um the facilitator is only there to stop behaviours from disrupting the class or that they are there to help the child socialise appropriately, they sort of forget that they are the teacher and that child is their child to teach you know. So I do find that they expect the facilitator to deal with most of the things because it is just easier that way.

4.4.3 Theme Three: Training

It has been thought that successful implementation of an inclusive programme is dependent on the attitudes on those who work closely with the learners involved. Such attitudes are influenced by the experiences and knowledge of the disabled (Burke, 2004). Training was believed to be a necessity for the majority of the facilitators interviewed in this study, both for themselves as well as the classroom educators.

4.4.3.1 Perceptions of teachers' training

Whilst discussing the level of training and experience that the teachers' have when it comes to teaching a child with special needs, specifically ASD, the majority of the learning facilitators were of the opinion that the teachers in the mainstream schools had little to no training. In the event where the teacher provided insight into the disorder, it was due to the facilitator's presence and input in the classroom. The lack of training perceived by the

facilitators was believed to have an impact on the child's academic performance and also emphasised the need for a facilitator in a mainstream classroom:

Participant C: None of the teachers I had in the classroom, none of them had any training. I mean the education degrees, you have a small module but you don't really learn about autism spectrum disorders and stuff like that. They don't have any sort of training, they just sort of learn from you I suppose and the child in the classroom.

Participant E: There didn't seem like there was any training whatsoever.

Participant A: Ok, they have an education for teaching but they are not equipped for working with children like this. They need the knowledge, something definitely needs to be put in place, especially South Africa.

4.4.3.2 Experiences of facilitator training

Five of the six facilitators believed some sort of training was necessary in order to control adverse behaviour and optimise learning and socialisation with others. Four of whom specifically referred to Applied Behavioural Analysis (ABA) as a form of intervention as described by Participant C:

I think training is definitely required. I don't think that anyone can just go in and do it. You won't get the same results... I would say ABA therapy is the way to go because it is the only proven therapy out there and from what I have seen from what other institutions do with the children on the spectrum, you don't see the same results. Like we see results, we see our children progress from one grade to the next and we continue to work on it and we see that our methods do work, so I would say that ABA therapy is the way to go and it does make a difference, it does help the children to progress.

Although Participant A did not receive ABA training, she also articulated the need for training when facilitating in a mainstream schooling environment:

*I don't think that just anyone can facilitate. I definitely think that some training is required or at least studying inclusive education in a school environment through UNISA or something like that, to go to *person* or *person* or both because even I did both with them, just to further my knowledge because not every child is the same.... It takes a special person to want to follow in that career path, so they should definitely further their studies before choosing, facilitating...*

The one participant who did not view training as an essential in facilitating an ASD child believed that one could learn how to work with the child through trial and error:

Participant B: I think that it takes a certain type of person, I had no training what so ever. Gosh, everything I learnt, I learnt from her..... We found that if something didn't work, we changed it for the next activity. I think that's what you have to do, with these kinds of children.

4.4.4 Theme Four: Views on the inclusive classroom

Research has inferred that educators' attitudes can have an adverse effect on disabled children and therefore can prevent an inclusive programme from thriving (Burke, 2014). In keeping with this theme, participants believed that a person's attitude, personal traits and qualities are precursors to how effectively a child with ASD can be included in an inclusive classroom. In addition to personal qualities needed for successful inclusion, the participants believed that South Africa's current legislation, and the correct and consisted implementation of it will determine the efficacy of inclusivity in the classroom.

4.4.4.1 Practicalities of legislation

Whilst reflecting on the practicalities of inclusive education within a South African context, all participants interviewed believed that this has not been fully implemented and that there

is still a long way to go in terms of creating equal opportunity and providing resources for those with special needs in a mainstream school setting:

Participant C: Well at this point I think it is pretty slow so my hope would be that it would, white paper six, would be properly implemented so that you know there is diversity in the classroom but I think that um. I think that it is pretty slow still at this point because no one is really that interested in it. Everything is great the way it is right now and I think there is still quite a bit of work involved towards getting a true, you know inclusive environment in a mainstream school.

Participant A: I think all schools should start including everyone but the main problem is where there is hardly any education, well there is education but the staff are not necessarily educated on the problems with the children. I think the government needs to put in place courses.... mostly inclusive education is very important, at the end of the day, more and more children are being born with these disorders.

4.4.4.2 Qualities and Traits

In the discussion of the qualities and traits needed to successfully facilitate an ASD child, participants have commented that it takes a certain type of person to facilitate an ASD child whom learns in an inclusive environment. Patience, good communication skills, a “firm but fair attitude”, and a passion for the job were deemed the most important qualities needed for the job:

Participant A: Communication skills definitely, you can't do things without communication. They need to be very understanding, very um I wouldn't say laid back but they need to understand that this child is slower than the rest of the class so they need to do things slightly slower, not just rush through things unless they have that facilitator in the classroom.

Participant E: I think you need to have a certain kind of nature to do it. Very patient. You are actually going to be dealing with a lot of different things.

Participant B described her experience as her role as rather a teacher, and having a facilitator in her classroom:

I just didn't think that it was for her. I don't think she was one hundred percent invested in him, in her job with him and what she was meant to do with him..... The parents weren't happy with her. Then another girl came in and it was very brief and then he left the school.

4.5 Summary

This chapter presents a summary of the study findings. The amalgamation of the results have highlighted patterns that emerged through the process of thematic analysis. Recurring themes that were produced by the participants included; an understanding of the role of the facilitator and teacher, techniques that were used in successful school facilitation, the perceptions of training for both facilitators and teachers, as well as their overall view of the inclusive classroom with regards to children with ASD. These integrated themes will be expanded upon in chapter four and will be compared to existing literature relevant to the study conducted.

Chapter 5

Discussion

5.1 Introduction

In this chapter the research findings will be discussed in relation to the literature presented in chapter two. The research questions and objectives of the study will be addressed, thereby demonstrating a more in-depth understanding of ASD in inclusive settings as the experiences of learning facilitators in mainstream schools are discussed.

5.2 Learning facilitators' experiences of facilitating

The first question this research aimed to answer was: What are learning facilitators' experiences of facilitating in mainstream schools?

Participants interviewed in this research study described the experience as both enjoyable and rewarding, particularly when they received support and were able to establish rapport with the client, the client's parents, teachers, members of a multi-disciplinary team and the relevant school/s they facilitated at.

The role of a facilitator, as outlined by Robertson et al. (2003), is to reduce behavioural problems, help the learner focus on tasks at hand, to socialise and cooperate with others, and to provide modifications to the environment if needed. This description tallied with the reports of the participants in this study. The participants believed that their role within the mainstream classroom consisted of building and modifying skills (both academic and behavioural) within the child, incorporating the use of different techniques to help the client focus on tasks at hand, and to encourage social interaction with peers. In addition to this, the participants detailed that forming and maintaining interpersonal relationships with the child, and those who work with and parent the child, are a necessity in successfully fulfilling their role as a facilitator to ASD children in an inclusive environment.

Paraprofessionals often feel that they play an important role in being the "connectors among and between students, parents, teachers and community service providers" (Giangreco, Suter, & Doyle, 2010, p.46). The theme of collaborative and interpersonal

relationships among paraprofessionals and other educational team members is apparent in most international research that examines the role and experiences of paraprofessionals in mainstream school settings (Giangreco et al., 2010). These findings mirror the experiences shared by the research participants, as interpersonal relationships formed proved to be factors that either helped or hindered a learning facilitator's ability to effectively help their client in a mainstream school setting.

5.2.1 Experiences of working with parents

When discussing the participants' experiences in working with the client's parents they often described their relationship with parents to be a very important one. It has been thought that parent involvement is critical in terms of supporting learners with ASD, as they are considered to be expert of their child's life and therefore the implementation of a successful intervention depends on their support (MacIntosh, 2013). It became apparent that the facilitators interviewed kept in close communication with the parents and usually provided them with daily feedback regarding their work with the child. It was also found that communication and feedback between the parents and the school occurred through the facilitator. Chopra et al.'s (2004) article on *The paraprofessional role of connector* explains that the paraprofessional will often take the role of the connector or contact person for the parents because they are visible and more accessible than other school personnel, this was the case for the participants in this study. The article goes on to explain the experience of one paraprofessional: "And many times they [parents] come to us instead of going to the principal . . . they [the teachers] ask me to speak to them or make phone calls for the nurse or whoever [sic]." (p. 225). Whilst in this instance, the paraprofessional did not seem to mind being the messenger between different parties, it was found that the participants of this study did not always agree with these methods of communication as they were then asked to answer questions or resolve issues that were not appropriate to their specific role within the system.

5.2.2 Experiences of working within a multidisciplinary team

Typically, multidisciplinary teams consist of medical, educational, health and social care professionals (Dillenburger et al., 2014). Throughout literature pertaining to learning support, there is an emphasis on promoting effective teamwork (Cremin, Thomas, & Vincett, 2003). Participants interviewed commented that during their employment with their client, they interacted or worked alongside other professionals such as speech therapists, occupational therapists, psychologists and other facilitators trained in ABA (e.g. worked within an interdisciplinary team).

Multidisciplinary teams usually share a common goal to improve the quality of life for an individual and their families. Having input from different disciplines allows for a wealth of knowledge and a comprehensive understanding of issues at play (Dillenburger et al., 2014.). Whilst working in a multi-disciplinary team can prove to be insightful, research has suggested that working as part of a multi-disciplinary team can in some cases cause tensions, as people from different disciplines do not always have a shared understanding of what the specific problem/problems are and what the correct course of action should be (MacIntosh, 2013). Given these findings, it is understandable as to why some of the facilitators interviewed enjoyed and benefitted from working with colleagues who shared a similar understanding of the situation and who aspired to work towards similar goals set out for their shared client. It was found that collaborative teamwork helped the facilitators' abilities to support their clients' effectively and constructively in a mainstream school setting.

5.2.3 Experiences of working with a client in an inclusive environment

Bauminger and Kasari (2000) found that children and pre-adolescents with high functioning ASD reported greater loneliness and less satisfaction with their friendships as compared with their neuro-typical peers. This suggests that children with high-functioning ASD appear to be aware of their social situations and may crave social engagement with others, however they lack the skill and opportunity to do so (Locke et.al, 2010). Impairments in the ability to socialise will exacerbate negative feelings. It is therefore crucial that a child with ASD has a strong emotional support system and is something that a learning facilitator

needs to be prepared to provide. Facilitators would therefore often become this support system for the child and the child would take comfort in having a person there that would help them in a neuro-typical environment that may make them feel uncomfortable. As children with high functioning ASD are often very aware of their social skills deficits (Macintosh & Dussanayake, 2006), they may feel that having a facilitator makes them stand out even more, so it was common for the study participants to have their clients ignore their presence at times. The facilitators however felt that their presence, even if ignored, provided guidance and support to their client. Bergstedt (2015) further reiterates this and describes how “the role of the learner facilitator encompasses being empathetic and supplying comfort and reassurance to the learner with disabilities” and that the “learning facilitator serves as a buffer for the learner with disabilities, providing protection against potential risks and difficult situations” (p. 71).

5.2.4 Experiences and observations of neuro-typical children’s interactions with an ASD child

When describing social relationships formed between an included ASD child and his or her neuro-typical peers, participants provided both positive and negative feedback. Many found that the smaller children were more easily accepted, those who facilitated older children found that their client struggled more with interaction and creating bonds with peers. Other authors have also reported that children at a kindergarten level are more accepting of children with differences than older elementary school pupils (Kasari et al., 2011).

Whilst social interaction for children has been shown to be more challenging for ASD learners when they get older (senior primary and high school learners), early reports on inclusive classrooms have yielded positive results showing that if a child with ASD is included in neuro-typical classrooms, improvements are seen in their general social initiations and ability to learn and adapt to social skills in school setting (Kasari, et al., 2011). This is understandable as increased social interaction among children has been shown to promote social play, behaviour and language skills (Rogers, 2000).

Not only is it beneficial for a child with ASD to benefit from inclusivity but neuro-typical classmates also “benefit from their experiences with students with ASD, developing a

compassion for and an understanding of children with special needs. Their self-esteem is boosted by the positive role they take in helping a friend with autism learn” (Autism Society of America, 2015, p.3).

5.2.5 Experiences of building or modifying academic skills

One aspect of facilitating in an inclusive classroom is to build or modify certain academic and behavioural skills within the child that they are employed to facilitate. A prominent feature of ASD is the impairment of social interaction with others and lack of social skills (American Psychiatric Association, 2000). The possession of adequate social skills in childhood has been associated with academic achievement and positive developmental outcomes (Beidel, Turner, & Morris, 2000). Therefore, children who struggle in these areas of development are prone to not only be affected socially, but also experience academic difficulties (Rao, Beidel & Murray, 2008). When interviewing the participants, it was noted that all participants felt that they had to build certain academic skills within the child in order to promote academic achievements. The biggest obstacles that the facilitators were faced with were: the task of getting the child in question to improve his or her ability to listen to instructions; to listen to the content being taught to them by the teacher; enhancing their ability to concentrate on tasks set out; and equipping the child with the confidence to appropriately ask for help independently, specifically from their class teacher.

Autism Spectrum Disorders (ASD) are childhood-onset neurodevelopmental disorders that affect areas of the brain responsible for executive functioning. Skills that require the ability to pay attention, switch focus, remember details, plan and organise and do things independently are affected (Harchik & Ladew, 2008). In order to cope with these deficiencies or delays, the participants had to modify and build skills within their clients so that they could cope with their inclusive environment.

In chapter four, participant E remarked that her client’s lack of confidence hindered his ability to ask the teacher for help, which in turn impacted his academic performance and ability to keep up with the class. In a study conducted by Macintosh and Dissanayake (2006) teachers and parents rated children diagnosed with ASD as considerably less able in qualities such as assertion. The current participants commented that building the child’s

self-esteem and level of independence was a crucial task in the attempt to optimise academic performance and increase independent tasks such as asking the teacher for help when needed.

Some ASD children have a lack of orientation to social stimuli and exhibit problems concerning the use of appropriate eye contact, difficulties in interpreting verbal and non-verbal cues, and often display an inappropriate response to situations (Rao, Beidel, & Murray, 2008). In order to combat these issues, the participants described that improving listening skills, and modifying the way in which their client reacted to the teacher or peers in the classroom was an ongoing task. By being able to help the child listen, concentrate on topics being taught, and teaching them how to ask others for help appropriately resulted in better academic performance which in turn benefitted their social skills.

5.2.6 Experiences of building or modifying behavioural skills

Social skills have been described as particular behaviours that result in positive social interactions (Rogers, 2000). As ASD children are impaired when it comes to social awareness and social communication skills, facilitators frequently have to deal with inappropriate behaviours within an inclusive school. This is often challenging as ASD learners have poor social referencing skills and do not see the need to interact with others according to societal norms (Rao, Beidel, & Murray, 2008).

Participants in the study described that instilling or modifying behavioural skills within their client was one of their main objectives within facilitating a child in a mainstream school. Inappropriate behaviours were regularly experienced and was a concern that would habitually have to be dealt with and rectified, in both an appropriate as well as an empathetic manner. As a characteristic of ASD includes being overly dependent on routines, intensely focused on inappropriate items, or being highly sensitive to changes in an environment (American Psychiatric Association, 2000), a child in a mainstream school with neuro-typical peers can be overwhelmed quite easily. The exposure to being fully included in a regular classroom allows for the child to be exposed to social pressures and demands that they are not used to nor feel particularly comfortable with (Rao, Beidel & Murray,

2008). As a result of this, ASD children cope with the situation through the use of self-stimulating behaviours 'stimming' (Sinha et. al., 2013).

Self-stimulating behaviours were frequently observed and monitored by the learning facilitators. Inappropriate behaviours observed by the participants included screaming, humming, crying and running around in the classroom. Such behaviour could be seen as disruptive to the classroom learning environment. In such instances, the participants explained how they would often remove the child from the classroom environment to both calm the child down, and to prevent further classroom disturbance. Children with ASD have difficulties with understanding the perspectives or sharing affective experiences with others (Gutstein & Whitney, 2002). It is for this reason that the facilitators would often take great effort to explain to their client why they can or cannot behave in certain ways and would implement ways in which the child could practice self-stimulation in a more appropriate manner.

Impairments in the ability to socialise and behave appropriately exacerbates negative feelings (Rao, Beidel & Murray, 2008). The participants therefore considered it crucial that an ASD child in a mainstream school has a strong emotional support system, even if the facilitators were there to primarily regulate behaviour. Whilst negative behaviours were seen to be unacceptable, and worked on with the aim of reducing them, this was done in a caring and supportive manner. 5.3 Factors that influence successful school facilitation

The second question this research aimed to answer was: What factors influence the learning facilitator's attempt to support their ASD client effectively and appropriately?

5.3.1 The training of facilitators

During interviews with the participants, the notion of being trained in school facilitation, specifically with regards to helping ASD learners, was strongly recommended by all except one former facilitator. It has been acknowledged that equipping oneself with ABA competencies allows for direct-care staff to implement intervention plans more successfully (Luiselli, Bass & Whitcomb, 2010). "Behavioural techniques, if effectively taught to paraprofessionals, offer ways of both teaching new skills to clients and reducing their undesirable behaviours" (Harchik et al., 1989, p.142).

One participant described how important it is to understand the rationale for a certain intervention and would often read up on background knowledge regarding the disorder and successful intervention strategies. It is thought that when a facilitator or even teacher understands the theoretical constructs of an intended intervention plan, they are more inclined to implement it with a greater sense of commitment (Rispoli, et al., 2011).

Another participant further indicated that those who had not been trained in facilitation faced many challenges in the classroom as they did not have the appropriate level of knowledge of the disorder, and ways in which to combat inappropriate behaviours as they did not know ways in which to gain compliance from their client. Evidence suggests that when services are delivered by inadequately trained individuals, serious repercussions may arise such as hindering social and academic progress, creating prompt dependencies, and inducing or heightening challenging and inappropriate behaviours (Rispoli et al., 2011).

On-the-job training is an approach that has dominated many schooling facilities as a way in which to train paraprofessionals across different knowledge areas (Carter et al., 2009). Steckelberg et al. (2007) indicated that schools may rely heavily on informal and individualised training approaches that are dependent on either special or general educators who then provide 'training' and supervision to paraprofessionals (Carter et al., 2009). The 'learning on the job' approach was indicated by a participant as a way in which she experienced training with regards to facilitation. However, in comparison to the above mentioned research, she did not learn from, and was not supervised by, a teacher during the process. Rather it was a collaborative effort whereby they both learnt to include an ASD child in a mainstream classroom through a trial and error process.

5.3.2 Degree of compliance received from client

An ABA intervention is based on the implementation of operant behaviour, whereby the behaviour in question is affected by antecedent and consequent factors/events. Based on empirical evaluations, the only interventions that have produced lasting and comprehensive outcomes in autism have been based on the principles of ABA (Foxy, 2008). It has therefore

become a primary method of treating inappropriate behaviour in individuals who have ASD and has been included in educational programmes that cater for children on with ASD (Jensen & Sinclair, 2002).

All the study participants acknowledged the use of reinforcements and consequences to modify or eradicate behaviours with their client, saying that this approach helped significantly in achieving the desired outcomes. Four of the six participants implemented stringent ABA techniques and therapeutic plans in their work with the child they facilitated at school. When ABA was said to be used as a form of intervention in the classroom, the facilitators believed that it was a way in which they were able to gain and maintain a level of compliance from their client, which in turn helped the child modify or learn social and academic skills.

5.3.3 Learning techniques for an atypical learner

A range of techniques were incorporated by the participants to optimise academic performance and behavioural progress for a child with ASD in the inclusive classroom. Techniques used the most frequently included: employing operant conditioning (in the form of ABA) as a form of intervention in and outside the classroom; prompting the child in various ways to increase a level of independence in their tasks and actions; encouraging the use of visual cues as an aid to help the child learn; as well as the use of modelling, specifically peer modelling, as a way in which the child could grasp new concepts, both academically and socially.

a. Additional tuition/therapy

Due to the various barriers to learning a ASD child may be challenged with, all facilitators who took part in this study were required to provide tutoring or therapy after schooling hours to reinforce and prime concepts that were taught in the classroom. Priming has been documented as an effective classroom intervention for children with ASD (Harrower & Dunlap, 2001). Priming consists of pre-practicing activities that a child is likely to have difficulties with before the child actually engages in them in the classroom.

In addition to this, those who worked with companies that provided ABA therapy as a form of intervention were required to complete homework sent home from school within their therapy/tutoring hours with the children. Evidence based practise suggests that ABA is an effective form of treatment and can be incorporated into a broad based approach whereby language remediation and behavioural abnormalities are worked on (Sadock & Sadock, 2015). These effective strategies or requirements of ABA treatment allowed the participants interviewed to see and experience the benefits of additional tuition and therapy for their client.

b. Use of prompts

Prompting can be an effective aid for ASD children. It is a technique which helps children to make correct and appropriate choices and promotes successful learning experiences (Hayes, 2013). A clear and strategically timed prompt indicates to the child what is expected of them, and can encourage engagement in learning, thus supporting development in social interaction skills and the acquisition and development of language (Hayes, 2013). Although prompting was frequently used by the study participants as a method of correcting or developing academic success and social behaviour, it was a technique that would be used only when necessary and would gradually be faded out in the attempt to increase a sense of independence or autonomy within the child. Literature supports the notion that prompts should be minimal and faded out as soon as possible so that the child in question learns and completes tasks or behaves appropriately without becoming wholly dependent on adult support (Neitzel & Wolery, 2010).

c. Visual Cues

Individuals with ASD appear to possess strengths in processing visual stimuli. Due to strengths in visual processing (compared to an often weak/impaired auditory processing) many instructional techniques emphasise the use of visual cues (McCoy & Hermansen, 2007). With this in mind, instructional strategies and learning material should be encouraged in visual form (Dunn et al., 2002).

Evidence for a visual learning style in children with ASD has been substantiated by qualitative data received from adults with ASD and their experiences living and learning with

ASD. Ganz (2007) reported that adults with high functioning ASD indicated that they learn more easily with visual aids such as pictures and written words when compared to auditory instructional strategies. Along with qualitative data received. Some individuals with ASD have been shown to exhibit superior performance on tasks that require visual processing, as assessed on the block design subtest of the Wechsler intelligence test, copying impossible figures and strong results on the embedded figures test (Shah & Frith, 1993). These findings correlate with experiences of the facilitators interviewed who saw greater results when visual aids were used such as picture books and picture charts.

d. Peer modelling

Participants in this study found that peer modelling helped the child they facilitated to learn to behave in an appropriate manner and complete academic tasks given. “Peer imitation, or matching one’s behaviours to that of a peer, is thought to be a basic developmental process that facilitates learning social skills, enhances self-efficacy, and remedies skill deficits” (Garfinkle & Schwartz, 2002, p. 27).

Many ASD children find it challenging to find an appropriate “frame of reference”. Modelling or imitation helps as it requires the child to distinguish who and what to model or imitate (Atherton, 2005). Peer modelling has been thought to be more effective than teacher modelling and is therefore a practice that has been instilled in many educational settings (McCory & Hermansen, 2007). McCory and Hermansen’s *Review of Model Types and Effects* (2007) articulated that studies that utilized peers as models exhibited the enhancement of language skills and encouraged social skills such as play and independent living. Participants in this study share these sentiments and thought peer modelling to be a more effective way in promoting good and goal orientated behaviour.

e. Qualities and individual traits of the facilitator

In the discussion of the qualities and traits needed to successfully facilitate an ASD child, participants deemed patience, good communication skills, a “firm but fair attitude”, passion, and an interest in the job the most important. These qualities were found to be similar to those stated by the Autism Education Trust (2012) which asked professionals in the field of

ASD to provide information on what they considered to be key skills and qualities in working with pupils with ASD.

Bergstedt (2015) further stipulated that an emotional investment forms the foundation of an encouraging relationship between a client and learning facilitator. Furthermore, Bergstedt (2015, p. 96) described that “an important factor in these interactions is that both the learner and the facilitator are active partners in continuous, dynamic, and reciprocal interactions”. Participants in this study suggested that those who were not invested in their school facilitation job would often see limited progress with their client and in most cases would stop facilitating all together.

5.4 Observations on classroom practices in an inclusive environment

The third question that the researcher intended to answer was: What are learning facilitator’s observations on classroom practices implemented by teachers in mainstream school settings?

5.4.1 Classroom management

As per the Employment of Educators Act 76 (1998), the role of the teacher is described as “any person who teaches, educates or trains other persons or who provide professional educational services, including professional therapy and educational psychological services, at any public school, further education and training institution, departmental office or adult basic education centre.” During the interviews conducted, it was unanimously stated that the teacher of the classroom oversaw learning and classroom management. Participants believed their area of focus in the classroom was to modify or correct behavioural issues and that it was rather the teacher’s duty to educate the learner. Whilst the inclusive education policy stresses the need for teachers to individualise teaching strategies to accommodate the diverse needs of students in mainstream schools (Bergstedt, 2015), the participants found that this could not always take place due to a lack of in-service training, the volume of children within each class and other classroom pressures that would not allow for greater inclusive accommodation. In such instances, some participants experienced teachers abdicating responsibilities and placing them onto the facilitator.

5.4.2 Abdication of responsibility

This issue of concern has been highlighted by international studies as it has been described that there is still a level of ambiguity as to what the role of the paraprofessional is and what boundaries should exist between the teacher and facilitator in an inclusive environment (Riggs & Mueller, 2001). In Riggs and Mueller's study paraprofessionals expressed feelings of being taken for granted, not being respected or valued by members of the school community, and frustration as they were frequently asked to assume teacher duties without being properly prepared, trained or directed. Feelings of frustration were amplified by either being over, under or improperly utilized in their job description. Some of the participants within the current study experienced these circumstances too and at times felt that their role in the classroom was either abused or that boundaries set in place would begin to blur as time spent within a classroom increased.

Robertson, Chamberlain and Kasari, (2003) found that some general educators felt that the presence and proximity of a facilitator/paraprofessional in the classroom allowed for opportunities for the teacher to avoid taking on responsibility for the learners with special needs or disabilities in their designated classroom. Not only does this impact and alter the objective of having a facilitator in the class but also thereby assumes that the presence of paraprofessional in the inclusive classroom could interfere with the development of a relationship between the teacher and learner with ASD (Robertson et al., 2003). Due to such findings, "calls have been issued for a closer examination of how paraprofessionals are utilized, the tasks they perform, and the knowledge they hold. Indeed, those who work closely with paraprofessionals suggest that role overload and role conflict are more often the rule than the exception" (Carter et al., 2009, p. 345). The abdication of responsibility perceived and experienced by learning facilitators appeared to hinder learning facilitators' abilities to support their clients' effectively and constructively in mainstream school settings.

5.4.3 Lack of in-service training

The combination of impairments that characterize ASD make the disorder an "ultimate learning disability because of its associated language and social difficulty" (Lindsay et al.,

2014, p. 2). Teachers believe that, in order to successfully include ASD children, they need appropriate practical exposure to ASD and training, they would have smaller classes and provisions would be made to include a class facilitator/paraprofessional (Roberts, 2007). These views were corroborated by the majority of the participants interviewed. Five out of the six participants were of the opinion that a classroom teacher would not be able to attend to a child with ASD's individual needs whilst simultaneously teaching neuro-typical children. Furthermore, all participants were concerned that there is lack of in-serving training for teachers when it comes to educating those who have ASD. As a result, all participants expressed that the current schooling environment may not always cater for their client academically and certain learning strategies need to be implemented to gain optimal academic results. No child with ASD is the same and therefore academic needs vary in nature and prove to be challenging at times as ASD children can have atypical learning styles (Collins, 2014).

5.5 Inclusive education and the practicalities of legislation

The fourth question that the researcher attempted to answer was: What are the learning facilitators' perceptions and opinions of inclusive education and the current curriculum for ASD children?

5.5.1 A traditional learning style and curriculum

For many years' research pertaining to the development of an effective curriculum for ASD children has been overshadowed by research topics that rather hone in on the nature of ASD (Olley, 1999). Curriculum is understood as "an organised description of a body of content, assessment procedures for selecting goals for instruction, and methods for teaching selected skills" (Olley, 1999, p. 595). ASD children often require an atypical learning strategy as they do not always learn effectively or in the same manner as their neuro-typical peers (Collins, 2014). With the State's current schooling curriculum, it is thought that an autistic child's individual learning style is often not considered and that the current system is inflexible to accommodate their specific needs (Collins, 2014). Due to the inflexibility to accommodate certain needs, most facilitators interviewed found that their presence in the classroom was a necessity, so that they in turn could adapt a more suitable

learning style for their client and teach the child material in a way in which would make sense to them.

Prinsloo (2001) illuminates the fact that “South African schools need to be restructured, in terms of the review of the new curriculum” (p. 344). In the process of restructuring the new curriculum, the state, school governing bodies, teachers and parents will be able to better understand the diverse needs of the learners in classrooms, be able to identify the included child’s problems, and ultimately be able to give support to all the learners, thereby allowing them to “learn and develop optimally” (p. 344).

5.5.2 Absence of practical training

Children with ASD and learners with other special needs are increasingly becoming included into general educational programmes. However, despite this tendency, “few procedures have been advanced to facilitate the successful placement and maintenance of learners with ASD in general education classrooms (Koegal et al., 2011, p.1). The training of educators in particular was a point of discussion for all the participants interviewed and an area of concern that they felt was neglected by the State’s current legislation pertaining to inclusivity in the classroom.

The training of facilitators is not mentioned in the Education White Paper 6 (2001), however it is stated that the training of staff is fundamental to the success of inclusive education (Department of National Education, 2001). In addition to this, the Department of Education acknowledges the importance of in-service training however mainstream teachers still feel inadequately prepared to take on special needs students in a mainstream environment and therefore welcome external help in the form of learning facilitators (Roberts, 2007). Special needs students, specifically ASD learners are challenging to teach without any practical training or knowledge of the disorder. Symptom severity varies across the ASD population and one would need to be able to have an understanding on how to communicate with someone who may have limited verbal skills, and may exhibit social and behavioural problems.

Not only was there a lack of teacher in-service teaching observed and experienced by the facilitators, but there also seemed to be a lack of pre-service training. Two of the facilitators interviewed, who had obtained teaching degrees prior to their employment as a facilitator, mentioned that they were not adequately exposed to the theoretical and practical training of special needs learners whilst completing their teaching degrees. As reasoned by Prinsloo (2001) it is important that teachers trained in both pre and in-service programmes so that they can focus on the strengths of the learners in order to “stimulate a richer learning environment” (p. 345).

Given the lack of practical training made available to mainstream schooling educators, the participants interviewed question the practicality of legislation put in place and believe that there is still a long way to go in terms of creating equal opportunity and providing resources for those with special needs in a mainstream school setting.

5.6 Perceptions and understandings of relationships formed with teachers

The final question that this study aimed to answer was: What are learning facilitators’ perceptions and understandings of their relationships with teachers in mainstream schools? Participants interviewed believed that the relationship formed between themselves and the general educators within the school influenced their level of enjoyment in facilitating in an inclusive environment, and more importantly influenced the academic success and social progress for the client they were employed to work with. Robertson et al., (2003) study on Paraprofessionals yielded similar results to these experiences described by the learning facilitators/paraprofessionals who took part in this research study. More specifically, it was understood that general educators who maintained a strong relationship with facilitators had in turn helped them to build a stronger relationship with the included ASD child. Some participants interviewed encountered both positive and negative experiences with regards to interacting with class teachers in a mainstream school. Positive relationships allowed for personal enjoyment in the facilitation of a child and also allowed for positive progress with regards to the child’s academic and social growth. Negative relationships formed with an educator or the experience of receiving a limited amount of support from the school as a whole, had implications on how the child progressed in the classroom.

Collins' (2014) research on barriers to admission to mainstream primary schools for children with high functioning Autism/Asperger's syndrome highlights the importance of acceptance, attitude and relationships formed with educators "Senior management staff in school environments set the attitudinal tone for the school (Williams, 1983). In addition, they are responsible for the staff morale and enthusiasm at their schools (Austin & Reynolds, 1990). How these senior management staff members understand high functioning autism (HFA) or Asperger's syndrome (AS) and the relating attitude about HFA / AS is therefore important when considering the barriers to mainstream education for children with HFA / AS" (p.109).

5.7 Conclusion

This chapter discussed the findings of the study in relation to the literature presented in chapter two. From the data collected, it is evident that facilitators believe they hold a complex role within the inclusive education system and whilst they (the participants) believe the notion of inclusive education to be of importance and a necessity in educating ASD children, the State currently lacks the resources to implement inclusive education effectively. From what has been discussed, it is hoped that the researcher has identified factors that exist within and between the number of systems present (classroom, school and government) and that the researcher has shown that the participants' perceptions and experiences are influenced by these systems. It appears that the influence of interactive individuals in their social environments can construct or constrain certain practises (such as inclusive education for ASD learners).

This chapter aimed to address the research questions and objectives of the study and provide a more comprehensive understanding of ASD in inclusive settings by describing the experiences of learning facilitators who work closely with ASD children.

Chapter 6

Conclusion

6.1 Main Findings

Autism Spectrum Disorder (ASD) is a complex neurodevelopmental childhood disorder (Korkmaz, 2011). As the rates of ASD are dramatically increasing, more children with ASD are being enrolled into mainstream schools as per the State's inclusion policy outlined in White Paper Six (2001). Given the growing occurrence of the disorder and its impact on South Africa's inclusive education system, research has largely focused on that of teachers and their experiences in teaching ASD children in an inclusive environment. Themes pertaining to the needs of classroom support, specifically facilitation for children, have rather been a by-product of research that explores this domain. To date, there is no published research available within a South African context that solely looks at the experiences of learning facilitators who facilitate ASD children in mainstream schools. Although there is a lack in South African literature pertaining to the experiences of learning facilitators within mainstream settings, there appears to be a rapidly growing number of studies within the United States that is concerned with paraprofessionals (facilitators) who work in inclusive schools. This suggests that issues pertaining to paraprofessionals/facilitators are a growing area of interest and is therefore of importance to the field of inclusive education.

The first objective of this study was to explore learning facilitators' experiences of facilitating ASD learners who are enrolled in mainstream schools. Participants revealed that their level of enjoyment in their working field was highly dependent on the level of rapport established with the client they worked with, the client's parents, teachers, professionals and therapists. Working in a context of collaborative teamwork helped the facilitator to support their client effectively. In addition to this, constructive teamwork promoted their levels of job satisfaction.

The relationship formed between the facilitator and the client's parents was deemed to be very important. As the provision of resources is not made available by the state, learning facilitators are exclusively employed by the parents of an ASD child. As the facilitator is

employed by the parents of the child with ASD, direct feedback would be given to these parents. Due to this, the job would often entail the facilitator becoming a communicator between the parent/s and teacher. Participants noted that at times, being the messenger opened them up to difficult situations whereby they would be asked to answer questions or resolve issues that were not appropriate to their specific role within the system.

In addition to forming many interpersonal relationships, the research participants experienced their role in the mainstream classroom to include the building and modifying academic and behavioural skills within the child they were employed to facilitate.

The second objective of this study was to identify factors that help or hinder learning facilitators' abilities to support their clients' effectively and constructively in mainstream school settings. Given that children with ASD are atypical learners, facilitators had to adapt different techniques and styles of learning in order for the child to perform to the same standard as their neuro-typical peers, both socially and academically. Techniques used most frequently included employing operant conditioning (in the form of Applied Behavioural Analysis (ABA)) as an intervention both inside and outside the classroom. Not all facilitators intervened using a stringent ABA approach however, results revealed that they all acknowledged that the use of reinforcements and consequences to modify or eradicate behaviour was most successful.

Most participants emphasized the importance of being trained in facilitation for ASD learners. Those who experienced training felt that they were more equipped and knowledgeable in the field of Autism, and therefore could help the child perform to their full potential in an inclusive classroom. It was indicated by some participants that those whom they had seen with little training in how to facilitate children with ASD faced many challenges in the classroom, as they did not have the appropriate level of knowledge of the disorder and ways in which to stop or prevent inappropriate behaviours. Trained participants were of the opinion that those who were not trained had a tendency to stop facilitating as they would be unhappy in the job position and would lack the level of compliance that a trained facilitator would possess.

The third objective of the study was to explore learning facilitators' observations of classroom practices implemented by mainstream teachers. The research participants believed their main area of focus in the classroom was to modify or correct behaviour in the classroom and that it was rather the educator's duty to educate the students. Although the inclusive policy stipulates that teachers need to individualise teaching strategies in order to accommodate the diverse needs of learners in mainstream schools, the participants found that this could not always take place due to the lack of in-service training offered to teachers, the quantity of children found within each class and other classroom pressures that would not accommodate children with ASD. In these instances, some participants experienced teachers abdicating their teaching duties and placing them onto the facilitator.

The fourth objective was to explore learning facilitators' general insights towards current school curricula and inclusive education. Participants were of the opinion that the curriculum does not cater to the atypical styles of ASD learners. In addition to this, concerns were raised regarding the level of practical training or exposure that mainstream teachers had to educating ASD children. Participants found that a lack of in-service training opportunities offered to teachers hindered their ability to provide an optimal level of support for ASD children. Overall, participants questioned the practicalities of legislation put in place and believed that there is still a long way to go in providing resources and creating equal opportunities for ASD learners.

The final objective of the research study was to explore learning facilitators' perceptions and understandings of their relationships with teachers in mainstream schools. Some participants interviewed encountered both positive and negative experiences concerning interacting with class teachers in a mainstream school. Positive relationships allowed for personal enjoyment in the facilitation of a child and also allowed for positive progress with regards to the child's academic and social growth. Negative relationships formed with an educator or the experience of receiving a limited amount of support from the school as a whole, had implications for how the child progressed in the classroom.

6.2 Limitations of this study

The findings from this research study cannot be generalised to other South African learning facilitators of different age, race, gender (male), and culture as this study utilized a small and relatively homogenous sample of school facilitators who provided one-on-one facilitation for children with ASD. This sample used limits the degree to which findings can be generalised to a larger population, however, generalisation is not the aim of this form of exploratory research and thus transferability may be possible to other, similar contexts.

Additional limitations include that the study made use of a sample of learning facilitators who only worked in primary school settings. It is expected that experiences within a high school context would be very different due to an array of factors such as there being multiple teachers per grade, varying levels of support offered to students, different classroom sizes etc.

Lastly, as a human instrument, the researcher needs to acknowledge that there is the possibility that she may have exerted an influence of the direction in which the research took, even if attempts to minimise research bias on the collection and analysis of the data were made. As the researcher herself was once employed as a facilitator she had to be careful with over identifying with the participants interviewed. As researchers we are predisposed to a level of subjectivity as the “interpretation of the participants’ behaviour and collected data is influenced by the values, beliefs, experience and interest of the researcher” (Jootun et al., 2009, p.45). The participants’ frustration regarding the abdication of responsibility of class teachers, and the ambiguous description and boundaries of a facilitator’s job position was experienced by the researcher herself when she facilitated ASD children in mainstream schools. Through the process of reflexivity, the researcher was aware of her own experiences and attempted to allow the participants’ stories to prevail (Palaganas et al., 2017). The active process of critically engaging in self-reflection and consciously shifting from past experiences back into the researcher role was crucial. This “space between” positioning, where the researcher was situated between an “insider” and “outsider” position, has hopefully produced a research study that is authentic, and one that may lead to other studies that focus on inclusive education within a South African context.

6.3 Recommendations for future research

Given that the scope of this study is limited, a study on a larger scale could be carried out to assess if other learning facilitators share similar experiences and opinions of facilitating ASD children in a mainstream school setting. In addition to this, research that further explores the perception and experiences of facilitation from an ASD child's, parents' and teachers view point could be conducted.

Other areas of research could aim to evaluate the extent to which the schooling curriculum accommodates ASD learners and whether changes in the curriculum are feasible. In addition to this, one could look at which areas of the schooling environment could be modified in order to cater to an ASD child's needs effectively.

Results of the study indicate that there is a lack of in-service training with regards to teaching children with ASD, therefore one could argue that there is a need to explore how effective the current mainstream teaching strategies are in teaching ASD children and how competent teachers feel in accommodating ASD children in their classes.

Lastly, researchers could attempt to create a model for the inclusion of ASD learners in mainstream schools within a South African context and assess the feasibility of implementing this model.

6.4 Implications

In light of the insights provided by the participants, one can argue that the Department of Education (DoE) needs to consider bridging the gaps between policy and the current operating of mainstream schooling. Whilst all participants unanimously agreed that ASD children should be given the opportunity to mainstream, it must be noted that facilitators are employed by the parents of the child who requires facilitation. Not all parents are able to afford the cost of hiring a facilitator. Roberts (2007) and MacIntosh (2013) South African studies pertaining to teachers and the inclusion of Autistic children in their classes found that teachers welcomed external support or the presence of paraprofessionals/facilitators in their class as they either did not feel competent in teaching the child or could not cater to the child's atypical learning needs. Given that studies show that school teachers welcome the form of external help, the allocation of resources and funds for support services and

resources needs to be examined, so that inclusive schools can cater to the diverse needs of the children included in the classroom.

Participants in this study highlighted the need for the restructuring of the curriculum as they found that they had to adapt their own techniques and learning methods to the atypical learning learner they facilitated. The current system appears to be inflexible to accommodate a learning style that caters to those who are not neuro-typical. As ASD children prominently have atypical learning styles, facilitators often found that they became the educator in the classroom for the ASD child as the teacher did not have knowledge or any prior exposure to working with an ASD child. It could be argued that this gap in the level of in-service training, along with other challenges faced by a mainstream school teacher entailed the facilitator taking on teaching responsibilities that were not part of their job description. Clarification regarding job definition and boundaries appears to be needed. This is a trend shown in international studies, South African studies and this study.

Lastly, it has been shown that schools whom are supportive of the inclusion of ASD children have allowed positive and collaborative relationships to be formed by those who work with the child diagnosed with ASD. This in turn has allowed the child to succeed to a greater degree within the mainstream environment and has given facilitators a greater sense of purpose and job satisfaction. Challenging the misconceptions of ASD and promoting awareness of the disorder are key to the successful inclusion of ASD children in mainstream schooling environments.

6.5 Conclusion

This chapter discussed the implications and limitations of this study and recommendations for further studies were made. It is hoped that with the increasing inclusion of ASD learners in mainstream schools, research that highlights problematic areas of the State's legislation pertaining to inclusion, will: promote feasible changes to the schooling curriculum; allocate resources to support services such as facilitation; modify the schooling environment; and provide in-service training opportunities to mainstream educators in the effort to include ASD learners more successfully.

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APPENDIX 1

Interview questions

Demographics

- How many years have you been a facilitator?
- What grades do you currently facilitate?
- How many clients do you facilitate in mainstream schools?
- How many mainstream schools do you facilitate at?

Inclusive education

- What do you understand inclusive education to be?
- How does an inclusive environment affect your client/clients?
 - Probe
- What sort of learning environment do you think your client would perform better in?
 - Probe
- Do you think some schools' approaches to inclusive education are more effective than others?
 - Probe
- How does your client handle the social aspect of inclusive education?
- How does an inclusive environment affect other learners in the class?
- Probe

Training

- Do you believe that anyone can facilitate or is training required?
- Do the teachers you engage with have any training relevant to working with an ASD child?
- To your knowledge do the schools offer any in service training?

Classroom experience

- How would you define your relationship with the teacher?
- How does your presence in the classroom impact your client?

- Do you think that the roles and boundaries between you and the teacher are established and maintained?
- How do you believe yourself to be perceived by the school?
- Do you think a teacher would cope effectively without you being there to facilitate a client?
- If a client behaves adversely or inappropriately, do you handle the situation or the teacher?
- Does the teacher approach you regarding learning strategies for your client?
- What do you believe to be necessary tools or skills for a teacher to have in order to successfully teach a class with children that are on the spectrum and those who are neuro-typical?
- What are your views regarding the future of mainstream classroom practices involving special needs students?

APPENDIX 2

Information sheet and consent to participate in research

Date: _____

To: _____

My name is Jennifer Swift and I am an Educational Psychology Masters student at the University of KwaZulu Natal (Pietermaritzburg Campus).

You are invited to consider participating in a study that involves Autistic Spectrum Disorders (ASD) and inclusion within mainstream schools. The aim and purpose of this research is to explore the experiences of facilitators who have facilitated children with (ASD) in mainstream schools.

This study has been ethically reviewed and approved by the UKZN Humanities and Social Sciences Research Ethics Committee (approval number: HSS/0389/016M).

The study is expected to enrol six participants. Participants will be selected on the basis of their experience with school facilitation of ASD children, specifically within in a mainstream school setting.

Your participation in this study will involve being interviewed at a time that is convenient to you. The interview will be approximately an hour long and it will consist of questions around your experiences of facilitating ASD clients in mainstream schools.

Your participation in this study is completely voluntary. You are also within your rights to choose not to answer any specific question that you decide not to disclose. You can withdraw your consent at any time, and there will be no consequences to withdrawing.

If you choose to participate in this study, I am unable to offer any direct benefits to you for participating. I do not think there are any risks to your participating in this study as you are welcome to refuse answering any questions that you do not wish to answer. However, with this said, should the interview distress you in any way, a referral to an appropriate counselling centre will be provided.

Confidentiality will be maintained throughout the study by ensuring that signed informed consent forms are stored by myself and are not accessible to anyone else. These consent forms will be kept for a period of five years in a locked drawer and will then be destroyed. Pseudonyms will be used in place of your name, the name of your clients and the schools you facilitate at in order to protect these identities throughout the write up of the study. Should the results of this research be published or discussed in conferences, information will not be divulged that would compromise your anonymity.

On completion of the study, the research findings can be sent to you via email upon request.

In the event of any problems or concerns/questions you may contact the researcher at 0799158225 or via email: swijen@gmail.com. Should you wish to contact my supervisor,

Carol Mitchell is available on mitchellc@ukzn.ac.za or (Tel: 033 260 6054). Should further clarification be needed regarding the nature of the study, the UKZN Humanities & Social Sciences Research Ethics Committee are available at (Tel: 031 260 3587) or via email: HSSREC@ukzn.ac.za

Consent

I _____ have been informed about the study entitled Autism Spectrum Disorders and Inclusion: An exploration of trained learning facilitators' experiences in mainstream schools by Jennifer Swift.

I understand the purpose and procedures of the study.

I have been given an opportunity to answer questions about the study and have had answers to my satisfaction.

I declare that my participation in this study is entirely voluntary and that I may withdraw at any time without affecting any of the benefits that I usually am entitled to.

If I have any further questions/concerns or queries related to the study, I understand that I may contact the researcher telephonically: 0799158225 or via email: swijen@gmail.com.

If I have any questions or concerns about my rights as a study participant, or if I am concerned about an aspect of the study or the researchers then I may contact:

The researcher's supervisor, Carol Mitchell, who is available on mitchellc@ukzn.ac.za or (Tel: 033 260 6054). Should further clarification be needed regarding the nature of the study, the UKZN Humanities & Social Sciences Research Ethics Committee are available at (Tel: 031 260 3587) or via email: HSSREC@ukzn.ac.za

Signature of Participant

Date

Signature of Witness

Date

(Where applicable)

APPENDIX 3

Consent form for audio recording of interview

The researcher will be make use of audio recordings recorded during the interview for data collection and transcription purposes. Identifying data will not be included in the write up of the report and pseudonyms will be used throughout the research process. The recordings will later be destroyed upon completion of the study.

Your permission is required in order to record the interview.

I consent to allowing the researcher to make an audio recording of the interview for data collection and transcription purposes only.

Signature

Date

APPENDIX 4**Letter to the company/organisation seeking permission to recruit participants**

To: _____,

My name is Jennifer Swift and I am an Educational Psychology Master student at the University of KwaZulu Natal (Pietermaritzburg Campus). I am conducting a research study focusing on facilitators' experiences in facilitating children with Autism Spectrum Disorders (ASD) in a mainstream school setting. In addition to investigating learning facilitators' experiences whilst facilitating their clients in mainstream schools, my research will also look at what factors influence the facilitator's attempt to support their ASD clients effectively, how learning facilitators qualify their relationships with the mainstream school teachers, and what perception and opinions school facilitators have with regards to inclusive education.

I am interested in interviewing facilitators who work for your company and hereby request your permission to recruit participants from your staff. Should you kindly permit me to recruit members of your staff, I shall send you an email to be distributed amongst the facilitators explaining the nature of the study. Should any facilitators choose to participate in the study I would interview them at a time convenient to them.

If you have any questions about the study, please do not hesitate to contact me by email at: swijen@gmail.com. My supervisor, Carol Mitchell is available on mitchellc@ukzn.ac.za (Tel: 033 260 6044). Should further clarification be needed regarding the nature of the study, the UKZN Humanities & Social Sciences Research Ethics Committee are available at (Tel: 031 260 3587) or via email: HSSREC@ukzn.ac.za.

APPENDIX 5

Letter of permission granted from gatekeeper to recruit participants

To whom it may concern,

I, Carryn Collins from Breakthrough Interventions South Africa, hereby grant permission for the Educational Psychology Master student, Jennifer Swift, to recruit participants from my staff for her Master's research study (2016).

I understand that the study in question is entitled 'Autism Spectrum Disorders (ASD) and Inclusion: An exploration of school facilitators' experiences in mainstream schools', and is focused on ASD facilitators' experiences of working in mainstream settings.

I will inform my staff of this opportunity to participate in this study and with participants' permission, will provide Miss Swift with the necessary contact details of those who wish to volunteer for the study.

I understand that participation is voluntary and my staff can withdraw from the study at any time should they see fit. I am also aware that the researcher is unable to offer any direct benefits to those who participate. In the unlikely event that my staff become distressed as a result of being interviewed, it has been specified that a referral to an appropriate counselling centre will be provided.

I acknowledge that those from my staff who wish to participate are required to read and sign a document of informed consent prior to being interviewed.

It has been stipulated that confidentiality will be maintained throughout the study. Pseudonyms will be used in place of participants' names, the names of clients, the schools the participants facilitate at, and the company that they are employed by. This will be adhered to in order to protect identities throughout the write up of the study. Should the results of this research be published or discussed in conferences, information will not be divulged that would compromise the participants or this company's anonymity.

Should further clarification be needed regarding my involvement as a gate keeper for this study, I can be contacted telephonically at: 076 191 8332 or via email: btinterventionsdbn@gmail.com

This letter was prepared for me by Jennifer Swift.



10 March 2016

Signature

Date

APPENDIX 6

Letter from counselling provider



10 March 2016

To whom it may concern

This letter serves to provide the assurance that should any participant interviewed by Ms Jennifer Swift, (Psychology Masters student) require psychological assistance as a result of any distress arising from the research project on "*Autism Spectrum Disorders (ASD): An exploration of school facilitators' experiences in mainstream schools*", the service will be provided by Masters one Psychology students and intern psychologists at the University of KwaZulu-Natal, Pietermaritzburg Campus Child and Family Centre – phone 033-2605166.

Yours sincerely,

K.P Maruping

Coordinator of University of KwaZulu-Natal, Pietermaritzburg Campus Child and Family Centre

Child and Family Centre
School of Applied Human Sciences

Postal Address: Private bag 201, Scottsville, Pietermaritzburg, 3209, South Africa

Telephone: +27 (0)33 260 5166 Facsimile: +27 (0)33 260 5829 Email: NaidooN2@ukzn.ac.za Website: psychology.ukzn.ac.za

Founding Campuses: Edgewood Howard College Medical School Pietermaritzburg Westville

APPENDIX 7

Ethics approval



10 June 2016

Miss Jennifer Rose Swift 213570472
School of Applied Human Sciences
Pietermaritzburg Campus

Dear Miss Swift

Protocol reference number: HSS/0389/016M

Project title: Autism Spectrum Disorders (ASD) and inclusion: An exploration of School facilitators' experiences in mainstream schools

Full Approval – Expedited Application

In response to your application received 13 April 2016, the Humanities & Social Sciences Research Ethics Committee has considered the abovementioned application and the protocol has been granted **FULL APPROVAL**.

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment /modification prior to its implementation. In case you have further queries, please quote the above reference number.

PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years.

The ethical clearance certificate is only valid for a period of 3 years from the date of issue. Thereafter Recertification must be applied for on an annual basis.

I take this opportunity of wishing you everything of the best with your study.

Yours faithfully

.....
Dr Shenuka Singh (Chair)
Humanities & Social Sciences Research Ethics Committee

/pm

Cc. Supervisor: Carol Mitchell
Cc. Academic Leader: Professor D Wassenaar
Cc. School Administrator: Ms Nondumiso Khanyile

Humanities & Social Sciences Research Ethics Committee

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Founding Campuses: ■ Edgewood ■ Howard College ■ Medical School ■ Pietermaritzburg ■ Westville