

# **'Fire Fighting' or 'Fire Lighting'?**

A Critical Evaluation of the Inclusion of Children with  
Autism Spectrum Disorders attending Mainstream  
International Primary Schools in Dubai

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## **Abstract**

This study aims to investigate and critically evaluate the current status of inclusion for pupils with ASDs within the mainstream international primary sector in Dubai, UAE, and determine whether this might be more appropriately termed 'fire fighting' or 'fire lighting' (MacLeod 2006). A number of data collection methods were employed, over three stages, to carry out the project: e-questionnaires (stage 1), interviews and observations (stage 2) and documental analysis and social network questionnaires (stage 3). The findings of the study isolate a number of promising incidences of 'fire lighting' which given the right circumstances could ignite and develop over time. However, the study concludes that at present the inclusion of pupils with ASDs within the mainstream international primary sector is still in the early stages of development and that overall the situation would be most appropriately termed 'fire fighting'.

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## Chapter 1: Introduction

### 1.1 Background and Purpose of Study

The debate about whether the inclusion of children with special educational needs within mainstream schooling is a practical policy is ongoing. Whilst most people agree with the philosophy behind the movement and can appreciate the benefits of such an approach, the actual implementation presents many challenges (Reid 2005: 99).

Commenting recently, in the *Times Educational Supplement* (November 2006), Fiona MacLeod states that: "autistic pupils receive a raw deal" in mainstream education. Her statement is based on the HM Inspectorate of Education's evaluation of education for autistic children in Scotland (October 2006). The report highlights, MacLeod notes, that some educational authorities in Scotland have: "no planned method for teaching children with autism"; that teachers fear they "lack sufficient knowledge" and are "left to develop their own strategies"; that pupils are "too reliant on support staff"; that some teachers "are finding the unpredictable behaviour of autistic youngsters difficult to cope with"; and, that autistic pupils can be "victims of bullying" in mainstream schools (HMIE 2006). Kalyva and Avramidis (2005: 253) also comment that although there is some evidence that children with autism may benefit academically from mainstream education they are not always able to integrate socially. Even high functioning pupils with autism, they argue, do not always respond to the communicative attempts of their typically developing peers.

Overall the HMIE report, Macleod notes, is critical of the 'fire fighting'<sup>1</sup> approach being taken by some Scottish education authorities towards the inclusion of pupils with autism.

Regardless of such emergent difficulties, over the last decade the inclusive philosophy has been written into many international policy documents; and the United Arab Emirates (UAE) is no exception. UAE Federal law No. 29, Article 12

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<sup>1</sup> The terms '**fire fighting**' and '**fire lighting**' are project management terms taken from: Barber, E and Warn, J (2005) 'Leadership in project management: from fire fighter to fire lighter' *Management Decision* 43 7/8ABI/INFORM Global p1032 Please refer to the definition of terms in Appendix 8 for further information.



(2006), guarantees that people with special needs have equal access to all educational institutions, unless those needs are considered to constitute a reason for prohibition. According to Gaad (2004a), an increasing number of children with special educational needs are being educated in mainstream education in the UAE.

Since the discovery of crude oil and the strategic investment of the financial resources this provided, the UAE has developed rapidly over the last forty years and has "emerged into the mainstream of modernism" over that short space of time (Gaad 2006). As it has grown commercially it has also diversified culturally. The population of the UAE is currently composed of a large proportion of expatriates from a number of different countries. Free public education in the UAE is only available for nationals and so expatriates have established private international schools, which follow the curriculum of their particular home country and where the medium of instruction is their native language.

The current study focuses on this private educational sector in Dubai; one of the seven emirates of the UAE. The study is further focused on international primary schools within this sector, where the medium of instruction is English. In this setting, through survey, interview, observation, documental analysis and social data collection this study aims to investigate the extent of inclusion for pupils with autism spectrum disorders (ASDs), using the main findings of HMIE, as reported by Macleod, to question the effectiveness of the current provision. The study will reveal whether some of the same issues and problems are arising in a country where the inclusion of children with special educational needs is a much more recent phenomenon and ultimately whether the situation would be more accurately described a 'fire fighting' or 'fire lighting'.

The rationale for the proposed research project is twofold. Firstly, Farroq (2007), who investigated the current status of educating Emirati children with ASDs in Dubai in her Masters thesis, notes that "there is a need for a study to cover the private mainstream schools ... in order to gain a holistic view of what is on offer for all children with ASDs". She identifies that there is a gap in the research field in this area and draws attention to the niche of this study.

Secondly, the motivation for the research is also based on the preliminary findings from another study that I conducted earlier this year to investigate how far the policy of inclusion has been translated into practice within mainstream international primary

schools in Dubai. The study focused on the broad practice of inclusion, but it became apparent during the research that a number of teachers interviewed within the study felt particularly concerned about children with an ASD who were attending mainstream schools. A teacher from one of the schools stated that: "we have children with autism and Asperger's here and a lot of schools find that difficult to cope with." (Kite 2007 unpublished assignment: 67<sup>2</sup>). Other teachers concurred:

School 1: "There is a boy here in this school in the reception year who has autism. He has a shadow teacher and me as a tutor and we are still not coping... he is disrupting the whole class and the teacher can't handle it." (Interview 1.7 Learning Support Tutor 2007: 73)

School 2: "I have a child with autism and it really has been left up to me as a class teacher to try and include him. I would have preferred a little more support. In Ireland different teachers would liaise together to make sure the child gets the best education" (Interview 2.3 Teacher 2007: 85)

"We do have a little one here with autism but his needs are not being met" (Interview 2.4 Teacher 2007: 88)

The main criticisms made by teachers in the former study seemed to align with those of MacLeod's news article: the lack of planned method, teacher knowledge, skills and training; the dependency on support staff; and, that teachers feel unable to cope with the situation. The research, therefore, would be able to establish whether these preliminary findings are more generalised and if so what some of the reasons and main barriers to inclusion might be in these cases of 'fire fighting'. Equally, should the research uncover examples of 'fire lighting', factors contributing to success may be considered.

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<sup>2</sup> 'Policy into Practice: Inclusion'

## **1.2 The Research Questions:**

**To what extent can the inclusion of pupils with ASDs in mainstream international primary schools in Dubai be described as 'fire fighting' or 'fire lighting'?**

1. Approximately how many pupils with a 'recognised' ASD attend mainstream international primary schools in Dubai (according to school records)? What levels of severity within the spectrum do the schools seem willing to cater for at this stage and why?
2. What kind of approaches/methods do mainstream international primary schools in Dubai adopt in teaching pupils with an ASD? What kind of training, knowledge and skills regarding ASDs do international primary school teaching staff in Dubai have and how are they supported to teach children with these disorders?
3. What is inclusion like for a child with an ASD in a mainstream international primary school in Dubai in terms of academic and social progress?

### **1.3 Organisation of Chapters**

Chapter 2 reviews a selection of relevant literature to the current study. Chapter 3 provides details of the approach taken to conduct the study, including details of the three research stages. Chapter 4 presents a summary of the research results from each stage and Chapter 5 discusses the findings and considers their importance in light of recent related research. Finally, Chapter 6 concludes the study and highlights a number of recommendations and suggestions for future research.

## Chapter 2: Literature Review

This literature review begins by setting out a current definition of autism spectrum disorders. The review then considers the current issues regarding the inclusion of pupils with ASDs in mainstream education globally. From this broad perspective the review narrows the focus to look specifically at the inclusion of pupils with ASDs in Dubai, in order to assess the current situation in the chosen context. Finally, it is necessary to widen the review once more and reflect upon the more general topic of 'inclusive education' due to the limited availability of specific literature relating to the inclusion of pupils with ASDs in the region and to understand some of the present issues of inclusion, which directly impact those with ASDs.

### 2.1 A Definition of Autism Spectrum Disorders

*...a withdrawal from the fabric of social life into the self. Hence the words "autistic" and "autism", from the Greek **autos** meaning "self". (Frith 2003)*

Sicile-Kira (2003) believes Autism Spectrum Disorders are "becoming the fastest-growing disability of this decade". Although a number of researchers would dispute her claim on the basis that the perceived rise in numbers of diagnosed cases can largely be attributed to a widening in diagnostic criteria (Jordan 1999), there is certainly a greater awareness of ASDs and knowledge and understanding of the syndrome has increased significantly (Jones 2002).

There are a number of theories regarding the causes of ASDs, although a single definitive cause does not as yet exist. Baron-Cohen and Bolton (1993) list some of the possible causal factors that may lead to the "one or several abnormalities in the brain" considered to produce ASDs, including: genetics and genetic conditions that may produce autism such as phenylketonuria, neurofibromatosis and Fragile X syndrome; difficulties in pregnancy and birth such as a rhesus incompatibility or mother aged over 35; and, infections such as rubella, cytomegalovirus or herpes encephalitis. All possible causes will remain speculative until sufficient evidence is produced. Until then, Baron-Cohen and Bolton suggest considering the 'final common pathway' model which links the possible causes to damage to the brain and therefore to the characteristics of ASDs:

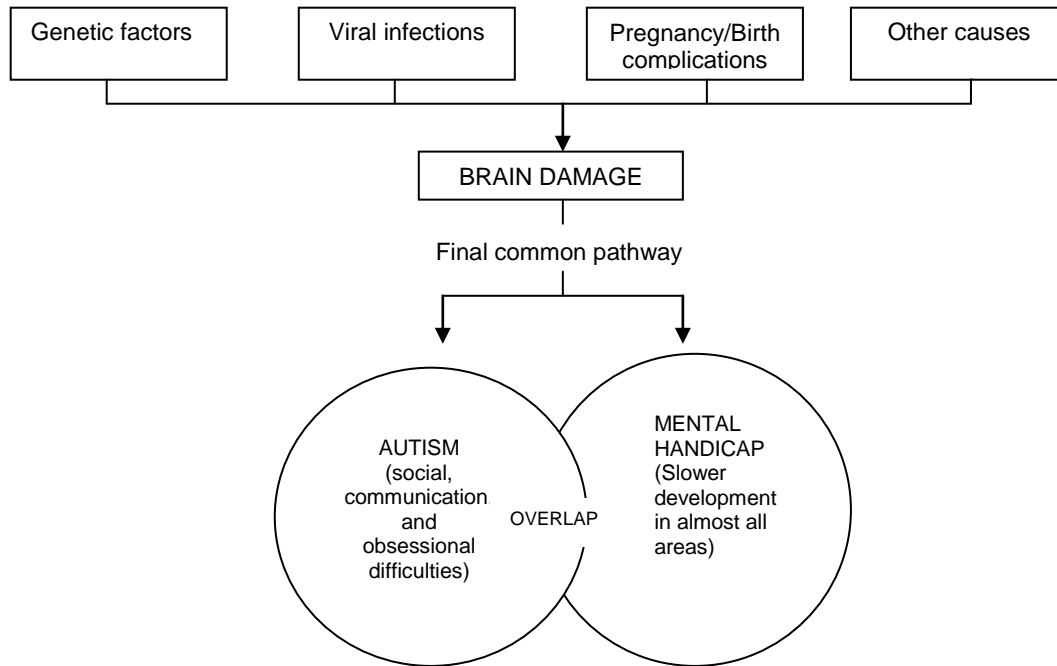


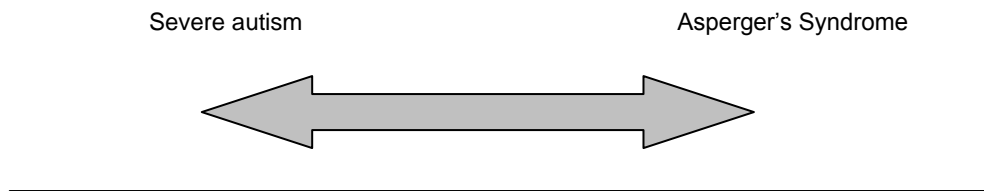
Figure 1: The final common pathway to autism (Baron-Cohen and Bolton 1993)

Recent media attention has focused on the possibility that ASDs may be triggered by the triple MMR vaccine. The theory is now largely discredited on the basis that studies have shown “no observable pattern that relates increases in cases to the introduction of the triple vaccines” (Frith 2003). Frith, however, as Sicile-Kira (2003), does not disregard the theory entirely, giving credence to the many direct observations made by parents of children with ASDs whose symptoms appeared following the vaccination and both researchers call for further research into the potential connection.

Due to the fact that the exact cause of ASDs is unknown and there is currently no medical test to diagnose ASDs (Sicile-Kira 2003), diagnosis is based on behavioural characteristics. The features of ASDs were first officially delineated in the 1940s by Leo Kanner (1943) and Hans Asperger (1944), although Frith (2003) provides evidence of the existence of the condition as early as 1799. Working separately, each without knowledge of the other’s work, both Kanner and Asperger observed features in common between groups of “strange” children whom they were studying (Frith 2003). The main shared feature was that these children were unable to develop normal relationships. Kanner went on to describe what is now termed ‘classic autism’ characterised by: autistic aloneness; desire for sameness; and, islets of ability. Asperger described: peripheral looks; stereotypic movements and

emotions that were hard to comprehend. Although both pioneers adopted the term 'autistic' to characterise their findings, the resulting Asperger's syndrome that we know of today is considered to feature at the opposite end of the autistic spectrum to Kanner's autism due to its milder symptoms and lack of the language delay present in classic autism (Frith 2003).

Broadness in fact is a key feature of the present day understanding of ASDs. The variance of ASDs was captured in Wing's definition of a 'continuum' (1988) or more recently a 'spectrum' (1996) (Jordan 1999). It is essential to understand that within the spectrum there is considerable diversity and that "no two children are the same" (Wall 2004).



*Figure 2: The autistic spectrum (Wall 2004)*

As a point of note, whether or not a school will be able to cater for a child with an ASD, regardless of where they fall on the spectrum, is largely dependent on the practice and ethos found in the school, according to Jones (2002), not on the characteristics of the pupil. Currently it seems, however, that pupils at the more able end of the spectrum are the most successful candidates for mainstream education (Wall 2004).

There is at present some dispute over which separately labelled conditions may reasonably constitute part of the spectrum. Some professionals do not consider Asperger's syndrome, for instance, to be a part of the spectrum (Sicile-Kira 2003), whereas Jordan (1999) argues that evidence for a "clear distinction" between the two groups is "not entirely convincing". Wing (1981 cited by Jordan 1999) equates those with high ability and autism with those classified as having Asperger's syndrome, thus disputing the need for a separate label at all. Conversely, Attwood (cited by Sicile-Kira 2003) believes it is important to recognise Asperger's syndrome not simply as a mild form of autism, but as a "different expression of the condition". Overall, practicality issues suggest some sense in including Asperger's syndrome in the spectrum because as the condition presents some of the same features of ASDs, similar provisions and approaches will most likely be adopted (Sicile-Kira 2003,

Sherratt 2005). Asperger's syndrome is, therefore, considered as part of the spectrum for the purposes of this study.

Other conditions or subgroups that are sometimes linked to the spectrum, if presented co-morbidly with developmental delays in social understanding and communication include: semantic-pragmatic language disorder; ADHD; Rett syndrome; pervasive developmental disorder; Landau-Kleffner syndrome, and Tourette syndrome (Sherratt 2005). However, total agreement about the conditions that fall within the spectrum has not yet been established (Jones 2003), which complicates matters for those striving for an exact definition. For example, Wall (2004) includes Rett syndrome in the spectrum, whereas Baron-Cohen and Bolton (1993) consider it a separate entity and similarly whilst Wall (2004) does not consider William's syndrome part of the spectrum, Jordan (1999) believes that people with William's syndrome may benefit from being treated as part of the spectrum for treatment purposes. To complicate matters even further, Williams (2006), who has an ASD herself, disputes the validity of the term 'ASD'. She acknowledges the existence of a condition, but considers it more accurate to refer to a cluster of conditions as opposed to just one under an umbrella term. Sherratt (2005), therefore, advises taking an open approach to this complex condition and referring to a child as being on the "spectrum of autistic conditions".

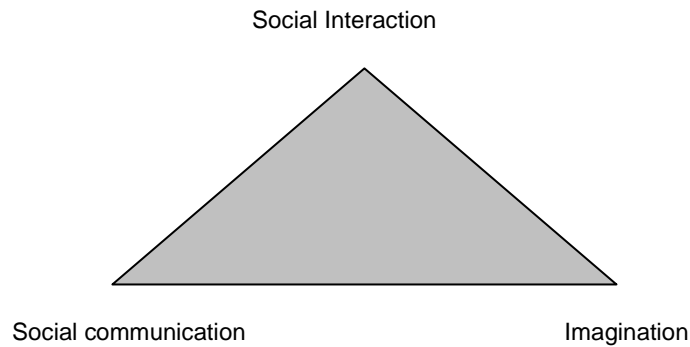
Two recognised sources for diagnosis descriptors are the *ICD 10*<sup>3</sup> (1993), compiled by the WHO and the *DSM IV*<sup>4</sup> (1994), compiled by the American Psychiatric Association (Plimley and Bowen 2006) (Appendix 6). These systems appear to be based on Wing's influential 'triad of impairments' (Jordan and Jones 1999). Wall (2004) describes seeking an absolute definition of ASDs at present as "seeking the impossible", but points out that the three classic features, as isolated by Wing in her model, should arise in every case:

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<sup>3</sup> *International Classification of Diseases version 10*

<sup>4</sup> *Diagnostic and Statistical Manual of Mental Health version IV*





*Figure 3: The Triad of Impairments (Wing 1988, as cited by Wall 2004)*

In order that a diagnosis of an ASD is made an impairment or 'developmental difference' (Jordan and Jones 1999) must present in each aspect of the triad, as opposed to just one or even two. There is also a general consensus amongst researchers that diagnosticians would expect these differences to occur before the age of three (e.g. Plimey and Bowen 2006, Sicile-Kira 2003, Wall 2004), although Jordan (1999) believes one should also account for a possible late onset. The *ICD 10* and *DSM IV* in Appendix 6 provide extensive details of the characteristics that normally occur in each section of the triad. Plimley and Bowen (2006), as a number of other researchers (e.g. Jones 2002, Sherratt 2005, Sicile-Kira 2003), provide a simplified list of common characteristics for teachers identifying children within school:

Table 1: Common characteristics of children with ASDs in school (Plimley and Bowen 2006)

<b>Social Interaction</b>	<b>Communication</b>	<b>Rigidity of thought and behaviour (Imagination)</b>
<ul style="list-style-type: none"> <li>• Limited play skills</li> <li>• Limited peer tolerance</li> <li>• Inability to share or take turns</li> <li>• Inappropriate play or social behaviours</li> <li>• No desire to investigate or explore, unless it's an interest</li> <li>• Lack of empathy for others</li> <li>• Inability to know what others are thinking or feeling</li> <li>• Socially aloof or awkward</li> <li>• Restricted interests</li> <li>• Simple social actions are often a complicated process (lining up, personal space, dialogue)</li> <li>• May know some social conventions and apply them rigidly</li> </ul>	<ul style="list-style-type: none"> <li>• Understands some basic instructions</li> <li>• Expresses own needs</li> <li>• Lack of desire to communicate</li> <li>• Lack of understanding of the attempts of others</li> <li>• No shared enjoyment of social situations</li> <li>• No use of gesture, intonation or non-verbal expression, and inability to understand their use by others</li> <li>• Cannot respond spontaneously</li> <li>• Appears not to 'hear' what has been said</li> <li>• Limited conversation repertoire</li> <li>• Talks incessantly on a topic of interest and can manipulate conversations round this topic</li> </ul>	<ul style="list-style-type: none"> <li>• Does not understand pretend play/drama/role play</li> <li>• Cannot use imagination to create models or pictures – images are derived from others</li> <li>• Difficulty in social games – turn-taking, winning, a draw</li> <li>• Repetitive quality to play</li> <li>• Will copy but not necessarily understand – often sees the outcome (bad behaviour and punishment)</li> <li>• Inability to see cause and effect of their own behaviour</li> <li>• Holds black-and-white views</li> <li>• Doesn't understand subtlety/sarcasm/jokes</li> <li>• Cannot create spontaneously without a model or intensive input</li> </ul>

In addition to the triad characteristics, sensory issues of hypersensitivity to sound, sight, smell or taste are often apparent in cases of ASD, but are not required for diagnosis (Frith 2003).

ASDs are generally thought to affect more boys than girls at a ratio of 4:1 (Sicile-Kira 2003), although there is a possibility that ASDs are harder to detect in girls as they tend to display greater social empathy and diagnostic tools may need to be modified to account for this (Jones 2002).

## **2.2 Current Issues regarding the Inclusion of Pupils with ASDs in Mainstream Education**

According to Baron Cohen and Bolton (1993) children with autism were considered ineducable in the past. Such attitudes, they explain, meant that the children were placed in the “back wards of long-stay mental-handicap institutions”. Thankfully, they continue, current evidence suggests that on the contrary the majority of children with ASDs can be educated provided the education that they receive is tailored to their needs. Education, in fact, according to Jordan (1999) and Dahle (2003), citing Howlin (1997), can play a key role in improving functioning for later life. Sicile-Kira (2003) notes that, although every country has different laws and acts concerning education, the challenge they face is the same: “how to educate an increasing number of children in the best possible manner”. Research literature suggests that there is a general move towards including pupils with ASDs in mainstream education, with many pupils attending school full-time (Jones 2002). Despite this move, however, Jones (2002) points out that there is little empirical evidence regarding the effectiveness of different placements, including inclusive education (Eaves 1997) and Barnard et al. (2000), citing Howlin (1997), concur that all types of education have both “benefits and drawbacks”. Special schools, for instance, Barnard et al. claim, may have more highly skilled staff, but lack academic challenge, whereas the opposite may be true of mainstream. Sicile-Kira (2003) considers the important factor in choosing the right education to be less associated with the actual place than the level of appropriate expertise and she provides a list of questions for parents considering mainstream education to help them decide if the support available is sufficient. Her questions reflect a general consensus amongst authors that successful inclusive practice is possible, but depends on the existence of certain factors, namely: that adopting a policy of inclusion does not just become empty rhetoric, but is dealt with in real practical terms (McGregor and Campbell 2001) and action is taken prior to the failure of the child, as opposed to after (Jordan 2004); professionals receive adequate training and experience (McGregor and Campbell 2001) so that children are not unnecessarily sent home when teachers cannot cope or even excluded, which at present happens on a regular basis as opposed to the teaching of appropriate coping strategies (Barnard et al. 2000, HMIE 2006, Sicile-Kira 2003); that there are sufficient resources (Barnard et al. 2002) and a reasonable staff-pupil ratio; and that schools are able to be flexible in their approaches (Sicile-Kira 2003). Jones (2002) provides a useful summary of the key factors she

considers necessary for an effective school placement for a pupil with ASD in Appendix 2 which reflects many of these points.

Currently it seems that authors consider mainstream schooling as a potentially successful option for pupils with high-functioning ASD (Francke and Geist 2003, Kasari et al. 1999, Wall 2004). Harrower and Dunlap (2001) document that researchers have found that pupils: "(a) display higher levels of engagement and social interaction, (b) give and receive higher levels of social support, (c) have larger friendship networks, and (d) have developmentally more advanced individualized education plan goals than their counterparts in segregated placements". Kalyva and Avramidis (2005) dispute this stance however, stating that even pupils at the high-functioning end of the spectrum may still experience difficulties associated with social integration despite the possibility of academic gains. Williams' (cited by Sicile-Kira 2003) sentiments below concur with this:

*"There are many things that people with "autism" often seek to avoid: external control, disorder, chaos, noise, bright light, touch, involvement, being affected emotionally, being looked at or made to look. Unfortunately, most educational environments are all about the very things that are the strongest sources of aversion"*

MacDonald (cited by Sicile-Kira 2003) states that "special educational needs still gets the fuzzy end of the lollipop when it comes to the need for flexibility and providing the equipment and resources required to meet real needs. After all, good SEN provision never put any school high in the national league tables". Speaking from a UK perspective, Wall (2004) notes that at present there is no standard form of provision for young pupils with ASDs. Wall observes that the rapid development of provision, which emerged in response to the growing numbers of children diagnosed with the condition has, due to its speedy application, not been thoroughly planned or is necessarily coherent. Barnard et al. (2000) agree, "a model of wholesale inclusive programming that is superior to the more traditional special education service ... does not exist at present". Jordan and Jones (1999) provide a useful summary of the pros and cons of mainstream placement for children with ASDs, which is included in Appendix 3.

A number of key factors indicative of successful inclusion of pupils with ASDs repeatedly arise in the current literature. These are foremost: Skilled, trained

teachers (e.g. Helps et al. 1999, Hinds 2006); effective employment of LSAs<sup>5</sup> (e.g. Logan 2006, Moran and Abbott 2002); parental (e.g. Dunlap and Bunton-Pierce 1999, Renty and Roeyers 2006) and multi-agency involvement (e.g. Dahle 2003, Jordan 1999); and, the use of empirically tested intervention and strategies (e.g. Freeman 1997).

In their 2002 report, Barnard et al. state that 72% of the schools they surveyed were dissatisfied with the extent of teachers' training in ASDs. They found that only 22% of teachers who taught in schools that cater for children with ASDs had any training and that this had been mostly for no longer than 1-4 hours. One in four parents, according to Hinds (2006) are unhappy with the understanding of ASDs amongst SEN co-ordinators. The HMIE (2006) identify teacher training as a key area for development and suggest strategies to implement it including: sponsoring teachers to pursue post-graduate certificates; offering training courses; and, running modular Masters courses. Barnard et al. (2000) recommend that training occurs at all levels: ITT, SENCO and that of the practising teacher, for instance. Sherratt (2005) concurs with this stating that a whole-school approach is vital for successful inclusion of children with ASDs, alongside the implementation of a whole school policy so all staff are cognizant with the approach. Best practice, according to the HMIE (2006), involves head teachers having a "clear knowledge and understanding of ASD" and ensuring that all staff have "an appropriate understanding" also.

Knowledge of ASDs is of "crucial importance" in "establishing and maintaining good practice" (Renty and Roeyers 2006). Helps (1999), citing Powell and Jordan (1993), argues that unfortunately the normal intuition of the class teacher is likely to "mislead" when applied to ASDs and may, for example, lead to an overestimate of the pupil's cognitive ability, which in turn may confuse and frustrate the pupil and could lead to aggression, or might lead to exclusion (Batten 2005). Thorough understanding of ASDs is essential, Jordan (1999) explains, as basing teaching on observable behaviours is disastrous for autism because the teacher's worldview will be greatly different from that of the pupil and assumptions made may lead to "potentially damaging approaches". Wall (2004) discovered, by conducting a small-scale research project in part of the UK, that teachers were very keen to develop their knowledge and understanding of ASDs even though they had not received much training to date. A positive experience can be created for a child, Sicile-Kira (2003)

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<sup>5</sup> Learning Support Assistants

posits, by working with a teacher who does not necessarily have any specific training, but who is willing to learn and be flexible. Tutt et al (2006) contend the principles of good general teaching approaches should not be discarded in favour of an approach that reduces education to a "matter of training for specific tasks in the world". Overall, Tutt et al. (2006) argue, education should aim to develop independent and critical thought even when a pupil finds it very hard to take responsibility for his or her own actions.

In order to achieve such a balance between good general teaching and use of specific strategy teachers clearly require support in order to avoid developing stress, which is highly likely in such a situation, even with an "increased" understanding of ASDs (Jordan and Jones 1999). Jordan and Jones recommend a number of ways for staff to manage stress including: planning times of the day to relax even when it may seem there is not enough time in the day to do so; doing some form of physical activity; and, spending time away from pupils at break times and lunchtimes. Glashan et al. (2004) propose that building a community of knowledge and experience is important to help alleviate the stress related to teaching children with ASDs with little training. Providing an autism-specific outreach service for support, they argue, will not only make training and advice available, but also strengthen links in the community amongst staff and across schools. Similarly, Barnard et al. (2002) recommend that special schools develop their role as "centres of excellence", providing a consultative service. Batten (2005) provides two illustrative examples of good practice which highlight how, with knowledge of suitable adjustments, children with ASDs may be included in a straightforward and effective manner (Appendix 4).

The employment of LSAs to support pupils with ASDs is a growing trend (e.g. Giangreco et al. 1997, Logan 2006, Plimley et al. 2006). There is a general consensus amongst researchers that LSAs provide a great help to children with ASDs (e.g. Barnard et al. 2002, Margerison 1997, Moran and Abbott 2002), are even under-used (Jerwood 1999), and perhaps valuable for pupils' social interaction (Lacey 2001). However, there are a number of commonly arising issues present in the research literature that need to be addressed if LSA employment is to be fully effective: LSAs must be provided with a clear job and role description, defining expectations in comparison to the teacher (e.g. Jerwood 1999, Collins et al. 2006); to avoid the lack of recognition so frequently experienced by LSAs and the peripheral position they often receive in school policy (Mansaray 2006) LSAs need to form part of a reflective team (Mistry et al. 2004) as opposed to taking sole responsibility for the

pupil (HMIE 2006), be adequately trained (e.g. Lacey 2001, Woolfson and Truswell 2005), given time to complete tasks and work in a communicative environment (e.g. Jerwood 1999); and, it is paramount that teachers understand how to break down tasks set for pupils to an appropriate level, rather than assuming the LSA will do this, as otherwise this is not only unfair for the LSA, but also cannot be construed as genuine inclusion (Lacey 2001). In the event that these factors are not taken into account research highlights a number of potential issues surrounding LSA support that can be problematic if not effectively handled. Lacey (2001), for instance, believes there is a danger that LSAs may "prevent children's independence by encouraging 'learned helplessness' (Siegelman 1975)". Researchers seem to be in general agreement that assigning LSAs to just one pupil is less effective than encouraging them to monitor the pupil in question whilst assisting a whole group (e.g. Jerwood 1999, Logan 2006). This reduces the likelihood of the development of stigma, commonly associated with overly attentive adult support (e.g. Logan 2006, Mansaray 2006). Giangreco et al. (1997) cite a number of issues arising from close assistant proximity, namely: interference with ownership and responsibility by general educators; separation from classmates; dependence on adults; impact on peer interactions; and, loss of personal control. Robertson et al. (2003), however, claim that their study illustrates how LSAs, or paraprofessionals, have a strong relationship with teachers and in fact assist in the development of the interaction between both teacher and pupil and peers and pupil. Barnard et al. (2000) also raise the point that despite the aforementioned criticisms "is it reasonable to expect the general teacher to interact with all pupils?" In addition, where LSAs are effectively included, therefore, the issue of contact time needs to be addressed:

*Inclusion is not a cheap option but seems increasingly to be used as such. A child with autism is autistic all day, not just 18 hours per week*

(Comment from LEA mainstream primary (UK) cited by Barnard et al. 2002)

The involvement of parents in the education of pupils with ASDs is unanimously supported by research (e.g. Dahle 2003, Dunlap and Bunton-Pierce 1999, Jordan 2004). Jordan and Jones (1999) state that parents have "detailed and excellent knowledge over time about their own child" and provide a list of basic questions for teachers to ask parents in order to ascertain important information about the child's habits and home life. They recommend keeping a home-school book, encouraging network groups for parents and if possible allowing the parents to see how their child

spends his day at school. It is important to remember, however, that as well as providing information; parents also require support from the school (Jones 2002). Coffey and Obringer (2004) suggest that there could be real benefit in teachers making home visits also.

Many researchers advocate the use of multi-agency support including speech and occupational therapists, behaviour therapists and educational psychologists (e.g. HMIE 2006, Jordan 2004). In one US study the parents were found to use a wide array of services such as these to support their children (Thomas et al. 2007). There are a number of issues concerning the adequate provision of such specialist support including: the constraints of budgets and policy (Sicile-Kira 2003); delays in obtaining educational psychologist reports, in some cases as long as two years (Glashan et al. 2004); under use and lack of understanding of the benefits of speech therapy (such as social skills groups) by schools (Glashan et al. 2004); and, McGregor and Campbell (2001) report that teachers in their study found educational psychologist advice inadequate because it did not address practical strategies for coping in the classroom.

The fact that merely placing a child with ASD in mainstream education is in itself not enough to ensure successful inclusion seems uncontested by research (e.g. Glashan et al. 2004, Ochs 2001), even though some pupils are still placed inappropriately without support (HMIE 2006). Key to success is the adoption of various strategies or interventions (MacLeod 2007). With effective strategy, pupils with ASDs can be taught at the heart of the school and class, not the periphery (Sherratt 2005).

There are a great number of strategies and interventions available for pupils with ASDs, some of which are more relevant to mainstream education. Whichever strategies are chosen, concern exists amongst researchers that selection is based on those that have been proven empirically (Dunlap and Bunton-Pierce 1999) as limited research exists regarding the effectiveness of many interventions (Jones 2002). When implementing any strategy, therefore, Jones (2002) recommends spending time reflecting on its success. Some of the more common interventions include: Applied Behaviour Analysis (ABA), Treatment and Education of Autistic and related Communication handicapped Children (TEACCH), Picture Exchange Communication System (PECS), visual schedules and social behaviour and social skills training (Sicile-Kira 2003). Common strategies include: writing an IEP; adapting the curriculum; and, using peers for support. Research recommends using a



combination of interventions and strategies, rather than just one approach (Freeman 1997, Helps et al. 1999). Wall (2004) describes her eclectic approach:

*Personally, I used key elements of TEACCH plus some elements of sensory theory, combined with a play based developmental curriculum ... This approach when adapted to individual strengths and preferences, and taking into account the difficulties experienced by each individual child, appeared to work well...*

Sicile-Kira (2003) strongly asserts: "regardless of what kind of school you work at or ASD ability you teach, all teaching staff should have a working knowledge of ABA. It is the cornerstone of all effective teaching techniques for people with ASDs". Marwick et al. (2005) concur with this, declaring, "intervention based upon a behavioural model currently enjoys the strongest research validation for effectiveness in ASD" if used from an early age. HMIE (2006) found that the most commonly adopted approaches were TEACCH and ASD-specific speech and language therapy. Regardless of which exact interventions are adopted, research specifies key principles that have been distilled from the range: that intervention occurs early; is structured and systematic; addresses the child's needs; includes normally developing children as models (e.g. Dahle 2003); uses peer support (e.g. HMIE 2006); is clear, unambiguous and explicit; uses repetition to consolidate; employs visual methods; provides opportunities for learning with personal meaning; involves a high level of adult support (e.g. Sherratt 2005); provides space for time out and minimises background disturbance; and, takes social times such as playtimes into account (e.g. Moore 2007).

Particular emphasis is placed on early intervention. Research suggests that ASDs are under diagnosed (HMIE 2006): "Because this is an invisible disability, it's frequently not diagnosed" (Reed, NAS Policy Officer for children, cited by Hinds 2006). Renty and Roeyers (2006) affirm that in Flanders diagnosis still takes place quite late at around six years of age, whilst much earlier detection is possible with increasingly sophisticated testing procedures such as CHAT<sup>6</sup> as early as 18 months. A lack of or delayed intervention, which stems from later diagnosis, may hinder pupils from entering mainstream successfully according to Marwick et al. (2005). Parents are more likely to turn to expensive and unproven alternatives if there is a

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<sup>6</sup> CHAT: Checklist for Autism in Toddlers (Baron-Cohen et al. 1992: 1996a cited by Jordan 1999)

considerable gap between identification and support, Marwick et al. contend. Jordan (2008) recommends that practitioners do not wait for a full diagnosis, but act at the point of "justified suspicion" and provide resources and strategies before the child has deteriorated. This salient point is supported by the HMIE (2006) who recognise that many children are not diagnosed and state that best practice does not limit support to those who hold a formal medical diagnosis.

Two familiar areas for mainstream special education support are: IEPs and curriculum adaptation. Barnard et al. (2000) state that 79% of parents in their survey said their children had IEPs, and only 10% of these found the IEP unhelpful. The HMIE (2006), however, found that IEP targets set in mainstream education did not always address "specific needs in relation to ASD" and were sometimes "insufficiently focused". Best practice, according to the HMIE consisted of integrated multi-agency targets, or in one case the use of colour coded targets that "tie in with the triad of impairments", thus ensuring individual needs within the triad were met. Sherratt (2005) supports this approach, adding that the IEP should frequently "refer to areas of difficulty such as social understanding, social skills, communication, play and creativity". Sherratt expresses concern that targets should not merely be a performance of "jumping through hoops", but involve genuine learning. Equally noteworthy, Sherratt argues, is the importance of reflecting the child's strengths and ensuring that these are integrated into the broader curriculum.

The amount of curriculum adaptation required for a child with an ASD will depend on the ability of the pupil, according to Sherratt (2005). The key is to ensure the needs of the child remain paramount and that the modification does not endanger their entitlement to a broad curriculum (Sherratt 2005). Ensuring breadth using some curricula may prove difficult. Barnard et al. (2000) believe the National Curriculum (UK) does not "adequately reflect the broader educational needs of children with autism" and requires an imaginative adaptation in order to successfully meet the needs of the children. Potter and Whittaker (2001) take this argument further, citing Halpin and Lewis (1996), contending the "subject-based format continues to appear significantly at odds with the process model of curriculum accepted by many as fundamental in the area of special educational needs". The National Curriculum (UK), they argue, focuses predominantly on average children and does not allow teachers a great deal of flexibility in order to focus on communication, for instance, at the expense of history. Flexibility (Jordan and Jones 1999) is paramount to an inclusive curriculum with a *meaningful* focus on "communication, social skills and

self-determination skills for *all* children” (Potter and Whittaker 2001). The National Curriculum (UK) focus on communication and discussion *as a means of problem solving*, however, Jordan and Jones (1999) avouch, “has been disastrous for many children with ASDs”. Similarly expecting a pupil with an ASD to write from imagination, for example, as opposed to following a frame or using knowledge of something seen before is also an inflexible and unreasonable expectation (Jordan and Jones 1999).

As an overview, Dahle (2003) provides a clear summary of best practice and things to avoid for early educators. She also presents some useful classroom adaptations for general educators. These helpful and salient points have been reproduced in Appendix 5.

Social inclusion for children with ASDs is an area of considerable concern within research. Boutot (2007) explains that children with ASDs find social relationships difficult because they may have difficulty “reading social cues; initiating, sustaining, or terminating a conversation, or behaving appropriately”. Boutot depicts the general characteristics of an ‘unpopular pupil’ as one whom: plays alone; is from a poor socio-economic status; has poor social skills; does not cooperate with others; is a poor athlete; poor student; and, who displays inappropriate behaviour. She believes it does not require much of a “stretch of the imagination” to see that some students with ASD fulfil these criteria. Bullying, according to Sicile-Kira (2003) is a “major problem” within the mainstream. She recommends that all staff read *Freaks, Geeks and Asperger Syndrome: A User Guide to Adolescence* by Luke Jackson, just to get a measure of how pupils are “routinely bullied by their peers as well as ignorant teaching staff”. Barnard et al. (2002) also state that even though teachers do not consider preventing bullying as a high priority for children with ASDs, “bullying and teasing are major barriers to enjoyment and progress in education”. Chamberlain et al. (2007) explain that evidence exists that mainstream placement may increase the risk of isolation and rejection and that even though children are placed in the mainstream to develop socially, little is in fact known about how high functioning pupils with ASD form peer relationships. Ochs et al. (2001:409) provide case study data that illustrates how a child with ASD may be rejected by peers. The child, whose diagnosis was unknown to school authorities, spent long periods of the day silent and apart. She was unassisted by an LSA and was noticeably never involved in the general chatter her classmates intermittently engaged in. Ochs et al., however, also present data from a child who is more successfully included. In this

case, the child's diagnosis is fully disclosed to staff and perhaps more importantly to peers. Peer awareness, Ochs et al. claim, "more than the HFA children's IQ scores, impacts on the success, or lack thereof, of the inclusion process". This stance is supported by a number of other researchers (e.g. Frederickson et al. 2005, HMIE 2006, Moore 2007). Within research there are some methods for dealing with social difficulties that repeatedly recommended, for instance: early intervention and teaching of social skills (Gena and Kymissis 2001); teacher support in developing relationships between classmates and pupil with ASD in class and at play (e.g. Jones 2002); peer tutoring (e.g. Jones 2007); developing a Circle of Friends (e.g. Frederickson et al. 2005); and, using social stories (Sicile-Kira 2003).

Some researchers claim, however, that despite these interventions children with ASDs will not be able to form genuine reciprocal relationships with mainstream peers (e.g. Sapon-Shevin et al. 1998 cited by Kalyva and Avramidis 2005). Kalyva and Avramidis (2005) dispute this citing evidence from their study that through using the Circle of Friends and developing "initiation of interaction" in children with ASDs this is the "first step towards the formation of a mutual relationship". Alderson and Goodey (1999) support Kalyva and Avramidis' argument, adding that according to evidence from their study, segregation actually increases autistic "tendencies of isolation and self-absorption". Chamberlain et al. (2007) also contest the idea that reciprocal relationships are not possible even though their study reveals lower levels of reciprocity overall. They argue that just as inclusion challenges our ingrained thinking, so we perhaps need to challenge our static concept of what makes adequate friendship. "If a child with autism is genuinely satisfied with the social opportunities and experiences available in a regular classroom, then perhaps full emotional reciprocity in a traditional sense is not so necessary".

## **2.3 The Inclusion of Pupils with ASDs in Mainstream Education in Dubai**

Very few published studies involving the education of children with ASDs have been carried out in Dubai, and to the author's knowledge the inclusion of pupils with ASDs in international mainstream primary education has not been researched at all apart from a brief sideline investigation in Farooq's (2007) dissertation (below).

The most relevant study to this project is an unpublished Masters dissertation by Farooq (2007). Farooq's thesis investigates the current status of educating Emirati children with ASDs in Dubai. She focuses her study on local government schools and some Centres in Dubai. Following her investigation, Farooq concludes that, "a place for a child with autism in a public regular school in Dubai is virtually non-existent". She believes it may become possible in the near future, but at present most children, "are either to be found in autism specific centres or all-purpose special needs ones". Furthermore, Farooq observes that the progress made by the children in the centres is uneven, with some hardly making any headway and others excelling in their developmental skills. At present, she continues, although "top-level" personnel have a "positive air" about inclusion, administration and teaching staff are far more negative, believing mainstream school inappropriate for pupils with ASD.

Farooq (2007) conducts a small sideline investigation into the current situation regarding the inclusion of pupils with ASD in mainstream private schools by contacting five schools and asking about provision. Her findings reveal a diverse picture: an American school and dual curriculum school that purposely made no provision for children with SEN; a British school, with a learning support department, that mainstreamed a child with a "mild" form of ASD; an Indian school which had a special needs centre with provisions for pupils with high-functioning ASD; and an Arabic medium school who have a special class for children with SEN, but reported that they could no longer support the children. The Arabic medium school, Farooq reports, "denied the fact that children with ASD, or any child with special needs, was studying in the school".

Farooq (2007) cites a sparse number of other studies that have been carried out in the UAE region. The two other most relevant to this project are a study by Gaad

(2003) which investigates the regular local government school experience of a child with ASD and an unpublished Masters dissertation by Hammouda (2005) which investigates the case of a child with ASD in a regular pre-school environment.

Gaad (2003) conducted a nine-month study into the first case of inclusion regarding a child with ASD in the UAE. She discovered that until recently very little was known about ASDs in the UAE and very few specialised centres existed except for those catering for mental and severe behavioural disabilities. She describes the emergence of the Abu Dhabi Autism Centre, which was initially where 'Ali', the subject of her study, was educated. An Autism Centre now also exists in Dubai. Gaad found that the process of including Ali in a local government school was partly hindered by ingrained beliefs, such as those of a top official responsible for placement in the Ministry who stated: "Your son was not meant to be in a normal school my dear. God created us all with different levels of thinking and abilities. You should concentrate on his strong skills, and hobbies in the centre and develop them", but also by a range of other missing factors she considered vital for successful inclusion in the region, namely: Teacher and teacher 'helper' training; peer awareness; legal backing; parent-school collaboration; careful planning and the development of a learning community; and, a lack of societal and professional knowledge and awareness about the condition.

Conversely, Hammouda's 2005 study, Farooq (2007) observes, concludes that the inclusion of the boy she studied was quite successful on the basis that he achieved most of his IEP targets.

Eapen et al. (2007) recently conducted a study into the prevalence of ASDs in preschool children in the UAE. Their study reports that the prevalence is comparable with reports from western countries: "a weighted prevalence of 29 per 10,000 for PDD in the 3-year-old UAE national population". Eapen et al. (2007) note that there is a need for better awareness and effective screening programmes, because their study revealed that many children had "slipped through the available paediatric surveillance". Considering the social, health and economic burden of PDD, Eapen et al. recommend that studies such as theirs are used to determine the number of children likely to need specialised services and also to develop the current "medical, educational and rehabilitative services". Relevant to Eapen et al.'s recommendations are the comments of Sara Baqer (cited by Mustafa 2008), from the Dubai Autism Centre, who states that, "the four autism centres in the UAE are swamped with

applications and have long waiting lists of children seeking admission". There is a period of up to six months, she explains, for an autism assessment test. Furthermore, according to Masudi (2007) many parents are choosing to send their children to boarding schools abroad, despite the high costs involved, due in part to the lack of special needs facilities and "short-lived ties with teachers" in Dubai.

## 2.4 Inclusive Education in Dubai

Despite the dearth of published literature specifically regarding the inclusion of children with ASD in mainstream education in Dubai (or the UAE), much more has been written about the inclusion as a whole in the region, which is relevant to this study. Children with SEN have certain options for education in the UAE. The public mainstream education system provides special education classes or resource room support for National pupils whose needs are not deemed too severe for mainstream school. Those pupils who are considered to have more obvious needs may not enter the public mainstream education system and parents must provide appropriate support for them, such as the Dubai Center for Special Needs, although many remain at home (Bradshaw et al. 2004).

The private international mainstream education system “varies considerably in its organizational sophistication for supporting students with special needs” (Bradshaw et al 2004). Bradshaw et al. report the following salient points regarding the inclusion of pupils with SEN in private mainstream facilities:

- The Ministry for Education and Youth requires that private schools provide extra support for pupils with SEN if they knowingly accept them.
- The Ministry for Education and Youth is in the early stages of developing guidelines for private schools (2004)
- The Ministry for Education and Youth is interested in developing awareness of pupils with SEN and understanding of effective intervention strategies
- Many private schools are unwilling to accept pupils with SEN because of funding or expertise restraints
- It is quite likely that many private schools have pupils with mild forms of SEN enrolled and that these students are “maintained” until their needs become more apparent when “the gap in their performance levels widens in the grades six to seven”

In 2004 when Bradshaw et al completed their research, the UAE had no federal legislation that supported accessibility for pupils with SEN or a specific categorical system for identifying and providing for pupils with SEN. The national aim for educating people with disabilities in the National Plan for Development (1999) was and is to: “raise the child to become independent, and a good citizen who knows his



duties, understands his rights, and works towards the continuous development of the nation" (cited by Gaad 2001). A new law now also exists: 'Federal Law No. 29 of year 2006 on Rights of People with Special Needs', which gives all children the right to enter mainstream school (Arif and Gaad 2008), although the implementation is still in the early stages. The law states:

The State guarantees to the person with special needs access to equal opportunities of education within all educational institutions ... whether in normal or private classes... The special needs do not constitute a reason for prohibiting the person from applying for, or joining or entering any education institution whether public or private. (Article 12)

Gaad (2004a) notes that the UAE has achieved "a great deal" over the last thirty years to improve the social system, but calls for a comprehensive policy on inclusion and an "intensive public sensitisation" to the situation as more pupils with SEN begin to move into the regular classroom (Alghazo and Gaad 2004). Alghazo and Gaad (2004) recognise that despite legislation improvements, it is 'attitudes' that need to change for inclusive education to be successful. In 2001 Gaad cited the opinions of a top decision maker in one of the Emirates in regards to the inclusion of children with Down's syndrome, "I don't think there is any need for that", he argues, "those children don't need 30 children in the classroom around them". In the same study Gaad also cites the views of a senior official at the Department of Special Education (Abu Dhabi): "Inclusion here", he states, "means including children with various special educational needs in regular school settings. There are, however, limitations on such special needs such as children with obvious mental disabilities". The pervasive attitude amongst officials, cited by Gaad (2001), therefore, seems to be that children with certain SEN are best educated in Centres. Alghazo and Gaad (2004) also found that mainstream public teacher attitudes in the UAE were, in general, negative towards inclusion. Preliminary research carried out by Bradshaw et al. (2004) concurs with Alghazo and Gaad's (2004) findings, indicating common concerns about inclusion amongst teachers: time taken away from the rest of students; class size; safety of children; and, lack of training and resources. Furthermore, Gaad (2004b) also found that teachers who have chosen to work with children with SEN still experience a negativity towards them and are stigmatised by their choice of profession: "It is as simple as this", Gaad states, "because these children are stigmatised in society, so are their teachers".

Gaad (2006) believes UAE society still apparently lacks interest in the plight of children with Down's syndrome, for instance. "The condition of DS is nearly a taboo subject in this part of the world", she argues, with many "myths and misconceptions" still surrounding the condition. Her 2006 research investigates the success of a pioneer support group for Down's Syndrome and finds the organisation helps to increase social acceptance and make some progress in dispelling myths. Job opportunities in UAE society, Bradshaw et al. (2004) report are also limited for people with disabilities: "among the 1422 people with disabilities in Abu Dhabi (the capital city), only 20 persons are employed".

Of further concern to the successful establishment of an inclusive schooling system in the UAE are the provisional results obtained by Gaad's 2004(a) study, which investigated the inclusion of students with ELN<sup>7</sup>. Gaad reports that her research "showed many holes in the system" and that specialists in the field showed an inability to adequately identify pupils with ELN, especially those with 'hidden special needs'. These children, Gaad continues, are not identified until they "fail their teachers, and their schools, and after many years of struggling with private tuition". Gaad (2004a) recommends at the very least that: teachers are issued check sheets in order that they learn to identify the needs early enough for modifications to be made, and that policies and an official 'code of practice' are developed.

The author's own unpublished student research to date, carried out in mainstream international primary schools in Dubai, reveals the possibility that currently there are a number of tensions relating to the inclusion of children with SEN, including: between the desire to accept all children with SEN, often expressed in school policy, and the statement that only those without 'significant' needs may be accepted; between the intention to make SEN a whole school responsibility whilst continuing to implement an 'add-on' system of learning support; and, in promoting the idea of early intervention, but not considering the practicalities of implementation (2008<sup>8</sup>).

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<sup>7</sup> Exceptional Learning Needs

<sup>8</sup> This refers to a previous assignment undertaken for a study module for the MEd at BUiD included in the References section

## **Chapter 3: Methodology**

### **3.1 Introduction**

In order to determine how far the approach to including children with ASDs in mainstream international primary schools could be described as 'fire fighting' or 'fire lighting', three stages of data collection were established:

- **Stage 1: A General Overview**  
This stage involved sending a largely quantitative e-survey to mainstream international primary schools, which aimed to provide a broad picture of how far children with ASDs have been included.
  
- **Stage 2: Whole School Approach and Teacher Perspectives on ASD Knowledge, Skills and Training**  
Stage 2 involved conducting largely qualitative interviews with Head teachers, SENCOs and class teachers from a sample of three schools which were found to include children with an ASD in stage 1.
  
- **Stage 3: A Portrait of Academic and Social Inclusion for Five Pupils with ASDs in Mainstream International Primary School**
  - 3i) Stage 3i involved a series of qualitative narrative classroom observations and interviews with parent, and shadow teacher stakeholders where appropriate.
  - 3ii) Stage 3ii involved an analysis of documental evidence related to pupil academic progress and consideration of social progress using a social network questionnaire (Chamberlain et al. 2007).

### **3.2 Research Strategy Stages**

#### **Stage 1: A General Overview**

Thirty-four mainstream international primary schools were sent an e-questionnaire (Appendix 1a). The sample of schools was selected via an Internet search for the designated school type. Questionnaires were piloted with one teacher beforehand and sent to schools that advertised a viable email address recipient. Using this approach thirty-four schools was the maximum number of schools that could be

approached within the time restraints of the project. School head teachers or SENCOs were asked if they had any pupils with an ASD at their school and if so then they were asked to specify: how many male or female; age of pupils; how they know the pupil has an ASD; the severity of the ASD and, whether or not they had felt it necessary to refuse admission. If not, they were asked to specify whether they had ever had any pupils with an ASD, how long they were there and whether they were able to support them satisfactorily. If they had never had a pupil with an ASD they were asked if they would be willing to do so in the future and to specify reasons for their answer.

As Kate Wall points out, “settling on one definition of autism is seeking the impossible as a vast array of definitions have been offered over the years” (2004: 7). The objective, therefore, of this stage was not to produce highly accurate statistical data, based on a narrow specific diagnosis, but to provide an overall picture of the general inclusiveness of schools and some idea of the reasoning behind the choices they have made.

**Stage 2: Whole School Approach and Teacher Perspectives on ASD Knowledge, Skills and Training**

Three of the thirty-four schools initially approached were selected for further study.

**School 3:**

*Tables 2-4: Background Information on the three schools selected for further study in Stage 2 of the data collection*

<b>General:</b>	
<b>Description:</b>	International Primary School
<b>Curriculum:</b>	International Baccalaureate Program PYP
<b>Age range of school:</b>	KG1 - Grade 9 (4-15 years)
<b>Average Class Size:</b>	22
<b>Number of Students (Approx):</b>	600 approx
<b>SEN Policy:</b>	
The school has only just had its IB PYP curriculum authorisation, which confirms appropriate standards are being met. Therefore, the policies are in the process of being written and not available as yet.	

**School 7:**

<b>General:</b>	
<b>Description:</b>	International School
<b>Curriculum:</b>	American and International Baccalaureate Programme PYP
<b>Age range of school:</b>	Pre-school (3 years) to Grade 12 (18 years)
<b>Average Class Size:</b>	25
<b>Number of Students (Approx):</b>	1200 (in Elementary school)
<b>SEN Policy:</b>	
"The school does not provide full service special education resources for students with an IEP from previous schools. Students must be successful with moderate assistance in the regular classroom curriculum programme provided or they are not eligible to continue." (School Policy Document 2007/8)	

**School 15:**

<b>General:</b>	
<b>Description:</b>	International Primary School
<b>Curriculum:</b>	British
<b>Age range of school:</b>	4-11 yrs
<b>Average Class Size:</b>	24
<b>Number of Students (Approx):</b>	600
<b>SEN Policy:</b>	
"We believe that we must work towards helping each child fulfil his or her maximum learning potential regardless of ability... As far as possible children with special needs will be taught within the classroom environment...The school is committed to meeting the special needs of all children through all possible means" (School Policy Document 2007/8). The school's identification, referral and assessment procedure is based on the British <i>Code of Practice</i> graduated response.	

The three schools were selected because they all catered for children with ASDs to some extent. Each selected school has a different background: School 3 promotes an international curriculum (IB PYP); school 7 is an American school that uses the IB PYP; and, school 15 is a British curriculum based school. It was considered important to maintain a level of diversity in the study in this way, as Dubai is populated by many different cultures. Only three schools were selected however, due to the time restraints of a small project.

Having gained a general picture of inclusion for pupils with ASD from stage 1, stage 2 aimed to investigate more deeply at the individual school level. Head teachers, SENCOs and teachers were asked to describe the situation in their schools regarding the inclusion of pupils with ASDs. Further to this they were asked to reflect

on what they considered to have worked well in this process and what had been less successful. They were also asked if the school adopted any particular approaches or methods to teach pupils with an ASD.

SENCOs and teachers were then asked about their knowledge of and skills related to teaching pupils with ASDs. Following an adapted format of Kate Wall's small-scale research project (2004: 146), teachers were asked to list any autism training they have undertaken over their career and to specify whether they would be interested in doing (more) training in the coming academic year, if it were available. Teachers were also asked to comment on if and how they were supported in their current school. A copy of the basic interview format can be seen in Appendix1b.

The interviews were semi-structured (Wragg 1999: 114), containing elements of positivist, emotionalist and constructivist structure (Silverman 2001: 83). The positivist more closed questions allowed for effective use of valuable teacher time, aid data analysis and maintain focus; the emotionalist element to the more open-ended questions intended to allow participants to express opinion and develop points they considered to be of importance; and, the constructivist element allowed enough latitude for the researcher to probe, investigate and follow-up issues as they arise (Bell 1999: 135, Drever 2003: 3).

### **Stage 3: A Portrait of Academic and Social Inclusion for Five Pupils with ASDs in Mainstream International Primary School**

Having investigated both the large-scale approach of schools in Dubai and also considered the school level approach from the perspective of head teachers, SENCOs and teaching personnel, stage 3 aimed to provide a classroom and pupil level portrait of the inclusion of pupils with an ASD. In order to do this qualitative classroom observations and interviews with stakeholders were conducted, as well as analysis of documental evidence detailing academic progress and collection of social inclusion data via pupil questionnaire (Chamberlain et al.).

- **The Five Case Study Pupils: Background Information**

Background details in this section are provided by the class teacher, SENCO or parent. Underneath each table a score is given according to how the class teacher completed the observed behaviour check sheet, composed by Sherratt (2005:11), which lists behaviours typical of children across the autism spectrum.

**School 3: Oliver**

Tables 6-10: Background Information concerning the five case study pupils involved in Stage 3 of the data collection

<b>Personal Details:</b>	
<b>Age:</b>	8 years old
<b>Male/Female:</b>	Male
<b>Nationality:</b>	American / Lebanese
<b>Diagnosis:</b>	ASD (high functioning)
<b>Academic Progress:</b> Oliver's language work is very good, including his reading (although he often finds comprehension difficult), writing and speaking. He finds maths more difficult and takes longer to grasp concepts and requires quite a lot of 1:1 support, but once he has understood he can retain the information. Oliver works at an age appropriate level.	
<b>Social Progress:</b> Oliver has made a lot of progress socially. He used to have a special friend whom he always played with and if she didn't play with him at any stage it used to take a long time for him to accept this (over two hours). He is much better at conflict resolution and has matured this year. In general he still plays a lot of the time in parallel rather than being fully involved.	
<b>Learning Support received:</b>	None
<b>Class Details:</b>	
<b>Year Group</b>	2 (7-9 years)
<b>Number in class</b>	20
<b>Number of children receiving LS<sup>9</sup></b>	3
<b>Number of children with EAL<sup>10</sup></b>	2 with high needs and 5 functional

- **Autism Observed Behaviour Check Sheet Score: 16/37**

<sup>9</sup> Learning Support

<sup>10</sup> English as an Additional Language

**School 3: Toby**

<b>Personal Details:</b>	
<b>Age:</b>	8 years old
<b>Male/Female:</b>	Male
<b>Nationality:</b>	Emirati
<b>Diagnosis:</b>	ASD (low functioning)
<p><b>Academic Progress:</b> Toby is able to read well, but he does not necessarily comprehend what he reads. He is able to answer simple questions about the text at a surface level only. Mathematically he can add and subtract and is working on trading. He takes in a lot of the content, as much as he wants to, but he cannot apply the content knowledge and so we have lower expectations for this. He does not work at an age appropriate level.</p>	
<p><b>Social Progress:</b> Toby has one friend with whom he interacts. This is a girl who volunteered to socialise with him last year and has continued to do so. He will find her and sit next to her. He does not socialise other than this.</p>	
<b>Learning Support received:</b>	Toby has a shadow support teacher at all times. He has had a shadow since K2. he had the same shadow for two years and then 3 or 4 different shadows, who were unsuccessful and now he is currently with an ABA therapist shadow. He does not work in groups; accept to sit with the class group. He works with the shadow 1:1. Every morning he attends a withdrawal class until 10.25am and then joins the main class. He does not attend French or Arabic. During these lessons he does ABA with his shadow.
<b>Class Details:</b>	
<b>Year Group</b>	2 (7-9 years)
<b>Number in class</b>	20
<b>Number of children receiving LS<sup>11</sup></b>	3
<b>Number of children with EAL<sup>12</sup></b>	2 with high needs and 5 functional

- **Autism Observed Behaviour Check Sheet Score: 18/35**

<sup>11</sup> Learning Support

<sup>12</sup> English as an Additional Language



**School 7: Eliot**

<b>Personal Details:</b>	
<b>Age:</b>	7
<b>Male/Female:</b>	Male
<b>Nationality:</b>	Turkish
<b>Diagnosis:</b>	<b>No official diagnosis.</b> The school psychologist unofficially suspects processing issues and Asperger's syndrome
<b>Academic Progress:</b> Eliot is in the lowest group for reading and maths and second lowest for comprehension. He does well in spelling tests and is in a higher group. In class he sits in a social group for all subjects, the groups are not mixed by ability.	
<b>Social Progress:</b> Social progress is an area of concern for Eliot. He has only developed a friendship with one other boy recently, before which time he did not have any friends. He has just begun a social programme outside school and within school he receives rewards if he plays with others. Since beginning to take Concerta he has begun to participate more and raise his hand more in class.	
<b>Learning Support received:</b>	None. He goes to a tutor twice a week.
<b>Class Details:</b>	
<b>Year Group</b>	Grade 1 (6-7 years)
<b>Number in class</b>	25
<b>Number of children receiving LS</b>	1 (additional reading)
<b>Number of children with EAL</b>	5

- **Autism Observed Behaviour Check Sheet Score: 25/37**

**School 7: James**

<b>Personal Details:</b>	
<b>Age:</b>	7
<b>Male/Female:</b>	Male
<b>Nationality:</b>	Turkish
<b>Diagnosis:</b>	<b>No official diagnosis.</b> The class teacher and school psychologist suspect autism.
<b>Academic Progress:</b> James is working at the expected grade level. He sits in mixed ability groups for work. When doing calculations his understanding is good, but he finds any work involving inference or critical thinking very hard.	
<b>Social Progress:</b> Socially, James is not progressing. He behaves inappropriately socially and has a limited perception of personal space.	
<b>Learning Support received:</b>	None.
<b>Class Details:</b>	
<b>Year Group</b>	Grade 1 (6-7 years)
<b>Number in class</b>	25
<b>Number of children receiving LS</b>	4 (2 children go to literacy support)
<b>Number of children with EAL</b>	5

- **Autism Observed Behaviour Check Sheet Score: 23/37<sup>13</sup>**

<sup>13</sup> 4 of total score = sometimes, not always

**School 15: Jake**

<b>Personal Details:</b>	
<b>Age:</b>	9
<b>Male/Female:</b>	Male
<b>Nationality:</b>	Australian
<b>Diagnosis:</b>	'Autism' diagnosed by paediatrician, clinical psychologist and speech pathologist in Australia.
<b>Academic Progress:</b> Jake is a lower achiever in the year group because of his autism.	
<b>Social Progress:</b> Jake tends to socialise with just one or two individuals. He mixes with the others during sport. He has difficulty working in a group.	
<b>Learning Support received:</b>	Literacy: 2 x half hour sessions in class and 1 x half hour session of comprehension in withdrawal session per week. In maths the TA assists Jake in his (lower ability) set.
<b>Class Details:</b>	
<b>Year Group</b>	4
<b>Number in class</b>	24
<b>Number of children receiving LS</b>	4
<b>Number of children with EAL</b>	9

- **Autism Observed Behaviour Check Sheet Score:**

The objective of the observations was to provide primary evidence about life at school for pupils with autism and in doing so triangulate (Elliott and Adelman 1976: 74 cited in Hopkins 2002: 133) with survey/interview, documental and social data to produce a more comprehensive picture, limit bias and provide more valid results (Cohen et al. 2000: 112). The key players (Rose and Grosvenor 2001): the pupil, support teacher (where present) and teacher were the foci of the observations and critical events (Wragg 1999: 67) related to these participants were recorded as they occurred. Otherwise the format of the observation was open to allow for a picture of inclusion to develop. Field notes were recorded in narrative form (Robson 2002: 312) in order to limit speculative remarks and the temptation to move quickly to judgement (Hopkins 2002). A marginal non-participant position (Robson 2002) was adopted in order to maintain normality as far as possible and limit the possibility of subjectivity and bias (Cohen and Manion cited in Bell 1999: 157-8).

A schedule of different observations was agreed with all affected parties beforehand and adhered to (Hopkins 2002: 70). Before any class was visited teachers granted permission, and the purpose of the visit made clear.

Table 11: Observation schedule

Pupil	Date	Subject	Time
<b>School 3</b>			
<b>Oliver</b>	21.05.2008	Handwriting / Reading	7.50am – 8.15am
<b>Toby</b>	21.05.2008	Withdrawal class session	8.15am – 10.15am
<b>Oliver &amp; Toby</b>	08.06.2008	Writing / Choir practice	10.25am – 11.00am
<b>School 7</b>			
<b>James</b>	06.04.2008	Assembly & Language Arts	8.20am – 9.30am
	07.04.2008	Recess & Math	11.45am – 1.30pm
<b>Eliot</b>	12.03.2008	Art & Recess	12.55pm – 2.00pm
	13.03.2008	Literacy	8.00am – 9.30am
<b>School 15</b>			
<b>Jake</b>	10.03.2008	Registration & Play Rehearsal	7.45am – 9.00am
	13.03.2008	Mathematics, Literacy & Science	10.15am – 12.00pm

In order to increase reliability a reasonable number of observations were conducted, as far as teachers allowed (Cohen 2000: 311), and where possible conducted at different times of day in order to increase the breadth of the data on which to ground judgements (Frank 1999: 57).

Interviews were conducted with the two parents who agreed to participate (school 3 and 15). They were largely unstructured to allow parents free expression regarding issues relating to their child and to learn more about having a child with ASD. The researcher imposed some structure, however, for ease of analysis by asking parents to describe their child's background; establish whether they were happy with the mainstream education they were receiving and how they felt it could be improved; and, to ascertain why they had chosen mainstream over special education in Dubai. There was only one shadow teacher involved in this stage of the project (school 3). This interview was semi-structured to make efficient use of the time allowed and focussed on establishing the background and training of the shadow as well as to gain some understanding of how she perceived her role in relation to the teacher when supporting the pupil and what kind of strategies she used in her work.

Documents collected and analysed included (where permission provided): the school policy regarding pupils with SEN; the pupil's IEP summary; academic test scores (e.g. NFER, SATS); SEN test results; and, reports or teacher informal assessments. Documental evidence was provided as an indicator of academic progress and therefore as a measure of inclusion. In order to maintain a "critical method of analysis" during the study of documental evidence, Stanford's advice: "What has been counted? How correctly? By whom? When? Where? And Why?" (1994 cited in Bell 1999: 108) was considered.

In addition to academic progress as a measure of inclusion, social progress was also measured using an adapted version of a social network questionnaire devised by Chamberlain et al (2007). The procedure involved the class teacher administering the questionnaire with the whole class (Appendix 1civ) during a PSHE lesson time. Chamberlain et al. conduct an in depth investigation into the social status of pupils with ASD in the mainstream classroom involving a number of tests and statistical measures. There is not enough scope to carry out such a detailed investigation within the bounds of this study, but a simplified version of the part of the procedure was conducted in order to produce three main measures of social progress: friendship nominations; social network statistics; and, social network diagrams.

A detailed description of the procedure can be obtained from Chamberlain's 2007 research paper or from the original source Cairns & Cairns (1994: 104).

In order to gather data on friendship nominations, page 1 of the questionnaire asked pupils to list who they like to "hang out with". This provides information about which pupils are nominated as buddies, in the top three friends, or a best friend and this data is recorded in table format in Appendix 1civ and then analysed in the results section.

Page 2 of the questionnaire is a little more involved and complex. The pupils were asked: "Which kids in the class like to hang out together?" The resulting data is then collated in an  $(x, y)$  matrix (Appendix 1civ) in order to produce the social network maps and calculate three illustrative scores: Individual Centrality (IC); Cluster Centrality (CC) and Social Network Centrality (SNC). Each time a child is listed in a group with another child he or she receives a mark in the intersecting square that connects the two names in the top half of the matrix above the diagonal. At the same time each time a child is mentioned as being in any group they receive a mark in their

own intersecting square where the diagonal is formed. The data that is recorded in the top half of the matrix above the diagonal is then repeated exactly below so that it mirrors the top.

In order to draw the social network maps each child's column is correlated with the others to establish the extent of correlation between the two (e.g. A with B, A with C, A with D and so on). If the correlation between the two pupils is more than 0.40 (a value established by the Cairns & Cairns method 1994) then the pupils are "considered to belong to the same "cluster"" and "a line is drawn between the two points on the Social Network Map" (Chamberlain et al 2007).

The final scores that result along the diagonal determine the child's IC. A pupil's IC is calculated as a percentage of the highest scoring pupil's score along the diagonal, thus an IC of 70% or more is considered 'high', of 30% or less are low and of between 30% and 70% medium. The CC for each cluster is determined "by calculating the average centrality of the two cluster members with the highest individual centrality", Chamberlain et al. (2007) explain, and then "clusters are designated as "high", "medium" or "low" based on a comparison to the highest centrality cluster in the classroom"; hence those with a centrality cluster percentage of 70% or more are classed as 'high', 30-70% as 'medium' and 30% and below as 'low'. Finally the SNC is calculated by combining a pupil's IC and CC. Chamberlain et al. deem four levels of SNC possible: nuclear, secondary, peripheral or isolated. A nuclear level is a combination of 'high' IC and CC; a secondary level is achieved if either IC and CC is 'medium' and neither is low; a periphery level is obtained if either or both IC or CC are 'low' and an 'isolated' position assigned if the child does not belong to any cluster.

### **3.3 Data Storage**

Observation, interview, documental and questionnaire data were systematically archived as they were obtained (Bassey 1999: 69). Observation and interview field notes were written up as soon as possible following the event (Hopkins 2002, Wragg 1999) and copies are provided in Appendix 1 as an audit trail (Bassey 1999).

### **3.4 Data Analysis**

Stage 1 survey data was collated and summarised as an overview in table form. Each question was also summarised, analysed and presented individually using the raw data to maintain the authenticity of the original comments.

Stage 2 interview data was substantial in volume. In order to collate the data, give it a systematic shape (Wragg 1999: 78) and interpret any emergent patterns it was reduced and displayed (Miles and Huberman cited in Robson 2002: 475) into a 'conceptually clustered matrix' (Robson 2002: 482) with subsequent emergent themes grouped accordingly (Appendix 1bi). Care was also taken to include ambiguous data.

Stage 3i) observation data was summarised in order to produce an overall picture of life at school for the included pupil. Stage 3i) interview data was collated and summarised producing an overall picture of parents' positive and negative views regarding current inclusive education; views about special education; and, which therapies are adopted at home. Stage 3ii) documental evidence was summarised in table form and social network questionnaire data was collated in tables and matrices to produce information regarding each individual's nomination scores, individual, cluster and "social network centrality" (Chamberlain et al 2007).

### **3.5 Ethics**

Before undertaking any stage of the research verbal permission was sought from each participating school. Confidentiality was assured and identities concealed by changing all real names to pseudonyms. Interview transcripts were returned to participants once they had been written up so that they could review and amend their comments, as they felt necessary. Parental consent was obtained before observations and these were conducted so that the pupils were unaware any specific attention was being drawn to a particular individual.

### **3.6 Limitations and Challenges**

The study is limited by its small-scale nature. It was only possible within the time-frame to approach a certain number of schools at each stage of the research, thus limiting the sample range. Teacher time is limited and therefore interviews had to be conducted quickly and during short breaks. Similarly, schools were only willing to allow a certain number of observations in each case and so the diversity of what

could be observed in that time was also limited. School 3 allowed access to documentation, but did not allow copies to be made. Therefore only a certain amount of information could be summarised from the files in the time allotted.

Gaining access to schools was challenging because it took a long time in each case to reach the considerable number of different staff members and parents involved in the study. Every person involved needed to be informed, give consent and then arrange a suitable time for meeting, for instance. Access to school 3 was particularly difficult due to the time it took for staff to respond to requests for interview and observation time and to arrange ethical access (six months). Consequently, observation data for this school is limited. It was originally hoped that pupil interviews could also be arranged, however, due to time restraints this had to be abandoned.

Certain limitations were also apparent in the data analysis stage. In the time available, analysis could only be undertaken by the researcher as opposed to the preferred more objective approach of using several analysts (Miles and Huberman 1994 cited in Robson 2002: 483) to limit bias through inter-rater reliability (Denzin and Lincoln 1994 cited in Cohen 2000: 121). Given the time restraints it was considered reasonable to restrict the process in this way in order to reveal some emergent patterns in the data, recognising that some subjective bias will be present however.

## Chapter 4: Results

### 4.1 Stage 1: A General Overview Summary Interpretation of Data

Thirty-four mainstream international primary schools in Dubai were sent an e-questionnaire (Appendix 1a) and twenty of those schools responded, which is a return rate of 60%. Detailed raw data responses to the questionnaires can be found in the Audit Trail in Appendix 1. A summary interpretation of the responses is provided in this section, followed by an overall data summary table.

**Question 1:** *Do you have any pupils with an autism spectrum disorder (ASD) at your school?*

Fourteen of the twenty schools that responded to the questionnaire currently have pupils with an ASD enrolled.

**Question 2:** *How many pupils with an ASD attend your school?*

Measure	Result
Mean	3
Mode	2
Median	2

Table12: showing the average number of pupils with an ASD attending the fourteen schools

Most mainstream schools surveyed, that currently enrol pupils with an ASD, cater for no more than four pupils, discounting the variance in school size. Only school 3 caters for a substantially higher number and therefore appears unique in the data set.

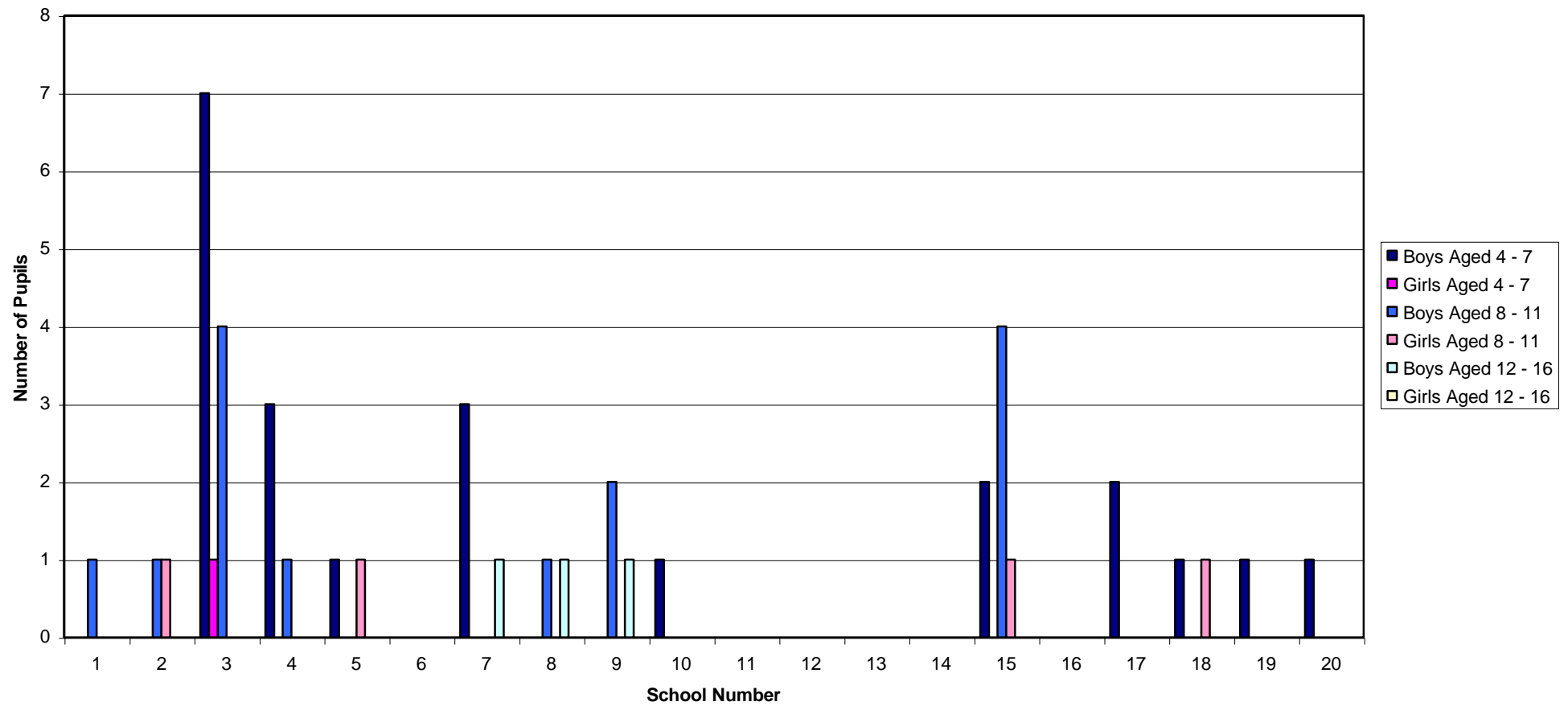


**Question 3:**      *How old is/are the pupil(s)? (Please indicate which are male and which female)*

The following graph shows that the majority of the 44 pupils with an ASD fall into the 4-7 year old (23 pupils), or 8-11 year old (18 pupils) category. This could be because the questions were directed to the primary section of the school. The primary participants may not have specified the details of older pupils in the 12-16 year old category (only 3 pupils), or it may indicate that fewer pupils with an ASD attend the secondary section of the school for some reason, which would warrant further research. Very young pupils in the 0-3 year category (0 pupils) may have been considered too young for adequate diagnosis and therefore not highlighted. This category has not been included on the graph because of its zero value.

The graph also shows that there are considerably more boys with an ASD in the data set than girls (a ratio of 39:5).

Figure 4: Bar Graph Showing the Age and Number of Boys and Girls with an ASD Enrolled at the Surveyed Schools



**Question 4:** *How do you know that the pupil(s) has/have an ASD? (E.g. observations, reports etc)*

*Tables 13&14 : Showing the level and type of diagnoses*

<b>Level of Official Diagnosis</b>	<b>No. of Schools</b>
None	5
Some	4
Official Diagnosis made	6

<b>Type of Diagnosis</b>	<b>No. of Schools</b>
Educational/Clinical Psychologist Report or GP Report	7
Parent Report	1 (in conjunction with GP Report)
Class Teacher Assessment	2
Special Education Teacher Assessment	3
Diagnosed but unspecified method	3

The data collected suggests that official diagnoses are not always made concerning pupils with an ASD. Closer examination of the audit trail raw data suggests possible reasons for this that include: pupils are at first allowed a period of teacher observation and monitoring before an official evaluation is recommended, particularly when the pupil is quite young (e.g. 0-5 years) and issues are considered to be potentially developmental; parents sometimes possess partial diagnoses that are somewhat open-ended; and, that parents are reluctant to seek an official diagnosis.

**Question 5:** *How would you describe the severity of the ASD in each case? (E.g. High or low functioning/verbal or non-verbal)*

*Table15: Showing the variation in the severity of ASDs across the schools*

<b>Description</b>	<b>No. of schools</b>
High Functioning / Mild / verbal	11
Autistic tendencies/traits	2
Aspergers syndrome	2
Low functioning / non-verbal	1
Undecided	2

The results to question 5 show that the majority of pupils in the participating mainstream schools are considered to be high functioning, verbal or have a 'mild'

form of ASD. Only school 3 has attempted to include pupils who are non-verbal and at the lower functioning end of the spectrum.

**Question 6: *Have you ever felt it necessary to refuse admission to a pupil with an ASD? Why/why not?***

*Tables 16&17 : Showing admission refusal or acceptance of pupils with an ASD and the reasons given for this*

<b>Admission Refusal</b>	<b>No. of schools</b>
Yes	5
No	7
No response to Q6	2

<b>Reason stated</b>	<b>No. of schools</b>
<b><i>Refused admission</i></b>	
Not enough support	1
Budget/funding and resources <sup>14</sup>	2
Extreme behaviour issues	1
Needs are too severe for mainstream, so pupil would be unable to cope	2
Disability limits ability to access curriculum	1
Dependent on individual circumstances. Decision taken after reports read and parents interviewed	1
<b><i>Not refused admission</i></b>	
The pupils do very well 1:1 in general	1

Question 6 reveals only a marginal difference between the number of schools who have refused admission to a pupil with an ASD and those who have not. Many reasons are given for why a pupil might be refused admission, which seem to focus on a lack support, funding and resources or a belief that the behaviour or disability of a pupil may be too severe for them to be able to cope in the mainstream setting.

**Questions 7& 8: *Have you ever had any pupils with an ASD at your school? How long were they there and did you feel able to support/include them satisfactorily?***

***If you have never had a pupil with an ASD at your school, would you be willing to in the future? Why/why not?***

Four of the six of schools who claim not to have any pupils with an ASD currently enrolled also claim they have never had any pupils in the past. Schools 6 and 13

<sup>14</sup> The participating SENCO defines resources as: fully trained and experienced staff, access to locally provided professional development, teacher training, funding for physical resources such as special programs (like ABA, Makaton signing and Boardmaker etc) and classroom resources.

state that they had a pupil with an ASD in the past, although only school 13 elaborates further to explain some of the difficulties they needed to overcome: i.e. learning how to talk to parents effectively and to encourage them to have an assessment carried out. This school also comments on the need to employ a shadow teacher to cope with disruptive behaviour and the belief that in general including pupils with autism is only successful when this is limited to one pupil with an ASD per class. These two schools do not suggest that they would not accept a pupil in future.

Reasons offered for why schools have never enrolled a pupil with an ASD (schools: 11, 12, 14 and 16) include: the unlikelihood that a pupil with a disability would be able to get through the entrance exam; the school's reputation for academic success would be hindered by the enrolment of pupils with SEN and parents would not be as attracted to the school; if pupils with SEN are in attendance then they are undetected because they would otherwise have been directed elsewhere, or it would be considered so minor as to not require any action; teachers are not trained to teach children with a disability, nor are there any courses for them; that there are no specialists at the school; and, that the school is a young school.

Three schools state quite strong objections to the suggestion they may enrol students with an ASD or SEN, for example:

*We do not have any children at the school with an ASD... If we have had pupils with an ASD in the past then they would have been directed to another school.* (School 11)

*We do not have any pupils with an ASD at this school... It is not an issue here and teachers do not talk about it ... We have an assessment on entry here and so all children who enter the school are average or above average.* (School 12)

*We do not have any children with special needs at the school. Parents are attracted to the school for its academic success and low fees. Children of even borderline cases of special needs would have to go elsewhere.* (School 14)

When asked if they would consider taking pupils with an ASD in the future, schools 11 and 12 responded that they would consider this, but that the onus would be on the child to pass the entrance exam and to fit in. School 14 rejected the suggestion, unless in the future they built a school specifically for this purpose and school 16 agreed that they would consider enrolling a pupil if he or she were at the “mild end of the spectrum”.



## **4.2 Stage 2: Whole School Approach and Teacher Perspectives on ASD Knowledge, Skills and Training (Interviews) Summary Interpretation of Data**

Head teachers (HT), SENCOs (S) and class teachers (CT) were interviewed at three of the participating schools (3, 7 and 15) to establish what kind of practice occurs within the schools, regarding the inclusion of pupils with autism, and to ascertain what sort of procedures staff at the school felt had worked successfully or less successfully in this respect (Q1<sup>15</sup>). Participants were also asked if any ASD-specific approaches and methods were employed in the schools (Q2).

Further to this, SENCOs and class teachers were asked to reflect on their knowledge and skills, training and support (Qs 3-5).

The raw interview data for this stage is in Appendix 1bii). The collated data, which provides the basis for the summary sections that follow is in Appendix 1 bi).

**Question 1: I am trying to find out more about how pupils with an ASD are included in mainstream schools, here in Dubai. Can you tell me about what happens in your school? Perhaps you could share your experiences of what works well and what seems to have been less successful in your opinion.**

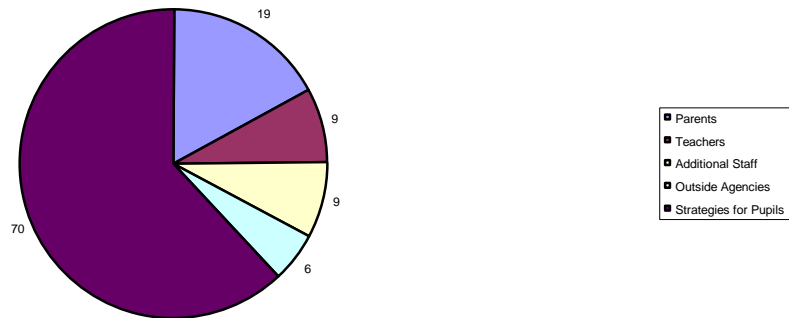
Participants from schools 3 and 15 describe their schools as 'inclusive', or 'as far as possible within the capability of the learning support department. Participants from school 7 agree that their school either does not provide extra support for pupils with SEN, or does not accepted children with diagnoses (of ASD).

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<sup>15</sup> Please see Appendix 1b) for a copy of the interview questions used at this stage.



Pie Chart Showing the Collated Data Groups of Participants' Experiences of what has been Successful in Including children with ASDs in Mainstream International Primary Schools



Participants from all schools offer a number of opinions about what has been successful in meeting the needs of pupils with ASD. These can be grouped under headings: parents; teachers; use of additional staff; outside agencies; and, strategies for pupils. The two largest groups are: parents and strategies. Three key factors emerge as important ways in which parental involvement is vital: being open and honest; having regular meetings; and, parents listening to and acting upon advice given by the school. Other comments included: the home support parents provide for their children through services such as ABA; the need to be able to finance the situation; and, for parents who do not have a child with SEN to understand how to show tolerance towards inclusion.

The suggested successful strategies for pupils can be grouped into: academic; social; shadow support; visual; routine and breakdown; class management; flexibility; and, communication. By scanning the data it can be observed that the strategies that participants tend to agree are successful and are mentioned three or four times include: differentiation; social strategies such as social stories, a social skills programme or help with social interaction; small group work; visual aids; routine; and, using small steps to break down a task.

Qualities considered important in a teacher focus on the need to be hardworking; highly trained and experienced; willing to make extra time to get to know the child and maybe even visit them at home; and, to understand their role as an educator of all children.

Ways in which additional staff are able to help include: tuition; shadow support (although this is not allowed in school 7); and, teaching assistants.

The use of outside agencies seems to be on a scale that ranges from: many people visiting and working within the school (school 3), to the use of educational psychologists (school 15), to the use of a doctor or specialist to decide the best course of action for a child (school 7). In the case of school 7 the doctor or specialist would most likely be called when the school have decided that they will no longer be able to support the child.

Participant opinions of things that have been less successful can be grouped into the following categories: parents; pupils and teachers; school-level; and, the wider network. Two participants comment that parents may hinder progress if they are unwilling to accept their child is having difficulties. Unsuccessful processes involving pupils and teachers include school procedures that involve a lot of social interaction or free expression and procedures that involve making some kind of unexpected change such as: making changes to routine and not explaining; asking a child to rush work; taking away something that has become fixated upon; and, not taking the time to scaffold a new skill.

At the school level participants mention the tendency for schools in Dubai to want to promote their academic status over their inclusive philosophy, which reduces the options for children with SEN. School 3 mentions the unsuitable nature of the IB PYP curriculum due to its emphasis on inquiry.

Primary concerns involving the wider network of support available in Dubai include: the lack of support networks in general; the lack of LEA support that would be accessible in the UK; the lack of guarantee that once a child with ASD leaves primary school there will be a placement available; and, the lack of adequately trained shadow teachers.

**Question 2:        What kind of approaches or methods do you use in your school to support pupils with autism?**

Results for question two can be grouped into five categories: general approaches; specific approaches; human resources; parents; and, no structure. The collated results show that participants from schools 7 and 15 use general teaching methods to support pupils with ASDs. By examining the specific approaches adopted by the different schools it can be observed that methods suggested by schools 7 and 15 include: differentiation; IEPs; reports and targets; small group work; and, making sure the child has a good teacher. Methods suggested by school 3, however, include more specifically autism-related strategies such as: using visuals; taking a step by step approach; keeping directions simple; ABA; PECS; and, prompts. This data also shows that in school 3 the head teacher, SENCO and class teacher all offer specific suggestions, which are at times in agreement: visuals and using a multitude of methods, whereas in schools 7 and 15 the majority of classroom based approaches come from the class teachers and there is less within-school agreement. Differentiation is recommended by a class teacher from all three of the schools.

Human resources suggested by school participants include: educational psychologists; shadow teachers; and, counsellors. Parents are suggested as a helpful resource by a participant from school 7 and two teachers from school 7 also point out that there are in fact no official structures in place to cater for SEN.

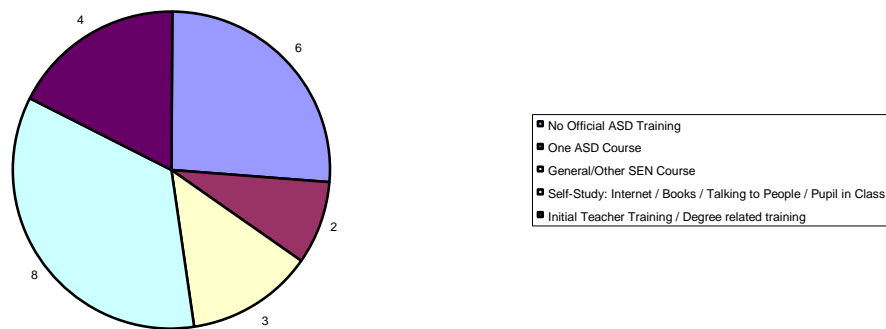
**Question 3:        What kind of knowledge and skills do you have in relation to pupils with autism?**

The collated data for question 3 shows a wide variety of knowledge and skills that participants feel they have developed through teaching pupils with autism. The diversity seems understandable considering the personal nature of that development. Results can be grouped into: theoretical knowledge; greater understanding of the child; teaching methods or strategies; general qualities; and, sources of knowledge and skills. Only the school counsellor from school 7 specifies that theoretical knowledge as a skill. It is the class teacher participants who feel they have developed greater understanding of the child by heightening awareness of: an inside view; knowing how to find the 'button' that will help the child; and, the recognition that all pupils are different. It is also class teacher participants who feel they have developed more methods and strategies to cope, including: the adaptation of assessments; creative teaching; and, to teach with every sense. Many general

qualities are expressed including: flexibility; a desire to help, open-mindedness and willingness; and, compassion and acceptance. Three participants stated patience or tolerance as a skill they had developed. Finally participants commented on the sources of their knowledge and skills citing: reading, the Internet and talking to other professionals.

**Question 4a: What kind of ASD training have you been involved with?**

Pie Chart showing what kind of ASD training participants have been involved with



The collated data shows that the majority of participants interviewed have had no official ASD training over their career. Only two participants (SC school 7 and S school 3) specify any training and this is limited to a professional training unit for counselling, completed when SC was in the US and a one off TEACCH course run in Dubai by a visiting company. Most training seems to have been gained via self-study using books or the Internet; by speaking to parents and colleagues; or, during ITT for general SEN.

**Question 4b: Would you be interested in doing more ASD training in the coming academic year?**

All participants specify that they would be interested in completing further training if it was available. The reasons they offer for this interest are variable including: the importance of such training; the enjoyment and interest it offers and for professional development. Participants also express views regarding the problems associated

with training in Dubai including: the expense; the lack of courses available; and, the need to ensure the companies running the courses have a good reputation.

**Question 5: How are you supported in terms of teaching pupils with an ASD at your current school?**

Collated data for question 5 can be split into positive and negative comments about support received. Positive comments made pertain largely to: people within school, or who visit school, giving advice; the presence of other people in class such as a TA or shadow; the restriction of class size, or the removal of children for periods of time; parents; organisations or therapists; and, use of the Internet and books.

Negative comments or suggestions for future change can largely be divided into comments that concern barriers to support and things that would provide more support if implemented. Barriers include: the school being unwilling to offer support; the removal of children with SEN from the school; the absence of laws that specify schools must cater for children with SEN; and, the general nature of international primary schools in Dubai as for-profit organisations. Things that would provide support include: Pro-active SEN organisations; regular visits from outside agencies; and, more TAs and LSAs.

### **4.3 Stage 3: A Portrait of Academic and Social Inclusion for Five Pupils with ASDs in Mainstream International Primary School**

#### **3i) Observation and Other Stakeholder Views**

##### **Summary Interpretation of Data**

In this section the classroom observation data is summarised and interpreted according to the emergent picture of inclusion that developed in each case. Key points, as they relate to academic and social progress are noted for each case study pupil. Full transcription of observations, including examples of work and class diagrams can be found in Appendix 1ci). Parent views of inclusive practice for pupils with ASD, based on their experiences with their child, and a perspective from a shadow teacher are also summarised.

##### **Observation Data**

###### **School 3: Oliver**

*\*Allocated observation time for the pupils at school 3 was limited.*

Academically, Oliver was observed completing the same set work as his peers, with minimal support, except for reminders from T and some 1:1 support. He was observed staying on task for the majority of the time and completing tasks adequately. Oliver seemed to really enjoy singing with the choir and was observed being able to stand as rigidly as instructed for the performance in the middle of the group. At the end of the singing practice he was happy to make his way back to class.

Socially, Oliver was observed chatting with peers during work time in an apparently relaxed manner. He did not seem anxious to sit in a particular position on the carpet and was content to work in close proximity to peers.

###### **School 3: Toby**

Academically, Toby did not complete the same work as his peers. He was observed in two locations: the withdrawal class and the main classroom. On each occasion he was completing different work to mainstream peers. Toby has a full time shadow teacher (ST), who is an ABA therapist. Throughout the observations ST verbally and physically prompted Toby in order to direct him to behave appropriately and complete tasks. Various incidents occurred involving intervention on the part of ST including

Toby: getting up to walk away; making loud noises such as shrieks or screams; repeating a word or phrase over and over; playing with an obsessional object such as blu-tack or being distracted by an object; repetitive movements; needing a role model or further instructions in order to participate in the lesson; and, requiring help to complete written tasks. During the mainstream independent work session ST had to repeat instructions a number of times in order for Toby to complete the set reading task. With guidance Toby was able to read some of the text and answer simple comprehension questions when ST showed him where to look in the text. ST explained that in order for Toby to learn the lesson they would need to repeat it a number of times. Toby was observed responding to verbal requests in the library session and with help was able to respond appropriately, just as his peers. He also appeared to cope with the busy and chaotic environment of the library session.

Socially, Toby was observed sitting with peers to eat his snack, but not interacting with them. According to ST he mostly does this without assistance, but sometimes requires prompts to stop him getting up and walking away. ST also mentioned that she usually uses this time to work on social skills, although this was not observed in the allocated time. Toby was observed being able to sit with the class group on a number of occasions, to listen to a story, read a book or listen to lesson instructions. For the majority of the time the other pupils in the class seemed to carry on with their work whilst Toby made a variety of different noises. On one occasion, when Toby repeated a phrase over and over again and the class was working very quietly it seemed that they laughed at this momentarily and then continued with work.

### **School 15: Jake**

Academically, Jake was observed participating in mainstream lessons. He coped well with every day routine activities such as answering the register or following simple verbal instructions. Based on a general examination of Jake's maths exercise book, evidence suggests that on some occasions Jake is capable of achieving house points for his work and on others, as noted by the teacher in his book, he has been unable to focus, needed a lot of assistance or has copied a peer. The academic standard of his work could be described as variable. During the maths and science lesson observation Jake required 1:1 assistance from the teacher in order to complete independent work set. Verbal instructions provided by the teacher were not sufficient for Jake to be able to complete the objectives without this help. With this support, he was able to complete work to a similar standard to his peers.

Jake appeared to lose focus a number of times during the observations, but this did not seem to affect his overall grasp of the lessons. He was observed on a number of occasions actively participating in class discussion, raising his hand to contribute mostly correct answers. Teachers most often presented questions verbally, without visual support. When questions required a one-word response Jake provided this without difficulty. When questions required more than this, Jake often spoke too quickly for his response to be easily deciphered. This was also apparent during other activities involving speaking including: reading out loud during the withdrawal session; speaking on stage or talking with the researcher. In terms of comprehension, Jake was observed giving reasonable answers to simple comprehension questions, although it was noticeable that those involving a more complex understanding of feelings, other than 'sad' or 'happy' were difficult for Jake and he required assistance to develop these concepts.

Jake was observed, however, standing in the centre of the stage in the role of the first narrator, during play rehearsal. During the rehearsal he seemed unperturbed by the noise and semblance of chaos around him. He seemed to enjoy singing the songs with his class for the rehearsal, moving in time with the music.

During observations no specifically ASD related strategies for support were observed. General teaching pedagogy was used to support Jake's needs such as: set classes (with Jake in the lower ability); withdrawal for help with comprehension; brief reminders for ways to sit correctly; and, teacher 1:1 assistance.

Socially, Jake's social interaction with his peers was limited during observations. In comparison to his peers who tended to chatter as they worked, Jake worked without interacting in this way. At one stage, when directed to talk to peers, he chose to play with objects on his desk instead. Jake seemed able to work to an extent with a partner, contributing his ideas. He tended to lose focus if the work became challenging and seemed to wait until the difficulty was resolved by the partner until he gained focus again and rejoined the partnership. In a group situation Jake often seemed to want to be on the periphery, although he contributed to group discussion and was observed being able to smile and direct peers during his narration role in the performance. Jake was also able to communicate with the researcher and direct her to different classrooms when asked by his teacher. Whilst taking the researcher to the classrooms he made brief eye contact and talked to her.



Jake seemed anxious to be first for a number of activities such as lining up, going to sit on the carpet and answering questions, but this did not seem to affect classmates. He was observed a numerous occasions displaying various repetitive or exaggerated movements such as: tipping his chair back and forth; bouncing his leg; lifting hands to face; spinning a swivel chair; and, balancing on the sides of his feet. These movements, however, although different from peers, did not seem to cause any disturbance or difficulties for himself or classmates other than once possible occasion.

### **School 7: Eliot**

Academically, Eliot was observed concentrating on his work and staying on task for the majority of the time. Eliot completes set work, meeting the objectives and working methodically throughout. During class discussions, however, Eliot seemed reluctant to contribute, rarely raising his hand and only offering a response if directly targeted. Equally, when given the opportunity to ask questions, Eliot was unlikely to do so. During the few times that Eliot contributed to discussion there was an awkwardness to this contribution. When asked about his favourite story he was unable to offer an idea until a peer made a suggestion, which he copied. Similarly, when asked to explain the ideas of a peer, his response was equally stilted and disputed by the peer in question. During independent study time, Eliot called on the teacher or assistant for help on numerous occasions, seemingly unable to complete the task without 1:1 support for each small stage. On a few occasions Eliot seems upset by the break in routine, as he perceives it. He is unwilling to take a turn at the board, based on the fact it is not his turn and also unwilling to shake more than the specified number of hands. He also appears to be anxious to be first to do a number of things such as hand in completed work and sit in a particular, regular place on the carpet.

No specific ASD related strategies are employed by the class teacher to support Eliot's learning during observations.

Socially, Eliot is observed joining in with the class as they listen to a story, repeating familiar lines and smiling. In general, however, Eliot appears to prefer to sit at the periphery of the class group, often at some distance from classmates. He also requires help from the teacher to be able to discuss an activity in pairs whilst seated on the carpet, as no-one volunteers to work with him. When two of his peers are

directed to work with him, by the teacher, the interaction between the three boys deteriorates into silliness. During independent study Eliot rarely interacts with peers and works quietly whilst his classmates chatter together. During recess he chooses to play with one other boy, whilst all the other boys play football. This friendship only developed recently, according to his class teacher, and she further explains that the boy he has befriended is very emotional and rejected by the rest of the boys. On the occasions that Eliot does attempt to interact with peers he is ignored or left out.

### **School 7: James**

Academically, James is observed on a number of occasions joining in with his class, shouting in unison for instance during assembly, or raising his hand to offer answers during class discussion. The answers he offers are often correct and he seems able to keep up with the pace of the lesson. When asked comprehension questions James seems happy to contribute, but when asked for more creative responses it appears James is less willing to make a comment. James is frequently observed working quietly on set tasks, whilst his peers engage in conversation as they work. His completed independent work mostly meets the learning objectives set by the teacher, except during one maths activity. The teacher explained that James became upset by a change she made in routine when the girl sitting next to James began receiving extra time to complete more maths questions. During the observations the teacher makes a sudden change to the routine, but James' seems unaffected by this.

The teacher did not use any ASD specific strategies to support James during the period of the observations.

Socially, James is observed spending the majority of recess alone, moving from one piece of equipment to another. Although he attempted on several occasions to interact with different groups of children none of these attempts was sustained, except for his last attempt to play on the seesaw with one other boy. Within the classroom the children were expected to work with a partner on a number of occasions. James worked with a reading partner who dominated the activity, allowing James to read when she specified. He also worked with a partner to complete his maths activities and this partner appeared to demand that James did a lot of the work involved in the activity. He was observed talking and smiling during a different maths activity where he formed part of a group. On two occasions James was observed being involved with an altercation. The first was when he was

reprimanded for pushing a teacher and the second when he pulled a worksheet from a peer because he wanted it. Although there was a considerable amount of noise and activity during the end of assembly, James seemed unperturbed by this. He was, however, seemingly distressed by something during language arts because he looked very uncomfortable sitting on the carpet at one stage, blinking his eyes as if in pain.

## **Other Stakeholder Views**

### **Summary of Shadow Teacher Interview**

Raw interview data can be found in Appendix 1cii)

#### **Job Description:**

- To only work with specified pupil, explaining the work to him in an easier way (than the CT)
- To be “him, be his hands and his ears and his eyes and help him through the first stages of returning to mainstream school”
- To write things for him as his motor skills and handwriting are bad

#### **Training:**

- None really, except health and social care work, being a class assistant and having own children

#### **Difference between Teacher and Shadow Roles: Responsibility for Pupil:**

- CT is skilled at what she does and I am not
- She explains the tasks for the day and I explain them to the pupil
- I have full responsibility, but she does as his teacher, but only through me

#### **How the Shadow Teacher Supports the Pupil:**

- Work through the independent activities with the pupil, giving directions
- To use an ABA communication approach with simple commands and to achieve the ABA goals specified on daily check sheet
- “I don't know how to explain to you really, I mean what strategies”
- To be harsh and not let him get away with anything
- To get him to talk and play with others out in the playground
- I use my experience in health and social care
- If Shadow teacher is absent then the pupil must stay at home

#### **Which approaches have been successful and which less so:**

- Successful: Being harsh and tough
- Unsuccessful: Introducing a small amount of an object, previously banned due to obsession (blu-tack), believing it to be helping to increase acceptance

#### **Support provided for Shadow Teacher:**

- The class teacher and the exceptional needs department
- The opportunity to watch one of the ABA therapists during school time

## Summary of Parent Interviews

Raw interview data for this section can be found in Appendix 1cii)

Both parents provide extensive information about their child's background. The key points from this are reported in the case study pupil background section of the dissertation. In this section the main points made by parents concerning their views of mainstream inclusive education and the approaches they have adopted to supplement this education are collated and summarised. The number in parenthesis following a comment indicates which school the parent is from.

## Views of Mainstream Education

### Mainstream or Special?

- **Mainstream.** "Absolutely not" a special school, but without preparation it would be difficult for a child to integrate and he would also be very dependent on the shadow teacher (15)
- **Mainstream.** "...when I walked into the centre I cried for a week. I did not feel Oliver had the level of needs of the children who were there. I was convinced mainstream school was for Oliver" (3)

### Positive comments regarding mainstream education

- **Head teachers**
  - A Pro-active Head teacher makes a big difference. The head teacher from school 3 knows what is happening in her school and intervenes to improve it. She arranged for my child to be moved from a teacher who did not understand ASD, to one who had the capability, so the approach was flexible. The next teacher was also *selected*, as opposed to just assigned according to whole school approach (3)
  - The head teacher and deputy visited the house to become familiar with Jake and his programme. They wanted to give him a chance (15)
- **School Management Approach:**
  - In the school everyone knows what is happening and information is communicated efficiently. A school that listens to you is important, but one that acts too is even more helpful. It is important that the school

doesn't just tolerate, or accept, the included child with ASD as a 'child with SEN', but challenges them and wants the best for them (3)

- In comparison to the school here in Dubai, the class organisation in Australia is "too relaxed" and "lacks organisation". The teaching is also not so "strict" (15)

- ***Positive Teacher Qualities***

- Teacher qualities that contribute to successful inclusion of children with ASD include: consistency; confidence; a loving but firm approach that doesn't allow a child to 'get away' with inappropriate behaviour; an open classroom approach where the teacher is receptive to new ideas and suggestions and also where the teacher is happy to meet and talk and share strategies; a teacher who shows understanding, responsibility and accountability for the child (as opposed to leaving this to the shadow); patience; creativity in lessons e.g. providing an activity that is a known favourite of the child in order to encourage him to participate; use of visual resources and structured timetabling; use and adaptation of materials and resources from therapy sessions as an aid for all children; frequent praise and reward (ideally that progresses from physical reward to a sole desire to please the teacher); a belief that inclusion is possible; taking time to brief a new teacher before the transition, including inviting the teacher to learn and observe from current classes; (3)
- We have had some brilliant teachers here, whose qualities include: being very organised and structured; engaging with the child as opposed to him becoming dependent on the shadow; being prepared to work with you as a parent and to understand; having experience or being willing to read up or seek advice and expecting a certain level of behaviour (15)

- ***Adequate Support:***

- Including: an adequate number class assistants; the acceptance of a shadow teacher and advice of outside agencies such as educational psychologists; therapy sessions that are built into the school day; advice given to parents (3)
- The shadow teacher was accepted into the school, she was experienced (former nursery teacher) and knew how to develop independence in Jake. By year 2 she was only there if needed (15)

- We would have left Dubai if Oliver had not succeeded in this school (3)
- We would have left Dubai had we not been able to set up the therapy support system (15)
- ***New Organisations:***
  - CARD will open in April 2008 offering occupational, behavioural and speech therapy and social and academic help. It will also offer training to schools and the lease of resources (3)
  - Since we began our programme for Jake, the Autism Center has now opened up (15)
- ***Social Issues:***
  - School is so beneficial for the social interaction it provides for children (3) (15)
  - "It is a great joy to have a child learning in school from his peers and from the environment and the teachers. I think if we just keep gradually building I am very optimistic that he may even go to university" (15)

**Negative comments (or suggestions for improvement)**

- ***Most mainstream international primary schools are unwilling to accept a pupil diagnosed with ASD:***
  - Most schools would not accept my child when I told them about the ASD diagnosis. They said they could not cater for him and did not have the resources (3)
  - A number of schools rejected Jake without even meeting him. One principal I wished to talk to said "he saw nothing further to discuss" (15)
  - One school accepted my child with the ASD diagnosis, but they were in the process of moving sites. During the move the information had been mislaid and no-one knew about his ASD. Early in the term the teacher phoned to say something was wrong and then shortly after I explained about the diagnosis I was asked to leave by way of an aggressive letter (3)
  - I obtained a court order to reinstate my child from the school that asked us to leave, but the consequences of this were that he was treated in a very negative way at school. This had a detrimental effect

on my child, who said: "The school doesn't want me, why don't they want me? Why don't they like me? I like them very much." So I had to look for an alternative (3)

- My educational psychologist recommended that I did not tell schools about the diagnosis and just get him into the school. He would have no trouble with the entrance exam. However, I wanted him to be in a school that was happy to have him and be able to support him (3)
- Due to the limited number of schools willing to accept my child (only one), I was unable to choose a school that I felt had the kind of academic reputation that I would have preferred, or the curriculum I preferred (British). I have concerns about the IB PYP programme as it is relatively new and there is no homework (3)
- ***Some children who are able to enter a school without their full knowledge of the SEN suffer from lack of support:***
  - I know of a child with ADHD who has been in school for three years and has not improved academically because his needs have not been addressed. The class teacher is desperate for help, but nobody notices and nobody helps. The child has now been asked to leave (3)
  - I know of another girl with ASD in mainstream primary education who is not supported, is not coping, and has been asked to leave (3)
  - Often schools will not allow shadow support or therapists to come into school. Parents are not given advice and SEN are misinterpreted by school staff as bad behaviour, then the child becomes labelled as 'difficult' (3)
- ***Teacher Competence:***
  - Initially the first teacher assigned, in the school that accepted my child, did not show any understanding of ASD. She complained of bad behaviour every day and made no attempt to form strategies to help (3)
- ***Outside Agencies:***
  - There are huge costs involved in providing therapy for your child (15)
  - In Australia the psychologist visited and worked within the school with small groups of children (15)
  - Generally academic support is provided by the school, but no assistance is given for numeracy so I provide a tutor (15)
- ***Social Issues:***



- My child doesn't know how to manage pressure and is teased in the playground (although these are things the school can work on) (3)
- "If anything we could have done with a little more help just within the playground... this is a great time to work on social skills" (15)
- "It would be beneficial for the school to operate some kind of buddy system" (15)
- **Diversity:**
  - The school accepts children with SEN, but it still has to impose a quota system because otherwise it would not be balanced and would have a reputation as a special school (3)
  - Schools seem happy to have a pupil who is not aggressive and who is compliant (3)
  - Parents are not very receptive to having children with special needs in the mainstream classroom, so this puts schools under pressure not to accept them, as parents pay for education here (3)
  - Dubai is all about diversity with so many nationalities in one place, but the schools promote just one thing: academic results (3)

**Approaches Outside School**

*Table 19: Showing approaches adopted by parents outside school*

Approach	Parent (School 3)	Parent (School 15)
ISADD Behaviour Therapy	✓	
ABA	✓	✓ <sup>16</sup>
Speech Therapy		✓
PECS		✓
Behavioural Intervention		✓
Inviting Other children to play		✓
Shadow Teacher working at home too		✓
Role-play / Social Stories		✓
Talking about problems		✓

<sup>16</sup> Parent (15) explains that she trained and brought over therapists to do ABA from Australia

### 3ii) Academic and Social Progress (Documental and Questionnaire Analysis)

#### Summary Interpretation of Data

#### Documental Evidence

In this section documental evidence is provided as an indicator of academic progress and therefore as a measure of inclusion. Evidence provided includes: the pupil's IEP summary; academic test scores (e.g. NFER, SATS); SEN test results; and, reports or teacher informal assessments.

#### School 3<sup>17</sup>:

Oliver

*Tables: 20-24: Showing summaries of documental evidence for each of the three schools (at stage 3 of the data collection)*

Document	Comments
<b>IEP:</b>	The school does not use IEPs because we believe in a developmental curriculum that caters for all needs rather than making an individual adjustment for one pupil. All pupils work on the same continuum.
<b>Academic Test Scores:</b>	None available
<b>SEN Test Results:</b>	The school keeps a file, which contains copies of the various tests the pupils have undergone outside of school. In Oliver's case there was an assessment carried out by a special needs centre in 2007. This contained a Vineland Adaptive Behaviour Scale, Walker-McConnell Social Skills Assessment, Gilliam Autism Rating Scale and recommendations for Oliver's development. Some further details of this assessment can be found in Appendix 7a.
<b>Reports:</b>	Two reports were kept in Oliver's file: ENC <sup>18</sup> 's report for the beginning of 2005, for term 1 and ENC's report for the end of 2005 with recommendations. Further details of these reports can be found in Appendix 7b.

<sup>17</sup> Due to the volume of SEN Test Result and Report information provided by School 3, details for this school (for Oliver and Toby) are provided in Appendix 7

<sup>18</sup> Exceptional Needs Co-ordinator

## Toby

Document	Comments
<b>IEP:</b>	See Oliver (above)
<b>Academic Test Scores:</b>	None available
<b>SEN Test Results:</b>	The school keeps a file, which contains copies of the various tests the pupils have undergone outside of school. In Toby's case there was one main report stored in the file, which was an assessment report from a SEN centre (2006). This included background information, a Nisonger Child Behaviour Rating Scale, Reynell Development of Language Scale, WIPPSI-R intelligence report and recommendations for development. Further details of this can be found in Appendix 7c.
<b>Reports:</b>	Two reports were filed for Toby: A report from ENC for the end of 2005 and a baseline assessment written by the class teacher for 2007. Further details of these can be found in Appendix 7d.

## School 7:

## Eliot

Document	Comments
<b>IEP:</b>	No IEPs are provided in this school
<b>Academic Test Scores:</b>	No official test scores are available at this age
<b>SEN Test Results:</b>	None carried out
<b>Reports:</b>	Cannot provide the school report for ethical reasons

## James

Document	Comments
<b>IEP:</b>	No IEPs are provided in this school
<b>Academic Test Scores:</b>	Academically this pupil is performing at grade level. There are no concerns. No test scores available.
<b>SEN Test Results:</b>	None carried out
<b>Reports:</b>	Cannot provide the school report for ethical reasons

**School 15:**

Jake

Document	Comments
<b>IEP:</b>	Jake has an IEP at 'School Action Plus' <sup>19</sup> level (Appendix 1ciii). His targets beginning March 2008 are mainly behavioural including: To attempt work willingly; To ask for and accept help; and, to use coping strategies. He is also working towards answering inferential questions about a text.
<b>Academic Test Scores:</b>	Jake's mid year (January 2008) assessments (Appendix 1ciii) show that he has achieved a Level 2a <sup>20</sup> for numeracy, reading and writing. The majority of pupils in his class are achieving a 3b or 3a for numeracy, a 3a or 4 for reading and a 3c or 3b for writing. Jake achieved a standardised score of 95 for his NFER <sup>21</sup> test in comparison to the mean class score of 111. Jake achieves the mean score for spelling: 14. In general, the results support Jake's teacher's comments that he is a 'lower achiever'.
<b>SEN Test Results:</b>	None carried out.
<b>Reports:</b>	Jake's last school report from school 15 was issued in June 2006 as he was educated in Australia in 2006-7. The 2006 report suggests Jake has made "some good progress". He is described as a "clever capable pupil" whose efforts are not always "reflected in written work". The teacher observes that he prefers to work individually rather than in a group and that he becomes preoccupied on some days and lacks concentration. The attached test scores show that

<sup>19</sup> 'School Action Plus' refers to the third stage of the Code of Practice. School 15 adopts an adapted form of this procedure for SEN.

<sup>20</sup> The levels in this section refer to the British National Curriculum Levels, which range from (W)1-4 for the primary years. By Year 2 an average pupil would be expected to reach at least Level 2 and by Year 6 at least Level 4.

<sup>21</sup> National Foundation for Educational Research.

	in Year 2 he was achieving a Level 2a for reading and writing and a Level 2b for maths, which would suggest that he has not progressed very far from this in mid Year 4.
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## Social Progress

### School 3: Oliver and Toby

#### Friendship Nominations (Buddy, Top 3 and Best Friend)

Oliver was nominated by one pupil as a buddy and did not receive any best friend nominations. The buddy nomination he received was from child F<sup>22</sup> who is an isolate. Oliver nominated Toby as his best friend and also nominated two girls: E and H as buddies. This was not reciprocated.

Toby did not receive any buddy nominations, but did receive two best friend nominations from Oliver and child E.

As a general rule the majority of children in the class received more buddy nominations than Oliver or Toby, although two children, B and D, received the same as Oliver and one child (F) did not receive any nominations.

#### Social Networks

- **Oliver**

Table 25: Oliver's social network data

Social Network Element:	Result
Individual Centrality	19% LOW
Cluster Centrality	26% LOW
Social Network Centrality	Periphery

- **Toby**

Table 26: Toby's social network data

Social Network Element:	Result
Individual Centrality	33% MED-LOW
Cluster Centrality	71% HIGH
Social Network Centrality	Secondary/Periphery

According to the data, Oliver has a low individual and cluster centrality score and socially operates at the periphery of the class. The two girls with whom he correlates

<sup>22</sup> Boys are indicated by blue typeface and girls by black

also have low individual centrality scores (C: 19%, B 14%) and are peripheral to the central social network of the classroom. The extent to which Oliver correlates with one of the girls (B) is also fairly low: 0.20 suggesting that the friendship cluster is not very strong unlike the bond between e.g P and Q.

According to the data, Toby has a medium-low individual centrality score and a high cluster centrality. This would suggest that he operates in a secondary to peripheral position within the class. Although he does not operate within the nuclear social network, he is bonded with three girls who have relatively high individual centrality scores (E: 15, H: 12 and I: 15) and are also linked to the most cohesive group. Toby's correlation scores with the three girls are also reasonably high: E 0.88, H: 0.61 and I: 0.47.

The social network diagram that follows illustrates the overall picture of social integration for both boys.

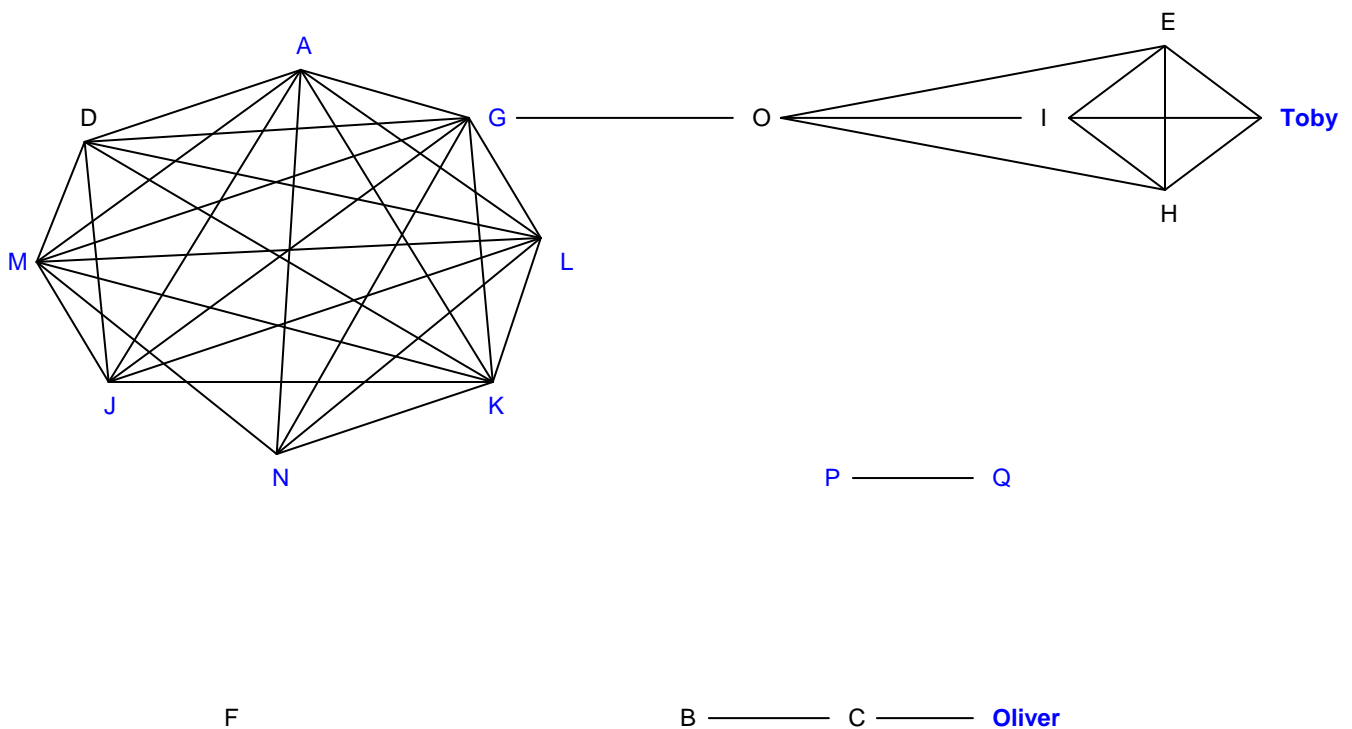


Figure 5: School 3 social network diagram (Oliver and Toby)

## School 7: Eliot

### Friendship Nominations (Buddy, Top 3 and Best Friend)

Eliot did not receive any buddy, top 3 or best friend nominations. He was the only one in the class to not receive any nominations. Eliot nominates child U as a buddy, but this is not reciprocated.

### Social Networks

Table 27: Eliot's social network data

Social Network Element:	Result
Individual Centrality	35% MED-LOW
Cluster Centrality	37% MED/LOW
Social Network Centrality	Periphery/Isolate

According to the data, Eliot has a medium-low individual centrality score. One child scores the same as Eliot (U) and another (M) scores marginally lower. The child who has a lower individual centrality score is an isolate. However, closer examination of the correlation matrix reveals that she has three correlations that almost reach 0.40 with L (0.32), N (0.34) and S (0.28), whereas Eliot only has one score above 0.40 (0.42) with child U. Furthermore, although child U and Eliot are bonded in the following diagram (and Eliot scores a med/low cluster centrality), child U did not reciprocate Eliot's buddy nomination and the class teacher confirmed at a later visit to the school that the partnership has in fact ceased. Child U also has correlation scores bordering 0.40 with three other children: L (0.32), P (0.38) and V (0.27). Eliot's overall social network centrality, therefore, is periphery and bordering on isolate.

The social network diagram that follows illustrates the overall picture of social integration for Eliot.



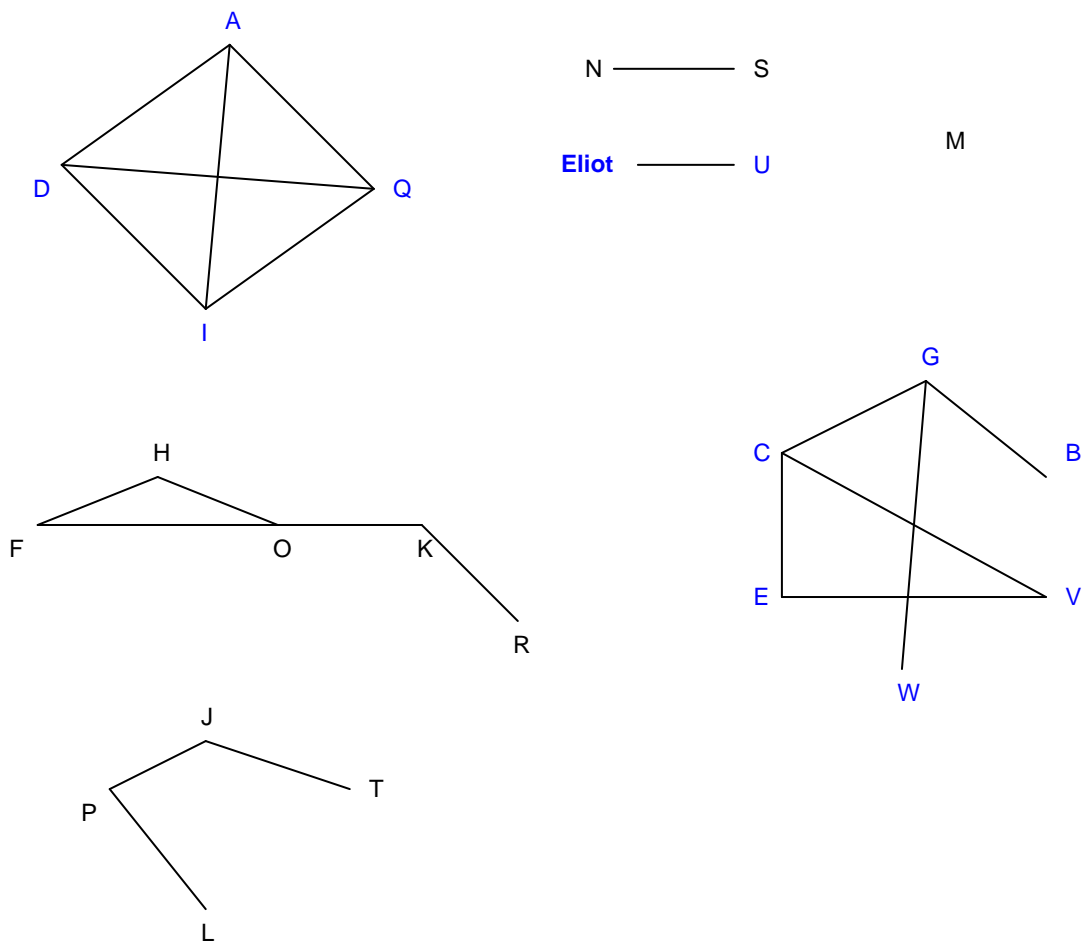


Figure 6: School 7 social network diagram (Eliot)

## School 7: James

### Friendship Nominations (Buddy, Top 3 and Best Friend)

James receives two buddy nominations, but no top 3 or best friend nominations. James nominates child L and R as buddies and L reciprocates, but R does not. Generally speaking the majority of children in the class receive more buddy nominations than James, apart from child I who is an isolate and also child H who is nevertheless part of a cohesive group (see social network diagram following).

### Social Networks

Table 28: James' social network data

Social Network Element:	Result
Individual Centrality	30% LOW
Cluster Centrality	NONE
Social Network Centrality	Isolate

According to the data, James has a low individual centrality score. Three children have a lower individual centrality score (I, H and A). Child I is an isolate. Child H and child A are bonded to friendship groups, however, unlike James. James only correlates with one other boy (L), but this is lower than 0.40 (0.38) and so he is regarded as an isolate and not considered to be part of a cluster.

The social network diagram that follows illustrates the overall picture of social integration for James. The data suggests that the class has a strongly bonded group of boys of which James is not a part.

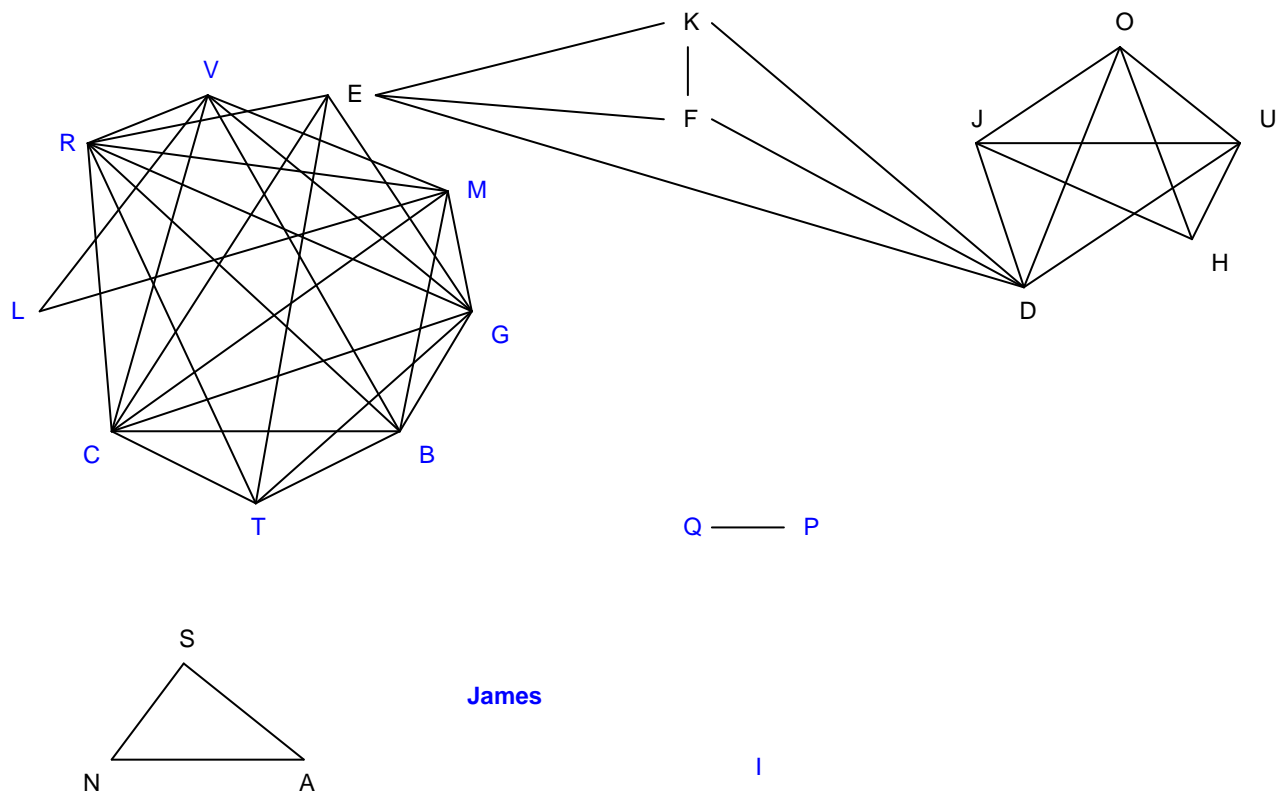


Figure 7: School 7 social network diagram (James)

**School 15: Jake**

**Friendship Nominations (Buddy, Top 3 and Best Friend)**

Jake does not receive any buddy, top 3 or best friend nominations. All the other children receive at least one nomination, except child G. Child G, however, has a reasonably high individual centrality score and is closely bonded to one of the groups (see social network diagram following). Jake states on his questionnaire that “I play with no-one” (from this class) and later states that he likes to play football with the boys in another class. According to his teacher he used to be part of the other class, but when he moved away from Dubai for a year and then returned he was reassigned to his current class because he had missed a year’s work.

**Social Networks**

*Table 29: Jake’s social network data*

<b>Social Network Element:</b>	<b>Result</b>
Individual Centrality	27% LOW
Cluster Centrality	40% MED
Social Network Centrality	Periphery (Isolate)

According to the data, Jake has a low individual centrality score. Jake’s score is in fact considerably lower than all of his peers. Jake has a medium cluster centrality score based on his partnership with child K. Whereas child K (and also child R who is in a similar position), however, has correlates approaching 0.40 with a number of other members of the class (E: 0.29, F: 0.26, H: 0.37, J: 0.25, M: 0.26, R: 0.25), Jake does not, limiting his connection with peers.

The social network diagram that follows shows an overall picture of a class who are, according to the data, tightly bonded into groups of girls and boys with strong cohesive ties to each other. Jake and to a lesser extent child K and child R are clearly not part of these groups, thus Jake’s social network centrality is classed as periphery and probably bordering on isolate.

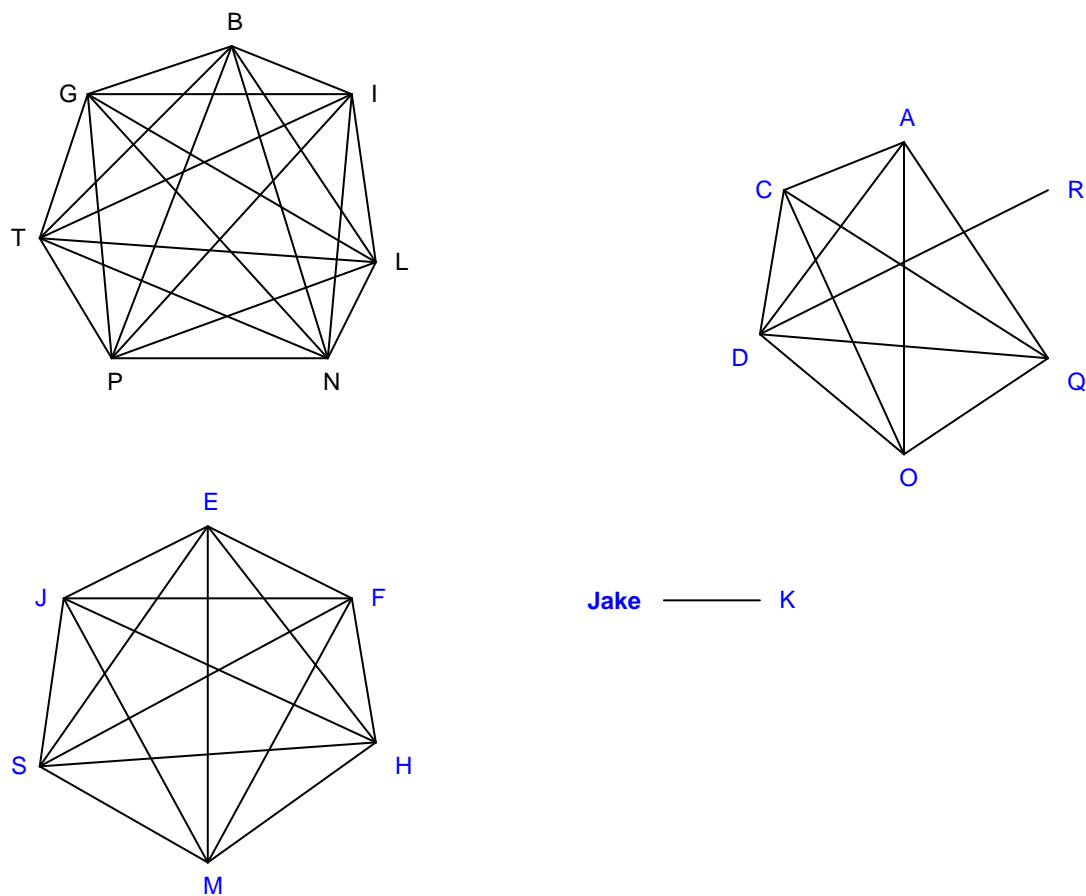


Figure 8: School 15 social network diagram (Jake)

## *Chapter 5:*            **Discussion**

The aim of this study was to investigate the extent of inclusion for pupils with autism spectrum disorders (ASDs) in mainstream international primary schools in Dubai, using the main findings of HMIE, as reported by Macleod, to question the effectiveness of the current provision and determine whether the current situation could be described as 'fire fighting' or 'fire lighting'.

In order to achieve this aim three research questions were posed:

1. Approximately how many pupils with a 'recognised' ASD attend mainstream international primary schools in Dubai (according to school records)? What levels of severity within the spectrum do the schools seem willing to cater for at this stage and why?
2. What kind of approaches/methods do mainstream international primary schools in Dubai adopt in teaching pupils with an ASD? What kind of training, knowledge and skills regarding ASDs do international primary school teaching staff in Dubai have and how are they supported to teach children with these disorders?
3. What is inclusion like for a child with an ASD in a mainstream international primary school in Dubai in terms of academic and social progress?

### **Research Question 1 (Stage 1 Data)**

Evidence that addresses the first research question was collected during stage 1 of the project. Firstly, fourteen of the twenty schools (70%) who responded to the e-questionnaire state that they cater for pupils with an ASD to some degree. This finding is in line with research literature that suggests there is a general move towards educating pupils with ASDs in mainstream education (Jones 2002). The majority of the schools cater for no more than four pupils, with only one school (3) catering for considerably more (12). As Bradshaw et al. (2004) and Farooq (2007) observe the results reveal substantial variance in provision within the private sector with some schools not including any pupils, some including a few and one including a

reasonable number. The mainstream international school data produced at this stage of the study differs considerably from Farooq's findings in local government schools where "a place for a child with autism... is virtually non-existent".

The data sample is composed of more boys than girls with a ratio of 39:5 (8:1), which is similar to Sicile Kira's (2003) stated general ratio of 4:1, although this does not account for girls who may have remained undetected. Most of the pupils with ASDs were found in the 4-7 year old category or 8-11 years. This could suggest that pupils are being diagnosed within the early school years as opposed to earlier (18 months) as recommended by Renty and Roeyers (2006), although it is possible that school staff focused on the primary years or did not mention cases where diagnoses were suspected but not yet confirmed. Official diagnoses were not always obtained, however, for a variety of reasons including the belief that children were too young, in addition to a reluctance to gain official recognition by parents. The finding that many children remain undiagnosed is recognised by the HMIE (2006) who support the practice of providing for pupils despite the lack of official status.

In line with Wall's (2004), and a number of other researchers (e.g. Francke and Geist 2003, Kasari et al 1999), observation that pupils with high functioning autism are the most successful candidates for mainstream education, the majority of schools in the survey state that the pupils they have accepted have high functioning (verbal) or a 'mild' form of ASD. Only one school (3) has accepted a pupil with low functioning ASD, supporting Jones' (2002) point that the ability to cater for pupils is based on the type of practice or ethos of an individual school.

Despite the evidence for inclusion of pupils with ASDs at this stage of the research there is also evidence that they are frequently refused admission. This reveals that the new law of 2006 (Federal Law No.29) cited by Arif and Gaad (2008), which states that all children have the right to enter mainstream school, is still only in the early stages of implementation with regard to international schools. Many reasons are given by schools for the rejection of pupils with ASDs and a number of these are recognised by current research as barriers to inclusion: a lack of adequate support and teacher training (e.g. HMIE 2006, McGregor and Campbell 2001); a lack of funding and resources (e.g. Barnard et al. 2002); the attitude that the needs of the pupils are too severe and pupils should be in SEN centres aligns with Gaad 2001 and Alghazo and Gaad 2004 research findings regarding the negative attitudes of officials and teachers; the belief that the pupils will not be able to access the

curriculum, which is indicative of a lack of flexibility on the part of the schools (e.g. Jordan and Jones 1999, Sicile-Kira 2003); the knowledge that that many pupils may be in school, but remain undetected (Eapen et al 2007); and, that accepting pupils with ASDs would jeopardise the academic success of the school which echoes MacDonald's (cited by Sicilie-Kira 2003) point that "good SEN provision never put any school high in the national league tables".

### **Research Question 2 (Stage 2 Data)**

The second research question was addressed by carrying out stage 2 of the data collection: the qualitative interviews with staff from the three selected schools. The first part of the research question which asks what kind of approaches and methods are used by mainstream international primary schools in Dubai is answered in questions 1 and 2 of the questionnaire.

Question 1 data provides a broad overview of opinions regarding approaches and methods. Staff from schools 3 and 15 describe themselves as inclusive in regards to the support of pupils with ASDs, whereas staff from school 7 state that the school does not accept pupils with ASDs or SEN who have been diagnosed, echoing Bradshaw et al.'s (2004) point that many schools in Dubai are unwilling to accept pupils with SEN. Overall staff from the three schools show awareness of and report a number of successful factors to approaches that can be used with pupils with ASDs: parents; teachers; additional staff; outside agencies; and, strategies (academic and social). Each of these is discussed in greater detail in the results section, but it is notable that two of these approaches: parents (e.g. Dahle 2003, Dunlap and Bunton-Pierce 1999) and strategies (e.g. Sherratt 2005) are highly recommended by research. One member of staff recognises the importance of making extra time to visit pupils at home as advocated by Coffey and Obringer (2004). As recommended by Jordan and Jones (1999) the schools seem to show some awareness of both the need to meet with parents for discussion and information sharing and also for giving 'advice' for parents to act upon.

Question 2 provides more specific data on the actual approaches and methods adopted by the participating schools. The data reveals that despite the overall awareness of a range of successful approaches, schools 7 and 15 use general teaching methods (e.g. IEPs, differentiation and targets) and only school 3 makes use of ASD-specific strategies (e.g. ABA, PECs and visuals) echoing Wall's (2004)



point (from a UK perspective) that there is at present no standard form of provision for young children with ASDs. Some research suggests that relying purely on general pedagogy can be problematic when teaching pupils with ASDs (e.g. Helps citing Powell and Jordan 1993) as the normal intuition of the class teacher could "mislead". However, Tutt et al. (2006) also contend that good general practice should not be abandoned in favour of a purely 'training' approach and Sicile-Kira (2003) notes that a lot can be achieved by an enthusiastic and flexible teacher who is not necessarily specifically trained. Closer examination of the raw data reveals a number of highly dedicated and hard working teachers who seem to be prepared to learn as much as they can in order to help. School 3, unlike schools 7 and 15, shows signs of collaboration in the sense that similar points are made during the interviews by different levels of staff: head teacher; SENCO and class teacher. In the other two schools the suggestions concerning which approaches are adopted came largely from the class teachers. Sherratt (2005) considers a whole-school approach vital for successful inclusion of pupils with ASDs and the HMIE (2006) notes that best practice involves a head teacher who displays knowledge and understanding of ASDs. The data suggests that school 3 also takes an eclectic approach to the selection of methods, which is also highly recommended by research (MacLeod 2006). The head teacher of school 3, however, recognises that the curriculum they use (the IB PYP) is not well suited to pupils with ASDs due to its inquiry-based nature. Curriculum restriction is a barrier to inclusion identified in current research (Jordan and Jones 1999 Appendix 3). Barnard et al. (2000), for instance, believe the National Curriculum of the UK to be too narrow to reflect the needs of children with autism and recognise that revision is necessary if schools are to become truly inclusive.

At the other end of the scale, two teachers from school 7 specifically state that there is no official structure within the school to support children with SEN. This finding relates to the HMIE's (2006) similar finding that some pupils are still inappropriately placed without support, even though there is now a general awareness that merely placing a pupil in mainstream is not enough to ensure inclusion (Glashan et al. 2004). Participants also drew attention to the possibility that although pupils with ASDs may find placement within primary school in Dubai, they may have greater difficulty in finding secondary placement. This claim cannot be substantiated by the evidence provided by this study, but does warrant further investigation, particularly as this study found most cases of children with ASDs identified in the primary years as opposed to latter years. Bradshaw et al. (2004) also argue that it is quite likely

private schools maintain mild cases of SEN until their needs become more apparent in grades six to seven, which would seem to support this possibility.

Human resources are also mentioned by the schools as an approach to supporting pupils with ASDs including: educational psychologists; TAs; tutors; and, shadow teachers. Once again the schools vary in approach. School 3 employs many different specialists throughout the school who work on site; school 15 deals with educational psychologists off-site and school 3 only employs a specialist, such as a GP, when a child is likely to be asked to leave the school because the school no longer feels able to cope with the pupil with ASD. Current research advocates the use of multi-agency support (e.g. HMIE 2006) in supporting pupils with ASDs, although Gaad (2004a) warns that children still "fail their teachers and their schools after many years of struggling with private tuition".

In line with the findings of Barnard et al. (2002) this study found that the majority of mainstream primary teachers had not undertaken any ASD-specific training, or where training had taken place it was usually either a short course of a few hours duration, or as part of general SEN training during ITT. Teachers discussed the need to engage in self-study using the Internet, books and talking to other professionals. Dahle (2003 Appendix 5), however, warns against depending on the Internet for information about teaching pupils with ASDs and recommends that it does not take the place of professional training. Class teachers felt they had gained a variety of skills through their experience including how to teach with every sense, be creative and make adaptations. However, all the participants in the study expressed a desire to undertake more training, which is a similar finding to Wall's 2004 study in the UK. The participants cited expense and lack of available reliable courses as barriers to achieving the training in Dubai. The HMIE (2006) make a number of suggestions for improving training, which they recognise as a major area of weakness, including: sponsoring teachers to pursue post-graduate certificates and running modular Masters courses.

The participants from the three schools identified a range of ways in which they were supported in including pupils with ASDs including TAs, small class sizes and the removal of children from class. Barnard et al. (2000), however, cite the removal or exclusion of children from class as a by-product of inadequate training and consider the teaching of effective coping strategies as more inclusive. Participants also perceived a number of current barriers to effective support including

the lack of implementation of laws to support the inclusion of children, as discussed earlier in this section, the unwilling nature of a school to help and that many schools in Dubai are for-profit organisations who may not wish to cater for pupils with SEN. Participants made a number of suggestions for improvement, including the introduction of more support staff, greater input from outside agencies and for SEN organisations to be more pro-active, because currently participants felt that there was a lack of support networks with Dubai. Increasing the number of support staff is generally welcomed by research (e.g. Barnard et al. 2002, Margerison 1997), however, there are a myriad of potential issues that also require careful consideration before simply increasing numbers, namely: the importance of clear job descriptions (Jerwood 1999); necessity to ensure LSAs form part of a team (Mistry et al. 2004); that support staff are adequately trained (Lacey 2001); that LSAs are assigned to a group as opposed to one pupil (Jerwood 1999); and, that personal control is maintained by the pupil (Giangreco et al 1997). Some of these issues do arise in stage 3 of the data collection. The participating shadow teacher has not, for instance, received any formal training and presents an unclear picture of her role in comparison to the teacher. Furthermore, staff from the school explain that Toby has experienced a high turnover of different shadow teachers, possibly related to this inexperience. Dependency issues, as highlighted by MacLeod (2006), did not seem to be an issue in general over the course of this project because most pupils did not have assistants, or had successfully progressed beyond the requirement (see Appendix 1cii parent interviews). However, in the one case of shadow assistance (for Toby) some issues of dominance are potentially apparent in the shadow teacher's comments that she is "him, be his hands and his ears and his eyes... to write things for him". These preliminary findings are not substantial enough to draw any conclusions, but do warrant further in depth investigation into the role of assistants in Dubai mainstream international education. The development of pro-active SEN organisations is highly recommended by research (e.g. Gaad 2003), by providing building a community of knowledge (Glashan et al. 2004), for instance, or autism-specific outreach service. Barnard et al. (2002) also suggest that special schools develop their role as "centres of excellence", which is a possibility for autism centres within the UAE.

### **Research Question 3 (Stage 3 Data)**

Data for the third research question: What is inclusion like for a child with an ASD in a mainstream international primary school in Dubai in terms of academic and social

progress? is provided by stage 3 of the project. This stage was composed of a number of different data elements: classroom observation; stakeholder interviews; documental analysis and pupil social network questionnaires. Such an approach produces a wealth of data and so in this section there is only scope to discuss the main points that have arisen with particular focus on academic and social progress overall.

Classroom observation of the five case study pupils revealed that in general all the pupils, except Toby, participated in mainstream lessons and took part in the every day routine of the classroom with minor assistance. Teaching methods observed were mostly general, as opposed to ASD-specific. Some research evidence points to the possibility that relying purely on general pedagogy may result in eventual exclusion (Batten 2005) and in a latter meeting with Eliot's class teacher it was explained that Eliot was indeed being asked to leave at the end of the academic year. During independent work time the pupils required 1:1 support from the teacher in order to cope with the tasks set, but with this support they were able to stay on task and achieve the learning objectives. The emphasis placed on social learning, in groups, in school 7, is potentially problematic for any pupils with ASD because this is a skill that they find very difficult, according to Jordan and Jones (1999), and Eliot's teacher comments that he finds this form of learning very challenging. In most cases teachers gave instructions verbally without supporting them visually, as recommended by ASD research (e.g. Sherratt 2005), which could have helped the pupils' understanding. Pupils were observed participating with whole class/school events such as singing in the choir, or during a performance and coping well with noise and distraction and largely fitting in with peers. Apart from Eliot, all pupils were willing to contribute to lesson discussions and Toby was able to participate with the help of his shadow teacher. There was evidence that some of the pupils, particularly Jake, Eliot and James, displayed signs of anxiety and were at times distressed by changes in routine. It is widely recognised in ASD-research that pupils with ASDs need a clear idea of events in order to function calmly and so this is an area which teachers could develop by using visual schedules and breaking down tasks as school 3 has successfully done for the two pupils currently enrolled. It is also important for the teacher to find the "trigger" (Jordan and Jones 1999) of James' anxiety periods to avoid the stigma that is currently developing when he behaves differently to peers by blinking his eyes frequently and becoming distressed.

Documental evidence provided by the schools was limited, particularly in the case of school 7. However, the overall picture provided by documents suggests the academic progress of the pupils varies, but is in general low. Eliot, Jake and Toby all work below grade level and Oliver's SEN report suggests he functions in the low-average range although it appears he is able to work in parallel with class peers. Jake's school reports suggest that he was achieving a level 2a in year 2 and is still achieving a level 2a in year 4.

Only school 15 uses IEPs, which were found to be very helpful in Barnard et al.s' 2000 survey. Jake's IEP addresses both social and academic areas of learning, as recommended by Sherratt (2005), although the targets seem to place the onus of responsibility for change with Jake as opposed to the school to an extent. The language of the IEP reflects this as the action is framed in terms of what Jake should do to help himself e.g. "To attempt... to acknowledge... to ask for" rather than what the school can do to accommodate. This is also reflected in Jake's teacher's comments about his academic achievement (chapter 3.2) when she states that he is a lower achieved *because of his autism* as opposed to the efforts of the school. In contrast, school 3's approach, which rejects the IEP in favour of an overall developmental curriculum, seems to capture and distil much of the recommended best practice of research. School reports (Appendix 7), for instance, refer specifically to ASD related targets (HMIE 2006) such as "visual prompts" (Dahle 2003 Appendix 5), "predictable routine" and "work broken down into smaller chunks" and in doing so emphasise the necessity of school adaptation as opposed to pupil. This is reflective of the researcher's own earlier findings that SEN support is still in many cases construed as an 'add-on' system.

Despite the overall lower academic achievement, which is not necessarily indicative of success or failure, parents interviewed claim that they are very happy that their children are in mainstream education and believe that their progress is better in this location than in an SEN school. The parents attribute the success of the placement to a number of factors, many of which have been noted earlier in this discussion as recommended in research: a pro-active head teacher who understands ASDs; home visits by staff; good overall communication and management; teachers who are empathetic, structured, flexible and willing to listen and learn; shadow teachers on whom the pupils are not too dependent; enough support from TAs and outside agencies; and, that advice is given to parents by the schools. One parent also identifies a new supportive organisation that is just opening in Dubai specifically to

support parents and teachers in the education of pupils with ASDs, which is in line with research recommendations to develop a learning community (Gaad 2003).

The parents are in general satisfied with the mainstream education and academic progress of their children, but identify barriers they have faced in reaching success including: their experience that many schools would not accept their children, some without even seeing them; that school choice and curriculum choice is therefore limited; that schools are more interested in their 'academic' reputation; and, that outside agency costs are high (Sicile-Kira 2003) and solely the responsibility of the parent. One of the parents also shares her experience of other less successful children with ASDs or ADHD of whom she knows in Dubai. These children, she explained, were either enrolled in mainstream schools but not supported and therefore regressed, were expelled or had to suffer from limited teacher experience by being termed 'badly behaved' (HMIE 2006).

Socially, classroom observations revealed a varying picture of everyday life for the pupils with ASDs. In general most of the pupils seemed to prefer a position on the periphery of events, although in James' case the position seemed to be enforced by peer rejection during recess, the majority of which he spent alone. Most of the pupils were not observed engaging in 'chatter' with peers during lesson time (Ochs et al. 2001) either through choice, or in Eliot's case possible rejection when peers do not volunteer to partner him or do not answer his questions. Unusual movements made by James and Jake were noted by peers and potentially misunderstood, although further observation would be required to confirm this. In Toby's case (school 3), however, whose sudden movements and noises are most obvious, peers seemed to be aware and accepting. Within the same classroom, Oliver is also the exception to the rule in that he was observed chatting freely with peers.

Documental evidence, mainly based on teachers' comments, reveals a picture of concern for social progress. With the exception of Oliver, who is described as having made good progress socially, most teachers describe the pupils' progress as problematic. In Eliot's case, the teacher explains that before making friends with one other boy in the class, he did not have any friends. Unfortunately, on a recent return visit to the school the teacher informed the researcher that this friendship had now ended. In James' case the teacher describes James' behaviour as inappropriate and in Jake's case the teacher notes that he tends to play with one or two individuals and has difficulty working in a group. Even in Oliver's case, his teacher identifies that he

still tends to play in parallel as opposed to being fully involved. Both Oliver and Toby, in fact, are assessed in SEN reports as having low social skills.

Parents believe there are social advantages to mainstream education and locational opportunities for social development (Jordan and Jones 1999 Appendix 3). However, one parent notes that her son has been teased in the playground and the other highlights social assistance as the one area that could really be improved within the school.

All this evidence is supported by the results of the social network questionnaires. These reveal a picture of life at school on the periphery, or even in isolation for most of the five case study pupils. Most pupils gain a low individual and cluster centrality, being grouped with one buddy, a peripheral group of peers, or isolated. The children do not receive many friendship nominations and in cases where they do further analysis shows that these are not necessarily reciprocated or have been received from other peripheral or isolated peers. The exception to this is Toby, who despite having the lowest functioning form of ASD, receives best friend nominations from two high centrality girls within the class and is integrated with their assistance. It is possible in this case that peer awareness (Ochs et al. 2001) helped with the success. Overall these findings correlate with those of Kalyva and Avramidis (2005) who argue that even pupils at the high functioning end of the spectrum may still experience difficulties socially. The findings also relate to Chamberlain et al.'s (2007) argument that mainstream education can increase the risk of isolation and rejection, although it would also be prudent to heed their advice that before making this judgement it is sensible to consider the nature of relationships and friendships for children with ASD. It is important, Chamberlain et al. advise, that we re-assess our static concept of friendship, just as the concept of 'inclusion' challenges our ingrained thinking. Of key significance is to consider whether the children themselves are satisfied with the nature of the friendships and this would warrant further pupil-based research.

## *Chapter 6:* **Conclusion and Recommendations**

In conclusion, the data produced by this study suggests that the inclusion of pupils with ASDs within the mainstream international primary sector in Dubai is currently in the early stages of development. The present situation would be most accurately termed 'fire fighting' for a number of reasons that are summarised here. However, it should be noted that amidst the overall 'fire fighting' approach there are examples of 'fire lighting' developing, which hopefully will continue to gain strength over time.

The data reveals that in line with international trends there does seem to be a general move towards the education of pupils with ASDs within mainstream international primary education in Dubai, albeit generally limited to cases of high functioning or very mild forms of ASD. However, with the recently issued law (Federal Law No.29 2006) still in the early stages of development and the current view that many schools lack appropriately trained teachers, funding and resources, coupled with the prevailing attitudes that children with ASDs should be in SEN Centres there are a substantial number of schools who do not cater for the pupils. Some schools in fact specifically state that they have no interest in supporting any children with SEN and refuse to enrol them. However, some of the worst cases of neglect can be found in these situations, where a child remains undetected, through lack of expertise, until they eventually fail the system and are asked to leave.

Thankfully the data collected from the three participating schools shows that staff have an awareness of many effective approaches that can be taken to ensure this does not happen. Parents of pupils with ASDs interviewed during the research are also generally pleased with the standard of mainstream education received by their children. Hopefully the growing awareness of effective approaches will develop into practice as it has done in one of the schools visited during the project (3). School 3 has adopted a range of ASD-specific strategies, such as PECs and vital visual approaches, in order to support the pupils enrolled there, unlike the other schools who are still relying on general pedagogical approaches. The highly dedicated teachers who are currently working in these schools would benefit from a lot more support including: properly organised and accredited professional training; the development of a learning community and outreach support network, perhaps building on the expertise found in the recently opened ASD Centres in the region; an



increase in outside agency workers operating within schools on a regular basis; and, some additional support staff.

Overall, pupils observed in this study were involved in the every day life of school. They appeared to meet the learning objectives set for them and spent the majority of the time on-task working amidst mainstream peers. Although academically achieving at a lower grade level than peers, parents were happy with the progress made. The current approaches adopted do appear to provide some success for the pupils with mild cases of ASD, however, if the schools are to cater for more severe cases then the add-on system of support will most probably not be sufficient to provide a satisfactory education. Schools will have to address more global issues such as what kind of curriculum is suitable for a more diverse school population and how staff can collaborate through the creation of policy and advisory documents.

Perhaps the most troubling aspect of this study is the social situation for pupils with ASDs in mainstream international education. The study revealed a general picture of life at school on the periphery, or in some case even in isolation. One of the parents reports that the key thing schools could do to improve the situation for pupils with ASDs is address the socialisation issues. There are a whole host of social strategies schools can adopt in order to ease the introduction of a pupil with ASD into mainstream life. The peer awareness apparent in school 3, which may have led to the social inclusion of the lowest functioning pupil in the study, is an example of 'fire lighting' worthy of emulation.

## Recommendations

In order for the continued development of the emergent 'fire lighting' approaches currently apparent in mainstream international primary education in Dubai, this study has highlighted a number of recommendations:

- At national level: For the legal system to continue to develop the implementation of the law in order for pupils with ASDs to be a recognised and credible part of an inclusive society.
- At whole school level: For schools to consider the effectiveness of the current curriculum in providing a suitable education for a diverse student population and review how they might adapt it and incorporate ASD-specific strategies into the general pedagogy of the classroom. For schools to develop a policy for the inclusion of pupils with ASDs that is jointly created and understood by all staff members, and includes an active set of guidelines for practice and an ASD identification checklist for teachers so that more teachers can be alert to the signs before the system eventually fails the child and, vitally, that the ASD can be managed at an early age.
- At classroom level:
  - An increase in support for teachers, including: properly organised and accredited professional training; the development of a learning community and outreach support network, perhaps building on the expertise found in the recently opened ASD Centres in the region an increase in outside agency workers operating within schools on a regular basis; and, the employment of some additional support staff.
  - For teachers to employ more of the recognised social strategies that are repeatedly recommended within research, for instance: early intervention and teaching of social skills (Gena and Kymissis 2001); teacher support in developing relationships between classmates and pupil with ASD in class and at play (e.g. Jones 2002); peer tutoring (e.g. Jones 2007); developing a Circle of Friends (e.g. Frederickson et al. 2005); and, using social stories (Sicile-Kira 2003).

## **Future Research Possibilities:**

- This study highlighted the possibility that fewer pupils with ASDs are currently enrolled in mainstream international secondary schools. It would be interesting to know if this is a chance occurrence, or if there are potential barriers to secondary education.
- Dependency issues, as highlighted by MacLeod (2006), did not seem to be an issue in general over the course of this project because most pupils did not have assistants, or had successfully progressed beyond the requirement (see Appendix 1cii parent interviews). However, in the one case of shadow assistance (for Toby) some issues of dominance are potentially apparent in the shadow teacher's comments that she is "him, be his hands and his ears and his eyes... to write things for him". These preliminary findings are not substantial enough to draw any conclusions, but do warrant further in depth investigation into the role of assistants in Dubai mainstream international education.
- The social situation facing many pupils with ASDs in mainstream international education in Dubai is clearly an area of difficulty for some. It would be useful to conduct a more in depth investigation into the socialisation of pupils with ASD and establish whether many truly face rejection, and if so why, or if they are content with the situation. This would involve a study that also focussed more closely on the views of the pupils themselves.

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