INTEGRATION OF CHILDREN WITH BEHAVIOUR DISORDERS:
A COMPARATIVE CASE STUDY ANALYSIS IN TWO AUSTRALIAN STATES

KEITH ALLAN BRADSHAW

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PLEASE NOTE

The greatest amount of care has been taken while scanning this thesis, and the best possible result has been obtained.
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ABSTRACT

This study was conducted in response to the policies for the integration of children with behaviour disorders in Victorian and New South Wales Primary Schools. These two states were selected for this study for three reasons. Firstly, the two states have adopted and are implementing integration policies which are, in many areas, contrasting. Secondly, compared to other Australian states, Victoria and New South Wales have the most children enrolled in their respective school systems and, hence, the largest number of children whose schooling is influenced by these policy decisions. Thirdly, the integration policies of both states group children with behaviour disorders under the generic term "children with disabilities".

The integration policy adopted in Victoria is termed the "Rights" model (Skyes, 1989, p. 88) which encourages the education of all children with disabilities to take place in regular schools rather than in segregated settings. The integration policy of New South Wales is termed the "Assessment" model (Doherty, 1987, p. 4) which refers to the process of providing the necessary services in a setting which is the least restrictive for each individual.

Regular primary schools are extremely hard pressed to provide services that meet the multiple and diverse needs of children with behaviour disorders (Nelson & Pearson, 1991). The aim of this study was to investigate the views of those involved in the integration of children with behaviour disorders, as to the effectiveness of the delivery of special educational services in Victorian and New South Wales primary schools.

The study consisted of two phases: Phase One, Victoria (conducted between 1988 & 1990); and Phase Two, New South Wales (conducted between 1990 & 1992). A case study profile, a perceived academic integration index and a perceived social
integration index were compiled for each child/school in both states, using qualitative and quantitative measures. The perceived social integration index and the perceived academic integration index were correlated with a number of variables, including age of the child, qualifications of staff, size of school/class and attitudes of staff.

Data were gathered from fifteen primary schools in each of the two states. All these schools were in the process of integrating a child with behaviour disorders. The schools were visited from between two to three days, depending on the number of staff members required to complete questionnaires and the number of specialist classes visited for observation purposes. In each school the principal, classroom teacher, parents, peer group and support staff were asked to respond to questionnaires, interview questions, sociometric scales, self report inventories and observation rating scales. Difficulties were encountered in gathering data in Phase One, as a result of variations in type and duration of problem behaviours. To address these difficulties in Phase Two, before the surveys were conducted, extensive discussion with staff and observation of the child took place to ascertain the suitability of the child for the study. In addition, some factors were added to the interview questions in the Phase Two study, including teacher stress and teacher characteristics considered important when placing children with behaviour disorders into the regular classroom. Follow up questionnaires were distributed to Victorian primary schools at intervals of six, twelve and twenty four months after the initial study to ascertain whether the findings of the Phase One study were maintained over a period of time. In New South Wales (Phase 2 study), a letter was sent to the school one year after the initial study to ascertain the enrolment status of the surveyed child.

The data were analysed via a series of research questions posed as a response to the literature reviewed. These research questions were: 1; "What factors
outlined in the literature as important to integration effectiveness influence effectiveness of integration programs for children with behaviour disorders?" 2; "Are different teaching strategies used by teachers perceived as more or less effective in the integration of children with behaviour disorders?" 3; "Do staff with differing levels of qualifications and in-service training have different attitudes towards the integration of children with behaviour disorders?" 4; "What is the educational placement of the surveyed children one and two years after the initial survey? What factors have influenced this placement?" 5; "Do implementational guidelines in the two states influence the staffs' perception of integration effectiveness?" 6; "What are the attitudes of the parents surveyed towards the integration of children with behaviour disorders? What factors appear to influence these attitudes?"

The results of both phases of the study indicated that those involved in the integration of children with behaviour disorders did not view integration, both social and academic, as being successful for a number of the children. In both phases of the study where integration was perceived as effective, a number of variables were seen to be positively related to that effectiveness. The most significant of these variables appeared to be a close working relationship with a special school, termed the "Co-operative Model". The implications of this model were examined and elements contributing to its particular effectiveness discussed. Other variables which were found to be positively related to effectiveness included special education qualifications of staff, teaching experience of staff, the grade in which the school was attempting to integrate the child, the age of the integrated child, number of children in the integrated class and location of school (regional area/suburb of capital city).

An examination of the findings from both states indicated that, despite policy differences, similar problems have been encountered when attempting to deliver services to children with behaviour disorders in the regular classroom. In both
states, resources appeared to be sparsely distributed, stress levels among staff were high and staff with qualifications in special education were a small minority.

A classification schema to assist in the effectiveness of integrating children with behaviour disorders was developed, based on the results of the Phase One (Victorian) study. This classification schema was then further developed and evaluated using the results of the Phase Two (New South Wales) study. The classification schema that evolved was designed to assist practitioners when integrating children with behaviour disorders.

The results of the follow-up studies indicated that the most effective integration programs identified in the initial study continued to be the most effective. The follow-up studies also indicated that the schools identified as having ineffective integration programs continued to have implementation difficulties and that the schism had grown between those case studies viewed as successful placements and those viewed as unsuccessful. Schools had become more widely divided over their view on integration effectiveness.

The findings of the present study suggest a number of areas that future implementors of integration policies need to consider. Firstly, mandatory special education courses need to be implemented by all teacher training institutions. Secondly, to effectively integrate children with behaviour disorders into the regular classroom an individual, collaboratively designed program needs to be utilized. Collaboration between special setting teachers and regular class teachers would appear to be crucial in program design. Thirdly, teacher stress emerged as an issue which policy designers need to address urgently. Fourthly, resources and support, including the availability of in-service courses on children with behaviour disorders, need to be increased and made available to regular classroom teachers. Finally a range of alternate educational programs/opportunities, not just a choice between
regular and special settings, needs to be developed for children with behaviour
disorders.

The study is important to the field of special education and in particular to
children with behaviour disorders in three significant ways. Firstly, data were
gathered using both qualitative and quantitative research methods. This approach
would appear to be the most appropriate method for gathering data on integration
as it allows for many of the child's ecosystems to be investigated and for the child's
numerous and important interactions to be examined. Secondly, the study
highlighted the importance of investigating the individual needs of children with
behaviour disorder when considering integration. Finally, the study allowed for a
number of variables, important for practitioners when integrating children with
behaviour disorders, to be identified and examined.
CHAPTER 1

INTRODUCTION

In implementing integration policies, educators world-wide have encountered a number of problems in relation to children with behaviour disorders (Fuchs, Fuchs, Fernstrom & Hohn, 1991). There have been no definitive answers to questions such as: which is the most appropriate integration support service, which is the most appropriate behaviour strategy, which is the most appropriate classroom environment, and which are the most important teacher characteristics when attempting to integrate children with behaviour disorders? This lack of clear direction has resulted in the adoption of varied, and at times conflicting, strategies. The type of service offered to children with behaviour disorders to some extent depends upon where they live (Nelson & Pearson, 1991). Educational authorities in some countries have adopted policy guide-lines in an attempt to assist practitioners in integrating children with behaviour disorders. In the United States, federal policies offer guide-lines for funding the integration of children with behaviour disorders (e.g. The Children's and Communities' Mental Health Systems Improvement Act, 1991). Likewise, in areas of Europe national policies offer educators some direction (e.g. Warnock, 1978). In Australia, however, there is no national policy on the integration of children with disabilities. Each state has developed its own policy and these policies vary considerably, as do the implications for integrating children with behaviour disorders in each of the states (Gow, 1989). Victoria and New South Wales, the most populous states of Australia, have developed two quite different integration policies and the implications for children with behaviour disorders vary quite considerably.

Legislation in Victoria (Collins Report, 1984) has mandated the transfer of special education services from segregated settings to regular schools. Policy guide-lines in N.S.W. (Winder, 1987) proposed that special education services be
undertaken by a number of service centres, ranging from regular classrooms through special settings to home instruction. In N.S.W., the policy dictates that the most appropriate setting be selected for each child with special needs (N.S.W. Policy Statement, 1993).

The aim of this study was to investigate the perceived effectiveness of the delivery of special educational services to children with behaviour disorders in Victorian and New South Wales regular primary classrooms. Perceived effectiveness was determined by examining the perceptions of those involved in the integration program for the child. A classification schema to assist in the effective integration of children with behaviour disorders was developed from these perceptions. This classification schema contains factors, including attitudes, training and strategies that need to be considered before children with behaviour disorders are placed in the regular classroom.

In Chapter One of this thesis, the important terms used in this study are defined, two research difficulties, namely the dearth of research on behaviour disorders and the integration controversy, are discussed, and the integration policies of Victoria and New South Wales are outlined. Chapters Two and Three provide a summary of the extensive literature review in the light of which definitions as well as theoretical and classroom approaches for integrating children with behaviour disorders are examined. A classification schema for maximising integration effectiveness is provided in Chapter Two.

Chapter Four introduces the research questions which emerged from the literature reviews and outlines the sampling procedures and research methods employed. The data were gathered in two stages, Phase One in Victoria and Phase Two in New South Wales. Several instruments were used in both phases to gain the perceptions of those involved in the child's integration. While a number of studies
have sought to quantify the difficulties involved in implementing integration policy. Such studies on their own cannot adequately examine the interaction of children and their peers and family with the quality of the learning environment. A series of quantitative surveys supported by qualitative observations is a more appropriate and effective method of investigating the complex factors involved in integration (Center, et al. 1988). The use of both qualitative and quantitative methods helps researchers to be more accurate in their estimates of phenomena (Schofield & Andersen 1984). Wiersma (1986) claimed that quantitative information is useful in qualitative research for providing more specific information than descriptive terms alone (p. 257). In support, Lanier and Little (1986) argued that "meaningful isolation and control of variables in complex social affairs is rarely, if ever, possible and it is not recognized, therefore as a particularly fruitful line of contemporary inquiry" (p. 92). In Chapter Four, detailed discussion of the instruments used to gather the data is undertaken. The data were gathered and examined in three ways: perceived integration scores; case studies; and follow up questionnaires. Responses to questionnaires resulted in the construction of a number of scores. From the data gathered, the classification schema for the effective integration of children with behaviour disorders shown in Chapter Two was further developed.

The results are presented in Chapter Five by constructing research questions based on variables identified in the literature as factors which enhance integration effectiveness. Chapter Six includes results and discussion on the follow-up questionnaires. The research questions are discussed and recommendations based on the data are presented in Chapter 7. Chapter Eight provides conclusions and outlines a classification schema to assist practitioners in enhancing the effectiveness of integration strategies for children with behaviour disorders.
DEFINITIONS OF TERMS USED

If you would debate with me define your terms (Voltaire, 1694-1778).

According to Spectre & Kitsuse (1977), the terminology employed in special education is complex and ever changing as, in part, a direct result of the competing interests involved. The title of this thesis introduces the reader to a number of terms which must be clearly defined prior to any discussion of the perceived effectiveness of the placement of children with behaviour disorders. When discussing definitions, particularly those within special education, it is paramount to see them as transitory in nature, related to the period of time, and developmental ideas of educators of that period. As Dunn (1973) and Lilly (1977) have highlighted, definitions change as our ideas develop over a period of time.

BEHAVIOUR DISORDERS

When examining the integration of children with behaviour disorders, the plethora of terms and classification systems associated with the child who behaves in an inappropriate way presents a complex maze for the educator to negotiate. Perhaps the term which creates the most difficulty is "behaviour disordered". The term is used to indicate different meanings by different people.

Most educationalists agree that there are problems in defining those characteristics that describe children who are behaviour disordered/emotionally disturbed (Nelson & Pearson, 1991; Rennie, 1993). These problems include: the accurate measurement of the behaviour; the transient nature of behaviour; problems of labelling; assumptions and theoretical approaches of those who label; stability of behaviour; and relationships with other disabilities. Despite the problems, intervention strategies, legislative decisions, funding, conceptual frameworks and conceptualizing of the problem all depend on some form of definition. Rich (1982) declared, definitions are: "the initial step in the identification
and classification of students who are disturbed" (p. 57). Compounding such difficulties, the terms "behaviour disordered" and "emotionally disturbed" are used synonymously.

The term "behaviour disordered" has been selected in this thesis in preference to "emotionally disturbed" for a number of reasons. These reasons have been categorised into three: the INDIVIDUAL, the TEACHER and the SCHOOL.

**Individual** The term "behaviour disordered" has been selected because it suggests that the problem is not necessarily within the individual but rather as a result of the individual's behaviour. Additionally, for the individual a number of researchers suggest that behaviour disorders is a less stigmatising label (Apter & Conoley, 1984; Feldman, et al. 1983). Finally, in respect of the individual the term, "behaviour disordered", "maybe a more accurate descriptor of most children's socialization difficulties " (Kauffman, 1985, p. 5).

**Teacher** The term "behaviour disordered" is more appropriate to use with teachers because of "its relevance to educational interventions" (Wood, 1985, p. 225). Most teachers are aware that research evidence indicates that many children behave differently out of school. When teachers speak of a student's behavioural problems, the phrase carries no intimation that their behaviour was other than transient and situational (Topping, 1990).

**School** The term "behaviour disordered" is more appropriate to use in the school environment because schools have to deal with many children with varying degrees of anti-social, emotional and deviant behaviour problems. The term also gives special educators the scope to look at the child in an ecological sense, to consider factors such as peers, teachers and parents. The term "behaviour disordered" "directs attention to what students say and do rather than to affective
states that are inferred from clinical judgements about behaviour" (Walker, 1984, p. 25). It allows for more descriptive terms and lacks the association with specific theories of causation" (Wood, 1985, p. 225).

An individual educator's understanding of the term "behaviour disordered" can be dependent on that educator's theoretical beliefs. Professionals are often influenced by their own personal bias. Hobbs (1975) suggests: "a particular child may be regarded as mentally ill by a psychiatrist, as emotionally disturbed by a psychologist, and as 'behaviour disordered' by a special educator" (p. 57). An educator's concept of children with behaviour disorders may be influenced by the number of conflicting theories surrounding the aetiology of the behaviour. The origins of behaviour disorders appear varied: family, biological and school based. Thus, behaviour disorders can be a medical, educational, social or an environmental problem.

There has been much controversy among professionals over which is the most appropriate term, "behaviour disordered" or "emotionally disturbed". While this conflict continues to rage, it appears clear that most definitions whether of "behaviour disordered" or "emotionally disturbed" contain several common identifiable elements. These common elements include behaviour or emotional responses that differ from those generally accepted from age-appropriate, ethnic, or cultural norms and these behaviours adversely affect educational performance in such areas as self care, social relationships, personal adjustment, academic progress and classroom behaviour (Nelson & Pearson, 1991). Often the problems are long standing and severe and require special educational services.

In the United States a proposed new U.S. Federal Definition for Behaviour Disorder is being discussed (Delegate Assembly of the Council for Exceptional Children, 1991), while in the United Kingdom debate over the categories of
behaviour continues (Rennie, 1993). While most educationalists would agree there are problems associated with definitions of "behaviour disordered"/"emotionally disturbed". Definitions are useful for placement and intervention decisions. Gresham (1985) created a practical definition of behaviour disorder which is adopted in this thesis. Gresham stated,

A behavior disorder is said to be present when a child or adolescent exhibits behavioral excesses and/or deficits that authoritative adults in the child's or adolescent's environment judged to be too high or too low. These behaviors are considered to be atypical because the frequency, intensity, and/or duration deviates from a relative social norm. The excesses and/or deficits which constitute a behavior disorder can be expressed through one or all behavioral systems or repertoires (cognitive/verbal/overt/motoric, or physiological/emotional) and occur across settings, situations, and time.

No single assessment method is used as the primary basis for the diagnosis of a behavior disorder, but rather it is diagnosed on the basis of a multifactored assessment information which gives or converges both between and within assessment methods. In addition to the above considerations a behaviour disorder can only be said to be present when excesses, deficits and/or situational inappropriateness of behaviour continue at an unacceptable level subsequent to a school-based intervention. (Gresham, 1980, p. 500).
This particular definition has been chosen for a number of reasons: the focus of the definition is on the behaviour displayed rather than on some unobservable trait; the definition acknowledges that some behaviour problems may be situationally inappropriate rather than excessive or deviant; by using the definition it is possible to develop a number of intervention strategies; the definition stresses the importance of assessing the frequency, intensity and duration of each individual’s behaviour; the definition requires behaviour problems to be exhibited across settings as well as over time; and, most importantly, it suggests that before an assessment decision can be made, a school-based intervention program should have been initiated.

INTEGRATION

As mentioned previously, the integration of children with behaviour disorders into the regular classroom is an extremely complex issue due in part to the plethora of classifications and definitions relating to the terms "integration" and "behaviour disordered". As with the term "behaviour disordered", this writer believes the term "integration" is one of the greatest obstacles towards the effective integration of children with behaviour disorders. Professionals accord the term different meanings, depending on their roles, experiences and attitudes.

Dictionaries define the verb "to integrate" in very clinical terms such as "to form into a whole". Although these clinical terms outline an idealised picture of integration, a picture worthy of consideration, they are of little benefit to practitioners who function in a real situation, not an idealised one. To complicate matters even more, the term "integration" is often used synonymously with the term "mainstreaming". These terms are not synonymous. Mainstreaming definitions are usually very broadly presented utilizing statements such as, "in the same environment as regular class children", in other words the philosophical perspective. Gottlieb (1981), in attempting to clarify the different interpretations of the term
"mainstreaming", described it as being viewed from two perspectives: a practical perspective (how it is actually implemented in the schools); and an idealized perspective (how it should or could be done).

In contrast to Gottlieb (1981), mainstreaming, in this study, refers to the product of transferring a student from a special school setting to a regular class setting. The concept of integration refers to how educationalists can assist the process of regular class placement. These definitions have been chosen because integration is seen as a long-term strategy, whereas mainstreaming can simply be a short-term proposition. The delivery of special educational services in regular classrooms to children with behaviour disorders is a long term process and should be termed "integration". It is important to note that mainstreaming was a legal decision followed by legislative actions; it did not necessarily ensure the development of integration programs (Hoben, 1980).

The authors of the United Kingdom Report (Warnock, 1978), aware of the problems associated with terms such as integration and mainstreaming, distinguished three types of integration: locational, social and functional. Locational integration was said to exist when special schools/classes/units were set up on the same site as a regular school. Social integration was seen to exist when children attending a special class shared play or lunchtime with regular class children. Functional integration, the fullest form of integration according to the committee's report, is achieved when locational and social integration lead to joint participation in educational activities.

In the report of the Victorian Review (Collins, 1984), integration was viewed as having two important aspects: policy and practice. Both aspects identified processes:
1. a process of increasing the participation of children with impairments and disabilities in the education programs and social life of regular schools in which their peers without disabilities participate; and

2. a process of maintaining the participation of all children in the educational programs and social life of regular schools.

The first process refers to finding and transferring those children who are presently in segregated settings into regular classrooms. The second process refers to supporting the former segregated child in the regular classroom. While not supplying the practitioner with a wealth of guidance, the definitions do highlight another aspect of integration: the process should benefit all children in the classroom, not just those with disabilities. In supporting this view, White (1985) suggested integration should be "just as concerned about students already in regular schools as it is about those who transfer from special schools to regular schools" (p. 7). Hoben (1980) stated quite clearly that integration is far more than mainstreaming; it is the development of all individuals whether they are disabled or not. The present study, although examining services to children with behaviour disorders, is also investigating how the placement of the child with behaviour disorders in the regular classroom affects the development of the peer group. Integration is based on the interactions between the integrated child and his/her peers and the development of a stable class/school environment. To be perceived as effective, integration will need to be seen as a benefit to all who contribute.

It is important when discussing the distinction between mainstreaming and integration to stress that mainstreaming can be accomplished through legal and administrative fiat. Integration, on the other hand, is an ongoing process of interaction that cannot be mandated, nor can it be expected to happen naturally (Hoben, 1980). Educating children with disabilities in regular classrooms creates opportunity for integration, but it offers little assurance that integration will actually occur.
Apart from clearly defining terms, two other aspects create difficulty for the investigator when researching the integration of children with behaviour disorders: the dearth of research on children with behaviour disorders and the controversy which still surrounds integration.

DEARTH OF RESEARCH ON CHILDREN WITH BEHAVIOUR DISORDERS

Walker (1984) stated: "children who are classified as either emotionally disturbed or 'behaviour disordered' appear to stress school systems perhaps more intensely than any other handicapping condition" (p. 25). Supporting this view, Sarason and Doris (1978) claimed students with behaviour disorders are among the first to be referred out of less restrictive educational settings and among the last to be socially integrated back into them. Despite the difficulty involved in the education of these children, little research has taken place particularly in the area of service delivery. A number of researchers (Brown & Ward, 1982; Pickering, 1986; Vacc & Kirst, 1977) have commented on this lack of research. Brown and Ward (1982) stated that there "appears to be a long standing lack of interest in the educational treatment of the emotionally disturbed or maladjusted child" (p. 201). Findings concerning children with behaviour disorders are often a result of more general studies, such as on the integration of children with special needs.

Many general studies have indicated that teachers consider children with behaviour disorders as the most difficult group of children with disabilities to integrate effectively (e.g. Alexander & Strain, 1978; Antonak, 1980; Braaten et al, 1987; Bradshaw, 1987a; Center, Ferguson & Ward, 1988; Coleman & Gilliam, 1983; Johnson, 1987; McGrath et al., 1986; Saunders, 1987; Simpson & Edwards, 1980; Ward & Center, 1987; Warger & Trippe, 1982). Other research has found that children with behaviour disorders are the group of children most often rejected by their peers (Kauffman, McCullough & Sabornie, 1984; Vacc, 1972).
The apparent lack of data on the education of children with behaviour disorders must be of concern when one considers the movement world-wide for the delivery of special education services to take place in the regular classroom. In Australia, the dearth of data is exacerbated by the fact that each state has adopted unique integration policies. This thesis examines both the delivery of services to children with behaviour disorders and the perceptions of staff, parents and peers as to the placement of children with behaviour disorders in the regular classroom.

INTEGRATION CONTROVERSY

While many educationalists see integration as a most acceptable practice, designed to enrich the educational experiences of children with disabilities, the results of the practice are largely unclear and, in terms of children with behaviour disorders, largely unknown. Educationalists from both special and regular schools must consider how well the integration program will assist the educational experience of children with behaviour disorders (Grosenick, et al., 1991). It is clear that many of the problems of children with behaviour disorders are not a direct result of school factors, yet intervention programs are instigated through schools in an attempt to solve these problems (Galloway, 1985; Rennie, 1993; Smith & Thomas, 1993).

The aetiology of children’s behaviour disorders is varied and widespread (Cullinan, Epstein & Lloyd, 1991). Large scale family and societal destructiveness are often accompanying factors. Educational intervention may not be appropriate to deal with these more complex issues (Bradshaw, 1987b, 1991). The potential for restoration and compensatory support for many children with behaviour disorders may be a matter of life support systems much broader than a regular classroom. A number of researchers speculate that a multi-disciplinary approach may be the most effective special education delivery method for children with behaviour disorders (Andrews, 1985; Brown & Ward, 1982; Ward, 1977; Smith & Thomas,
A number of other writers argue that a separate integration policy needs to be devised for children with behaviour disorders. Galloway and Goodwin (1979) stressed that a policy for integrating children with behaviour disorders cannot be expected to be the same as that for other areas of disability: "a hopeful optimism that the child will be assimilated without providing any of the additional resources available in a special school" (p. 125) (an unacceptable situation for any special needs category). In attempting to provide appropriate resources for all children with disabilities, including children with behaviour disorders, both Victoria and New South Wales have adopted quite different approaches.

In Victoria, the integration approach adopted states that all children with disabilities have the right to be educated in their regular classrooms, although some special settings continue to exist. This approach is termed the "Rights Model" or the "Zero Reject Model" and it rejects the least restrictive environment premise adhered to in the United States, Great Britain and other Australian states, including New South Wales. Adherence to a least restrictive environment approach (Fulcher, 1986) as adopted in New South Wales is based on the premise of integrating the child with disabilities in the most normalised education setting feasible (Fulcher, 1986).

Within the boundaries of the models adopted in Victoria and New South Wales, educators have created a number of practical strategies and procedures. For instance, teachers in both states have adopted integration strategies such as the consulting teacher approach, the resource (support) teacher approach and the social skills training approach to assist in the delivery of special education services.

In addition to examining which integration strategy is perceived as the most effective, it is important to identify variables considered important in enhancing integration effectiveness. It is clear from research that a number of factors can enhance or detract from the effective delivery of special education services in the
regular school/classroom (Allen, 1980; Bilden, 1985; Bishop, 1986; Center & Ward, 1987; Harvey & Green, 1984; Larrivee & Cook, 1979). These factors include the attitudes of the principal, classroom teacher, parents and peers, the climate and structure of the classroom, the form (modified or regular) in which the curriculum is presented and most importantly, resource provision. Are these variables also important when integrating children with behaviour disorders? Researchers (e.g. Morse, 1980) often claim that the most important variable when integrating children with behaviour disorders is the nature of the classroom.

The nature of the classroom is most important in any integration program, but especially in the case of children with behaviour disorders. Some classrooms "are stable, resilient groups which absorb and diminish the output of a deviant child" (Morse, 1980, p. 550). Other classrooms have already been saturated with problems, so much so that the influx of one child with behaviour disorders may destroy the balance. Such classroom dynamics must be studied to ascertain which of the classroom variables has the largest impact on the delivery of services to children with behaviour disorders.

The present study examines the perceived effectiveness of the integration approaches adopted in both states. Variables which may affect that effectiveness need to be identified, examined and made available in the form of a practical classification schema for integrating children with behaviour disorders. The present study aims to construct such a classification schema based on the perceptions of the personnel involved. In addition, the present thesis compares the perceived effectiveness of the delivery services to children with behaviour disorders in two Australian states.

Before reviewing the literature it is important to outline the integration policies of the states surveyed.
INTEGRATION POLICIES IN TWO AUSTRALIAN STATES

VICTORIA

Integration in Victorian primary schools has been ongoing for a number of years. The release of the 'Report of the Ministerial Review of Educational Services for the Disabled' (Collins, 1984) "saw a predictable heightening of interest and accompanying debate over the key issue of integration" (Sykes, 1989, p. 85).

The Review was designed both to: "increase the participation of students with impairments or disabilities in the educational programs of and social life of regular schools and to maintain the participation of all students within the educational and social life of regular schools" (State Board of Education, Feb, 1987, p. 1). The Review Committee presented 143 recommendations using five guiding principles as a conceptual framework.

**PRINCIPLE 1**: *every child has the right to be educated in a regular school*

**PRINCIPLE 2**: *non-categorization* (requiring that) 1. legislation is framed without reference to particular categories of impairment and disability. 2. service delivery should be organized, administratively and conceptually, on a non-categorization basis.

**PRINCIPLE 3**: *resources and services should, to the greatest extent possible, be school-based.*

**PRINCIPLE 4**: *collaborative decision-making processes* - equal participation of all those concerned with decisions about a child’s educational progress.

**PRINCIPLE 5**: *that all children can learn and be taught.*
Discussion on the Victorian policy will take place using the five guiding principles.

**PRINCIPLE 1. EVERY CHILD HAS A RIGHT TO BE EDUCATED IN A REGULAR SCHOOL.**

The construction of Principle One indicated the influence of overseas research and policy on the Review Committee. Research (Cariberg & Kavale, 1980; Madden & Slavin, 1983) found that special class placement for children with disabilities was inferior to regular class placement. The Committee accepted this view and stated that children with disabilities had a right to be educated in the regular classroom. In support of this premise, the Review Committee rejected the concept of the least restrictive environment. In selecting the rights model, the committee rejected policies enshrined in legislation in both the U.S.A and the United Kingdom. The adoption of this model was also in contrast to those adopted in other Australian states, including New South Wales. Fulcher (1986) claimed the Victorian policy was the only State policy/report on integration that could really be called democratic because a great deal of consideration has been given to the issue of rights, both children's and parents. Despite widespread support for the philosophical beliefs expressed in Principle One, it was criticised on a number of issues.

On closer investigation of the right of children to be educated, it was noted (Pickering, 1986 & 1993) that children have, by law in Australia, no right to an education. Present legislation concentrated instead on the obligation of parents to ensure the attendance of their children at school, "thus conferring such a right on students with impairments, disabilities or problems in schooling is to some extent inconsistent with the 'non-categorization principle of the Review" (Sykes, 1989, p. 89). The policy, by stating that children with disabilities had a right to be educated, singled them out, as children without disabilities did not have, legally, those same
rights. Children with disabilities, it appeared, were the only children to have rights to an education. Pickering (1986) suggested that if the Victorian Government wanted to adopt a rights model they had better look closely at the United States model which owes its existence to the United States Bill of Rights. In support Fulcher (1986) noted that legislating for rights in a constitution where there is no Bill of Rights, "and in an economic situation where there can be no resources on demand is fraught with problems. Such a concept of democracy, it may be argued, is one-dimensional and thus politically naïve" (p. 43).

In response to the controversy surrounding the "rights" issue and other implementation problems (e.g. a lack of resources, both financially and in terms of personnel) the Ministry of Education published two documents ("Implementation of the policy of integration, teacher, parent and community education", Jan, 1987; and "Legislative changes to implement the integration of students with impairments, disabilities or problems in schooling", Feb, 1987). These documents acknowledged the problems in implementing the original policy. Rather than change existing legislation the two documents outlined a set of principles that would be used as guidelines. These general principles would also be used as guidelines for the education of students without disabilities.

Despite the controversy over the interpretation of the first principle, it "does not require children with disabilities to be educated in a regular school. Parents now have a choice between two school settings - special schools and regular schools" (Sykes, 1989, p. 89). The present system in Victoria is therefore a dual system with the result that both special schools and regular schools are being chosen by parents and educational professionals as placements for children with disabilities (Pickering, 1993). In comparison to other systems operating throughout the world, the Victorian system may have some philosophical differences, but as research (Gartner & Lipsky, 1987; Gow, Ward, Balla & Snow, 1988; Swann, 1985) has suggested the
dual system of education is also the norm in other states of Australia and internationally.

PRINCIPLE TWO. NON-CATEGORIZATION.

The Victorian Policy Committee were cognizant of international policies and programs (Warnock, 1978; Fourth Annual Report to Congress on the Implementation of Public Law 94-142, 1982; Support for the Disabled in Sweden, 1982). The Warnock Committee (1978) had recommended the abolition of statutory categorization of children with disabilities. The Victorian Policy Committee was aware that existing structures in Victoria were based on categorization. The Review Committee raised the issue of the relevancy of medical labels in education and subsequently rejected them in favour of a sociological approach. The prime emphasis was on changing the child's education services rather than concentrating on medical labels. "This transition from a medical (deficit) model to a sociological (systems) model, marked an important change in educational thinking about children with impairments and disabilities" (Sykes, 1989, p. 91). The acceptance of a sociological model also questioned the validity of two separate education systems: the regular system, and the special school system. The Review Committee argued for the substantial transfer of pupils and resources from educational settings to regular schools. The second principle has been criticised for its failure to cater for the individual needs of certain children with disabilities and the equitable distribution of valuable resources. Despite attempts to the contrary by the Review committee, the Victorian education system continues to use categories as the two educational setting system remains the norm.

The review stated that various segregated settings would continue to operate in the foreseeable future. Funding would be at the level of the present allowance and no more Day Training Centres or Special Schools would be built in Victoria.
These statements caused some concern among parents who, on the one hand had been given increased rights, and on the other hand a reduction in alternatives as to their children's schooling. The Victorian Teachers' Union supported the parents with their concerns.

The Victorian Teachers Union (Varley & Howard, 1985) argued that the Ministry could not supply to all regular schools the resources that were available to children with disabilities in their special settings. The Union was concerned that integration programs could falter due to the large strain placed on human and physical resources. It was argued (Varley & Howard, 1985) that some schools were gaining reputations as integration schools i.e. schools with a concentration of students with disabilities. It would appear that some of these concerns were well founded. The review was hopeful that, by 1989, 1,750 Integration Teachers and 1,000 Integration Aides would be appointed. The actual appointment numbers for Integration Teachers have been substantially lower: 340 Integration Teachers in 1989 and dropping to 302 by 1993. On the other hand the number of Integration Aides increased from 766 in 1989 to 1277 in 1993 (1993 numbers include both primary and secondary appointments). These figures are noteworthy when compared to the increase in the number of children receiving either integration or visiting teacher support within regular schools, from 2,186 students in 1984 to 7,052 in 1992 (Cullen & Brown, 1993).

Perhaps the most unacceptable aspect of the review is the lack of emphasis placed on the education and welfare of children with behaviour disorders. Pickering (1986) noted: "in the absence of any meaningful provision emotionally disturbed children are catered for or contained in regular schools" (p. 2). Pickering concluded that these children have been largely overlooked and in effect are integrated by default. Non-categorisation may therefore disadvantage certain children with special needs.
**PRINCIPLE THREE.** RESOURCES AND SERVICES SHOULD, TO THE GREATEST EXTENT POSSIBLE, BE SCHOOL-BASED.

The review proposed that, to the greatest extent possible, resources should be available at the regular school. Certain non-school-based staff would be redeployed to regular schools. Recommendations included: the need for staff and resources presently provided to Special Schools, Special Facility Units and Special Education Units, to be redeployed to regular schools. Schools were also encouraged to implement flexible and supportive curricula.

**PRINCIPLE FOUR.** COLLABORATIVE DECISION-MAKING PROCESSES.

Due in part to the fact that the Review Committee had been a collaboration of interested personnel, it was felt that a collaborative approach to integration was the correct direction to pursue. The development of this collaborative approach included: the sharing of information, decision making, and responsibility. The Integration Unit was established in 1985 as the central coordinating body. This Unit was disbanded in 1988 and reformed in 1989. A close collaboration between the Ministry, parent bodies, regular teachers, special teachers and other professionals was encouraged. Integration policies were established within each school. While the school is responsible for integration policies, the role of professionals such as psychologists was reduced in favour of more parental influence. When parents wished their child to attend a regular school an Enrolment Support group was established within the school. This group consisted of the school principal, a classroom teacher, parents, a parent advocate and sometimes the student.

Steer (1985), the former director of the initial Integration Unit, described increased parental participation as an important cornerstone in the Victorian policy.
Parent groups were invited to make submissions to the Review Committee. The result of the submissions was a list of important needs which parents felt needed addressing. The list included:

- the right to have their son and daughter receive an education at public expense
- continuity in schooling
- real integration in the mainstream of school life
- parent education
- their sons and daughters to be treated as individuals and not stereotyped
- their children to be regarded as assets not burdens

(Steer, 1985b, p. 17)

The real issue in Victoria, according to Fulcher (1986), was that an intent to challenge professionals through democratic processes was instigated. The Review also recommended a closer collaboration between regular classroom teachers and special education services. Changes to teacher preparation were considered. It was recommended that the inclusion of compulsory special education strands at preservice level be included in the undergraduate courses at all teacher training institutions. Teacher in-service training in special education was to be allocated 10% of all inservice funding.

**PRINCIPLE FIVE. THAT ALL CHILDREN CAN LEARN AND BE TAUGHT.**

By developing this principle, the Review Committee, challenged the concept of ineducability. The Committee made the Ministry of Education responsible for the education of all children. All special schools in Victoria would eventually come under the guidance of the Ministry of Education rather than welfare groups/charitable groups and medical associations as had been the case for many
decades. (Since 1990 all special schools in Victoria have been administered by the Ministry of Education).

NEW SOUTH WALES

In 1981 the first New South Wales Department of Education policy statement on the enrolment of children with disabilities was issued. Since this time, policy development has taken place and an ongoing procession of policy statements and media releases has eventuated. In January 1988 the then Director General of Education in New South Wales released two statements which illustrated the development of integration policies in the state during the 1980s. The two policies, 'Enrolment of Children with Disabilities' and the 'Integration Statement', are the present guidelines on which integration into regular schools is determined. As the present study was conducted prior to 1993 the Department of School Education in New South Wales new policy on special education will not be referred to.

The Department of School Education in New South Wales adheres to the New South Wales Government policy of considering the principles of normalization when allocating services and resources to people with disabilities. This is in direct contrast to the policy adopted in Victoria. The New South Wales Department of School Education policy states that all children with disabilities should attend the regular neighbourhood school "where this is possible and practical and in the best interests of the child" (Enrolment of Children with Disabilities, 1988, p. 1). The principal of the regular school is the person delegated the authority to make the decision on the child's placement.

Principals of regular schools in New South Wales have a set procedure to follow when considering the placement of a child with disabilities into the school. The principal requires statements on the child's medical and academic position from parents, medical professionals and the school counsellor and is requested to make
an assessment of the child using these reports. Certain procedures are followed if the child is accepted or rejected for enrolment. If the principal decides that the child should not be enrolled, then the child's parents have the right of appeal through the Regional Director. The construction of this enrolment procedure was to avoid "main-dumping", that is, children being placed in the regular classroom without appropriate resources and programs (Gow, 1989). To assist in the integration process a number of resources, both personnel and materials have been made available.

Integration Teachers and Integration Aides (10 and 36 respectively in 1986) were appointed to assist the classroom teacher in the construction of appropriate programs. In June 1986, 11 integration consultants were appointed to assist schools in constructing appropriate programs in their schools. Schools are also able to apply to the Commonwealth Schools Commission Integration Funds for additional monetary resources. Apart from adhering to the principles of normalization, constructing enrolment procedures and allocating resources, the New South Wales Department of School Education has supported the "Assumption of Responsibility" initiatives.

The "Assumption of Responsibility" initiative is the practice whereby a large number of special schools previously administered by voluntary organizations are transferred, by negotiation, to the control of the Department of School Education. The Department then becomes responsible for each school's curriculum, staff and financial support. The "Assumption of Responsibility" initiative has been paralleled in Victoria where the Ministry of Education has responsibility for all those special settings previously controlled by other agents. Another parallel between the New South Wales policy and the Victorian policy is that some aspects of each policy have been intensely criticised.
A major criticism of the New South Wales approach to policy implementation relates to its propensity to allocate decision making powers to professionals. Fulcher (1986) refers to the New South Wales approach as the 'Professionalism Model'. Fulcher argued that the approach allows for professionals to make important decisions and that these professionals tend to use terminology and vocabulary which are based on the child's deficiencies. Fulcher is also critical of the New South Wales approach because it "lags well behind all other states in the proportion of teachers employed in special education holding appropriate postgraduate qualifications" (p. 25). Doherty (1987), in defending the approach, claimed that it is not a professional model, but rather an assessment approach. The needs of the child are assessed by school personnel in close consultation with parents. The decision to enrol the child is based on available resources, and the enrolment does not proceed until additional resources are provided.

**SUMMARY OF THE VICTORIAN AND N.S.W. POLICIES**

In comparison, the two approaches to policy implementation vary considerably over a number of issues. These issues include normalization, role of the parent in decision making and the right of the child to enrol in a regular school, irrespective of the availability of resources at the time. A number of parallels between the approaches can also be noted. Both education departments are assuming responsibility for all special settings and both have been criticised for a lack of resources. It is a stated aim of this thesis to investigate the perceptions of important persons in the integration process as to the effectiveness of these approaches to deliver special education services to children with behaviour disorders in the regular classroom. These important persons include parents, principals, classroom teachers, support staff and peer group.
CHAPTER 2

INTEGRATION: A REVIEW OF THE LITERATURE

INTRODUCTION

The literature review examines and identifies the development of attitudes to, and practices used in, the integration of children with behaviour disorders. A significant proportion of the papers reviewed originate from the United States and the United Kingdom but Australian work, particularly that published in Victoria and New South Wales, will also be examined. The literature review commences with an examination of the aetiologies of behaviour disorders. Due to the large number of possible causative factors in behaviour disorders, many theoretical intervention approaches have been developed to assist in the treatment of these behaviours, including those developed from biophysical, psychodynamic, behavioural, sociological and ecological approaches. These approaches are examined in this chapter.

The application of theory to classroom practices has been made possible by the development of a number of approaches designed to assist the classroom teacher and special educator in the delivery of special education services. These include the consultant teacher approach, the resource teacher approach and the social skills approach. Research findings on the use of these approaches are reviewed.

In addition to an examination of behaviour disorders, the review includes an examination of literature on integration. Integration is therefore examined in terms of its historical development, important developmental influences, debate over claims of effectiveness, and a comparative examination of international policies.
AETIOLOGIES OF BEHAVIOUR DISORDERS

In Chapter 1 the significance of the label "behaviour disordered" was discussed. The variety of causes which may lead to a child being labelled "behaviour disordered" are now examined. A salient finding seems to be that some children in our society do not cope with excessive levels of stress. Reinert (1980) supported the earlier work by Marmor and Pumpian-Mindlin (1950) when he suggested there is a relationship between children's adjustable resources and the degree of stress under which they live (see Figure 1).

Reinert (1980) argues that the emotional/behaviour problems of each child are determined by two factors: the degree of stress; and the child's adjustable resources. Most children are in the mental health portion (see Figure 1): their adjustable resources are satisfactory and they live under a mild degree of stress. A child can have good mental health and still live under moderate to severe stress. Similarly, a child can live with only mild stress and fall within the moderate to severe conflicts portion (see Figure 1) because of poor adjustable resources. The majority of children described as "behaviour disordered" fall into the latter category. However, it is important to consider the fact that the mental health of an individual is not statically categorized but is a living interaction that changes with adjustable resources and stress.

Other writers (Quay, 1983; Walker & Fabre, 1987) concur that children's behaviour disorders may be described as acting out (externalising) or social withdrawal (internalising). Walker and Bullis (1991) claimed that children have to make two primary adjustments in school. The first is adjusting to the behavioural demands of the teacher the second adjusting to the social expectations of the peer group. The authors studied the behaviour patterns of pupils with externalising and internalising behaviours in terms of their adjustment to teacher and peer group expectations (see Table 1).
FIGURE 1

RELATIONSHIP BETWEEN ADJUSTIVE RESOURCES AND DEGREE OF STRESS

(Reinert, 1980, p.6)

(Permission given 1993)

Source: From Children in Conflict. (Educational Strategies for the emotionally disturbed and behaviour disordered (2nd Ed.) P. Reinert, St Louis MS: C.V. Mosby Company, 1980.)
TABLE 1

INTERRELATIONSHIPS OF BIPOLAR BEHAVIOUR PATTERNS AND SCHOOL ADJUSTMENT TYPES

<table>
<thead>
<tr>
<th>Patterns</th>
<th>Behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Externalizing</strong></td>
</tr>
<tr>
<td><strong>Teacher-Related</strong></td>
<td>• Acting out, non-compliant behaviour</td>
</tr>
<tr>
<td></td>
<td>• Teacher defiance</td>
</tr>
<tr>
<td></td>
<td>• Behavioural excesses</td>
</tr>
<tr>
<td></td>
<td>• Low achievement</td>
</tr>
<tr>
<td></td>
<td>• Disruption of classroom ecology</td>
</tr>
<tr>
<td></td>
<td>• High probability of referral</td>
</tr>
<tr>
<td></td>
<td>• Resistant to social influence tactics</td>
</tr>
<tr>
<td><strong>Types of Adjustment</strong></td>
<td><strong>Peer-Related</strong></td>
</tr>
<tr>
<td></td>
<td>• Variable peer status</td>
</tr>
<tr>
<td></td>
<td>some acceptance</td>
</tr>
<tr>
<td></td>
<td>some rejection</td>
</tr>
<tr>
<td></td>
<td>• Failure to use social skills that support positive peer interactions</td>
</tr>
<tr>
<td></td>
<td>• High levels of social engagement</td>
</tr>
<tr>
<td></td>
<td>• High levels of negative/aggressive social behaviour</td>
</tr>
</tbody>
</table>


(Used with permission)
Table 1 indicates that externalising children exhibit high levels of behaviour that cause conflicts with teachers. On the other hand, internalising children tend not to have many incidents when they are in conflict with the teacher.

Variations in definitions lead to difficulties in estimating the prevalence of behaviour disorders. Coleman (1986) suggested the estimates of "behaviour disordered" children in United States schools vary widely from 2% to 7%. In the United Kingdom Topping (1990) suggested that "in the absence of agreed definition, estimating incidence is problematic, and figures cited have ranged from 4 to 49 per cent" (p. 24). In the Australian context a Schonell survey (Andrews et al., 1979) reported prevalence figures of 2.8% for primary schools and 3.6% for secondary students. Gender differences were reflected in prevalence rates. Ashman and Elkins (1990) suggested that, in Australia, males labelled "behaviour disordered" outnumbered females four to one. Hallahan and Kauffman (1991) noted that boys in United States schools labelled "behaviour disordered" tended to outnumber girls by a ratio of 5 to 1.

Behaviour disorders may be the result of medical, family, biological, and school variables or indeed a combination of these. Various classification systems are needed to identify the origin before an acceptable intervention program can be designed. For the most part, classification of children's behaviour disorders have represented a logical downward extension from the classification systems of adults (Gresham, 1985). There are two basic approaches to classifying children's behaviour: clinical (observations by professionals); and empirically derived classifications (multivariate, statistical techniques). Empirically derived systems appear to be the most reliable and valid because usually large numbers of problem behaviours are included. A score for each behaviour can then be compared to normative samples. In recent years, there have been a number of classification systems derived for children with behaviour disorders (e.g. "Child Behaviour
Checklist and Profile (CBCL)\textsuperscript{,} Achenback and Edelbrock, 1982; "Diagnostic and Statistical Manual of Mental Disorders (DSM III)\textsuperscript{,} American Psychological Association, 1980: "The Revised Problem Behaviour Checklist", Quay, 1983; and "The Standardized Screening for Behavior Disorders (SSBD)\textsuperscript{,} Walker, Severson, and Haring, 1985). The classification system chosen by an individual may be influenced by that individual's definition of behaviour disorders. Apter and Conoley (1984) stressed the need to consider behaviour disorders in one of two terms, "deviance" and/or "disability" (see Table 2). The deviance perspective sees the child's problem in terms of unacceptable social behaviour. The disability perspective, on the other hand, suggests the child's problem/behaviour is a symptom of an internal disturbance.

As mentioned in Chapter 1, there is much controversy among educators over the use of the terms "behaviour disordered" and "emotionally disturbed". It is clear that one child's behaviour problems may well stem from a different base than that of another child. There has been criticism of both these terms by educationalists who prefer a more ecological viewpoint. These criticisms have produced such statements such as, "both E.D. & B.D. labels are attempts to round up a variety of very different kinds of problems into single categories for administrative convenience" (Apter & Coneley, 1984: p. 20). The ecological viewpoint contends that educationalists should not concentrate solely on the individual, but also consider the environment surrounding the individual.

**THEORETICAL INTERVENTION APPROACHES**

Research on children with behaviour disorders is conflicting over aspects such as the aetiology of the behaviour problems, the use of the labels "behaviour disordered" and "emotionally disturbed" and the choice of instruments to use when assessing levels of behaviour. Given the complexity surrounding the important variables associated with the label, it would appear that to integrate children with
### TABLE 2

**COMPARISON OF DEVIANCE AND DISABILITY PERSPECTIVES:**

<table>
<thead>
<tr>
<th></th>
<th>DEVIANCE</th>
<th>DISABILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disturbance</td>
<td>violation of social rules</td>
<td>symptoms of underlying disturbance</td>
</tr>
<tr>
<td>defined as</td>
<td></td>
<td></td>
</tr>
<tr>
<td>basis for</td>
<td>behaviour disorders</td>
<td>emotional disturbance</td>
</tr>
<tr>
<td>model</td>
<td>behavioural (acceptable behaviour must be</td>
<td>medical (internal disease causes external</td>
</tr>
<tr>
<td></td>
<td>learned for appropriate settings</td>
<td>behavioural symptoms)</td>
</tr>
<tr>
<td>focus</td>
<td>new more appropriate behaviour</td>
<td>etiology what is the cause</td>
</tr>
<tr>
<td>advantages</td>
<td>demands investigation of context. Emphasizes</td>
<td>culture free classification</td>
</tr>
<tr>
<td></td>
<td>arbitrariness of the labelling process.</td>
<td>emphasize on early and humane treatment. Study of etiology can increase understanding of the individual.</td>
</tr>
<tr>
<td></td>
<td>Focus on specific observable behaviour can aid in program planning.</td>
<td></td>
</tr>
<tr>
<td>disadvantages</td>
<td>normality may come to be defined as conformity.</td>
<td>assumptions about internal states are not verifiable.</td>
</tr>
<tr>
<td></td>
<td>Relativity of definitional criteria may repress individual differences.</td>
<td>Stigma of label may outweigh potential advantages of treatment.</td>
</tr>
</tbody>
</table>

*(Apter & Conoley 1984, p.19)*

*(Used with permission)*

behaviour disorders effectively a flexible, and individual intervention approach must be adopted. In support of this contention, Newcomer (1980) stressed that when it comes to developing intervention programs for children with behaviour disorders the days of adherence to one point of view are past. If, as research has suggested (e.g. Braaten, Kauffman, Braaten, Polsgrove & Nelson, 1988; Executive Committee for Children with Behaviour Disorders, 1987; Fuchs, Fuchs, Fernstrom & Hohn, 1991; Kauffman, 1989; Rich, 1982), an individualized, flexible approach is warranted when examining problem behaviour, then it follows that intervention programs and integration programs also need to be flexible and individualized.

When designing an intervention program, educationalists and other professionals may favour one of many approaches, including: the biophysical approach, the psychodynamic approach, the behavourial approach, the sociological approach and the ecological approach. Gearheart and Weishaun (1984) have suggested a diagnostic procedure for determining treatment strategies for each of these approaches (see Table 3). The theoretical perspectives of these approaches will now be examined.

**Biophysical Approach.** Some proponents of the biophysical approach (Haring, 1963; Sagor, 1974) espouse the view that the behaviour disorder lies within the individual, while others (Millon & Millon, 1974) consider the role of the environment and the stress which it may place on the individual. The approach is basically a disease-oriented or medical model and is used by those who believe the problem lies not in the teaching method or the education structure, but within the individual.
### TABLE 3

**CAUSES AND TREATMENT STRATEGIES**

<table>
<thead>
<tr>
<th>APPROACH OR CONCEPTUAL MODEL</th>
<th>CAUSES OF BEHAVIOURAL DISORDERS</th>
<th>TREATMENT INDICATED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biophysical</td>
<td>Internal cause such as chemical imbalances, genetic deficiencies, poor nutrition, disrupted sleep patterns, brain injury.</td>
<td>Use medication such as tranquilisers, stimulants or antidepressants and/or behaviour modification.</td>
</tr>
<tr>
<td>Behavioural</td>
<td>External causes such as inappropriate behaviour learned, reinforced, and maintained by others in the environment.</td>
<td>Remove reinforcers that maintain inappropriate behaviour, reinforce appropriate behaviour, teach acceptable behaviour.</td>
</tr>
<tr>
<td>Psychodynamic</td>
<td>Internal causes such as unsuccessful negotiation of psychological stages, internal conflicts, guilt, guilt feelings.</td>
<td>Allow free expression of feelings, provide accepting warm environment, avoid too many demands.</td>
</tr>
<tr>
<td>Sociological</td>
<td>External causes such as society’s labelling the student deviant, factors forcing rule breaking, lack of social rules that serve as behaviour inhibitors.</td>
<td>Modify society, teach alternative behaviours, assist student to establish rules for themselves.</td>
</tr>
<tr>
<td>Ecological</td>
<td>Internal and external causes problem originates in interaction between student’s feelings, needs and desires and society’s norms, demands and responsibilities.</td>
<td>Aid adjustment of either student or environment or both, manipulate either student or environment for the benefit of both.</td>
</tr>
</tbody>
</table>

*(Gearheart & Weishahn 1984, p.249)*

*Source: From The Exceptional Student in the Regular Classroom. By B.R. Gearheart, & M.W. Weishahn, St Louis, MS: Times, Mirror/Mosby, 1984.*
**Psychodynamic Approach.** Psychodynamic theory has its origins in Freudian thought, according to which the individual has not successfully "negotiated the various intrapsychic and external complications of maturation" (Rienert & Huang, 1987, p. 40). Interventions based on this approach require attempts to assist the children to understand their motives for behaving as they do, to understand the consequences and to plan appropriate alternative responses (Kauffman, 1985; Long, Morse & Newman, 1980).

**Behavioural Approach.** The behavioural approach derives from the view that disordered behaviours are learned responses. The behavioural model encompasses three major components (theories), respondent conditioning (Pavlov, 1927), operant conditioning (Skinner, 1953) and social learning (modelling, Bandura, 1977). Respondent conditioning is a response initiated because prior conditioning suggests what will come next, e.g. a visit to the dentist may elicit an anxious response because prior visits suggest some pain may be experienced. Proponents of operant conditioning accept that behaviour is a function of its consequences, e.g. positive reinforcement presents a stimulus that increases the probability of the behaviour happening again. The view is accepted that individuals may learn new behaviours by observing the correct behaviour of others (Kauffman, 1985). Altman and Linton (1974) have listed a number of reasons why educators would utilise the behavioural approach in the classroom. Firstly, the classroom is a traditional place for modification of children's social and academic behaviour because the teacher by definition is a classroom manager. Secondly, schools have institutional environment controls and students are captive audiences. Finally, behavioural technology offers promise for prevention of behavioural problems that have led traditionally to the removal from the regular classroom and, sometimes, removal from the school system.
**Sociological Approach.** The premise of this approach is that the behaviour of a child is judged by a lack of conformity to implicit or explicit social standards, rules, and norms (Coleman, 1986, p. 95). Although sociometric measures have been used regularly to assist children and teachers in overcoming the problem of social rejection, they are difficult for the teacher to implement. The difficulties arise because the child is only one variable in the sociological approach. As Coleman (1986) stated, "there are few educational applications of sociological theory because sociological theory depends upon changing the entire social structure" (p. 101). In contrast Elkins (1990) claimed that the present special education system in Victoria owes much to a sociological perspective (p. 15). In relation to children with behaviour disorders, the sociological approach highlights the role of the child's environment in the development of the disordered behaviour.

**Ecological Approach.** Theorists of the ecological approach (Apter & Conoley, 1984; Swap, Prieto, & Harth, 1982) espouse the view that "deviance lies in the interaction of the individual with others (the perceivers) in the environment" (Coleman, 1986, p. 101). The behaviour disorder is seen as a result of a mismatch between the environment and the individual. The special educator/regular classroom teacher needs to intervene in the interaction between the student and the student's environment. The conflict is seen as one that encompasses both the child and his/her community rather than only as a pathological condition of the child or of the community.

All these approaches have aspects which are critical in any intervention program, but many also have limitations for integrating children with behaviour disorders. Cullinan, Epstein and Lloyd (1991) found that for various purposes different models may be more or less valid (p. 149). The authors suggested that there were three general areas in which approaches may be contrasting, as explanations of origins, guides for intervention and as contributors to scientific
understanding. Discussion in Chapter 1 on the label "behaviour disorders" included the importance of considering the problem in terms of the behaviour of the individual, not in terms of the individual him or herself. Proponents of the biophysical and psychodynamic approaches clearly see the problem associated with the individual. The behavioural approach has been criticised for being too mechanical, for giving no attention to the information processing abilities of the learner and for ignoring the way in which internal states (e.g. memory, feelings & thoughts) facilitate the learning process (Cole & Chan, 1990; Paul & Epanchin, 1982). The ecological approach would appear to allow educationalists the most opportunity to be flexible in allowing the child's individual needs to be considered. Acceptance of an ecological approach allows for the consideration of various environments in which the child routinely interacts (ecosystems) including interactions with peers, family and teacher. Coleman (1986) claimed that integration was an ecological intervention because effective integration is based on the integrated child's interactions with his/her school environment. Cullinan, Epstein and Lloyd (1991) have suggested that an "ecobehavioral approach", the integration of the ecological and behavioural approaches (Martens & Witt, 1988), may be the most efficient approach to assist in the integration of children with behaviour disorders in the future. It has been claimed (Cullinan, Epstein & Lloyd, 1991) that "ecobehaviorists have worked extensively in assessment of school and other ecosystems and behavioral techniques for promoting successful mainstreaming" (p. 155).

The adoption of a theoretical approach leads to the selection of an appropriate intervention program. Conway (1990) claimed that the importance of conceptual models lies "not only in explaining the causes of behaviour disorders but in directing the identification, assessment and intervention procedures that follow" (p. 157). The selection of an intervention program then needs to consider the aetiology of the individual's behaviour and the previous experiences of the child.
The intervention program can be influenced by the background, experiences and philosophies of the personnel responsible for its construction (Conway, 1990; Cullinan, Epstein & Lloyd, 1991). When labelling a child "behaviour disordered", the child should have been viewed over time in different situations and by different people (Gresham, 1985). The selection of an appropriate intervention program should also only take place after the child's behaviour has been observed and recorded in different situations across various time frames and contains the input of a number of people, all of whom are aware of the child's history.

Cullinan, Epstein and Lloyd (1991) suggested that the ecological approach can deliver intervention efficiently as it allows for a number of people to be involved in the intervention both inside and outside the classroom. A number of efficacious classroom approaches have been developed to assist classroom teachers/schools in catering for the needs of children with disabilities. These classroom approaches include the consulting teacher approach and the resource (support) teacher approach. In addition, the social skills approach has been developed whereby the child is taught appropriate social skills prior to, during and after mainstreaming. All these approaches have been used by teachers in schools in Victoria and New South Wales to assist in the integration of children with behaviour disorders. The following literature review on these approaches examines their effectiveness in assisting the integration process.

PRACTICAL CLASSROOM APPROACHES

Consulting Teacher Approach This approach involves the use of a consultant who visits a number of schools and assists the classroom teacher and others (special educators, parents and other professionals) to construct programs for children with behaviour disorders. These people collaborate to plan, implement, and evaluate a programmed service with the intent of reducing the need to withdraw students for special education services. It has been argued (Nelson & Stevens,
that for integration to work successfully a special education delivery system emphasising problem-solving consultation and individualised educational programming is needed. In N.S.W., these consultants are referred to as Itinerant Support Teachers (Behaviour Disorders) and in Victoria as Student Disabilities and Welfare Officers. Each educational region of both states has these positions.

"The consulting teacher model for delivering services to special education students is one that has garnered increasing attention in the special education literature and in state offices of education" (Huefner, 1988, p. 403). While recently the consultation approach has gained increased attention, it has been a part of special education discussion and practice for many years (Knoblock & Garcea, 1965; Lowenfeld, 1952; Paul, 1963; Stephen & Birch, 1969; Strong, 1953). The reasons for this increased support appear to be threefold. Apart from reducing the need for withdrawal programs, it is arguably more cost effective than other existing approaches. Finally it is "an outgrowth of a decade of disillusionment with the rising numbers of low achieving students who have been mislabelled as handicapped and with the lack of special services for millions of other slow learning students who are not so labelled" (Huefner, 1988, p. 404). It appears also to support the popular notion that regular education must involve itself more intensively in the education of underachieving students.

The consultation approach has been recommended for use when integrating children with behaviour disorders into the regular classroom (Nelson & Stevens, 1980). Nelson and Stevens (1980) provided data on twenty-five cases, fifteen being successful, eight partially successful and two failures. The authors concluded that the teacher-consultation approach is both effective and useful but difficulties in achieving success with the model may be due to the inflexibility of teachers and suggested a number of other variables which may also influence the success of the teacher consultation approach. These variables include: receptiveness of the
principal, the school climate, availability of services, planning and the skill of the consultant.

One of the greatest hurdles for the teacher consultation approach, particularly for children with behaviour disorders, is the system itself; the system which all too often demands a label and lobby groups. The formation of lobby groups and parental support groups for children with behaviour disorders has not been forthcoming and as a result there is a lack of financial support to establish consultation programs in this area. Lilly and Givens-Ogle (1981) anticipated yet another problem: the consultation role may be a new role for many special educators. Despite implementation and funding difficulties, the consultation approach has much to offer the educator (see Table 4).

Writers (Hills, 1990; Huefner, 1988) have suggested a number of potential benefits of the teacher consultation approach. (1), Reduction of stigma; children will be served in regular classrooms thus reducing the need for labelling. (2), The development of better understanding across disciplines would develop a closer co-operation and understanding between regular and special educators. In support, Lilly and Given-Ogle (1981) suggested that children's success in integration depends on the relationship between special and regular educators. The importance of this close relationship between special and regular class teachers is further supported by Nelson and Stevens (1980) who suggested that the primary advantage of the consultation approach is that "it reduces the distinction between regular and special education and, therefore, there is less tendency to refer children who present difficult instructional problems to specialized programs away from the mainstream" (p. 151).

(3). By having special educators collaborating with regular classroom teachers may lead to on-the-job training for regular classroom teachers in special
<table>
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<tr>
<th></th>
<th>CONSULTATIVE APPROACH</th>
<th>RESOURCE APPROACH</th>
<th>SOCIAL SKILLS APPROACH</th>
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<tr>
<td><strong>Advantages</strong></td>
<td>Reduction in the need for withdrawal programs.</td>
<td>Delivery of services can be in a regular classroom.</td>
<td>Children have the opportunity to develop appropriate social and behavioural skills.</td>
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<td></td>
<td>Develops co-operation between Regular and Special Education teachers.</td>
<td>Opportunity to monitor child in regular classroom child may not need to be singled out for special ed services.</td>
<td>Children have the opportunity to develop alternative strategies. Peer group benefit from social skills training for the whole class. Regular teacher has the opportunity to develop teaching skills.</td>
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<td>Reduction in mislabelling less of a tendency to refer children.</td>
<td>Opportunity for regular class teacher to observe appropriate strategies.</td>
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<td></td>
<td>Increases on-the-job training for regular classroom teachers.</td>
<td>Regular class peers can progress at own level.</td>
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<td>Reduction in stigma for the child.</td>
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<tr>
<td><strong>Disadvantages</strong></td>
<td>Demands a label research on results have mixed findings.</td>
<td>Lack of appropriate training for teachers.</td>
<td>Withdrawal programs often used.</td>
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<td>Doesn't allow for all egosystems to be investigated.</td>
<td>Indecision concerning role of support teacher.</td>
<td>Lack of funding available for programs.</td>
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<td></td>
<td>May lead to case load overloading.</td>
<td>Stigma attached to child may replace all segregated settings.</td>
<td>Research has indicated mixed results.</td>
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<td></td>
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<td>Indecision over who the resource teacher is responsible to.</td>
<td>Acceptance of the belief that the problem is with the child.</td>
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<td>Withdrawal approach commonly used.</td>
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<td></td>
<td></td>
<td>Bias information could be communicated to classroom teacher.</td>
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<td>Resource teacher expected to work with many categories of disability.</td>
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education skills. Some of the skills needed to support an integrated student in the regular classroom can be transferred from special educators to regular classroom educators. (4) By reducing the process of mislabelling non-disabled students the problem of some students being mislabelled in order to attract funding will be alleviated. (5) Spillover benefits to regular students; regular classroom teachers new skills will assist regular classroom children. (6) The needs of secondary students may be assisted by having consulting teachers help content area teachers modify curriculum and instructional strategies within their classes. Hills (1990) claimed that the teacher consultation approach allows a background for discussions between teacher and consultant to take place whereby the teacher can discuss strategies implemented. Finally, allowing regular and special teachers the opportunity to work together may assist in the development of master teachers within special education. Huefner (1988) stressed a number of causal or premature implementation dangers:

1. Ineffective caseload management;
2. Converting the approach to a tutoring or aid approach;
3. Unrealistic expectations:
   a. viewing the consulting teacher approach as a panacea;
   b. undertraining and overloading the resource teacher;
4. Inadequate support from regular educators;
5. Inadequate funding mechanisms;
6. Faulty assumptions regarding cost savings; and
7. Faulty assumptions regarding program effectiveness
   (appears to be a lack of empirical evidence
    available to substantiate the claims made about
    the teacher consultation approach).

Researchers (Nelson & Stevens, 1981; West & Idol, 1987) examined the overall effectiveness of the approach. The data indicated conflicting results. The
consultative approach used in the integration of children with behaviour disorder has limitations (see Table 4). The approach requires that a label be used; it doesn't allow for all the child's egosystems to be investigated e.g. the child's family interaction. The child with behaviour disorders may need specialised assistance at short notice and this may not always be available. Finally, the approach is yet to be shown to be effective. West and Idol (1987) argued that, while the concept is attractive, "well designed research studies assessing the effectiveness of the few approaches already in existence are sparse" (p. 409).

It is important to consider that both the Victorian and New South Wales Education Departments have adopted the teacher consultation approach in a variety of guises for the delivery of special education services to a number of groups of people with disabilities, including children with behaviour disorders. Some schools surveyed in the present study were implementing consultative-type programs. The effectiveness of this type of program in the present climate and with different policy initiatives, can only be examined relative to other approaches.

In the present study a comparison between the two states and their different integration policies addressed the issue of the effectiveness of the consultation approach in integrating children with behaviour disorders. Because research is unclear on the most effective integration approach for children with behaviour disorders, this comparison has allowed for examination on the relative merits of the consultative approach using both the "rights" approach and the "least restrictive environment" approach.

**Resource (Support) Teacher Approach** Macmillan, *et al.* (1976) claimed that the most commonly advocated approach for the delivery of services to mainstream children is the resource teacher approach. According to Westwood (1987), the role of the resource teacher is "to provide a service to children with special needs by
assisting the classroom teacher to develop or adapt appropriate learning programs
to cater for exceptional children" (p. 138). The distinction is often made (e.g.
Huefner, 1988; Peterson, Zabel, Smith & White, 1983) between the resource teacher
approach, the consulting teacher approach and the self-contained unit approach.
Peterson, et al. (1983) believed that the resource teacher approach should be
considered for children with mild disabilities. Peterson, et al. defined resource
programs as those that directly support students with special needs for less than
half their time at school and suggested that resource teachers provide support
services to students through consultation and co-ordination with regular classroom
teachers (p. 405). This view is supported by Evans (1980) who argued that the
resource teacher is the best-equipped professional to consult with teachers.
Huefner (1988), in contrast, stated that the role of the resource teacher is one of a
diagnostician, instructor and evaluator, and although consultation may be a small
component, "resource teachers have only limited time and ability to consult" (p.
405). The limited time factor cited by Huefner may well depend on the case load of
the teacher.

The New South Wales Education Department (1989) changed the name of the
resource teacher to the support teacher and outlined the role of the support teacher
in five specific areas: diagnosing and analysing children's learning difficulties;
planning appropriate programs in consultation with classroom teachers;
implementing such programs in co-operation with classroom teachers; evaluating
programs; and devising suitable follow up activities. In the N.S.W. approach, the
support teacher is encouraged to work in the team teaching role rather than
adopting a withdrawal approach (New South Wales Department of Education, 1987,
p. 9).

MacMillan, et al. (1976) discussed problems inherent in using the resource
approach when integrating children into the mainstream (see Table 4). The authors
cautioned that, while the approach has widespread support, it lacks agreement on implementation. The question is posed whether the resource teacher is a remedial teacher, diagnostician/designer or a curriculum consultant. The authors also mentioned the possibility of replacing segregated settings with settings that were even more inflexible. Policy/practice has posed another question: to whom is the resource teacher accountable? Under the resource teacher approach, some children may still be labelled/stigmatised because they go to the resource teacher. If the segregated setting is replaced by a resource teacher approach, then it must be clear that "resource teachers do not have educational goals and they do not represent a program; rather they deliver services such as assessment, prescription and remedial instruction. Hence, they supplement the regular class teacher but the programmatic goals are those of the regular education program" (New South Wales Department of Education, 1987, p. 8).

Safran (1982) also discussed problems associated with the resource teacher approach (see Table 4). The resource teacher is responsible for supportive services such as informing teachers as to students' individual characteristics and strategies which may be needed. Whereas the communication of information between resource teachers and classroom teachers is clearly important, the influence of such information, on classroom teachers, needs to be considered. For instance, does this information lead to a self-fulfilling prophecy? Research (e.g. Safran, 1982) has indicated that the influence of resource teachers' views in discussion with classroom teachers weakens after exposure to atypical behaviour, so that "experienced teachers who have daily interactions with children may form expectations more on the basis of their own experiences than on the information given" (Safran, p. 28). The suggestion is made (Safran, 1982) that resource teachers need to be clear, concise and positive in the information they convey to the regular classroom teacher about children with behaviour disorders. Such information can convey expectations.
The effectiveness of the resource teacher approach with the integration of "behaviour disordered" children was studied by Peterson, et al. (1983). The researchers compared three types of delivery services for children with behaviour disorders: resource programs; self contained units; and residential programs for children with behaviour disorders. The results indicated that "a greater proportion of students placed in the less restrictive environments (e.g. resource programs), were more fully integrated into regular programs" (p. 407). The data also indicated that resource teachers spent little time in consulting and evaluating compared to the other two types of delivery services. Consultation with classroom teachers and parents is a very important concept in the integration of children with behaviour disorders. The importance of this consultation is particularly significant in the early stages of placement. If the resource teacher lacks skills in this area, then success in using the approach for children with behaviour disorders may be limited.

In Victoria, resource teachers are called integration teachers. In N.S.W., as previously mentioned, resource teachers are termed support teachers in Government schools and resource teachers in Catholic schools. There are a number of courses available to help train integration and support teachers. Many of the schools surveyed in this study have part time or full time integration/support teachers. In N.S.W. support teachers are asked to work mainly with children with learning disabilities. In reality, behaviour disorders and learning disabilities are often closely related; hence many support teachers are working with children who have both behaviour and learning disorders. The effectiveness of the support teacher approach, in assisting children with learning disabilities, is widely documented. However, research on its effectiveness to assist children with behaviour disorders is less conclusive.

Educators who implement the support teacher approach with children with behaviour disorders have a number of difficulties to overcome; first and foremost a
shortage of suitably trained staff (Sykes, 1989). In Victoria and N.S.W. training programs for integration teachers and support teachers concentrate on teaching strategies, consultation and assessment procedures rather than behavioural strategies and programs. In addition, in both Victoria and N.S.W. recently graduated teachers (from pre-service programs) have been appointed to support and integration positions. These recently appointed teachers may lack experience in the regular classroom which is essential to develop skills needed in support teaching. Another major consideration when using the resource approach for integrating children with behaviour disorders is the time factor. The child with behaviour disorders usually needs close monitoring on a regular basis but such intensive help is not always available from the support teachers. Finally, support teachers are responsible for a wide range of children with special needs and the time to concentrate and develop expertise in one particular needs area is difficult.

**Social Skills Training Approach** Both the consulting teacher approach and the resource teacher approach have been used widely in the integration of children with disabilities but children with behaviour disorders have needs which may not be adequately dealt with in either of these approaches. Indeed Gresham (1982) stated that "mainstreaming efforts are likely to result in increased social isolation and more restrictive social environments unless provisions are made to train handicapped children in the social skills necessary for effective social interaction and peer acceptance" (p. 423). It is argued (e.g. Hollinger, 1987) that the goals of integration conflict with the social rejection experienced by children with behaviour disorders. Due to a lack of the appropriate skills necessary to interact with their peers in socially acceptable ways, children with behaviour disorders often have difficulties in communicating with their peers (Gresham, 1982; Vacc, 1968). Gresham stressed that these social skills need to be provided to children with disabilities prior to integration and then continue to be provided during and after integration into the regular classroom.
A study by Sabornie and Kauffman (1985) indicated that children with behaviour disorders are frequently rejected by their peers and peer group. Such rejection argued Hollinger (1987) has a number of consequences: (a) once rejected, the child usually remains rejected, (b) loneliness often results; (c) rejected children often experience academic failure; and (d) adjustment problems may carry over into adulthood. Gresham (1982) argued that many assumptions made about children with behaviour disorders modelling appropriate behaviour from their peers are faulty. He believed that many children with behaviour disorders do not have the imitative skills needed to model certain behaviours and this lack of imitative skills may be due to lapses in concentration or a lack of memory skills. Another factor to impede the modelling of appropriate behaviour is the type of classroom structure operating in most schools.

The way classrooms are arranged in terms of furniture, teacher pupil communication and curriculum objectives often inhibits student interactions. Consequently cooperative learning strategies found to be successful in the integration process (Johnson & Johnson, 1986) often are not utilised because of the rigidity of the structure in such classrooms. Johnson and Johnson (1983) argued that "classrooms should be dominated by cooperation among students. This is especially true when handicapped students are being mainstreamed" (Johnson & Johnson, 1986, p. 554).

It is clear that, for many children with behaviour disorders, preparation for social integration is a necessary aspect of their integration program. Fortunately there is evidence that children with behaviour disorders can be improved to the point where they are more likely to be accepted by their regular classroom peers (Gresham, 1982, 1986a; Hollinger, 1987; La Nunziata, Hill & Krause, 1981; Lebsock & Salzberg, 1981; McGrath et al. 1986). Hollinger (1987) cautioned, however, that
while social skills training has great potential for children with behaviour disorders it is still very much in its infancy stage.

Social skills, according to Gresham (1982), may be considered as part of social competence. Foster and Ritchey (1979) defined social competence as "those responses, which within a given situation, prove effective, or in other words, maximize the probability of producing, maintaining, or enhancing positive effects for the interactor" (p. 626). Putallaz and Gottman (1982) list a number of dimensions of social competence:

1. an overall positiveness:
2. the ability to resolve conflicts:
3. awareness of group norms:
4. the ability to communicate accurately:
5. the ability to establish a common bond between oneself and another:
6. positive self perception.

Parkhurst and Asher (1985), in considering all the characteristics of social competence, suggested that social competence is "the ability to accomplish appropriate goals in social situations" (Hollinger, 1987, p. 18). The aim of social skills training is to increase the social competence of children with behaviour disorders prior to, during, and post mainstreaming.

A number of measures have been developed to assess the level of social competence of the child with behaviour disorders. However, these different measures may assess different dimensions of competence (Gresham, Bruce & Vettia, 1983; Hymel & Asher, 1977). Sociometric activities have been used in many situations to assess social competence but, as indicated by Gresham (1982), they too have numerous technical limitations. These limitations relate to a number of key issues, including the vulnerability of sociometric ratings to events which precede
administration of the scale (i.e. a child's upcoming birthday party might initiate a change in another child's behaviour in the hope of an invitation; secondly, the relationship between sociometric rating and actual social interaction (i.e. the children completing the sociogram might respond to how they feel adults want them to respond rather than how they actually feel); and thirdly, situational specificity of sociometric ratings (i.e. social interaction between two children might be very different in reading groups than in the playground). To overcome some of these drawbacks, naturalistic observations should be used in conjunction with sociometric measures (MacMillan & Semmel, 1977). Naturalistic studies allow for interactions between the children and other significant people in their lives to be recorded. The results of these observations then can be compared to the results of sociometric measures. In the present study, both observation and sociometric measures are used to examine the level of acceptance of students by peers. As has been stated in Chapter 1 social acceptance is considered an important variable in determining the effectiveness of integration programs.

Hollinger (1987) claimed that the most common components of social acceptance are social status among peers and social behaviour. Once the specific skills needed for social competence are isolated, the problem then becomes how to teach these skills during the integration period to children with behaviour disorders. Lytle (1986) suggested there were two major approaches to social skills training. The first approach is the Direct Instruction Approach, e.g. discussion, modelling and rehearsal of specific social skills. The second approach is the Cognitive Approach which is characterised by emphasizing social cognitive processes, e.g. how people solve interpersonal problems (Hollinger, 1987, p. 20). Lytle's approaches were supported by Fields (1988) and Gresham (1982). Gresham suggested three major types of social skills training:
1. manipulation of antecedent;
2. manipulation of consequences and,
3. modelling.

Combinations of these strategies have also been used. Manipulation of antecedents is concerned with setting up appropriate situations so as to allow social interaction to take place, e.g. playing games and cards between children with and without disabilities to increase social interaction rates. Manipulation of consequences could involve a child earning reinforcement (verbal and/or non verbal) for the entire class for displaying appropriate social skills. Modelling involves the child experiencing, live or on film, behaviours which are targeted. Madden and Slavin (1983) discussed yet another strategy, coaching. The literature has suggested a number of key concepts which emerge from the strategies discussed including: modelling, direct verbal instruction, practice, feedback, reinforcement, self instruction, self evaluation, self reinforcement and problem solving.

The results of social skills training have been contrasting. However, Hollinger (1987) suggested that the "studies, taken together, have produced strong evidence for continued development of social skills training procedures" (p. 21). A number of researchers have considered the concept of interpersonal cognitive problem solving (Gesten, et al. 1982; Sarason & Sarason, 1981; Spivack & Shure, 1974; Spivack, et al. 1976; Weissberg et al. 1981). The results generally indicate that children who had experienced the training, developed alternative strategies to solve situations. While it appears that problem solving abilities increased, it is difficult to assess whether social adjustment improved. Madden and Slavin (1983) cautioned that much of the research on social skills training has not taken place in mainstreamed settings but rather in self contained special classes. The time would seem opportune to examine how students with social skills training can operate in both learning environments.
The effectiveness of social skills programs for children with behaviour disorders tends to be measured by the degree of peer acceptance e.g. a social status change. A number of researchers have found children with behaviour disorders improved in behaviour and social status due to social skills training (Bornstein, Bellack & Heisen, 1980; Coie & Krehbel, 1984; La Numziata, Hill & Krause, 1981). Improvement in segregated settings has also taken place. Lebsock and Salzberg (1981) improved the behaviour of children with behaviour disorders in special education settings with a social skills training intervention. These methods included role playing and reinforcement techniques. Hollinger (1987) concluded that "social skills training intervention research indicates that children with behaviour problems can benefit from social skills training" (p. 22). Such benefits depend however on a number of conditions including accurate assessment of behaviour deficits, accurate assessment of subgroups, closely followed coaching procedures and peers' perceptions of and attitude towards children with behaviour disorders (Strain & Shore, 1983). Strain et al. (1984) prescribe to the view that social skills training may need to focus on interactive exchanges rather than on discrete behaviours.

Hollinger (1987) felt that caution should be taken when considering the peer group's assessment of the social competence of a particular child with behaviour disorders. Hollinger discussed the issue of social perception bias which can be present in sociometric activities. For example, social perception bias exists when children interpret popular children's behaviour in a different way to unpopular children. Dodge and Frame (1982) analysed boys' interactions and revealed that peers were inclined to attribute hostile behaviour to unpopular children four to ten times more than popular boys. Hymel (1986) also found that peer acceptance of behaviour varied according to whether the person displaying the behaviour was well liked or not. Research (Cote & Dodge, 1983; Roff, Sells & Golden, 1972) found that once a peer group has rejected a member, the rejection by peers tends to remain so for a number of years. As stressed by Hollinger (1987), "it seems especially
important to address the problem of social perception bias among peers of rejected children with behaviour disorders since their history of behaviour problems has probably resulted in a negative reputation” (p. 23).

The evidence seems to indicate that social skills training can be an effective strategy in assisting with the integration of children with behaviour disorders. The evidence also appears to indicate that not only should the child with behaviour disorders be involved in the social skills training program but also the peer group should. A number of researchers have indicated that peers have an impact on other children’s behaviour (Kalfus, 1984; Strain, et al. 1984; Solomon & Wahler, 1973; Wahler, 1967). Strain, et al. showed that, without teaching peers how to respond to unacceptable behaviour from children with behaviour disorders, the newly learned (appropriate) behaviours of the child with behaviour disorders may be extinguished. In support, Stokes and Osnes (1986) claimed it is also important to eliminate some of the reinforcing behaviour which can occur within the peer group that supports inappropriate behaviour. The newly learned behaviour is also transferred not only to the child with behaviour disorders but to the peer group as well. Kazdin (1980) and Hollinger (1987) stressed that training children with behaviour disorders in social skills must take place in a natural setting whereby newly learned skills can be tested and where, “successful interactive exchanges may be used as predictors of efficacious social skills training” (Hollinger, 1987, p. 24). Michelson and Mannarino (1986) recommended an effective training approach may be coaching procedures combined with modelling and positive reinforcement.

SYNOPSIS OF OTHER APPROACHES DISCUSSED IN THE LITERATURE

Discussion in the preceding sections involved the examination of three practical (classroom) approaches designed to assist the classroom teacher to effectively integrate not only children with behaviour disorders but also all children with disabilities. These three approaches all advocate that special education
services should be school-based. The literature review revealed that a number of practical approaches have been developed. Many of these approaches were not solely school-based. Two of these approaches, Project RE ED and The North Carolina Experience, have been designed especially for children with behaviour disorders. These approaches will be examined in the following section. However, it is important to note that these approaches are only two representatives of a number of similar approaches which have been developed. The view being that, for some children with behaviour disorders, the regular classroom may not be the most appropriate educational setting.

**Project RE ED** Project RE ED is based on the consultation teacher approach with its emphasis on an ecological intervention. Project RE ED stands for a project for the re-education of emotionally disturbed children (Hobbs, 1966). The project was instigated at Cumberland House Nashville, Tennessee in 1962. The child is seen as having learned inappropriate behaviours and thus correct behaviours need to be taught. The concept of a twenty-four hour residential program was established. The new emphasis was on education as a major therapeutic approach. "Project RE ED accepted the view that in many instances, moving the child to a new environment for a short period of time is necessary to allow one person to work intensively with the child while simultaneously someone else works with the school, home and community" (Paul & Epanchin, 1982, p. 228). According to Reinert and Huang (1987), the project is often labelled a withdrawal program by those who support the concept of integration. The centre of the approach is a teacher counsellor who organises the child's program in consultation with others. The teacher/counsellor is seen primarily as a 'change agent'. Research (Hobbs, 1979; Weinstein, 1969, 1974; Whitaker, 1979) has shown the results of the project to be positive and encouraging. Paul and Epanchin (1982) stressed that "the value of the approach, and the soundness of the philosophy and ideas upon which it is based" (p. 233) are widely accepted.
The North Carolina Experience (Behar, 1986) The North Carolina approach has been developed on a basic set of assumptions including a system of services from highly restrictive to mainstreamed, a belief that children are best served close to their community, the need for a full continuum of care, the need for a strong linkage between all components of the system, a flexibility in funding and decision making management structure, individualized treatment and educational planning. According to Behar (1986) the most essential unifying factor is the case management. This case management "is the energising factor that has propelled the service plan into the reality of service delivery, the advocacy strength that has sustained a commitment to each and an optimism about each child's capacity to change" (p. 150).

Literature examining the aetiologies of behaviour disorders, theoretical intervention approaches and practical classroom approaches has been discussed. Examination of the literature on integration will now follow.

INTEGRATION

As with behaviour disorders, the literature on integration is inconclusive and unclear. To be able to understand properly the development of the integration policies of Victoria and New South Wales a close examination of the literature on integration is essential.

Integration will be examined initially from an historical perspective and important influences in its development will then be discussed. These important influences include: the efficacy studies: the labelling theory; and the normalization principle. Despite obtaining a higher profile in the literature in recent years integration is still host to much debate. This study will examine the continuing debate at both the Australian and international levels.
HISTORICAL DEVELOPMENT OF INTEGRATION

According to Schiebelbusch (1986), the general history of educational programs for children with disabilities throughout the world is a sequence of four very distinct periods of thought and practices. The first stage which took place during the late 19th century could be referred to as the "Residential Period". During this period, residential schools were established for a number of categories of students with disabilities. The second period appeared around the turn of the century and could be labelled the "Special Unit Period", during which time classes for students with disabilities appeared. The third period, particularly in the United States, could be termed the "Special Education Period". It was during this period, soon after World War II, that many schools tried to serve children with disabilities in the regular school. The final period came during the 1970s and 80s and could be proclaimed the "Renegotiation Period", because "we are now renegotiating the boundaries between regular and special education and between community based and residential institutions" (Schiebelbusch, 1986, p. 4). Skrtic (1991) argued that, worldwide, we are still progressing through a "Renegotiation Period"; educators are still debating issues such as integration. For some educators, Skrtic concluded, the renegotiations concerning the boundaries between regular and special education and the implementation of integration programs has achieved little: "there is widespread concern that the implementation revolution has been lost" (p. 149).

One of the watershed years in the development of special education, and in particular integration, was 1968 when two influential pieces of educational research were published (Dunn, 1968; Rosenthal and Jacobson, 1968). As a result of the publication of these articles, the role of special education and its excessive use of the labelling process was questioned and extensively criticised. The work of Dunn (although recently criticised by Zigler and Hodapp in 1986 and Danby and Cullen in 1988 for ignoring other evidence available) and Rosenthal and Jacobson was well timed to fuel concern over the education of children with disabilities. Dunn (1983)
claimed his article was influential because, "nothing as powerful as an idea whose
time has come" (Dunn, 1983 in Danby and Cullen, 1988, P. 178). At this time, in
addition to the work of Dunn and Rosenthal and Jacobson, a series of articles called
"the Efficacy Studies" were published.

EFFICACY STUDIES

The "Efficacy Studies" were researches into the relative merits of regular
class placement versus special class placement. Results of these studies were used
by many to support the premise of Dunn that it was, in terms of special education
thinking, time for a reanalysis. The question which now needs to be raised is how
valid were the results of these studies?

Gottlieb (1981) noted that "of ten of the early efficacy studies conducted
between 1932 and 1965, results of five showed no significant achievement
differences between children in special and regular classes" (p. 117) and five studies
showed an improvement in achievement among children in regular classes. More
recent research (Rodee, 1971; Semmel et al. 1979; Walker, 1972) appeared to
support the assumption that, in terms of academic achievement, integrated classes
seem more appropriate than segregated classes. These results should be considered
with caution as both Rodee (1971) and Walker (1972) conducted studies lacking
random procedures. A study by Budoff and Gottlieb (1976), who randomly assigned
students into segregated and mainstream groups, found no convincing evidence of
the positive aspects of one situation over another. On close examination the efficacy
studies, in relation to academic achievement, appear unconvincing. In support,
Carlberg and Kavale (1980) using meta-analysis found special class placement
inferior to regular class placement for students with below average I.Q.s. In contrast
they found special class placement was superior for children with behaviour
disorders. Kaufman, Agard and Semmel (1981), after reviewing the research in the
area, suggested that the most appropriate educational setting, for students with
disabilities, may not yet have been developed. Although, in terms of academic performance, the results of the efficacy studies are unclear, integration effectiveness depends on more than academic performance. Individual factors such as social adjustment, self esteem, behaviour and life skills must also be considered.

Perhaps the area of most importance when examining children with behaviour disorders is social adjustment. Many proponents of integration (Collins, 1984; Madden and Slavin, 1983; Schiefelbusch, 1986) claim that the most positive aspect of the concept is its social ramifications for both children with and without disabilities. This claim becomes more significant if one considers that many children with behaviour disorders lack the skills necessary to create appropriate social contacts. A number of studies (Baldwin, 1958; Cassidy and Stanton, 1959; Porter and Milazzo, 1968; Walker, 1974) have found evidence to suggest that children educated in segregated settings make greater gains in the areas of social and/or emotional adjustment. In support other research examined the implications of social adjustment using self concept measures on children with disabilities in both segregated and regular classrooms (e.g. Budoff and Gottlieb, 1976; Goldstein et al. 1965; Hoeltke, 1967; Kern and Pfaeffle, 1963; Schurr & Brookover, 1967). The data suggested that children in special classes showed better social adjustment than their peers in regular classes. Studies of social adjustment were also conducted using sociometric techniques (Goodman, Gottlieb & Harrison, 1972; Gottlieb & Budoff, 1973; Gottlieb & Davis, 1973; Markus, 1978). The results of these studies supported the results using self concept measures, i.e that children with disabilities benefit from placement in special classes. Results on social integration, like those on academic development, are unclear and inconsistent and care must be taken when findings are to be generalised (Chambers & Kay, 1992).

Skoda (1970) found better social adjustment for adults who had spent some educational instruction in regular classrooms. Caution is needed when considering
these data as all segregated schools were situated in the inner city while all regular
classes were located in rural districts. Nevertheless, the results of the Skoda study
have been supported by a number of researchers.

Some researchers have found that children in partially integrated situations
made greater gains in self concept than did children in full time settings (Budoff &
could indicate a possible solution to the placement problem for children with
behaviour disorders. Children who have gained social skills in one setting could try
them out in the other. In addition to the debate relating to the most appropriate
setting, there are contrasting views and unclear results concerning which delivery
services are the most effective in assisting children with disabilities. Examination of
delivery services such as the consulting teacher approach, the support teacher
approach and the social skills training approach have been discussed in a previous
section of this chapter.

A number of points need to made clear when examining the research
evidence available on social adjustment and integration. (1). Due to the use of
certain instruments, e.g. sociograms, the validity of many studies must be
questioned (Chambers & Kay, 1992). (2). Much of the research referred to has been
carried out on educable mentally retarded students and the findings may not
generalise to children with behaviour disorders (Jenkinson, 1989). Some
researchers have suggested that the results achieved with children with intellectual
disabilities may relate to children with behaviour disorders. Rubin, Simson and
Betwee (1966) stated: "some effectiveness studies similar to those done on educable
mentally retarded students were completed in the area of behaviour disorders, with
studies randomly chose their students and, in many studies, the sample size was
too small to support the generalizations that were made. Finally, "there has been a
tendency, with the exception of the study of Goldstein et al. (1965), to pay little attention to the dynamics of teacher-child interaction and curriculum content in these studies" (Thomas, 1982; p. 54).

While the writer concedes that the results of the efficacy studies have had some influence on the development of integration policies, the studies must be seen in context. Meisgeier (1976) correctly points out that the changes in education over a period of time make comparisons between efficacy studies conducted in different decades meaningless, thus: "the earlier efficacy studies...must remain of indirect and historic interest " (Meisgeier, 1976, p. 255).

When looking historically at special education, and in particular integration, there appears to be "a steady trend from rigid exclusion to progressive inclusion" (Center, 1987, p. 11). By the mid nineteen seventies it was evident that three areas of policy dominated thinking in special education and would influence special education in the future. These areas included the concept that strategies existed by which children with disabilities could be taught, the idea of community involvement, the idea that integration was allowing children with disabilities back into the wider community and finally, the idea that the use of labels and classification systems based on medical models were questionable.

While the role of the efficacy studies in the development of integration has been thoroughly examined in this section it is important to consider that other factors (the labelling theory and the principle of normalization) also played a significant role in the widespread appeal of integration. These other factors, and their importance to the development of integration, will now be discussed.
OTHER IMPORTANT INFLUENCES ON INTEGRATION

The Labelling Theory. During the 1960s a sociological theory developed termed the social-role approach (Townsend, 1978). This approach was based on a concept of labelling first used in the area of criminology and called labelling theory (Tannenbaum, 1938). Labelling theory suggested that the attitudes which coincide with the labels we apply to individuals often contribute to the behaviour those people exhibit. While labelling theory has been criticised by sociologists (Grove, 1970, 1975b; Matza, 1969) for the lack of emphasis on the rule breaker in the process of becoming deviant, the concept has maintained strong support. Some of the present efforts towards the integration of children with disabilities are partially the result of enlightened educators avoiding the process of labelling children with disabilities. The labelling theory can be supported when one considers the inaccuracy of labels and the consequences of them. This is particularly significant in relation to children with behaviour disorders.

Labelling. "Placing any label on any human being does violence to that individual uniqueness which is the joy of humanity" (Gallagher, 1972, In Swan, 1980, p. 62)

The labelling of children as "behaviour disordered" is extremely complex and, as a result, may at times be inaccurate. The inaccuracy of labelling children as "behaviour disordered" was supported by Rubin and Barlow (1971, 1975) who studied teachers' attitudes towards children's behaviour. The results of their study found that, over a period of five years, only 27% of boys and 51% of girls had not been reported by teachers for exhibiting problem behaviour. The results suggested that even experienced professionals have difficulty in distinguishing between normality and abnormality. In supporting these results, Phillips, Draguns and Bartlett (1975) summarised the difficulties, "... the complaints that bring a child to the attention of professionals may be specific or vague, widely or minimally shared
among relevant adults and present across a wide or narrow range of environmental contexts. Present diagnostic labels, however, do not reflect such variations in context, and the label applied often becomes descriptive of the whole child in all settings and under all conditions” (p. 41). The decision to apply a label and which label to apply often is inaccurately chosen due to the professionals’ training and experience.

Depending on the individual’s background and training, a medical term is used “emotionally disturbed” or a behaviourist term “behaviour disordered” is preferred. Pirozzo (1983) suggested that the medical model “based on medical terminology has done very little to allow educators to select suitable materials, programs and strategies which would be beneficial to the child” (p. 24). This notion is supported by Reger, Schroeder and Uschold (1968) who cautioned: “the notion that simple labels, applied by high status authorities from outside the school, should serve as a basis for grouping children is basically nothing more than a refusal to accept responsibility for making educational decisions. It is educational laziness” (p. 19). The labels “emotionally disturbed”/”behaviour disordered” inform the educator of very little. In fact the use of labels can often result in the stereotyping of individuals.

It would appear that in most cases children labelled “behaviour disordered” are expected to display to peers and teachers all the characteristics of the most severe cases. One term labels, such as “behaviour disordered” or “emotionally disturbed”, cannot possibly convey sufficient information to be of benefit to all individuals so labelled together in these categories.

Klein (1978) warned “categories and labels have perpetuated stereotypes and myths of various types of exceptionality in the eyes of the public as well as regular
education personnel" (p. 106). The question over where the label should be directed, to the individual or the behaviour, further questions the use of labels.

A number of researchers (Gallagher, 1976; Hobbs, 1975; Klein, 1978; Lilly, 1977; Mongon, 1983; Pirozzo, 1983) argued that labels can be used to blame the victim (the individual) for their predicament. The premise not accepted is that the problem is the individual's, so hence they (the individuals) are labelled. By blaming, and hence labelling, the individual other variables crucial to the child's long term prognosis are overlooked. In support, Pirozzo (1983) suggested that labels tend to focus on the child and overlook other vital sources in the remediation of the situation. Problems displayed in the child's family, peer group and/or school situation may be ignored. The continued practice of labelling the individual by proponents of the medical model has led to many researchers (Hobbs, 1975; Rhodes, 1970; Stobart, 1986) advocating a more ecologically-based treatment. An ecological approach was discussed in a previous section of this chapter. A critical review on the practice of labelling would not be complete without mention of the permanency of labels.

When a label has been used to describe an individual's behaviour the labels can, and usually do, remain permanent. Children's growth and development can be erratic and unpredictable and a label once used may soon become invalid. Pirozzo (1983) claimed labels tend to suggest that the symptoms/disability/disorders are fixed and that "emotional disorders are not transitory" (p. 26). In practice, this process of labelling may lead to children placed in special classes seldom returning to regular classrooms (Hobbs, 1975, p. 9). It seems crucially important to have periodic reviews of status in order to place children in the most appropriate setting as quickly as possible. The practice of labelling has, at times, led to the lowering of expectations by those involved in the remediation program.
A number of researchers (Foster & Keetch, 1977; Foster, Ysseldyke & Reese, 1975; Gillung & Rucker, 1977; Salvia, Clark & Ysseldyke, 1975) have found that labels lower teachers' expectations for children with disabilities as well as affecting teachers' interactions with students. Teachers may treat students according to their stereotyping image rather than their actual behaviour and ability (Beez, 1968; Meichenbaum, Bowers & Ross, 1969; Palardy, 1969; Rubovitz & Maher, 1973; Sutherland, 1976). While it is clear that labelling a child creates certain expectations, the significance of the effect may vary according to other information provided. Thus Reschly and Lamprecht (1979) found that labels only exert effect on teacher's expectations if no other information is available. Behaviour appeared to be a more crucial variable than labels. Both the labelling process and the unacceptable behaviour suggest that children with behaviour disorders present a unique situation. Therefore, when considering the effects of labelling on children with behaviour disorders a number of factors must be considered.

Behaviour disorders have a variety of aetiology and hence require a wide spectrum of intervention programs. Programs need to be considered for each individual child, depending on that child's stage of development and the aetiology of their behaviour. In relation to children with behaviour disorders, the effects of labelling vary according to the number of other important variables involved, including behaviour patterns. The extent of these behaviour patterns has led some researchers (e.g. Braaten & Kauffman, 1987) to conclude that the effects of labelling on children with behaviour disorders are insignificant. The authors noted: "In the case of behaviourally disordered youngsters the anti-labelling arguments are moot; teachers and peers know who these students are and reject them because of their aberrant behaviour patterns" (p. 11).

Throughout the literature researchers have suggested that the use of labels can have an effect on the expectations of teachers and peers (Jones, 1972; Pirozzo,
1983; Scherer & Gersch, 1990). How significant this effect is depends on other variables present and information available. While it has been suggested (Braaten & Kauffman, 1987) that the effects of using labels on children with behaviour disorders are irrelevant the use of labels would seem none the less to draw attention to the child, perhaps even before behaviours have been displayed.

One other factor, the Principle of Normalization, has been given credit in the literature for the widespread appeal of integration. The principle of normalization will now be discussed.

**The Principle of Normalization**  As with the efficacy studies and labelling theory, the principle of normalization was used by proponents of integration as a supporting argument (Kirk & Gallagher, 1979; Thomas, 1982). While the principle of normalization was widely supported, it has always been a controversial concept and remains so today. The first mention of the principle of normalisation appears to have been in Scandinavian legislation in the nineteen sixties. Nirje (1976) defined the principle of normalization as the "means making available to all mentally retarded people patterns of life and conditions of everyday living which are as close as possible to the regular circumstances and ways of life of society" (p. 231). In the United States, Wolfensberger (1969a, 1969b, 1970, 1971, 1980, 1983) "tried to North Americanize, socialize and universalize the Scandinavian formulations, so that they would be applicable to all human services" (Wolfensberger, 1980: p. 7). Wolfensberger attempted to expand the concept from its focus on laws relating to people with intellectual disabilities to a concept that was applicable to any type of human service work. Wolfensberger also saw a much wider role for the principle: that of a consciousness raiser for the general public. By drawing attention to a number of unacceptable practices that service providers engage in (e.g. using posters to create pity so that donations can be collected), these practices may be discontinued.
The major aim in advancing the principle was to alleviate the harmful effects of segregation of people with intellectual disabilities by increased integration into the community, whether it be in educational, medical, vocational or residential terms.

A number of researchers have criticised the principle of normalization (Mesibov, 1976; Sapon-Shevin, 1978; Schwartz, 1977; Throne, 1975). Sapon-Shevin (1978) suggested the interpretation of statements, such as all people are really the same, "tends to minimize all differences, both superficial and important" (p. 119). Ames (1982) claimed that the old saying "all men are born equal" ignores the fact that all people are created equal in the eyes of the law only and it would be a totally unrealistic notion to accept that everybody is the same as everybody else in academic potential" (p. 238). It would appear that this discussion is based entirely around one's interpretation of the statements associated with the principle. As Wolfensberger (1983) stated, "once people hear or see the term normalization, a large proportion (apparently even the vast majority) assume, usually wrongly, that they know what it means" (p. 234).

Mesibov (1976) claimed that the principle seems to have been presented as a "fait accompli" yet the assumptions upon which it is based have not been verified empirically including the assumption that integration will enhance attitudes towards people with disabilities. Mesibov claimed that the principle deals only with service delivery systems not individuals and he rejects the assumption that "normality" should be used as a guide for all human endeavours, "doing what others are doing is not necessarily doing what is right or what gives dignity and satisfaction" (p. 31).

In retrospect, the principle of normalization may have had more impact on the integration movement if its "chief advocates had been based in special education, rather than primarily concerned with mental health services" (Thomas, 1982; p. 39). In relation to children with behaviour disorders, the principle of
normalization had an effect on integration but little impact on how the services could be provided.

World communities, particularly policy developers, were influenced by such concepts as labelling, efficacy and normalization. Many countries developed their integration policies fully aware of the attitudes, theories and discussions being formed world-wide. When formulating the Victorian and New South Wales policies, the decision makers were aware of the debate concerning integration. The Victorian Review Committee in its introduction claimed, "the Review has examined both the overseas debate and local views on the integration of disabled children" (p. 6). In examining the perceived effectiveness of the Victorian and New South Wales policies, an awareness and understanding of comparative policies is an advantage.

Before examining the integration policies of particular countries, it is important to gain some understanding of the debate which was raging world-wide at the time these policies were being formed.

INTEGRATION DEBATE

For over twenty years, researchers have discussed the prospective advantages and disadvantages of integration. The debate over which is the most appropriate setting, segregated or regular classroom, for the delivery of educational services to children with disabilities continues to flourish. When considering the effectiveness of integration, particularly for children with behaviour disorders, two aspects of integration need to be discussed; academic and social. According to Kaufman et al. (1975) academic (instructional) integration refers to the extent to which the child with disabilities shares in the instructional environment of their peers. Social integration refers to integration whereby the child with disabilities is in physical proximity to, is interactive and assimilated with, and finally accepted by non-disabled peers (p. 4).
Research on the outcomes of academic integration are varied. A number of researchers (e.g. Calhoun & Elliot, 1977; Leinhart, 1980) concluded that regular classrooms are superior to special class placements for the majority of disabled children, while others (e.g. Carlberg & Kavale, 1980; Madden & Slavin, 1983) cautioned that variables, such as type of instructional program and type of disability must be considered before overall comparisons can be made between segregated and integrated settings. Glavin et al. (1971) claimed that for behaviourally disturbed, low achieving students, a highly structured, individualized resource program with a token economy was more effective than full time placement in regular classes. In support of special school settings Goldstein et al. (1965) found a tendency for low achieving students to perform best academically in special class settings. When reviewing the literature on the outcomes of social integration the results, like those of academic outcomes, are unclear. An early study (Goldstein et al. 1965) discovered that special class students showed greater verbal flexibility, fluency, and originality than students placed in the regular class. Students placed in the special class also tended towards a failure avoiding position. It was argued (Madden & Slavin, 1983) that an important criterion for social integration is that the child with disabilities be socially accepted by its peers without disabilities. Ray (1985) claimed that research concerning social acceptability has largely been based on data derived from sociometric activities and could therefore be biased by such procedures. Madden and Slavin (1983) concluded that the experience of integration alone will not have an unequivocal positive effect on social acceptance or an unequivocal negative effect. The effect of integration on social acceptance appears to depend on the particular instruments used to measure the acceptance level. Horne (1979), aware of difficulties in measuring social acceptance, still conceded that the bulk of studies are supportive of the lower status position of people with disabilities.

Whether social integration or academic integration is the goal, keenness for integration by educators may be waning. Ashby and Taylor (1984) commented
"while the mounting evidence did not indicate a swing back to total segregation it did highlight the need for caution" (p. 24). Skrtic (1991) suggested that the enthusiasm to implement integration policies may be lost and it is time for a new revolution, the Regular Education Initiative. Reality may be more in tune with Gow's (1987) comment that we are progressing slowly, still grappling with the same issues which confronted special education two decades ago. Some researchers (Jones, 1987) are beginning to demand evidence that integration is the superior model for either the child or the teacher. Recent research data appear to have curbed the rhetoric on integration somewhat. No longer are researchers suggesting that "being opposed to mainstreaming is like being against apple pie and motherhood" (Reinert, 1980, p. 149). The question being examined in the literature is: is integration the answer for the delivery of educational services to children with disabilities? This question is particularly pertinent in regards to children with behaviour disorders.

When considering the effectiveness of the integration of children with behaviour disorders, an important aspect to consider is the dearth of research in the area. Many researchers (Andrews, 1985; Pickering, 1986; Vacc & Kirst, 1977) have stated their concern regarding the apparent lack of research into not only the integration of children with behaviour disorders but also behaviour disorders in general. As Brown and Ward (1982) claimed, "one of the more unusual features of the current scene in Australian special education is what appears to be a long standing lack of interest in the educational treatment of emotionally disturbed or maladjusted child" (p. 201). This apparent lack of interest is of concern when there is clear evidence which has indicated that children with behaviour disorders are amongst the most difficult groups of children to be integrated effectively into the regular classroom/school (Alexander & Strain, 1978; Antonak, 1980; Braaten et al., 1982; Bradshaw, 1987a; Center, Ferguson & Ward, 1988; Coleman & Gillam, 1983; Gow, 1987; Johnson, 1987; Kugelmass, 1982; McGrath et al. 1986; Pappanikou & Paul, 1972; Saunders, 1987; Simpson & Edwards, 1980; Walker,
The results are not completely unanimous as a number of researchers (Goupl & Brunet, 1984; Williams & Algozzine, 1979) found that children with behaviour disorders are acceptable or at least no more unsuitable as integrated students than other groups. The Goupl and Brunet study was on teachers’ attitudes towards different categories of exceptional children. The results indicated that "emotionally disturbed children were seen as more educable in mainstream measures than children with serious learning disabilities" (p. 31). Data in the Williams and Algozzine study was gathered using a questionnaire designed to record teachers’ attitudes to the integration of certain categories of exceptional children. The results of the Williams and Algozzine study, as in the Goupl and Brunet study, indicated that teachers rejected educable mentally retarded children more so than children with behaviour disorders.

The research literature (e.g. Alexander & Strain, 1978; Bradshaw, 1987a; Walker, 1984), although not unanimous, has indicated that of all the traditional categories of special education, children with behaviour disorders tend to be the most rejected group. Even when subclassifications of certain categories are included (e.g. severely intellectually disabled) children with behaviour disorders are still strongly rejected by educators. Educators have indicated reluctance when it comes to teaching some types of children with disabilities, yet integration policies tend to group all categories of children with disabilities into one.

Kauffman, McCullough and Sarbonne (1984) and Metsels and Friedland (1978) argued that one major mistake of the proponents of integration is to assume that all types of disabling conditions are alike in their social implications, issues and challenges. The integration of children with behaviour disorders cannot be solely justified by the progress of any one integrated child; it is essential that the presence of the integrated child should not harm other pupils (Galloway & Goodwin, 1987). When integrating children with behaviour disorders, it is imperative to consider the
social consequences of not only the integrated child but also the peer group without disabilities. Some of the assumptions made about integration have been made with certain categories of disability (e.g. physically disabled students) in mind and these assumptions may be quite invalid for children with behaviour disorders. Many other assumptions about integration are yet to be proven.

Gresham (1982) postulated that the integration of children with disabilities, in particular children with behaviour disorders, is designed and argued around three underestimated assumptions. In the first instance physical placement of the child with disabilities in the regular classroom will lead to social interaction increasing. Secondly, that the physical placement of a child with disabilities in the regular classroom will result in children without disabilities increasing their social acceptance of children with disabilities. Finally, that children with disabilities will model or imitate the behaviour of their peer group without disabilities. Gresham suggested the need for social skills training for children with behaviour disorders to enhance their ability to interact effectively with their peers without disabilities. Evidence has indicated that students who display disruptive or dangerous behaviour are usually rejected by their peers and teachers as is their behaviour (Braaten et al., 1987; Kauffman, 1987). These views are supported by studies which have suggested that children with behaviour disorders themselves may not welcome efforts to socially and academically integrate them in situations where they feel they will be humiliated for their behavioural differences (Edgar, 1987; Frizzell, 1987). McCullough and Sa’bionie (1984) suggested that the debate over integration versus segregation for children with behaviour disorders is a question for which there is no definitive answer available.

Aspects such as teacher skills, classroom structure, therapy availability, social and academic gains are all considered in the literature as variables in favour of and against the education of children with behaviour disorders in the regular
classroom. Meisels and Friedland (1978) argued that, by its very structure and intrinsic nature, the regular classroom has little hope in meeting the therapeutic needs of children with behaviour disorders. Calberg and Kavale (1980) found, using a meta-analysis on fifty research articles on special versus regular class placement, that children with behaviour disorders "in special class placement was better off than 61% of his/her counterparts in regular classes" (p. 301). The results suggested positive effects from special class placement for children with behaviour disorders in the areas of both social and academic variables. The authors suggested the results may be due to the fact that "behaviour disordered" children were more tractable in the special class" (p. 304). Consideration must also be given to the level of teachers skills.

Braaten et al. (1987), in discussing teachers' skills, claimed "regular classroom teachers cannot be expected to develop easily or quickly the attitudes, skills and priorities that will allow academic and social success of all students, including those with behaviour disorders" (p. 2). The authors further suggested, "we are convinced that not all behaviourally disordered students can be appropriately served in regular classes" (p. 7). The placement of children with behaviour disorders in the regular classroom will require skills for the management of behaviours which many regular classroom teachers may not have, thus creating a possible dangerous situation (Braaten et al., 1987). For so long bureaucratic systems have denied the existence of children with behaviour disorders yet teachers without intensive training are expected to recognise, assess, plan and implement appropriate academic and social programs (Dixon, 1986). As Winchel (1980) proclaimed "one wonders at the folly with which we have enabled the capacity of regular education to resolve the problems of its ordinary mission, much less the perplexities of children with special needs" (p. 493).
In contrast, Stimpson, Miles, Walker, Ormsbee and Downing (1991) believed, given the necessary resources, that children with behaviour disorders can be offered individualised instruction within the regular classroom. Knoblock (1966), Myles and Simpson (1989), Reinert (1980) Stainback and Stainback (1980) and Vacc and Kirst (1977) in support of maintaining children with behaviour disorders in the regular classroom suggested an evaluation of segregated settings and claim that every effort must be made to integrate children with behaviour disorders into regular classes for as much of the school day as possible.

The question of placement of children with behaviour disorders appears to be as complex and contradictory as the overall concept of integration. The literature hints that integration has often taken place without sufficient attention being focussed on the individual differences and needs of children with disabilities. Integration in relation to children with behaviour disorders is, as Blatt (1980) stated: "a charade, evolving simplistic conclusions, drawing our attention from serious problems and focusing on the trivial, the obvious and the unimportant" (Blatt, 1980: p. 495).

Educators worldwide continue to debate placement issues and develop strategies which will assist the integration process. To provide an understanding of the Australian situation it is informative to initially examine policies of particular countries, which were influential in the formation of integration policies within the Australian states.

INTERNATIONAL COMPARISONS

THE UNITED STATES OF AMERICA (P.L.94-142)

Public Law 94-142, (the Education of all Handicapped Children Act), has been described as the most significant federal legislation in the history of special education (Blankenship & Lilley, 1981). The intent of the Act was to assure all
children with disabilities access to free appropriate public education and to shift the focus of special education from categories of disabilities to individual children's needs. David and Greene (1983) discussed four basic values that can be inferred from P.L. 94-142: the need for individualised attention; parental involvement; the need to avoid erroneous classification; and finally an awareness that both children with and without disabilities will benefit from integration.

Ziegler and Muenchow (1979) claimed that the most revolutionary aspect of the Act was the power given to parents in helping to develop programs for children with disabilities. This aspect of the act is referred to as the "due process" procedures.

There are conflicting views on the impact of the Law. The majority of negative comments are made in regard to the financial costs and the speed of implementation. Kauffman (1980) claimed that "once the public and the Congress realize the enormous cost of P.L. 94-142, there may be public resistance and fiscal rebellion" (p. 523). A major fault of P.L. 94-142 is the distinction it makes between learning disabilities and emotional/behaviour disorders. The definition accepted by the Congress Committee was based on that of Bowers (1969) with a clause attached which distinguishes between children who are "socially maladjusted" and those who are "behaviour disordered". Those children termed "behaviour disordered" are not entitled to the same funding levels as those termed socially maladjusted. Given the difficulty educators have in making the distinction between acceptable and unacceptable behaviour the distinction between behaviour disordered and socially maladjusted would seem almost impossible to make even for the most experienced professional. A number of researchers (Apter & Conolly, 1984; Bower, 1982; Executive Committee, Council for Children with Behaviour Disorders, 1987; Gosenick & Huntze, 1980; Kauffman, 1980; Wood, 1985) have criticised P.L.94-142 for its failure to include all children with behaviour disorders and a number of these
Researchers are calling for continual changes to occur in the services and resources offered to children with behaviour disorders, particularly those in regular schools.

In the United States during the 1980s the relationship between regular class teachers and special class teachers became a matter of great concern for policymakers, researchers, and advocates for exceptional children (Hallahan & Kauffman, 1991). Radical calls were made to merge the two areas of education and this movement became known as the regular education initiative (REI). In essence the goal of REI is to make general educators more responsible for the education of students who have special needs. This goal, proponents of REI (Stainback & Stainback, 1984; Wang, Reynolds & Walberg, 1988) believe, can only be achieved if "general and special education are reconstructed so that few students, if any, are taught outside the regular classroom for any part of the school day" (Hallahan & Kauffman, p. 63). Although many of the suggested reforms have a great deal to offer their implementation would require major changes in educational policy and thus the basis for REI and its ultimate consequences have been questioned (Braaten et al. 1987).

Twenty years after the implementation of P.L. 94-142 Gosenick, George, George and Lewis (1991) collected data on administrators' views on the delivery of services to children with behaviour disorders across 27 American states. Student identification was the only area in which the administrators were pleased. The authors stressed that meaningful information about the efficacy of public school programs for behaviorally disordered students is essential if special education is to demonstrate a positive impact on the students who are served. Nelson and Pearson (1991) claimed that legislation is being considered to "create a new federal grant program focusing exclusively on the needs of children with serious emotional, behavioral, or mental disorders" (p. 18).
While the P.L.94-142 legislation has been criticised by a number of researchers very few have argued for a return to pre-act legislation. Apart from the alarming misrepresentation of children with behaviour disorders, the only other criticism which could be levelled at the legislation is that it moved too quickly to be subsidised by the necessary resources, human and fiscal. Many professionals (educational, medical and legal) were unprepared for the speed of the integration movement in the United States.

The impact of the American legislation on Victorian and New South Wales policies has been varied. The Victorian policy makers included aspects of the U.S. policy such as individualised education programs, increased special education training at pre-vocational level and more involvement for parents. The New South Wales policy makers encompassed the principle of normalization. Like their U.S. colleagues, the Victorian policy makers failed to deal adequately with children with behaviour disorders. The child with behaviour disorders in Victoria and New South Wales seemed to be labelled too difficult and subjected to arbitrary decision making. The Victorian policy, not unlike its American counterpart, was subjected to legislation which moved too quickly legally leaving education considerations floundering in uncertainty.

CANADA

Viewpoints on the development of the Canadian integration policy vary. Winzer et al. (1987) claimed that special education in Canada has followed the American model, while Bowd (1986) argued that the Canadian experience closely parallels that of Australia. Like Australian education Canadian education is a provincial (state) responsibility. In Ontario (Canada's largest province) Bill 82 was designed to provide for the education of all children with disabilities. Bill 82, unlike P.L. 94-142, does not mandate the least restrictive environment or individualized educational programs, "it thus avoids two aspects of American legislation which
have occasioned considerable litigation in that country" (Bowd, p. 5). The bill is based on five principles: universal access education without payment of fees; early identification; continuous assessment and review; and appropriate program and appeal. In contrast to Ontario province, Victoria province has, by ministerial directive, adopted a zero reject policy. Bowd concluded that like most special education systems the Canadian system is faced with inadequate teacher training, the continuation of a rigidly categorical approach to service delivery and, of course, a shortage of funds.

UNITED KINGDOM (THE WARNOCK REPORT)

The Warnock Report (Special Educational Needs-Report of the Committee of Enquiry into the Education of Handicapped Children and Young People, 1978) was commissioned by Margaret Thatcher, who at the time was the U.K. Secretary of State for Education and Science. The committee, under the guidance of Mrs Mary Warnock, submitted the report to Parliament in May 1978.

The Warnock Report suggested that about 20% of children may have some special needs at some time in their school life. To assist this significant number of children the four hundred page report contained some two hundred and twenty four recommendations. The report viewed integration and mainstreaming as synonymous and part of the much wider movement of normalization. The report stated that "so far as humanly possible, handicapped people should share the opportunities for self fulfilment enjoyed by other people" (p. 99). The report distinguished three main forms of integration: locational, social and functional. Locational exists where special units or classes are set up in regular schools. Social integration was seen as children attending a special class or unit sharing organised out of class experiences with children without disabilities. The fullest form of integration is functional integration: "this is achieved where the locational and social
association of children with special needs with their fellow... leads to joint participation in educational programs" (Warnock Report, p. 101).

The main recommendations of the report were that the categorisation of children with disabilities should be abolished; the progress of a child with special educational needs should be reviewed at least annually; special classes and units should, whenever possible, be attached to and function as part of regular schools; and that a special education element should be included in all courses of initial teacher training.

Some of the supporters of the Warnock Report (Britton, 1978; Wilson, 1979) claimed that its real significance lies in the fact that the definition of special education is seen in terms of needs rather than disabilities. Its supporters described the report as a "lucid, practical and humane report", "evolutionary rather than revolutionary" (Wilson, 1979, p. 9). Outspoken critics (Lewis & Vulliamy, 1979; Richmond, 1979), claimed the report does not offer practitioners any valuable guidelines. The Report, according to Lewis and Vulliamy (1979), failed to solve any problems for which it was commissioned and displays a complete lack of guidance. "There is no considered judgement, based on reflection and experience, of strategies which hold out prospects of satisfying educational needs" (p. 18). Another criticism of the Warnock Report is the cost factor (Pocklington, 1980; Tomlinson, 1982; Wilson, 1979) and in anticipation of this argument the Warnock Committee noted in their report that initial expenditure would ultimately save the community money as people with disabilities grew to self sufficiency. By the end of 1980 however, "Mary Warnock herself was conceding that it is impossible for the government to put money in now" (Tomlinson, p. 79). Richmond (1979) criticised the Warnock Report for its concentration only on learning difficulties at the expense of other needy children. Once again it became clear that policy practices failed to consider the needs of children with behaviour disorders.
It is clear that the Warnock Report had a major influence on the widespread appeal of integration; however, the implications for practitioners must be questioned. While there is a failure to identify the enormous variety of needs which children with disabilities require the report does leave room for alternatives such as special schools. Ashby and Taylor (1984) argued that the report sees the necessity for "maintaining special schools for children with severe or complex disabilities including... those with severe emotional or behavioural disorders" (p. 11).

The success of the Warnock Report, argued Britton (1978), will depend upon the flexibility, professional skills and resourcefulness of teachers in devising strategies whereby the individual needs of children will be diagnosed and programmed so that a "mix of locational, social and functional integration will see the individual progress towards the maximum level of normal adult life of which he is capable" (p. 9).

In the United Kingdom a number of successive acts (Education Act, 1981; Education Reform Act, 1988) have been passed to develop concepts outlined in the Warnock Report. The Education Act (1981) defined children with special needs, set guidelines for all local education authorities (LEAs) to plan and review their provision for special educational needs and further promoted integration (Tallum, 1989; Drew, 1990). The Education Reform Act (1988) "aims to improve the quality of education by allowing most decisions about resource allocation to be taken within schools (Bowers, 1991, p. 3). While the 1988 Act provided for the possibility of the local management of special schools regulations did not allow it. In 1990 a report (Touche Ross, 1990) was sought, and subsequently submitted, that recommended that LEAs should be permitted to manage their local special schools. This recommendation resulted in the formulation of Circular 7/91. Considerable debate is taking place in the United Kingdom at present (Bowers, 1991; Fletcher, 1991) as to how LEAs can best serve the needs of children in the local special settings.
The Warnock Report introduced policies and concepts that were later to be included in the Victorian Report. Both reports emphasised the needs rather than disability of the individual and both examined and considered integration in terms of physical, social and academic aspects. Likewise both reports were criticised for lacking practical guidelines. In New South Wales, policy makers opted to accept such aspects of the Warnock Report as the principle of normalization (Department of Education, Integration Statement, 1988) and the importance of maintaining alternative placements; both of these aspects were also importance aspects of Public Law 94-142.

While the United Kingdom was reeling from the recommendations of the Warnock Report elsewhere in Europe similar philosophies and practices were being implemented.

EUROPE & SCANDINAVIA

Various researchers (Clunies-Ross, 1983; Large, 1983) claimed that Sweden has the best developed system of integration in Europe and has made the greatest contribution to its implementation. In Sweden, special education training is given to all teachers and special instruction is provided at home for the very ill. The idyllic picture created by the preceding comments is clouded by statements from Galloway and Goodwin (1979), who claimed that the popular myth of full integration of children with disabilities is far from being achieved. In support of Galloway & Goodwin is the Swedish policy which states that all children with disabilities in Sweden are expected to follow the same curriculum guidelines as children without disabilities. It is also clear that the Swedes believe in segregated classrooms particularly if it assists the individual to cope with society more appropriately at an adult level (as may be the case with "behaviour disordered" children). It is interesting to note that there are also special schools in Norway and Denmark. The closure of special schools in Scandinavia has not happened but the special school
system is now closely monitored. The need for alternative settings to the regular classroom seem well accepted in these countries.

The Scandinavian experiment has been closely scrutinised by Victorian and New South Wales policy developers. This scrutiny, argued Pickering (1986), should be a cautious one examining the totality of the Scandinavian experiences. Pickering suggested that the authorities scrutinize carefully the timing of the introduction of integration in Scandinavian countries since the initial impact took place during a period of high economic prosperity.

Not all countries of Europe are advocating the Zero-Reject model of integration accepted by the Victorinan policy developers. Large (1983) noted that in The Netherlands, West Germany, Belgium and Czechoslovakia segregated special schools are integral parts of the education system. The European scene appears to be characterized by a lack of agreement when it comes to integration policies and practices, similar to the Australian scene.

Hansen and Hansen (1979) claimed that in the socialist countries children with disabilities usually receive their schooling in separate institutions. The existence of segregated settings for persons with disabilities is not seen as segregation. Each special school is seen as part of one education system. The concept of integration is in fact "seen to be contrary to socialist thinking and a plan which would tend to place vulnerable children in situations of personal and social failure" (Hansen & Hansen, p. 8). Integration in socialist countries appears to be at the level of services, "a desire to provide improved and more extensive specialized services through agency coordination" (Hansen & Hansen, p. 8).
AUSTRALIA

Unlike the United States, Australia does not have a federal policy on integration; education is mainly a state concern. A Federal Government Report (Karmel Report, 1973) had examined the issues surrounding federal powers in regard to the education of children with disabilities and concluded: "while conscious of State rights in this matter, feels it should register its belief that the interests of handicapped children would be best served if responsibility for their education were placed in the hands of State Education Departments" (1973, p. 111). As a result of this report each state department of education began to consider the education of children with disabilities in their state.

At the time when integration movements were rife overseas, Australian states had developed "a vigorous, well entrenched and in many ways admirable set of segregated facilities for students with disabilities" (Doenau, 1984, p. 34). Despite state control of education, Australia does have a Federal Department of Education whose role relates to funding and recommendations for policy practices. The development of integration policies overseas influenced policy makers in the Federal Department of Education to reassess state policies dealing with the education of children with disabilities and in 1979 they conducted a survey whereby each state in Australia expressed its views and policies on integration.

As a result of increasing government and societal pressures, both New South Wales and Victoria began reviewing government policies on children with disabilities and new policy statements began to emerge. The unique situation was that each state appeared to interpret overseas policies differently and hence the emphasis in state policy varied. No state wholly embodied any American or European policy yet, on examination of these policies, a number of common factors did emerge. In all states, with the exception of Victoria, special settings continued to be considered a viable alternative to regular schools. In all states, integration policies appeared to be
"professionalism" approaches (controlled from within by professionals). Once again the exception to this pattern appeared to be Victoria. In Victoria the "Democraticism" approach (collaborative decision making) had been adopted. Further close examination of state policies indicated that hundreds of thousands of children with learning disabilities and behaviour disorders in regular classrooms were not being offered any delivery services at all (a controversial issue in the United States at present).

The integration policies of the two states surveyed in this study have been examined in detail in Chapter One, and while both operate policies that vary considerably from each other they also vary in many aspects from policies operating in other Australian states. Gow (1989) undertook a review of integration in Australia and found that there was a lack of consensus amongst all states in respect to strategies and practices for integrating children (particularly for children with behaviour disorders). Gow suggested that the planning of policy and services in Australia to children with disabilities should become a cooperative approach between state and federal governments with particular emphasis on funding, teacher training and incentive methods for teachers. These recommendations highlight the lack of progress in the area of integration as a number of these recommendations had also been suggested by Andrews, Elkins, Berry and Burge (1979) in their report a decade before.

**SUMMARY (INTERNATIONAL COMPARISONS)**

When examining integration policies and practices from around the world, as when examining integration policies from within Australia, a number of common issues can be isolated including legal provisions, the role of labelling, the representation of minority groups in special education programs, the role of the categorical approach, the rights of parents and financial implications. The following discussion will elaborate on these issues.
Legal decisions relating to integration policy vary considerably. In America and Scandinavia the principle of integration has been enshrined in a less diluted form in the law than in the United Kingdom, yet in the United States funding is often withheld until such time as legal issues have been resolved.

Perhaps the most dynamic contrast between the integration policies of the United States and the United Kingdom is the variations in the overrepresentations of minority groups when labelling children with disabilities. In the United States evidence (Dunn, 1968; Mercer, 1965, 1972, 1974) suggested an overrepresentation of low socio-economic groups in special education classes. This overrepresentation was not as clear in the United Kingdom. Thomas (1982) noted that apart from West Indian children in some London schools (Coard, 1971; MacMillan, 1972; Hegarty, 1977), the same situation did not exist in the United Kingdom. In the Australian context, Watts et al., (1978), Andrews et al., (1979), and Jenkinson (1987) noted that the over representation issue was also not valid. Watts et al., found that “the proportion of minority groups or economically-disadvantaged children in special education was no greater than in regular education, and was well below the proportion found in the United States.” (In Jenkinson, 1987, p. 7). Labelling, whether accurate or not, often leads to the child being placed into a category.

In examining the issue of categorisation there appears to be a general consensus: use, but be aware! In the United States and the United Kingdom categorisation has been strongly identified with labelling and the adoption of the medical model has been rejected on that premise, however the rejection of one category may lead to the creation of another. Some researchers (e.g. Lewis & Vulliamy, 1979), claimed that even with new laws outlining guidelines for the education of children with disabilities we may be simply creating new categories. Lewis and Vulliamy argued that a new category, albeit a broader one, (the category of special educational needs) has been created as a result of the Warnock Report.
and that this new category "could readily be seen to refer to the total school population" (p. 17). In Australia, policy makers appear to be aware of the problems associated with the categorical approach. One of the five guiding principles of the Victorian policy was the issue of non-categorization yet a new category, children with problems in schooling, was created (similarly "disaffected child" in the United Kingdom). Canadian policy makers have also stated that non-categorisation is a major principle of their provincial policies.

The increase in the rights of parents to decide the education setting of their child with disabilities is a concept that the United States, the United Kingdom and Victoria have in common. Parental power seems to be far more active in the United States due in part to constant debate among competing groups. In the United Kingdom there appears to be more of a passive approach and parental groups generally lack the input of some of the professional groups (Pocklington, 1980). Kemp (1983) stressed that neither politics nor the law has effectively challenged professional power in special educational decision making in the United Kingdom. The parental bodies in Australian schools have long been separated from decision making in the educational arena. In Australia, like the United Kingdom, it will take some time for parental groups to exert pressure on the educational hierarchy. In the Victorian context the rights of the parents and their involvement in decision making leads other states, especially New South Wales (Fulcher, 1986).

Fiscal consideration is an area in which international policy makers share a common bond. The available literature suggested that educators world-wide generally agree that the integration policies of their country are insufficiently funded.

While most countries now have policies on integration, many aspects of those policies are still debated. One area of ongoing debate is: should placement be based
on social priorities or academic ones? A second area of debate is the failure of most integration policies to cater effectively for children with behaviour disorders, especially in the area of the most appropriate intervention model.

SUMMARY OF LITERATURE REVIEW

The technical literature which examines integration and children with behaviour disorders is inconclusive in many important areas. The "Labelling Theory", "The Efficacy Studies" and "The Principle of Normalization" while illustrating the historic development of integration present a plethora of concepts and philosophies that do little to resolve the continuous debate. Many issues concerning the education of children with behaviour disorders are also unclear.

The literature surveyed clearly indicated the uncertainty amongst professionals as to whom the label "behaviour disordered" should apply. The research is clear on the wide spectrum of causes but equally unclear as to the most appropriate intervention program. The examination of international policies sheds little light on the problem except to illustrate the possible origins of certain components of the Victorian and New South Wales policies. It is apparent that the Ministry of Education in Victoria has selected aspects such as individualised education programs, the zero rejection approach, non-categorisation, right to free education, collaborative decision making, increased rights for parents and a number of guiding principles to include in their policy. On the other hand New South Wales has selected other aspects including the principle of normalization, professional decision making, special settings and the least restrictive environment approach. The literature indicated that many of the aspects chosen by both states have not been vindicated by research.

One question which still appears unresolved despite continuous research is which setting, segregated or regular, is the most effective for children with
disabilities. Some researchers (Andrews, 1985; Braaten et al. 1987; Carlberg & Kavale, 1980) have suggested that many children with behaviour disorders need special placement, if only for a short period of time. Scandinavian countries, long considered the leaders in the integration of people with disabilities, confess to the need for alternative placements. While the literature leaves many questions unresolved, a number of aspects appear consistent.

Most of the international policies discussed displayed a complete disregard for children with behaviour disorders. Debate continues to take place in a number of countries (United States & The United Kingdom) concerning labels, funding, responsibility and placement of children with behaviour disorders. This debate is important in one sense: it recognises that there is indecision concerning a number of important service delivery questions.

The literature indicated few areas of general agreement as to effective integration programs. This indecision was particularly relevant for service delivery to children with behaviour disorders. A factor of general agreement was the need for alternative approaches to intervention and placement. Approaches such as the resource teacher, consultant teacher and social skills model were examined through the literature. The research offered little clarification as to the most appropriate service delivery approaches, all approaches appeared to have some success but the total effectiveness of any one approach was not supported.

In summary, the literature has stressed that many integration policies, adopted in various areas, are based on services, situations and attitudes particular to that country/state. It is clear that Victoria has adopted many aspects of its policy from elsewhere although many of these aspects cannot be vindicated through research. The prerequisites for many of these aspects were not considered before
adoption. The Victorian and New South Wales policies are then a patchwork of ideas and concepts from practices outside Australia.

Both the Victorian and New South Wales policies need to be examined using the perceptions of those involved in the implementation of these policies and factors perceived as being effective in integrating children with behaviour disorders need to be identified. Once these factors have been identified they need to be included in the construction of a practical classification schema designed to assist practitioners and administrators with decision making in the integration process. If these factors are perceived by some practitioners as being beneficial in the integration of children with behaviour disorders their availability to other practitioners may assist with the ongoing process of integration.
CHAPTER 3
VARIABLES INFLUENCING INTEGRATION EFFECTIVENESS: A REVIEW OF THE LITERATURE

One of the stated aims of this study was to develop a classification schema to assist practitioners with the effective integration of children with behaviour disorders. This classification schema has been developed through a number of stages. The initial stage was to isolate and discuss variables identified in the literature as being essential to effective integration. The next stage was to ascertain whether the identified variables, or any others, were perceived as important by those involved in integration at the school level (e.g. principal, classroom teacher, support staff). The final stage was to construct a classification schema based on a number of variables identified in the literature, and perceived by school practitioners in two states, as important for effective integration (see Chapter 8).

STAGE 1: IDENTIFICATION OF VARIABLES FROM THE RESEARCH.

The variables discussed at this stage include those identified in the literature as important when considering the integration of children with behaviour disorders. While important variables will be discussed it is also important to consider the interaction between variables. Thomas (1982) cautioned, there is "a tendency among researchers to ignore interactions between variables as though each was truly independent. As a result the significance of a variable is much harder to gauge since its effects may be due, in some degree at least, to a separate but interrelated factor" (p. 82). Eleven variables were grouped under two headings; individual and institutional variables, and then examined in detail. Individual variables related to an individual's attitude to integration whether that individual is a teacher, student or parent. Institutional variables related to variables in the integrated environment other than individual ones. Some variables, it may be argued, could be placed in either category, however, they were included in only one category. Each was
examined initially in general terms as to its relationship with integration per se and then examined in terms of its relationship with the integration of children with behaviour disorders.

Teachers' attitudes towards integration was seen by many researchers as a crucial aspect of effective integration (Cagler, 1981; Center & Ward, 1987; Goupil & Brunet, 1984; Harasymiw & Horne, 1976; Harvey, 1985; Horne, 1983; Mitchell, 1976; Vandivier & Vandivier, 1981; Warnock, 1978). The second variable, principals' attitudes was selected due to the fact that a number of researchers recognized that the principal plays a key role in the effectiveness of an integration program (Blklen, 1985; Center et al, 1985; Center & Ward, 1987; Davis, 1977; Gage, 1979; L'Abate & Cureitis, 1975; Lewis, 1974; Melcher, 1972; Oaks, 1979; Paul et al., 1977; Peterson, 1977; Robson, 1981). Parental attitudes has been suggested by researchers as a crucial factor in the effectiveness of integration (Allan & Pearson, 1928; Wendel, 1976). In support Allen (1980) concluded that the role of the parent may prove to be the critical variable in the success of integration.

If integration is to be effective, particularly at a social level, then acceptance by the peer group is essential. In the development of both the Victorian and New South Wales integration policies, the importance of peer group acceptance was clearly stated. Research has shown that of all categories of children, children with behaviour disorders are amongst the most rejected by their peer group (Hollinger, 1987; Sabornie & Kauffman, 1985; Vacc & Kirst, 1977). Therefore, attempts at effective integration for children with behaviour disorders must address the role of the peer group. Apart from research on teachers', principals' and parental attitudes and the role of the peer group, two other variables have been examined under the heading individual variables: teachers' style/personality; and teachers' training.
Teachers' style and personality have been found by a number of researchers (Bishop, 1986; Feldman & Altman, 1985; Gow, 1988; Larrivee, 1982; Rocha & Sanford, 1979; Wang, 1981) to be significant variables in the effective integration of children with disabilities. Additionally, a number of researchers (e.g. Harvey & Green, 1984; Horne, 1983; Stephens & Braun, 1980) have suggested that teachers' training (preservice/inservice) is strongly linked with effective integration. Both of these variables need to be examined in determining the perceived effectiveness of the Victorian and New South Wales policies.

In addition to individual variables a number of institutional variables were chosen. Type of school was selected due to conflicting results (Center & Ward, 1987; Larrivee & Cook, 1979; Parmerter & Nash, 1985) as to whether the number of children enrolled at a school correlated with the effectiveness of its integration program. The location of the school (metropolitan/regional) and its relationship to perceived integration effectiveness resulted in contrasting data. In an attempt to examine the relationship, if any, between the location of the school and perceived effective integration this variable was selected for examination. Classroom climate was included because of support in the literature for the role it plays in the integration process. Classroom climate was cited by Hoben (1980) as the single most important factor in promoting integration and in class support. Morse (1980) claimed that the climate within a particular classroom must be considered before placement of a child with behaviour disorders. Gow et al. (1988) claimed the quality and appropriateness of the program provided was the most significant key to successful integration. The quality and appropriateness of a program was included in the variable curriculum instruction format which examined whether the type of curriculum program, regular (same as peers) or modified, was related to perceived effectiveness of the integration program. The integration format selected to assist the classroom teacher, consultation or resource approach, is an extremely important variable due to the fact that the Victorian and New South Wales policies both reject
a number of widely used approaches (resource teacher approach). It is important to examine whether alternative approaches have been perceived as effective. In the next section, each of these variables will be examined.

INDIVIDUAL VARIABLES

ATTITUDES

Attitude has been described as the way a person may react towards something on the basis of a past experience (Choate, 1958). An attitude can be dynamic in quality and it may vary in intensity (Choate, 1958). This emotional structure, oriented from the perceptual or reactional point of view may shape a person's behaviour (Pieron, 1968). "Attitudes involved how people think about, and are likely to behave toward the attitude object" (Warger & Trippe, 1982, p. 247). According to Cohen (1980) attitudes develop from three dimensions affective (feelings), cognitive (beliefs), and behavioural and, "although expressed beliefs may not always be totally consistent with behaviour or internal feelings, they nonetheless provide an estimate of a person's attitudes and an indication of their possible behaviours" (Hayes & Gunn, 1988, p. 31). It is clear that teacher attitude and behaviour affect student outcomes in various ways.

1. TEACHER'S ATTITUDES

Teacher's attitude to integration in general Teacher's attitudes are seen as one of the crucial aspects of effective integration (Cagler, 1981; Center & Ward, 1987; Goupil & Brunet, 1984; Harasymiw & Horne, 1976; Harvey, 1985; Horne, 1983; Mitchell, 1976; Vandivier & Vandivier, 1981; Warnock, 1978). Larrivee and Cook (1978), observed that attitude maybe a far more potent variable in determining the success of integration than any administrative or curricula scheme. It seems clear that teachers who reject a child with disability in the classroom will induce, to a greater or lesser extent, similar behaviour in their students.
Johnson (1987) and Mandell and Strain (1978) have reported that regular classroom teachers are less accepting of integrating students with disabilities than their special education counterparts. This view was supported by Harvey and Green (1984) who found that teachers who had experience with children with disabilities were slightly more favourably disposed towards integration. It appeared that these experienced teachers were also more relaxed with children with disabilities in their classroom. This view was in direct contrast to the data gathered by Vandivier and Vandivier (1981) who reported no relationship between teachers' attitudes towards integration and previous integration experience. Allen (1978) gathered data from pre-service teachers and found that previous experience in fact increased negative attitudes towards integration.

The attitudes of teachers, with or without experience in teaching children with disabilities, are as varied as are those between teaching and non teaching educators (e.g. principals, consultant(s)). Barngrover (1971) found that regular classroom teachers preferred special classes for children with disabilities while non teaching educators (e.g. principals) preferred integration. These views were not supported by Gullotta (1974) and Center and Ward (1987) who found that teachers were prepared to keep children with disabilities in their classes provided that necessary support was maintained (although in the Center & Ward study this was not the case for children with behaviour disorders. Teachers indicated that they were not "enthusiastic about integrating any children with behavioural disabilities" Center & Ward, 1987, p. 45). The concern by teachers for adequate support/resources was also evident in the results of the interviews carried out on sixty two classroom teachers by McGrath et al. (1986). The results gathered in the McGrath et al. study indicated that teachers were supportive of integration but were very critical of the level of support services. The type/level of school (secondary or primary/government or catholic) appears to have some influence on teachers' attitudes also.
Studies have indicated a difference in attitudes towards integration between primary and secondary teachers (Ringlaben & Price, 1981; Stephens & Braun, 1980). Primary school teachers in general are more willing to accept a child with disabilities in their classrooms. This apparent positive attitude displayed by primary teachers may be influenced by the age of the child. Larrivee and Cook (1979) discovered that teachers' attitudes towards integration tend to become less positive as grade level increases. The Larrivee and Cook result must be considered with caution as only a little over 50% of the teachers contacted responded to the questionnaire. The sample was selected from six New England states in the United States, a factor which must be considered when linking the results to other locations. As indicated by Knoff (1985), teachers' attitudes vary depending on the state in which they teach and that states particular integration strategies. Despite the need to accept the Larrivee and Cook results with some caution the results achieved were supported elsewhere in the literature (e.g. Bender, 1986).

Whether the school is a government or non government school also appears to have an effect on teachers' attitudes (Center & Ward, 1987). The data collected by Center and Ward, using a number of questionnaires, suggested that teachers in Catholic schools were more supportive and positive about integration than teachers in N.S.W. Government schools. The authors suggested that this result is due in part to the increasing number of children with behaviour disorders found in the government sector, "which has tended to become the repository for deviant students not accepted by the other two systems" [Independent and Catholic], (Center & Ward, 1987, p. 45).

It would appear that in examining the perceived effectiveness of integration programs the attitudes of the teacher are influential. These attitudes can be affected by type of school, experience with children with disabilities and age of the child. Other variables, marital status, size of municipality and having children with
disabilities in the family have a less than clear effect. According to Stephens and Braun (1980), the latter variables were not significantly related to teachers' attitudes towards integration. Some other variables, e.g. gender of the teacher and years since graduating, have achieved conflicting results. Higgs (1975) and Harvey and Green (1984) found female teachers were more positive in their attitude towards integration. In contrast Berryman (1981), Foley (1978) and Hughes (1978) found no relation between gender and attitudes towards integration. Research into the variable; number of years since graduating, is also unclear. Berryman and Berryman (1981) found that younger teachers had more positive attitudes towards integration than older teachers. In support Bradshaw (1987a), Harvey and Green (1985) and Wager and Trippe (1982) all found that pre-service teachers are generally favourably disposed to the concept of integration. It could be argued logically that pre-service teachers are more positive than practising teachers in regard to integration because they lack practical experience and are hence simply reflecting their philosophy on integration. Center et al. (1988) claimed that attitude towards integration is not related to experience, but rather, teachers base their "attitudes towards mainstreaming on the outcome of the current situation" (p. 45). Thus, if the child were perceived by the teacher as being successfully integrated, then that teacher's attitudes would correspondingly become positive. In relation to attitudes towards integration, other variables which have been found to have some influence included: the locality of the school; absence of a special class in the school; and level of training.

While results suggesting a link between the locality of the school and perceived integration effectiveness are unclear, the attitudes of teachers in particular localities did appear to be influenced by a certain factor: how successful the teachers perceived the placement. Larrivee and Cook (1979) found that teachers' perceptions of success is a critical factor and teachers in rural areas perceive themselves as being less successful. The authors describe this perception of
success as "perceived knowledge of ones technical ability as a teacher" (p. 13). This feeling of confidence and its relationship with positive attitudes towards integration was also noted by Harvey and Green (1984). If metropolitan teachers perceived themselves as being more successful then, as Stephens and Braun (1980) noted, that confidence would make them more willing to integrate children with disabilities than those teachers who were not so confident (p. 292).

The presence of a special class in the school and the level of training a teacher receives have also been linked to attitude towards integration. Research in Australia (Center & Ward, 1987), and overseas (Jensen, 1979) has indicated, that the absence of a special class in the school tends to produce more favourable attitudes towards integration. The level of training a teacher receives in special education has also been linked to positive attitudes and effectiveness of the integration program. (this variable will be discussed in a subsequent section).

Teachers' attitudes are crucial in the examination of perceived program effectiveness because teachers' attitudes can influence the perceptions of the child's peers, staff and parents in addition to the child's attitude towards their disability and their integration program. This influence is particularly relevant when one examines the perceived effectiveness of integration programs for children with behaviour disorders.

**Teachers' attitudes towards the integration of children with behaviour disorders.** As has been previously stated educators hold more negative attitudes towards the child with behaviour disorders as a group than towards most other groups of exceptionalities (Badt, 1957; Coleman & Gilliam, 1983; Haring, Stern & Cruickshank, 1958; Kingsley, 1967; Dyck & Kappes, 1979). While these negative attitudes are linked to academic and social programs it would appear that the area of greatest concern to regular classroom teachers, and hence the factor that creates
the most negative attitudes, is the child's behaviour and the difficulty in developing appropriate programs and strategies to assist the child in developing more appropriate behaviours.

Concern over behaviour control strategies may in fact be related to the labels "behaviour disordered" and "emotionally disturbed" rather than the actual behaviour of the children. Lewin et al. (1983) noted, after surveying a number of student teachers, that aggressive, outspoken and disruptive children were frequently rejected by the student teacher and that even when reported success in decreasing the child's disruptive behaviour was signalled the student teachers' attitudes toward the children did not change. The authors concluded that childrens' behavioural change is not sufficient to cause teacher attitudinal change. The results support the findings of Brophy and Good (1974) who found that it is not the child's behaviour that leads to the teacher's attitude rather the teacher's perception of that behaviour. In support, Algozzine et al. (1977) claimed the rejection of children with behaviour disorders by teachers is due in some part to the relationship between the child's behaviour and other attitudes towards the behaviour as determined by the label assigned to the child. The attitude adopted by the teachers may in fact lead to a self-fulfilling prophecy of failure (Algozzine, 1977; Freshback, 1969; Wickman, 1978).

Certain types of behaviour appear to influence teachers' attitudes more so than others. Aggressive behaviour has consistently been identified as the most disturbing behaviour for regular classroom teachers (Algozzine, 1977; Herr, Algozzine & Baves, 1976; Mooney & Algozzine, 1978; Rohrkeper & Brophy, 1979; Walker, 1979). Coleman and Gilliam (1983) surveyed 139 teachers of grades first through to sixth to classify a series of behaviour clusters frequently exhibited by children with behaviour disorders. The results indicated that teachers had the least favourable attitudes towards students whose presenting behaviour was aggression.
towards both teachers and peers. The authors concluded that students who do not interfere with the classroom structure and routine and therefore do not require more of the teacher’s time and energy are generally received by teachers in a positive way. Conversely, Walker (1979) found that aggressive children tend to monopolize the teacher’s time. The literature has indicated that teachers tend to have a negative attitude towards children with behaviour disorders. The literature poses two questions: can perceived program effectiveness be improved by changing teachers’ attitudes and what is the most effective way to change teachers’ attitudes? 

The literature has suggested that teachers’ attitudes towards the child with behaviour disorders are very hard to change and that attempts to measure the effectiveness of methods, designed to change these attitudes, achieved conflicting results. The debate over which is the most appropriate method has a two-pronged approach: what form should the training take and for how long should the training last? The type of training programs suggested are varied. Johnson (1987) claimed that, while teachers do develop skills as a result of in-service activities, basic negative attitudes towards integration are unchanged. A more prolonged training period for improving teachers’ attitudes towards integration was supported by Klinger (1972). Beare (1985), on the other hand, argued that a workshop approach to in-service training appears to be ineffective and that pre-service education appears to be more productive. Beare claimed that influencing teachers’ attitudes once they are on the job is a very difficult task. He argued there must be increased emphasis, awareness and skills delivered on a pre-service basis. Beare conducted a workshop in-service type model approach on a number of classroom teachers. In addition to the in-service program, which included behaviour management and life space interviewing, the teachers were also serving a child with behaviour disorders in an advocacy role. Both the workshop group and control group were administered an inventory assessing regular classroom teachers’ perceptions of the effect of
integrating various categories of children with disabilities (The Learning Handicapped Integration Inventory, Watson & Hewett, 1976).

The results indicated there were no significant changes for either the treatment or control group from pretest to posttest. Beare claimed that the results suggested that changes in teachers’ attitudes towards children with behaviour disorders are very difficult to achieve. Exposure to children with behaviour disorders seems to have negated gains made through the in-service. This finding supported the results of earlier researchers (Hall, 1970; Schottel, Iano & McGettigan, 1971) both of whom found that contact with children with disabilities, following delivery of new information, can cause a negative shift in attitudes. The results of the Beare study must be accepted with reservations for a number of reasons. The sample used was very small (13 in the control group and 16 in the experimental group), secondly, all the sample were secondary teachers. Research (Ringlaben & Price, 1981; Stephens & Braun, 1980) has indicated that secondary teachers are not as supportive of integration as primary grade teachers.

Caution must be heeded when discussing the in-service method used in the Beare study, the workshop method. Although the workshop method has been shown to be effective in changing teachers’ attitudes (Harasymiw & Horne, 1975) the concept is opened to many different interpretations. In the Beare study the workshop method was used in conjunction with the advocacy role. It is unclear which variable, the workshop method or the advocacy role, was responsible for the results, or was it a result of their use in combination.

The attitude of teachers to the placement of children with behaviour disorders is unclear and therefore unresolved. Grossi (1981), after reviewing the literature, suggested that the benefits to children with behaviour disorders, in either segregated or regular class settings, are inconclusive. Grossi also noted that
teachers believed that regular classroom teachers would be unable to manage and cater for children with behaviour disorders in the regular classroom setting. This view is supported by Vacc and Kirst (1977) who carried out a questionnaire-type survey on 149 regular classroom teachers. The results indicated that teachers believed that the government education system should be responsible for the education of children with behaviour disorders. The teachers also believed that children with behaviour disorders should be segregated into special classes in a regular school setting. The teachers felt that, while children with behaviour disorders would benefit from being in a regular class, children without disabilities would not. The findings of this study need clarifying somewhat; firstly, the authors received a 68% return rate on their questionnaires. secondly, as Semmel et al. (1979), have pointed out, many of the studies that suggest regular school staff are relatively pessimistic were carried out at a time when integration was a relatively new concept; this study was a typical example. Finally the Vacc and Kirst study was carried out in New York State and as Knoff (1985) noted, compared to other states, New York teachers are not as positive in their attitudes towards integration. This may in some way be related to the fact that New York State, according to Knoff, still categorically label children with disabilities. The Knoff study did however support the notion that teachers believe special education settings are more effective and more preferred than regular classrooms for children with behaviour disorders. In support, Center and Ward (1987) and MacMillan et al. (1976) suggested regular classroom teachers in general are not enthusiastic about having to integrate children with behaviour disorders. Campbell, Dobson and Bost (1985) Braaten et al. (1987) and Johnson (1987) all stressed that children with behaviour disorders should be segregated, even if only for a short time in some cases. While support for segregated classrooms was evident it was not unanimous.

In summary, the literature has suggested that the attitude of regular classroom teachers is crucial to perceived program effectiveness. Teachers' attitudes
towards the integration of children with behaviour disorders tend to be negative and research on efforts to change such attitudes is inconclusive. There are a number of factors which influence attitude and these must be considered when examining program effectiveness. In general, the majority of the literature supported Power (1983), who regarded teachers and their attitudes as the principle agents in the integration of children with disabilities. The view, however, is not unanimous. Thomas (1985) claimed, "in many cases, the teachers' attitude towards integration seemed to be much less crucial in successful integration than some authorities have suggested" (p. 54). Thomas argued that many children with disabilities can benefit from integration even when the receiving teacher doubts the wisdom of the placement. In the present study the attitude of the teacher will be surveyed using self report inventories, interviews and questionnaires. These attitudes will then be correlated to perceived social integration scores and perceived academic integration scores.

2. PRINCIPALS' ATTITUDES

Principals' attitudes towards integration in general. The key role the principal plays in the process of integration is widely recognised, (Biklen, 1985; Davis, 1977; Gage, 1979; L'Abate & Curtis, 1975; Lewis, 1974; Melcher, 1972; Oaks, 1979; Paul et al. 1977; Robson, 1981). The role of the principal is not simply an administrative one; the principals' attitude can influence the effectiveness of the child's placement. In New South Wales schools the principal has the right to enrol (or not to enrol) the child with special needs. If the principal decides to enrol the child they are expected to "provide a supportive school environment for students with disabilities" (Department of School Education, 1992, p. 7).

Larrivee and Cook (1979) found that the attitude and support of school principals was a major influencing variable in the effectiveness of integration programs. Schuster (1985) in support, claimed, "the principal is identified as the
key individual in the mainstreaming process" (p. 232). The importance of the role of the principal is particularly important when one considers that in many Australian states the major responsibility for integration, according to Gow (1987), is the regular school principal. The attitude of the principal can be influenced by a number of variables.

Center et al. (1985) found that years of service, special education qualifications and teaching/administration experience influenced principals' attitudes towards integration. The authors found that principals who had spent less than seven years as school administrators appeared to be significantly more positive towards integration than longer serving principals. Another variable which can influence principals' attitudes is the category of disability.

**Principals' attitudes towards the integration of children with behaviour disorders**  
Research on principals' attitudes towards the integration of children with behaviour disorders is extremely scarce. Parks (1981) discussed the necessity of a strong relationship with the principal when integrating children with behaviour disorders and Oaks (1979) stated the importance of principals using the same behaviour strategies as the classroom teacher when integrating a child with behaviour disorders. Australian research (Center, Ward, Parmenter & Nash, 1985) has indicated that principals, when considering integration, placed the majority of children with behaviour disorders in the "uncertain" category. The Center et al. study found only those children with behaviour disorders labelled "socially withdrawn" were placed in the positive category by principals.

The attitude of the principal has an important influence on the integration process because it can influence staff, parental, and peer group attitudes. In the present study, the principal's attitude towards integration will be surveyed using both questionnaires and interviews.
3. **PARENTAL ATTITUDES**

Parental attitudes towards integration in general Allan and Pearson (1928) first noted that the attitudes of parents of children with disabilities, toward the disability, were crucial in determining the manner in which the children themselves reacted to the disability. Allen (1980) concluded that the role of parents "ultimately may prove to be the critical variable in determining the success of mainstreaming" (p. 59). Despite the importance of parental attitudes in the perceived effectiveness of integration programs little research is available.

Mlynek, Hannah and Hamlin (1982) commented on the paucity of literature concerning parental attitudes and opinions towards integration. In support, Hayes and Gunn (1988) noted that of the small amount of research carried out on the attitudes of parents most research has been confined to parents of children with disabilities. These comments support the statements of Adey (1979) who stated the importance of gathering data on the parents of non-disabled children as well as parents of children with disabilities. Considering that parents now have a vital role in determining their child's school placement "systematic information concerning their views about mainstreaming is vital" (Mlynek, Hannah & Hamlin, p. 16). Hayes and Gunn (1988) examined the attitudes of parents of non-disabled children and integration. The results of this study indicated that many parents were still uncertain as to the advantages of integration. As the sample group in this study was small the results can only be considered guidelines for further research.

A number of researchers have indicated that many parents support special schools and have concerns about some aspects of integration (Gow et al. 1988; McKinnon, 1970; Steer, 1987; Stephens, 1977). Steer (1987) claimed that many parents who were involved in the formulation of the Victorian policy argued that they had fought hard and long to have special schools "and they were not prepared to permit their children's special needs to be jeopardised" (p. 17). The role of the
parent in the education of their child may well be undergoing a major change. Rees (1980) claimed it is not without significance that the Warnock Committee saw parents as equal partners in the integration process.

With the development of the integration policy in Victoria, the role of the parent has lead to some confusion. Gow (1987) claimed that many parents are unwilling to place their children into schools forced to accept them by law. Pocklington (1980) suggested there may yet be other problem areas associated with parental involvement in education and cautioned that perhaps we are giving over "too much control to the lay person" (p. 23). Despite Pocklington's cautionary tale the role of parents in the integration process, particularly perceived effectiveness of it, is becoming even more important.

**Parental attitudes towards the integration of children with behaviour disorders**

Research on the integration of children with behaviour disorders and parental attitudes has almost been non existent. The lack of research in this area has been linked to an inability on the part of parental groups to lobby for children with behaviour disorders. Braaten *et al.* (1987) suggested the lack of a national advocacy group for children with behaviour disorders may explain why children with behaviour disorders have been overlooked in the definitions of P.L. 94-142. The authors decided that "there is little sympathy for students who drop out or are elbowed out and little understanding of those who are socially withdrawn or depressed" (p. 6).

While there is a lack of research on parental attitudes towards the integration of children with behaviour disorders, Metsel and Friedland (1978) make reference to the fact that integration programs based on the child's social and academic needs may not be able to meet therapeutic needs presented by the parents. It is argued that the treatment of the child may require changes in the
style of the parents and that parents, particularly those of children with behaviour disorders, have to be involved in the intervention program. Many children with behaviour disorders come from disturbed or ineffective family situations and the importance of that family in perceived program effectiveness cannot be oversimplified. Parental involvement in the intervention program is essential, however, this intervention should take place away from the school environment as the school may not be the most appropriate place in which to change parental behaviour.

If parental attitudes are not positive than the integration program has less chance of being perceived as effective. Parental attitudes must be considered when examining program effectiveness. In the present study parental attitudes have been surveyed using questionnaires.

4. **PEER GROUP ACCEPTANCE**

*Peer Group acceptance of integration in general* Pitts (1986) in a review of the literature, claimed that in relation to the social acceptance of children with disabilities, children without disabilities may well reflect public acceptance but private rejection. When reviewing the research on the acceptance of children with behaviour disorders by their peer group, the evidence indicates overwhelmingly that the child with behaviour disorders is socially rejected. Research has shown repeatedly that children with behaviour disorders are amongst the most rejected of all categories of children (Cowen, Pederson, Babigian, Izzo & Trost, 1973; Hollinger, 1987; Morgan, 1977; Newman & Simpson, 1983; Pekarik, Prinz, Liebert, Weintraub & Neale, 1976; Sabornie, 1985; Sabornie & Kauffman, 1985; Shores, Histe & Strain, 1976; Strain, 1977; Vacc, 1972; Vacc & Kirst, 1977; Weintraub, Prinz & Neale, 1978).
The majority of research surveying peer group acceptance of children with behaviour disorders has been carried out using sociometric activities. Vacc (1972) undertook sociometric activities on children with behaviour disorders in mainstream settings and found that children with behaviour disorders were not accepted by their class. No child with behaviour disorders in the Vacc study was classified as a star and the number of isolates was higher amongst the behaviour disordered group. Ray (1985) however was critical of the use of sociometric instruments to measure peer group acceptance, arguing that these types of instruments may not reflect actual interaction, particularly behavioural. Using teacher ratings, sociometric ratings and direct observation Ray found that children with disabilities have a much greater chance (nearly twice as much as non disabled) of being isolated and rejected. Ray's data also indicated that teachers' ratings and sociometric activities supported each other but direct observation did not. La Greca and Stark (1986), in supporting the criticism of the sole use of sociometric activities, argued that sociometric data does not provide information on social behaviour deficits. The authors stated that to assess the behaviour dimensions naturalistic observations must be used. More than naturalistic observation may be needed as recent research (Bain, Houghton & Farris, 1991) has indicated that there is little correlation between teacher rating and teachers' direct observation suggesting that as many methods as possible should be utilised to gather data on behaviour. In the present study teachers' ratings, observation in a variety of settings and sociometric scales have all been utilized to gather the most reliable and valid data.

**Peer Group acceptance of the integration of children with behaviour disorders**

A substantial body of research has examined the social acceptance of children with disabilities in terms of gender differences. Thus a number of studies (Greenbaum & Wang, 1965; Newman & Simpson, 1983; Simpson, Parish & Cook, 1976) have found that not only are girls more accepting of disabilities in general but also of behaviour disorders. Evans and Simmons (1987) arranged a series of physical education
lessons between a number of children with disabilities from a segregated special school and a neighbouring regular school. After forty five minutes once a week of joint activities the students were asked, via a questionnaire, their reactions to the shared lessons. The results indicated that girls were more accepting of students with disabilities. The authors are quick to point out that the type of lesson, P.E., may have been a unexplored variable as the particular expectations of P.E. lessons to boys may have been different to girls.

Dublin and Fisher (1981), in contrast to the Evans and Simmons study, found girls to be less accepting of children with behaviour disorders. This study included mainstreamed children with behaviour disordered in grades three through to six. The sample included 23 children with behaviour disorders and 553 non-disabled students in 19 classrooms from four schools. Using two factors: the peer group's attitudes towards children with behaviour disorders; and secondly the self esteem of the child with behaviour disorders, the authors attempted to monitor the effects of training upon the attitudes of primary aged children. The children were presented with eight one hour training sessions on disabling conditions once a week for eight weeks. The children were administered a pretest and a posttest "attitude towards disabled person scale". Each of the classes had children with behaviour disorders in them so the children were also familiar with the practicalities of these situations. The results indicated that the treatment group increased their acceptance level while the control group decreased their acceptance of children with behaviour disorders. More interestingly the girls appeared to be less accepting of children with behaviour disorders than the boys. The results suggested that, apart from the gender findings, instructional programs can improve the attitudes of peers towards children with behaviour disorders. The authors called for a training program on disabling conditions to be implemented in primary classes which contained children with behaviour disorders. The view that the influence of labelling can be reduced through training programs would in be conflict with labelling
Theorists such as Pirozzo, 1986, who argued that labels, and their effects tend to remain fixed.

The importance of the peer group becoming familiar with disabling conditions is supported by Simpson and Edwards (1980). The authors discussed the importance of integration teachers discussing with the regular classroom peer group such topics as: concepts of exceptionality; similarities and differences between regular and special education pupils; and famous people with disabilities.

Perhaps the most successful programs in assisting the peer group to accept children with behaviour disorders are the social skills training programs. It has been suggested in the research that children with behaviour disorders can be improved to the point that they are more likely to be accepted by their regular classroom peers (Gresham, 1982, 1986a; Hollinger, 1987; La Nunziata, Hill & Krause, 1981; Lebsock & Salzberg, 1981; McGrath et al. 1986). The argument has been put forward (Hollinger, 1987) that children with behaviour disorders lack the skills to interact in socially acceptable ways and thus are often rejected by their peers. Hollinger suggested "conducting social skills training in the peer group may be an effective way of addressing the social adjustment problems faced by mainstreamed behaviourally disordered children" (p. 24). The author stressed that the regular classroom peer group should also be targeted for a social skills program if successful integration is going to take place. Flint (1987) argued that much of the social rejection a child with behaviour disorders receives from peers may be due to the fact that there are too many peer variables interacting at once. Flint suggested that specific steps need to be taken to reduce the number of peers to whom the integrated child is exposed.

One of the most important aspects of integration, especially social integration, is acceptance by the peer group. It is therefore important when
examining perceived program effectiveness to consider peer group attitudes. If the peer group rejects the child, and research suggests that children with behaviour disorders are in the high risk category, then integration, particularly social, will not be effective. Data on gender acceptance, the use of social skills programs, the use by regular classroom teachers of disability awareness programs and whether children with behaviour disorders are being accepted socially all need to be examined. Any of the above variables which has a positive or negative influence on perceived program effectiveness needs to be isolated and examined.

5. TEACHERS' STYLE/PERSONALITY

Teachers' Style and Personality and Integration in General  Kavale and Hirshoren (1977) argued that for the effective teaching of children with behaviour disorders a number of teacher variables need to be considered. Ideally the teacher needs to be competent in a number of areas including educational assessment, remedial teaching and behaviour management. But Kavale and Hirshoren also claimed that "the behaviour disordered child reacts not only to the methods but also the manner of the teacher, the total personality" (p. 5). A teacher's personality is not only important for children with behaviour disorders but for integration programs in general.

Research (Feldman & Altman, 1985; Gow et al. 1988) has suggested that a teacher's personality is one variable which affects teachers' attitudes towards integration. Wang (1981) considered other personality factors such as resourcefulness, diverseness and flexibility as the main requirements of an integrating teacher. Additionally, Rocha and Sanford, (1979) felt that an effective integrating teacher should be patient and understanding and have the ability to recognise and provide for individual differences as part of their personality makeup (arguably the requirements for all teachers). Not only has research singled out
teachers' personality as an important variable in the integration process but also teacher competencies.

Redden and Blackhurst (1978) carried out a survey on primary grade teachers to identify specific competencies teachers regarded as necessary to integrate children with disabilities. The results outlined six main functions and thirty two competency statements. The six main functions isolated were: the ability to develop orientation strategies for integration entry; the ability to assess needs and set goals; the ability to plan teaching strategies and use of resources; the ability to implement teaching strategies and use of resources; to facilitate learning and to evaluate learning. When examining the implications of this study there is one major drawback: the small sample return. Only 184 of the original 493 questionnaires posted were returned, a response rate of approximately 40%. Using a similar survey instrument, Ringlaben and Price (1981) surveyed teachers' attitudes through the use of a twenty two item questionnaire and added some additional traits considered relevant to integration effectiveness. The authors randomly surveyed 250 teachers in grades kindergarten through to year twelve in both rural and small city schools. The results of the survey indicated that the educational and social philosophy held by teachers was an important teaching factor in the integration process. The traits isolated in the research as important for integration effectiveness for children with behaviour disorders (and other disabilities) appear to be the same as for teaching children without disabilities.

**Teachers' Style and Personality and the Integration of children with behaviour disorders** Kounin et al. (1966) found that the teachers who most successfully managed regular classroom children were also the most successful in educating children with behaviour disorders. It would appear that the extent to which the child with behaviour disorders disrupts the peer group is closely related to how the teacher controls the rest of the class. Galloway and Goodwin (1987) and
Vacc and Kirst (1977) supported the concept of 'effective classroom teacher - effective teacher of children with behaviour disorders'. In contrast Braaten et al. (1987) claimed that "it is a delusion to assume that all teachers can or should develop either tolerance for or expertise in managing the unusual behaviour deviance exhibited by behaviourally disordered students" (p. 8).

The ability of the teacher to cope effectively with children with behaviour disorders in the regular classroom may well relate to the teacher's ability to adapt to the type of delivery service adopted or the type of behaviour exhibited. Peterson, Zabel, Smith and White (1983) found teachers of children with behaviour disorders utilized their time differently depending on the mode of the delivery service. Not only do teachers vary their time utilization, but also have personal preferences for certain types of children with behaviour disorders. This finding occurred in other research. For example Edwards and Simpson (1980) found that some teachers were more tolerant and successful with passive-aggressive children while others were more effective with those displaying conduct disorders. Individual teachers undoubtedly differ in their degree of tolerance for specific behaviours (Gesten, Cowen, DeStefano & Gallagher, 1980) thus their expectations and ultimate interactions could be influenced by the their tolerance of certain behaviours (Algozzine & Curran, 1979; Curran & Algozzine, 1980). Morse (1980) argued that there are regular classroom teachers "who are able to interact usefully with socio-emotionally disturbed children though they never took a course, did not know the terms, and could not describe what they do" (p. 349). Morse stressed that in relation to integration we had better seek out the natural human resource who are already committed rather than trying to win over the whole profession. "We should try to upgrade the willing workers before we attempt to take the teachers who have negative attitudes and reform or change their whole style of behaviour" (P. 162).
The teaching style/personality of the teacher is an important variable in the effectiveness of integration programs. Clearly certain teacher behaviour assists the integration process in a positive way. Teaching traits such as flexibility, positive attitude, ability to adapt to delivery services all, the literature has suggested, are important not only in integrating children with behaviour disorders but for teaching in general.

In the present study teachers' style/personality was surveyed using the Observer Rating Scale. The scores gained on this scale, under various sections, will be correlated with other variables to examine whether there is any relationship between personality/style and perceived integration effectiveness.

6. TEACHERS' TRAINING

Teachers' Training and integration in general A number of researchers (Harvey & Green, 1984; Horne, 1983; Stephens & Braun, 1980) have found evidence linking effective integration to special education courses undertaken by the classroom teacher. As research (Cagler, 1981; Center & Ward, 1987; Harvey, 1985) has linked teachers' attitude to effective integration the examination of teacher training as a factor in the perceived effectiveness of integration programs is warranted. Harvey and Green (1984) found that the variable which showed the strongest association with attitude towards integration was a special education course. Paul, Turnbull and Cruickshank (1977) argued that teacher training is one of the key variables in the ultimate success of integration. The authors claimed teachers must be prepared attitudeinally and provide the relevant knowledge and skills to maintain the integrated child in the regular classroom. An argument is put forward that major training at pre-service and at in-service levels must be developed.

A considerable body of research has identified the need for additional training for teachers so as to assist the integration of children with disabilities
(Keogh, Kukic, Becker, McLoughlin & Kukic, 1975; Keogh & Levitt, 1976; MacMillan, Jones & Meyers, 1976; McGinty & Keogh, 1975; Murray 1974). Paul, et al. (1977) regarded it as essential that every teacher prior to integration should: 1. help in a special class, 2. attend a seminar on the learning needs of disabled children, 3. take part in a workshop on the methods and materials of teaching disabled children and, 4. work alongside a special educator on the problems of a child with special needs in the classroom.

On the Australian scene Center (1987) noted that research has indicated that special education qualifications are instrumental "in lowering resistance to mainstreaming for both principal and teachers across all educational systems" (p. 78).

While researchers have generally agreed on the link between special education courses, attitudes and effective integration much debate has taken place over when the course should take place, for how long it should take place and what strategies are most effective. Changing ones attitude, argued Power (1983), represents the most difficult goal of any course. Warger and Trippe (1982) claimed that training for integration must be addressed at the pre-service level to ensure that negative attitudes are not perpetuated. Research (Lane, 1976; Peters, 1978) supported the effects of pre-service training. Further support was offered by Johnson (1987) who found that basic negative attitudes towards integration remained virtually unchanged after in-service. Noble (1988) tapped pre-service student teachers attitudes to integration before undertaking a course on integration during their teacher training course. The results of this study indicated an increase in awareness and a change to a more positive attitude towards integration for a majority of students. The change wasn’t substantial and Noble noted that this change might have been subdued somewhat due to, "the students hesitation to volunteer for possibly a more challenging grade in their first year of teaching" (p. 6).
Many suggestions have been put forward as to why in-service is not as effective as it should be.

Klinger (1972) argued that a more prolonged training period may be needed before attitudes can clearly be seen to change. Ringlaben and Price (1981) stated teachers' preparation for integration is not necessarily best administered through in-service but rather academic preparation. The authors agreed that in-service may affect some attitudes but academic preparation along traditional coursework lines may be more effective in preparing teachers. Leyser, Abrams and Lipscomb (1982) suggested a pre-service course combining academic study and supervised special needs placement was successful in improving the professional confidence of teachers in coping with integration. Harasymiw and Horne (1976), stressed that an in-service course must contain a strong element of supervised contact and that a theoretical approach by itself has little impact on the students. In contrast Johnson and Cartwright (1979) found that short theoretically based courses in special education were helpful.

Research has also hinted at the usefulness of laboratory work in changing teachers' attitudes. Yates (1973) found that in-service training consisting of laboratory work enhanced teacher's knowledge and promoted more favourable attitudes towards integration. Gans (1987) suggested that the importance of increasing knowledge and skills in order to enhance teachers' attitudes towards integration may be over emphasized; "That teachers continue to express dissatisfaction with their current level of expertise may represent a perpetual concern rather than one which will decrease with intervention" (p. 44). Gans suggested that in-service programs that were part of teachers' everyday daily routines would permit greater emphasis than 'off the job' in-service programs would.
Stephens and Braun (1980) found the number of special education courses taken relates to willingness to integrate. This is in direct contrast to Harasymin and Horne (1976) who report that whilst teachers following a course in special education expressed more liberal opinions about the manageability of children with disabilities their basic attitudes towards the children with disabilities and integration did not change. Conversely, Buttery (1981) found a negative change following a course on integration.

The literature has hinted at the importance that training in special education has on teachers' attitudes towards integration, however, training in special education may have one drawback. Ringlaben and Weller (1981) cautioned that the training of special educators had often been responsible for the apparent gap between regular class teachers and special educators.

Teachers' training and the integration of children with behaviour disorders
Research examining the relationship between the effective integration of children with behaviour disorders and the role of in-service/pre-service training is scarce. Bullock et al. (1985) carried out a survey on one thousand and seventy eight children with behaviour disorders in five different settings. The results indicated that the behaviour of the children was quite diversified. The authors suggested this is in direct contrast with teacher training practice which assumes all children with behaviour disorders demonstrate similar behaviours. The authors concluded, "if differences exist between students in various settings, then in-service training should be designed to address the specific needs of the particular setting" (p. 129). This multidimensional approach is supported by Mesinger (1982) who called for the emphasis on teacher training to be multi-categorical so the teacher can become competent with many different areas of behaviour disorders.
Beare (1985) carried out an in-service program to find if regular classroom teachers' attitudes towards integrating children with behaviour disorders can be changed. The teachers were given six days of in-service training where information was conveyed on working with children with behaviour disorders. This program was delivered concurrently with the teachers serving in a child advocacy role with a child with behaviour disorders. The results indicated that there were no significant changes in the teachers' attitudes. Beare suggested that exposure to children with behaviour disorders negated gains made through the in-service program and that in relation to training teachers of children with behaviour disorders, "the workshop approach, based on present research evidence appears not to be the efficacious method as was perhaps assumed. What would seem to be more effective is increased emphasis on pre-service education" (p. 11).

The literature has indicated a relationship between training and integration effectiveness. In examining perceived program effectiveness the training of the teacher needs to be considered. In the present study teachers' and principals' training in special education will be examined using questionnaires. Examination also needs to take place to ascertain if there is any relationship between training, type of training, length of training and perceived effective integration programs.

INSTITUTIONAL VARIABLES

7. TYPE OF SCHOOL

Type of school and integration in general. In assessing the effectiveness of integration very little research has been undertaken on, or indeed included, the variable of school type. School type in this study will refer not only to type of school (government or non-government) but also the number of children enrolled in the school (the size of the school). The size of the school was included in a study by Larrivee and Cook (1979) who found, after questioning 941 teachers, in kindergarten
through to year 12, that the size of the school appears to be unrelated to teachers' attitudes towards integration. Caution must be taken however as the study was carried out in one region (New England) of the United States and may not truly be representative of all teachers' attitudes. In contrast Bishop (1976) found that the size of the school had an effect on attitudes towards integration. Bishop found that students who attended large high schools were more accepting of integration than those from small high schools. These results were supported by Lazar (1973) and Robinson (1977) who reported that school size was a small but significant factor in determining attitude towards integration. Attitude has been shown previously to be closely related to program effectiveness. If school size effects that attitude formation than it must also be examined when considering perceived program effectiveness. In addition to school size, whether the school is a government or non-government has been found to have some effect on integration effectiveness.

Australian research (Center & Ward, 1987; Center, Ward, Parmenter & Nash, 1985) has found that teachers and principals in catholic schools were more supportive of integration than their counterparts in the government system. The authors also reported findings that suggest rural school teachers perceived themselves as being more effective in the integration of children with disabilities than teachers in metropolitan areas. In support Payne and Murray (1974) and Oveline, (1977) found rural school personnel more positive concerning integration than urban school personnel. An additional variable to be considered is class size. Mathey (1977) and Mandell (1976) found that class size was cited as a major concern by teachers in their willingness to integrate.

Other research (Ringlaben & Price, 1981; Stephens & Braun, 1980; Zingmond, Levin & Laurie, 1985) has suggested that primary school teachers/principals appear to be more positive about the integration of children with disabilities than secondary school teachers/principals. These results have suggested the level of the school
(secondary or primary) may have an effect on program effectiveness. As this study will only survey state primary schools many possible relationships cannot be fully investigated.

In the present study only state primary schools were surveyed hence class size and school size were the only 'school type' variables to be examined. In addition two of the schools in the present study were prep to year twelve (consolidated) schools. As there were only two schools in this category few valid assumptions can be made. Research has shown a relationship between attitudes towards integration effectiveness and school type. When examining perceived program effectiveness it is important to consider 'school type' variables as they may indirectly affect the teacher's attitudes hence perceived effectiveness of the program. 'Type of school' variables were examined via the classroom teacher's questionnaire and correlated with a number of other variables to investigate any relationships with may enhance perceived integration effectiveness.

**Type of school and the integration of children with behaviour disorders** No research was found that specifically dealt with the integration of children with behaviour disorders and type of school attended.

8. **LOCATION OF THE SCHOOL**

**Location of the school and integration in general** Research into the relationship between the geographical location of the school and perceived effectiveness of integration programs has been conflicting. Stephens and Braun (1980) found no significant correlation between the size of the area/region and attitudes towards integration. In contrast, DeLeo (1976) found a relationship, albeit small, among educators' views on integration success and the size of the area in which they taught. Research has indicated that the question of a relationship
between perceptions of integration success and location of the school are still unclear (Center et al. 1985; Larrivee & Cook, 1979).

The Center et al. study found that teachers/principals in country schools have a more positive attitude to integration than teachers/principals in metropolitan areas (as discussed in the previous section). The results of the Larrivee and Cook study indicated that perception of success is a critical variable in integration. Larrivee and Cook found that teachers in rural areas perceive themselves to be less successful in the integration process than teachers in urban areas.

In the present study, the location of the school will be correlated with perceived social integration score (PSI) and perceived academic integration score (PAI) to examine whether there is any relationship between the geographical location of the school and perception of integration effectiveness, socially and academically. The schools surveyed were from all localities: metropolitan areas; large regional cities; small country towns; and small rural communities.

Location of the school and the integration of children with behaviour disorders: No research was found which dealt specifically with the location of the school and the integration of children with behaviour disorders.

9. CLASSROOM CLIMATE

Classroom climate and integration in general: In a provocative study Rutter et al. (1979) hypothesized that a large number of variables characterize the classroom climate. The most successful schools in the Rutter study were characterized by prompt starts, well presented pupil's work displayed on the walls, clear and generally high expectations on completion of work, generally low rates of punishment and relatively high rates of positive recognition for good work or
behaviour. These factors, which constitute classroom climate, would also appear to be most important in integration effectiveness (Center et al. 1988).

Hoben (1980) stressed: "how the teacher structured the activities and established the tone of the classroom was the single most important factor in promoting integration" (p. 104). The importance of the classroom climate to the success of integration programs was also found by Simpson and Edwards (1980) who suggested that a favourable classroom climate is essential if integration is to be effective.

To determine which type of classroom climate enhances perception of effective integration classroom climate needs to be examined from two different perspectives: learning methods and the structure of the activities; and secondly, classroom control and support strategies. Johnson and Johnson (1986) suggested that a co-operative learning environment compared to other learning situations (individual and competitive) promotes more positive relationships between children with disabilities and non disabled students. This view has been restated elsewhere in the literature (Johnson & Johnson, 1975, 1978, 1983, 1984c, 1985a; Johnson, Johnson & Maruyama 1983). Madden and Slavin (1983), after reviewing the literature on learning outcomes and the integration of children with disabilities, also suggested that the climate of the classroom for integrated students will be improved by the use of non-competitive methods.

A number of other learning methods have been suggested to assist the classroom teacher in catering for children with disabilities in the regular classroom. These methods include: multi-age grading, team teaching and peer tutoring (Wang, 1981), a predictable routine (McGrath et al. 1986), and role playing (Wood & Miederhoff, 1988).
When considering issues in classroom control and support strategies, a number of recent studies and reviews have addressed the area of children with disabilities. Wang (1981) for example highlighted the critical need for an effective support system: the child must have supports if needed e.g. time out areas. The classroom format then needs to contain a certain amount of structure yet be flexible enough to allow support services to operate unhindered. Bickie and Bickie (1986) and Johnson (1987) suggested a number of structured yet flexible considerations, including: time out areas; classrooms which are open and provide direct instruction in small, self contained areas; and the pairing of students with regular classroom teachers according to learning and teaching styles.

**Classroom climate and the integration of children with behaviour disorders**

When examining programs to assist in the integration of children with behaviour disorders, a number of practical strategies have been recommended and adopted. Kavale and Hirshoren (1977) suggested that, since no one theoretical approach has been shown to be superior, it is worth considering most concepts and models to ascertain which is most appropriate for the individual child being integrated. Classroom milieu has been suggested as an important factor in the integration of children with behaviour disorders (Morse, 1980). Morse discussed the importance of classroom milieu in terms of the mental health resource index (see Figure 1 in Chapter 2). Morse argued various classrooms differ on this index, "there are stable resilient groups which absorb and diminish the outburst of a deviant child. Some go further and reach out in an empathic way to help a troubled child. Other groups have such a low margin or are already saturated with problems that a precarious marginal balance can be destroyed with an addition" (p. 350). Morse cautioned that the "peer culture can be a mainstream resource or disaster" (p. 351). In the case of children with behaviour disorders classroom teachers must choose (or develop) the correct classroom milieu. The literature has proposed certain strategies which will assist in the creation of this climate.
Meisels and Friedland (1978) suggested a number of guidelines for teachers when dealing with children with behaviour disorders including: a willingness to accept more disruptive behaviour; a need to be aware of interpersonal and environmental reinforcement; a need to modify limit setting; and to devise rules and restrictions with clarity, consistency and in attention to consequences. The authors further recommended that teachers integrating children with behaviour disorders need to maintain Morse's mental health resource index balance. Maintaining this balance can be done by learning techniques of explaining and interpreting children's actions in behaviourally observable terms thus making it clear to themselves and the non-disabled children the implications of the behaviour. The classroom milieu can be maintained at a responsive level by the teacher setting realistic academic goals for the child with behaviour disorders. These goals may be encouraged by using consistent behaviour management strategies (McGrath et al. 1986), establishing predictable routines (McGrath et al. 1986, Meisels & Friedland, 1978; Saunders, 1987), contingency contracts and seating positions (Simpson & Edwards, 1980), avoidance of sarcasm (Cooke, 1981), token economies (Van Nagel et al. 1980, Karraker, 1977), and peer tutoring, teacher modeling and special friends programs (Biklen, 1985).

A number of intervention/support/adjustment approaches, to help integrate the child with behaviour disorders, have been suggested in the literature. These approaches include: Therapeutic Milieu (Redl, 1959); Crisis Intervention (Morse, 1976); Behaviour Modification (Hewett, 1968), Life Space Interviewing (Redl, 1959), Reality Therapy (Glasser, 1965), Precision Teaching (Kunzelman, 1970), Ecological Management (Hobbes, 1966), Prescriptive Teaching (Peters, 1965) and many more.

Other research (Flint, 1987; Riester, 1984), has identified a number of controlling strategies which help maintain appropriate classroom climate. Flint suggested a time out room, the limiting of stress and low stimulus levels within the
room, while Riester stressed the importance of positive feedback, time out, contracts, classroom rules, reminding students of the consequences of negative behaviour and maintaining an instructional focus.

In summary, the research has suggested that the effective climate for all learning is the climate that is most effective for children with behaviour disorders. The literature has also suggested a strong link between an effective classroom climate and effective integration. The factors which need to be monitored to ascertain an effective classroom climate include: co-operative learning situations; positive feedback; level of structure; variety in instruction modes; and appropriate peers & teacher approaches.

When examining perceived program effectiveness the climate of the classroom needs to be included and the best way to examine this classroom climate is to observe classroom interactions. In the present study, classroom climate will be examined using the observer rating scale. The rating scale will be described in a subsequent chapter.

10. CURRICULUM SELECTION

Curriculum selection and integration in general. Gow et al. (1988) claimed, "probably the most significant key to successful integration is the quality and appropriateness of the program provided for the individual student" (p. 17). Skyes (1989) stated more emphatically that the quality and appropriateness of the program provided is "the single most important factor in successful integration" (p. 103). Both authors have stressed the need for a balance between appropriate educational programs and social interaction and that this interaction needs to be 'orchestrated' by the teacher. The question which remains is what are the appropriate programs to achieve this orchestrated balance?
It has been argued that an open plan classroom organization is able to adapt to the concept of integration more readily than other more traditional methods of organization (Saylor & Alexander, 1974). This view, however, is not unanimous. Mandell (1976) found that an open plan organization was not significantly correlated with teacher's acceptance of integration, however, team teaching may be a variable worth considering. Mandell's work has been criticised by Thomas (1982) who cautioned that only fourteen of the regular class teachers in Mandell's sample were teaching in open plan classrooms. Despite criticism over methodological issues support for Mandell's view has been forthcoming (Levine, 1979). Levine argued that team teaching allows for: individualized instruction; coming to grips with the problem of time spent on each task; and the enhancement of integration. In addition to open plan organisations and team teaching co-operative learning situations have also been suggested as suitable instructional methods to enhance integration effectiveness.

A number of researchers have recommended the adoption of individualised instruction to assist in the integration of children with disabilities (Kunzweller, 1982; Leinhardt, 1980; Madden & Slavin, 1983; Madden, Slavin & Leavey, 1983; Wang, 1981; Wendel, 1977). Reynolds and Birch (1977) stated, "when utilized in mainstreamed classrooms, individualised instruction is viewed as an important intervention strategy that improves a school's effectiveness in providing quality education for exceptional children and normal children alike" (in Wang, 1981, p. 199). Wang argued that individualised instruction helps alleviate some of the negative effects of being singled out for specialized programs. In contrast, some researchers have been critical of individualized programs (Brophy & Evertson, 1974; McDonald & Elias, 1976; Stallings & Kaskowitz, 1974; Tikunoff, Berliner & Rist, 1975). Stobart (1986) claimed individualized instruction along with more traditional approaches (competitive) must be modified, otherwise the child with disabilities will experience negative relationships and peer pressure. The difficulty of assessing the
effectiveness of individualized instruction is that it can be interpreted in many ways along the continuum from direct instruction to open plan methods. Many other instructional strategies have been suggested in the research to assist the classroom teacher adapt to the needs of children with disabilities.

McGrath et al. (1986) stressed the importance of the task analysis approach, concrete experiences and powerful reinforcers in contrast to Jones (1987) who argued for flexibility. Wood and Miederhoff (1988) recommended the classroom teacher needs to adapt three aspects of instruction when integrating a child with disabilities: the teaching mode, the media used and the content format. In the first instance, Wood and Miederhoff suggested rather than use the expository (teacher directed) mode, which is the norm, other modes should be considered such as, the inquiry mode (ask questions), the demonstration mode (showing, doing and telling) and the activity mode (activities children do that are related to the topic). In the second instance, the media used, teachers should direct activities to suit the child's learning/perceptual style and consideration for visual, auditory or tactile learning should take place. Finally, the adaption of content format. Frequently, according to Wood and Miederhoff, the child with disabilities cannot complete assignments or cannot read the material presented and the material may need to be adapted to suit the needs of a particular child. The authors suggest that methods such as task analysis could be used to simplify the content level. Other strategies that could also be used to adapt the format include, typing all worksheets, reducing the number of items on worksheets and adapting the text/other reading materials to the student's reading level.

Curriculum selection and the integration of children with behaviour disorders. The concept of curriculum instruction, as it relates to the integration of children with behaviour disorders, has been examined by a number of researchers. Some researchers have stressed the characteristics unique to the education of
children with behaviour disorders, others have stressed the sameness of instructional techniques for all children with disabilities, in fact all children. Researchers (Biklen & Zollers, 1986; Lilly, 1988; Proctor, 1967; Rabinow, 1960; Stainback & Stainback, 1989; Vacc & Kirst, 1977; Will, 1986) have all suggested that there is no specific approach for working with the child with behaviour disorders in the regular classroom. In support, Gardner, (1977), Stainback and Stainback (1980) and Wang, Reynolds and Walberg (1988) all stated that there are no unique strategies for use with children with disabilities which differ in kind from those used with children in the regular classroom. Stephens (1977) also alluded to the same point when he stated, "instructional procedures need not differ as a function of the difference in diagnosis" (p. 5). Deno (1978) reiterated, "children with problems do not need qualitatively different teaching approaches. They need learning management conditions that permit a teacher to apply in a more controlled way the same kinds of instructional skills that the teacher should be using with all children" (p. 14). Deno stressed that teachers need to consider each child's uniqueness but the overall process of education is the same for all children including behaviour disordered. In support of her assumption, Deno listed a number of characteristics of successful programs for the education of children with behaviour disorders in the mainstream. Upon closer scrutiny it becomes apparent that many of these characteristics are as applicable to regular classroom children as to any labelled category. According to Deno the characteristics of programs providing assistance to regular classroom teachers when integrating children with behaviour disorders should include:

1. state funding sources without the use of labels
2. movement toward more placement options
3. flexible school organization
4. administrative commitment
5. professional sanction and support
6. strong teacher support systems
7. effective procedures for monitoring individual child progress
8. de-emphasis of categorical address
9. low profile service
10. classroom assistants
11. peer/cross age tutoring programs
12. parental involvement
13. continuing education opportunity
14. time and patience


In contrast to the "one approach for all" described by Deno and others (e.g. Stainback & Stainback, 1980; Vacc & Kirst, 1977), a number of researchers have argued that the evidence points to the necessity of implementing certain strategies to augment the educational opportunities of children with behaviour disorders (Kauffman & Wong, 1991; Nelson & Pearson, 1991; Simpson et al. 1991). One such strategy is the open plan method. Morse (1977) suggested that open plan education method probably has a great deal of promise in the education of children with behaviour disorders (p. 161). Oaks (1979) stressed emphatically that children with behaviour disorders should not be educated in open plan situations, they need, in contrast, plenty of structure. Before accepting either argument it is imperative that some consensus is reached as to what open education refers to.

The suggestion that children with behaviour disorders require a structured environment has been advanced by a number of researchers. Gallagher (1972) described the importance of highly structured, individualized learning environments and the importance of these concepts is further stressed by Riester (1984). Riester developed the comprehensive individualized educational plan (CIEP) to assist in the education of children with behaviour disorders in the regular classroom. The author believed that teachers need sound pedagogy to teach children with behaviour
disorders, certain approaches need to be followed including one to one instruction and adherence to an academic schedule/routine. The importance of achieving some success is also stressed throughout the literature. The need for the teacher to start the academic program below the child's functional level to assure academic success has been supported by Simpson and Edwards, (1980) who, with Simpson (1980), also recommended the use of a token reinforcement strategy.

Other instructional strategies that have been proposed include: immediate feedback (Edwards, 1980, Simpson and Edwards 1980), Cross age tutoring (Rosenberg, 1974), individualized programs (Brown & Ward, 1982; Nelson & Stevens, 1984; Safran & Safran, 1984), using naturally occurring situations (Bilden, 1985) and individual contracts (Safran & Safran, 1984). Research has also suggested quite clearly the need to carefully plan the classroom prior to the admission of a child with behaviour disorders. The indecision over the strategies needed to assist the educational performance of children with behaviour disorders may be a reflection on the vast extremes of educational levels grouped under the umbrella term "behaviour disorders". The reasons may also result from the apparent lack of research on the strategies needed to help these students. Vacc and Kirst (1977) suggested educational programs for children with behaviour disorders are less advanced than those of other exceptional groups. Zabel (1987) after reviewing the literature on programs and teacher training for children with behaviour disorders concluded that "empirical data is scarce and the boundaries between state of the art and state of practice are indistinct" (p. 172).

The technical literature has suggested a link between the type of curriculum used and effective integration programs. In examining perceived program effectiveness, it is important to consider whether certain curriculum presentation strategies influence the perception of integration effectiveness. In the present study the curriculum instructional format will be surveyed using the student check-list.
The student check-list is completed by the observer and will be discussed in a subsequent section.

11. **INTEGRATION SUPPORT SERVICE**

Integration support service and integration in general  Several writers have affirmed that effective integration programs will develop only if students are adequately prepared, academically and behaviourally, for the regular class (Gottlieb, 1981; Gresham, 1987; Hundert, 1982; Kauffman, McCullough & Sabornie, 1984; Salend, 1984). As mentioned previously, a number of strategies have been suggested to enhance the social acceptance of the child with disabilities including: interagency services (Nelson & Pearson, 1991; Scherer, Gersch & Fry, 1990; Simpson et al. 1991), peer initiation intervention (Hendrickson, Strain, Temblay & Shores, 1982; Young & Kerr, 1979), peer modelling (Gresham & Nagle, 1980, McGrath, et al. 1986), reverse tutoring (Osguthorpe, Eiserman & Shisler, 1985), curricular infusion technique (information provided to children without disabilities about disabilities, Donaldson & Martinson, 1977; Sasso, Simpson & Novak, 1985) and peer tutoring (Donder & Nietupski, 1981; Kohl, Moses & Strettner-Eaton, 1983; Sasso, Mitchell & Struthers, 1986). Strategies designed to assist the classroom teacher and the peer group without disabilities with the implementation of integration programs have also been outlined in the literature.

One area on which the literature has concentrated is teacher training which has been seen as important in developing teachers' attitudes towards integration (see Section 1 in this chapter). The research literature has discussed the various training methods to ascertain which training method is the most effective in training teachers for, the integration process. These include: training techniques presented over long periods of time (Kerlinger, 1972); workshop methods (Beare, 1985); laboratory work (Yates, 1973); short theoretically based courses (Johnson & Cartwright, 1979); and a combination of academic study and supervised special
needs placement (Leyser, Abrams & Lipscomb, 1982). The research has also been involved with a number of curriculum strategies to assist the child with disabilities come to grips with the academic expectations of the regular class.

Curriculum strategies suggested in the literature include: co-operative learning situations (Johnson & Johnson, 1975, 1978, 1983, 1984c, 1985a, 1986; Johnson & Maruyama, 1983); individualised instruction (Madden & Slavin, 1983; Wang, 1981); and task analysis (McGrath et al. 1986). While these strategies are critically important, attention also needs to be focused on the format (methods utilised to assist the placement e.g. which subject to place the child in initially, or how long should the first placement last?) which the schools, parents, enrolment support groups and teachers have adopted to assist with the integration placement. This format is of particular importance when integrating children with behaviour disorders.

Researchers (Hollinger, 1987; Gresham, 1982, 1986a) have argued that, when integrating a child with behaviour disorders, he or she should be placed concurrently on a social skills program. Indeed Dublin (1981) and Kauffman, et al. (1984) have suggested that all children including the peer group without disabilities should be placed on a social skills program. Kauffman et al. stressed two important concepts: the importance of the, "plan for reintegration given to the non disabled student" (p. 207) and the importance of the child with behaviour disorders being given training prior to and throughout the transition period. They point out the importance of withdrawing the child with behaviour disorders if substantial behaviour problems emerge in the regular class. These may be alleviated by making sure the child with behaviour disorders is making sufficient progress academically and socially before placement in the regular classroom is instigated (Simpson & Edwards, 1980). Apart from examining programs for teachers, peer groups and the child with behaviour disorders, the research has outlined a number of other
important considerations in the integration process. The subject area, in which the initial integration takes place, has been examined by a number of writers. Demers (1981) suggested that the placement should take place initially in subject areas such as, Art, Physical Education and Music. In contrast, Bradshaw (1987b) suggested that more structured subjects should be considered for initial placement. This initial entry/re entry also needs to be considered in terms of time. Bradshaw (1987b) and Kauffman et al. (1984) have suggested between 30 and 60 minutes a day in the early days gradually increasing as success warrants. Two other issues raised in the literature include: the number of children with behaviour disorders being integrated into any one classroom at a time (one according to Demers, 1981) and the importance of related services (Riester, 1984). Both of these issues will be examined in more depth in a subsequent chapter.

A number of approaches to assist the regular school in the delivery of special education services have been examined. These approaches have been discussed in detail in Chapter Two but will be mentioned again briefly at this stage to highlight the possible range of integration formats available to schools/teachers. These approaches include: teacher consultation approach (Blankenship & Lilly, 1981; Nelson & Stevens, 1980); on-site unit approach (Galloway & Goodwin, 1987); the multi-discipline approach (Brown & Ward, 1982); alternative schools approach (Mesinger, 1982); resource approach (Safran, 1982); continuity mainstreaming approach (Pappanikou & Paul, 1977); the unit approach (Parks, 1981); the itinerant teacher approach, the cascade of services approach (Peterson, Zabel, Smith & White, 1983) and others including: the time out approach; the six rules offered approach; and the multi-faceted approach also have been considered.

The integration format variable has been included in this research because it has been suggested in the literature that a relationship exists between integration strategies adopted in the regular school and program effectiveness. Factors within
the integration format which need to be isolated and examined include: training strategies; curriculum strategies; and peer group acceptance strategies. In addition a number of other factors including: time for spending at school; and the subject in which to initially integrate the child warrant examination. Finally a number of approaches have been developed to assist the regular classroom teacher/school. These approaches and the preceding variables all need to be examined to ascertain if there is any correlation between their use and perceived integration effectiveness.

**SUMMARY**

In attempting to examine the perceived effectiveness of the Victorian and New South Wales integration programs and hence develop a practical classroom classification schema for assisting practitioners with the process of integrating children with behaviour disorders a number of variables were examined.

When examin a number of variables, particularly in relation to integration, it is important to consider the interaction between those variables. A diagrammatical representation of these variables has been included (see Figure 2). Figure 2 is a simplified classification schema based on variables suggested in the literature as factors which appear to influence integration. These variables cannot represent every factor relevant to integration effectiveness. Figure 2 is a theoretical schema and may not relate to variables considered by practitioners as factors influential in integration effectiveness. The rationale for this study is to compare the results of the Phase 1 (Victorian) and Phase 2 (New South Wales) studies with this theoretical classification schema. This theoretical classification schema will then be replaced with a more accurate series of variables and hence a more practical classroom classification schema to assist practitioners when integrating children with behaviour disorders.
FIGURE 2

INTERACTION BETWEEN VARIABLE

INSTITUTIONAL VARIABLES

Type of School
Government
Non Government
school size
class size

Location of School
Rural
Metropolitan

Integration Support
Service
full-time
part-time
resource
social skills
consultation

Classroom Climate
Learning
environment
teaching control
structure
reinforcement
humour

Instructional Format
Learning strategies
Curriculum selection

INDIVIDUAL VARIABLES

Attitudes
Teachers'
Parents'
Peers'
Principals'

Style/Personality
Teacher Behaviour
Teaching Style
Flexibility
Professional Freedom

Teacher Training
Pre-service
In-service
Special Ed.

INTEGRATION EFFECTIVENESS

Social
Academic
CHAPTER 4

METHODOLOGY

INTRODUCTION

In the present study both qualitative and quantitative research methodologies were used. It has been argued that qualitative and quantitative research differ in so many fundamental ways that integrating methodology from the two types is difficult (Smith & Heshustus, 1986). There is, however, an increasing awareness of the benefits that can be obtained by combining the methods (Schofield & Anderson, 1984; Wiersma, 1986). Schofield and Anderson (1984) presented a convincing argument in support of a combination of qualitative and quantitative research, "methodology can be integrated and present examples for incorporating selected quantitative methodology into qualitative studies such as ethnographic studies" (in Wiersma, 1986, p. 256).

It was felt that quantitative methods on their own would not adequately examine the complex interactions involved in the process of integration (Center, Ferguson & Ward, 1988). The interaction between the teacher and student and their peers can often only be monitored through observation. Observational techniques not only supplement data gathered through quantitative measures but quantitative measures also complements qualitative observations by providing specific information to add to descriptive terms. Observational techniques then add validity to quantitative measures and conversely quantitative measures add validity to qualitative observations. Observations also allow for the input of yet another person in the establishment of integration effectiveness. This input is important as it presents an external perception, a perception that may well be free from 'in school bias'. 'In school bias' refers to a bias occurring due to discussions/pressures/labels which may have influenced decisions made in the school environment. In other words observation from an external source may help to control 'in school bias' by
avoiding the possibility of observers being influenced by knowledge they may have of the child.

The majority of researchers investigating attitudes towards integration and strategies adopted in implementing integration programs, have used questionnaires (Center & Ward, 1987; Coleman & Gilliam, 1983; Goupil & Brunet, 1984; Harvey & Green, 1984; Hayes & Gunn, 1988; Horne, 1983; Knoff, 1985; Ringlaben & Price, 1981; Ward & Center, 1987; Williams & Algozzine, 1979). However a number of other researchers have used other instruments. Bullock, Zager, Donahue and Pelton, 1985; Dubin and Fisher, 1986; Harvey, 1985 and Larrivee and Cook, 1979 used rating scales. Barngrover (1971) decided that interviews were the most reliable way to "sample the current views of those in daily contact educationally with exceptional children" (p. 754). In contrast Kelly, Bullock and Dykes, (1977) decided that the use of numerous research instruments had "contributed to the confusion" (p. 316) and opted for the use of a checklist. Other researchers have used a combination of instruments to gain a more valid indication of teachers' opinions. A checklist, attitude scale and observation were used by Lewin, Nelson and Tollefson (1983) with student teachers. Parmenter and Nash, (1985) surveyed teachers using questionnaires and interviews. Some researchers (Gullota, 1974) devised their own unique data gathering methods. Gullota asked teachers to read case studies and indicate whether they would or would not recommend each of the ten suggested solutions. The teachers were then asked to rank order the ten suggested solutions.

While there has been a wide range of instruments and strategies used the most widespread method of gathering attitudes has been through the use of questionnaires. According to Wiersma (1986) questionnaires can include responses ranging from "a checkmark' to a extensive written statement" (p. 179). Questionnaires are frequently used by researchers as large numbers of subjects can be contacted and the responses sought can be limited to the areas required.
Questionnaires are also able to be analyzed for levels of validity and reliability. They do however have disadvantages when compared to interviews. The interview has less chance of having nonresponse. Questionnaires are very susceptible to subjects not returning the completed forms if they are not completed while the investigator is present. Interviews also allow the subject to elaborate on aspects of particular interest or to elaborate on a point raised. Interviews have another very important advantage, in that "they can be used with individuals from whom data cannot otherwise be obtained" (Wiersma, p. 180).

Rating scales were used frequently in the research as a means of summarizing findings. Rating scales are, however, subject to many influences. Responses can often reflect what the respondent thinks is the correct response rather than what is the correct response. Rating scales are also subject to what has been termed the 'Halo Effect', e.g. the respondent being influenced by the fact they like or don't like the student/researcher. Tuckman (1978) suggested that the checklist was superior to a rating scale as the respondent "is limited to describing what has or has not transpired rather than indicating the degree of presence or absence of the behaviours in question" (p. 188). The research reviewed has suggested that all the major instruments used for gathering data on teachers' attitudes are subject to one form of bias or another. There may in fact, be considerable overlay between individually administered questionnaires, interviews and rating scales. In the present research it was anticipated that by using a number of instruments the disadvantages of any one instrument would to some extent be controlled. It was also anticipated that the information gained from each of the instruments would compliment each other in the formation of the perceived integration indices and the case study profiles. Teachers in the present study were surveyed by means of an interview, a questionnaire and a self report inventory.
One of the stated aims of this study was to add to the bank of knowledge on the integration of children with behaviour disorders. It was anticipated that both qualitative (observation schedules & interviews) and quantitative data would supplement each other and achieve this aim in a most valid and reliable way.

In order to examine the perceptions of the Victorian and New South Wales integration programs it was decided to undertake a survey in a number of primary schools across each state. The literature reviewed in the previous chapter has outlined the variables isolated in the research as factors affecting perceived integration effectiveness. These variables will become the independent variables in the present study and will be studied in relation to a number of dependent variables (perceived social integration score, perceived academic integration score, perception of continued placement score and perceived appropriateness of support score). These dependent variables, the case study profiles and the follow up studies will all supply data to assist in carrying out the stated aims of this study i.e. to investigate the perceived effectiveness of the delivery of special educational services to children with behaviour disorders and to develop a classification schema to assist practitioners. The data gathered will be discussed in the form of a number of research questions. These questions were constructed as a result of the literature reviewed. This chapter will include an explanation of how and why these research questions were developed, an outline of the instruments utilised, an examination of the children/schools surveyed, discussion on the procedures used to gather the data and an explanation on how the indices were formed.

**RESEARCH QUESTIONS**

As mentioned in the previous section, a series of research questions will be responded to in an attempt to achieve the stated aims of this study. The literature reviewed (see Chapters 2 & 3) has indicated a number of factors which influence integration effectiveness. Each of the research questions are designed around these
factors in an attempt to validate their influence on the effectiveness of integration programs. It is also anticipated that the research questions will allow, through the examination of these factors, the formation of a practical classification schema designed to assist practitioners with the integration of children with behaviour disorders into regular classes/schools. The research questions are as follows:

1. What factors outlined in the literature as important to integration effectiveness influence effectiveness of integration programs for children with behaviour disorders?

2. Are different teaching strategies used by teachers perceived as more or less effective in the integration of children with behaviour disorders?

3. Do staff with differing levels of qualifications and in-service training have different attitudes towards the integration of children with behaviour disorders?

4. What is the educational placement of the surveyed children one and two years after the initial survey? What factors have influenced this placement?

5. Do different policy guidelines in the two states influence the staffs' perceptions of integration effectiveness?

6. What are the attitudes of the parents surveyed towards the integration of children with behaviour disorders? What factors appear to influence these attitudes?

Research Question 1 was designed to allow the factors that appear to influence integration effectiveness to be examined and ascertain which ones were influential in relation to the integration of children with behaviour disorders. Once these factors were identified they will be included in the classification schema. The question was general in an attempt to examine factors other than teaching strategies, levels of qualifications, policy guidelines and parental attitudes which are addressed in the more specific research questions. Factors which were discussed include: teachers' attitudes, gender of teacher, age/experience of teacher, principals'
attitudes, experience of principal, staff attitudes, peer group acceptance, location of
the school and size of the school.

Research Question 2 was designed to allow the researcher the opportunity to
examine classroom strategies suggested in the literature as factors which influence
integration effectiveness. Do these strategies influence the effectiveness of programs
for children with behaviour disorders? To assist practitioners with the effectiveness
of integration programs it was seen as important to identify those strategies
indicated by other practitioners as effective. This question allows for the
opportunity to identify these strategies. The strategies examined include: classroom
structure, classroom management, integration format and curriculum format.

Research Question 3 examines a factor indicated in the literature as
important to integration effectiveness: staff qualifications. The question also allows
for the levels and extent of teachers' special education qualifications in both states
to be identified.

Research Question 4 is an attempt to investigate and identify the factors
which may influence the length of time a child is enrolled in a regular class/school.
This question also allows for the opportunity to examine the school history of these
children over a substantial period of time.

Research Question 5 deals specifically with the implications for teachers, in
New South Wales and Victoria, of having two contrasting sets of policy guidelines.
Do these contrasting guidelines influence perceptions in relation to integration? If
these perceptions are different can they be attributed to philosophical,
implementation or other variable differences such as special education
qualifications, size of classes and age/gender of teacher/principal?
Research Question 6 examines parental attitudes towards the integration of children with behaviour disorders. The literature reviewed indicated that parental attitudes have a major influence on the effectiveness of integration programs. It also became apparent through reviewing the literature that the role of the parent, in relation to the education of their child, was changing and that parental involvement in both states was not at the same level. This question allowed for these aspects to be further investigated.

SUBJECTS

As only one child was recommended from each school surveyed the child and school became the case study. The series of scores obtained for each case study provided a measure of perceptions of the effectiveness of integration held by important persons in the child's integration program.

Subject Selection In the first instance, contact was made with the Chief General Manager (Victoria) and the Director General of Education (New South Wales). Permission was sought from these officers to carry out research in a number of primary schools in their respective states. Once this permission was obtained contact was made with the Senior Program Officers, Students with Disabilities and Welfare (Victoria) and Senior Education Officers, Integration and Student Welfare (New South Wales) in each regional office. These officers were asked to supply the names of children who have been referred by schools in their respective regions as requiring assistance with their behaviour. Each Regional Officer was asked to supply the names of six children, two at least of which were chosen at random to survey. The researcher had no prior knowledge of the schools.

In Victoria, once the school had been selected the school principals were asked by telephone, for their permission to carry out the research in the schools. No principal refused this permission. Copies of all questionnaires, interview questions
and self reporting scales were sent prior to the researcher's visit to the schools. Copies of the sociometric activities and the observation schedules were not sent prior to the visit as it was felt that prior knowledge of the activities may have had some influence on the results gained. This process was changed somewhat for New South Wales schools.

In New South Wales schools the initial telephone call to the principal was followed up by a personal visit in an attempt to explain the study in more detail and to add some consistency to the types of behaviour being observed. During this visit the writer explained to the principal the requirements of the study in terms of staff time, parental involvement and observation access. In many cases the principal gave their immediate permission to visit their school and in other cases the principal asked for some time to discuss the study with certain staff members. Full copies of all questionnaires were left with the principals at this stage. Three principals in New South Wales declined to allow the study to take place in their schools. In two cases parents' opposition was cited as the reason and in the other case staff opposition was cited. In the case where parental opposition had been given, the parents noted, "the child has been seen by too many professionals".

**Schools** The schools involved in the survey were from six educational regions in Victoria and six educational regions in New South Wales. These educational regions represented both rural and metropolitan areas. In Victoria nine of these schools were located in rural areas, three were located in large regional centres and three were located in the metropolitan area. In New South Wales four schools were located in rural areas, five schools were located in large regional centres and six schools were located in the metropolitan area (see Figures 3 & 4). The schools involved in the survey represented four categories of schools:
category 1 = schools with less than 100 students;
category 2 = schools with between 100 and 250 students
FIGURE 4

NEW SOUTH WALES EDUCATIONAL REGIONAL BOUNDARIES

Metropolitan Regions

Key:

Identified Regions

Country Regions

Key:

Identified Regions
category 3 = schools with between 250 and 400 students

category 4 = schools with over 400 students

In Victoria two category one schools, four category two schools, seven category three schools and two category four schools were surveyed. In New South Wales one category one school, two category two schools, six category three schools and six category four schools were surveyed.

All schools knew the schedule of visits and had a clear understanding of what the visits would entail. Observation of children in their school setting is vulnerable to many uncontrollable variables. This dilemma is particularly important when observing children with behaviour disorders. Ysseldyke and Foster (1978) highlighted the need to consider bias in observing children with behaviour disorders. The authors argued that once the children have been labelled, "the deviancy labels generated initial negative stereotypes, which were retained in the observance of behaviour inconsistent with the labels" (p. 615). To add validity and to some extent to control observer bias, contact was made with educational professionals all of whom worked in the various Regional Support Centres and had prior contact with the children. These professionals were, like the writer, external observers of the child and school. These educational professionals were contacted following the compilation of the data. Various data were summarized and placed in a check-list formation (see Table 5). The educational professionals were asked to indicate with a tick or a cross whether they agreed with the summary of findings on those particular children/schools in their region. The importance of gaining a number of external inputs when it comes to gathering data on behaviour was outlined by Bain, Houghton and Farris (1991). The authors found that there was little correlation between teachers' rating of behaviour and their direct observation of it.
<table>
<thead>
<tr>
<th>CASE STUDY NO.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INDICES OF INTEGRATION</strong></td>
</tr>
<tr>
<td>Academic: 31.4%</td>
</tr>
<tr>
<td>Social: 45.6%</td>
</tr>
<tr>
<td>Success Rate: Academic Low</td>
</tr>
<tr>
<td>Social Low</td>
</tr>
<tr>
<td>School Attitude: Extremely Negative</td>
</tr>
<tr>
<td>Family Attitude: Positive-Single minded</td>
</tr>
<tr>
<td>Student does not mix well with peers</td>
</tr>
<tr>
<td>Responds well to the present aide (temp.)</td>
</tr>
<tr>
<td>Student has few classroom behaviour strategies</td>
</tr>
<tr>
<td>Stress Factor on School personnel high</td>
</tr>
<tr>
<td>School Personnel highly qualified in terms of special education</td>
</tr>
<tr>
<td>Student can be stubborn and physically violent</td>
</tr>
<tr>
<td>Student physical risk to other students</td>
</tr>
<tr>
<td>Disagreement between school and family over medical prognosis</td>
</tr>
<tr>
<td>Peer Group becoming less tolerant</td>
</tr>
<tr>
<td>Parents adamant about placement in regular school</td>
</tr>
<tr>
<td>Concern amongst other parents about child’s behaviour</td>
</tr>
<tr>
<td>Integration aide .5</td>
</tr>
<tr>
<td>Withdrawal Program</td>
</tr>
</tbody>
</table>

**Note:** Tick indicates agreement with observation data. Cross indicates disagreement with observation data.
**Children** Fifteen students (eleven male and four female) from Victorian primary schools and fifteen students (all male) from New South Wales primary schools were included in this study (see Table 6). The children surveyed in both states were in the following grades. The childrens' age has also been included.

<table>
<thead>
<tr>
<th>GRADE</th>
<th>VIC</th>
<th>N.S.W</th>
<th>AGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>k/p</td>
<td>3</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>1</td>
<td>4</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>3</td>
<td>2</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>4</td>
<td>-</td>
<td>3</td>
<td>9</td>
</tr>
<tr>
<td>5</td>
<td>2</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>6</td>
<td>2</td>
<td>-</td>
<td>11</td>
</tr>
</tbody>
</table>

All students were attending a regular school for at least 50% of the school week. The students were all from government schools and were in grades from prep (kindergarten in New South Wales) to grade six. These children previously had been identified (by the formal evaluation process of observation/referral to teacher support service) within their educational region. They have been identified as having behaviour problems which directly and indirectly influence their educational and social development. These behaviour problems have interfered with expected progress at school and have, according to the educational personnel involved, warranted special educational assistance. The children correspond with the criteria outlined by Sabornie and Kauffman (1985): (students have) "demonstrated one or more of the following characteristics over a period of time and to a marked degree: (a) an inability to learn which cannot be explained by intellectual, sensory or health factors; (b) an inability to build or maintain satisfactory relationships with peers and teachers; (c) inappropriate types of behaviour or feelings under normal circumstances; (d) a general pervasive mood of unhappiness or depression; (e) a tendency to develop physical symptoms or fears associated with personal
### TABLE 6

**CASE STUDIES (Victoria & New South Wales)**

<table>
<thead>
<tr>
<th>CASE STUDY</th>
<th>GENDER</th>
<th>GRADE</th>
<th>SIZE OF SCHOOL</th>
<th>TYPE OF SCHOOL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Male</td>
<td>2</td>
<td>Category 4 = (400+)</td>
<td>Rural</td>
</tr>
<tr>
<td>2</td>
<td>Male</td>
<td>1</td>
<td>Category 2 (100-250)</td>
<td>Rural</td>
</tr>
<tr>
<td>3</td>
<td>Male</td>
<td>5</td>
<td>Category 3 (250-400)</td>
<td>City non Metropolitan</td>
</tr>
<tr>
<td>4</td>
<td>Male</td>
<td>P</td>
<td>Category 2</td>
<td>Rural</td>
</tr>
<tr>
<td>5</td>
<td>Male</td>
<td>6</td>
<td>Category 2</td>
<td>Rural</td>
</tr>
<tr>
<td>6</td>
<td>Male</td>
<td>2</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>7</td>
<td>Male</td>
<td>P</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>8</td>
<td>Male</td>
<td>1</td>
<td>Category 3</td>
<td>City non Metropolitan</td>
</tr>
<tr>
<td>9</td>
<td>Female</td>
<td>1</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>10</td>
<td>Male</td>
<td>3</td>
<td>Category 3 (&lt; 100)</td>
<td>City non Metropolitan</td>
</tr>
<tr>
<td>11</td>
<td>Female</td>
<td>3</td>
<td>Category 3 (&lt; 100)</td>
<td>Rural</td>
</tr>
<tr>
<td>12</td>
<td>Male</td>
<td>P</td>
<td>Category 2</td>
<td>Rural</td>
</tr>
<tr>
<td>13</td>
<td>Male</td>
<td>5</td>
<td>Category 4</td>
<td>Rural</td>
</tr>
<tr>
<td>14</td>
<td>Female</td>
<td>6</td>
<td>Category 1</td>
<td>Rural</td>
</tr>
<tr>
<td>15</td>
<td>Female</td>
<td>1</td>
<td>Category 3</td>
<td>Rural</td>
</tr>
<tr>
<td>CASE STUDY</td>
<td>GENDER</td>
<td>GRADE</td>
<td>SIZE OF SCHOOL</td>
<td>TYPE OF SCHOOL</td>
</tr>
<tr>
<td>------------</td>
<td>--------</td>
<td>-------</td>
<td>----------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>16</td>
<td>Male</td>
<td>2</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>17</td>
<td>Male</td>
<td>4</td>
<td>Category 4</td>
<td>City non Metropolitan</td>
</tr>
<tr>
<td>18</td>
<td>Male</td>
<td>3</td>
<td>Category 4</td>
<td>City non Metropolitan</td>
</tr>
<tr>
<td>19</td>
<td>Male</td>
<td>Kindergarten</td>
<td>Category 4</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>20</td>
<td>Male</td>
<td>4</td>
<td>Category 2</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>21</td>
<td>Male</td>
<td>3</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>22</td>
<td>Male</td>
<td>5</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>23</td>
<td>Male</td>
<td>1</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>24</td>
<td>Male</td>
<td>3</td>
<td>Category 2</td>
<td>Rural</td>
</tr>
<tr>
<td>25</td>
<td>Male</td>
<td>1</td>
<td>Category 1</td>
<td>Rural</td>
</tr>
<tr>
<td>26</td>
<td>Male</td>
<td>5</td>
<td>Category 3</td>
<td>City non Metropolitan</td>
</tr>
<tr>
<td>27</td>
<td>Male</td>
<td>2</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>28</td>
<td>Male</td>
<td>2</td>
<td>Category 4</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>29</td>
<td>Male</td>
<td>4</td>
<td>Category 3</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>30</td>
<td>Male</td>
<td>2</td>
<td>Category 4</td>
<td>Metropolitan</td>
</tr>
</tbody>
</table>
or school problems" (p. 269).

As has been discussed in Chapter 1, criteria for selecting and, defining children with behaviour disorders are difficult to construct and adhere to. The above criteria are no exception; they are subjective yet can be considered as a useful guide.

**Teachers** Classroom teachers are important agents in the integration process. It was considered important to gauge classroom teachers' responses for two reasons: as crucial components in the implementation of each individual integration program their input on the perceived success of each case is important; secondly, from the classroom teachers' responses some comparison can be made between the states and the possible implications of each state's policy on perceived success. The teachers involved in the present study represented both genders and had varied lengths of service in the teaching profession. The full range of teacher experience across the two states included teachers who had been teaching for 30 years to those teachers involved in their first year of teaching. The teachers surveyed were classified into three categories, category 1 = < 10 Years experience, category 2 = 11-20 years experience and category 3 = > 20 years experience. In Victoria two teachers were in category 1, nine teachers in category 2 and four teachers in category 3. In New South Wales seven teachers were in category one, four in category two and four in category three. Across the two states the gender ratio was 2:1 in favour of female teachers (Victoria = female 9, male 6; New South Wales = female 11, male 4). All teachers in the present study were asked by their principal if they would agree to being involved in the study. Once the teachers had given their agreement to being involved they were informed, by this writer, what was involved in terms of observation, questionnaires, sociometric activities and interviews. At this point all teachers were once again given the option to withdraw from the study, but no teacher withdrew. As with teaching experience, special
education qualifications varied greatly. The majority of teachers had had no training at all in special education while only two teachers in Victoria and one in New South Wales had post graduate qualifications in special education.

**Principals** Once permission to conduct the research had been granted from regional office principals of the school recommended were contacted. This initial contact was made by telephone in both states. In N.S.W. during this initial contact a time was arranged to visit the principal to outline the research details. In Victoria during the initial contact the research methodology was outlined over the telephone. The principals, like the teachers, included members of both genders and varied in experience and special education qualifications. Most of the principals were male, 13 in Victoria and 11 in New South Wales (see Table 14). A number of the principals were in that position for the first time while others had been principals for over 30 years. The principals were classified into three categories based on their experience as principals: category 1 = < ten years experience as a principal, category 2 = 11 - 20 years as a principal and category 3 > 21 years as a principal. In Victoria 13 of the principals were in category 1, one in category 2 and one in category 3. In New South Wales 8 principals were in category one, six in category 2 and one in category 3. Only one principal in Victoria and one in New South Wales had post graduate qualifications in special education. One principal in Victoria and nine in New South Wales had not attended any courses or in service programs on children with behaviour disorders. Three of the Victorian principals and one of the New South Wales principals were teaching principals.

**Support Staff** The support staff surveyed included those personnel involved in a number of different roles from support teacher to itinerant teacher of behaviour disorders to teachers aide. Ten of the Victorian schools had teachers aides in the classes visited. Nine of the teachers aides were female. Thirteen of the Victorian schools had support teachers, all but two were female. Eleven of the New South
Wales classrooms had assistance from support teachers. All of these support teachers were female. Nine New South Wales schools had the services of support teachers (behaviour disorders) two of whom were male. None of the New South Wales schools visited had teachers aides (see Table 21). Where the child received support from a number of support staff it was requested that the support staff member who worked closest with the child complete the questionnaire.

**Parents** The parents involved in the present study varied substantially in age, socioeconomic status, marital status, employment status and occupation. The parents age ranged from early 20s to mid 50s. The schools visited were from a number of different socioeconomic areas and the parents socioeconomic status indicated this range. The marriage status of the parents also varied. In Victoria seven of the children lived in single parent families and eight in family situations in which both parents were present. In two of the latter situations the children were fostered by the family and in one the child was adopted. In New South Wales seven children also came from single parent families. Of the eight families headed by both parents two had fostered the children. In both states all single parent families were headed by females. In both states, five parents were unemployed. All ten families where the parents were unemployed the families were on some form of social welfare. The occupation of those parents employed varied greatly. Over half from both states were self employed. None had any tertiary qualifications.

**INSTRUMENTATION**

A number of instruments was used including questionnaires, interviews, observations and sociometric scales (see Appendices 1, 2, 3, 4, 5, 6, 7, 8, 9, 10). These instruments will now be examined in detail.

**Sociometric Activities** One of the most important aspects of integration is social acceptance by the child's peer group (Johnson & Johnson, 1986). The
importance of social acceptance to effective integration has been stated in a number of policy documents. One of the mainstays of both the New South Wales Department of School Education Policy (1993) and the Victorian Ministry of Education Policy (Collins, 1984) is social integration. The Victorian policy lists six aims of educational services to children with impairments (p. 12-13). In three of these aims the theme is social participation of children with disabilities. This theme is perhaps best stated in aim iii: "to maintain the participation of all children in the educational programs and social life of regular schools" (Collins, 1984, p. 13).

Despite the recognised role that social acceptance plays in the integration process little research was found that addresses the issue of the acceptance of children with behaviour disorders by their non-disabled peers. There is little doubt that when integrating children with behaviour disorders the peer group plays a crucial role. Gresham (1982) argued strongly that placement in the regular classroom would not necessarily lead to the social acceptance of the child with behaviour disorders, nor would it lead to an increase in social acceptance, and nor is there any guarantee that the child with behaviour disorders will model appropriate behaviour from non-disabled peers. As Hollinger (1987) stated, the social rejection experienced by children with behaviour disorders in mainstreamed settings conflicts with the goals of mainstreaming. There is a number of ways to reduce this social rejection, including social skills training and disability awareness training for the peer group. Both of these programs have been discussed previously and suggest the important role of the peer group. There has been considerable support for the important role that the peer group play in the integration of children with behaviour disorders.

Saborne and Kauffman (1985) surveyed the sociometric status of children with behaviour disorders. They concluded, "what is clear from the results of the present study is the need for the mainstream of education to be made more socially
rewarding for BD students" (p. 273). For a socially rewarding situation to exist, peer group support is essential. Despite its importance to the effective integration of children with behaviour disorders, the views of the peer group are often overlooked and this may lead to the incorrect notion that the affective consequences of integration are always positive.

The use of sociograms in this study was an attempt to consider and examine the perceptions of the peer group. Research (Ray, 1985; Sabornie, 1983; Sabornie & Kauffman, 1985; Vacc, 1968, 1972) have revealed that children with behaviour disorders are not well accepted by their peer group. In collecting data on the peer group it is hoped that this most important aspect of integration effectiveness will be considered when placement and programs are formulated.

A modified version of the Ohio Social Acceptance Scale (OSAS, Fordyce, Yauck & Raths, 1946, adapted by Sabornie & Kauffman, 1985) was used in the present study. Sabornie and Kauffman used the scale to measure the status of adolescents with behaviour disorders in regular schools. The scale is a six point rating scale instrument (see Appendix 1), whereby the peer group rate their classmates on the following criteria:

1. my very, very best friends;
2. my other friends;
3. not friends but okay;
4. don’t know them;
5. don’t care for them;
6. dislike them.

All numerical ratings were assigned a weighting (from the OSAS MANUAL)

\[
1 = 6, \quad 2 = 5, \quad 3 = 4, \quad 4 = 3, \quad 5 = 2, \quad 6 = 1.
\]

157
The ratings were weighted in an inversion format to ensure that high social acceptance by peer group was correlated to a high numerical score. The ratings received by each class member were totalled up and this score was then converted to a decile rank in relation to all scores gained by class members. The higher the score, the higher the decile rank. This decile ranking allowed the user to gain knowledge on how integrated children scored in comparison to their peer group. The result of the sociometric activities also assisted in the construction of matrices (see Appendix 1) which allowed for the accumulation of further data on who chose who and mutual choices and rejections.

Sarbonie and Kauffman (1985) claimed several advantages in using this type of sociogram with children with behaviour disorders. Firstly, no children are singled out because all children are included on the rating sheet. Secondly, in comparison to peer nomination procedures, (procedures where each child lists only a specified number of children), this rating method is more advantageous in obtaining sociometric data on all children whether they have been accepted or rejected socially. There is some evidence that indicates children with disabilities are unlikely to be nominated as desirable classmates or friends, thus it is important to gain all children's likes and dislikes. Thirdly, compared to peer nomination methods, rating scales sociometric devices have superior test-retest reliability (Asher & Taylor, 1981).

Using sociometric techniques to assess social status of children is widespread (Gresham & Reschly, 1987; Iano et al. 1976; Ladd, Oden & Asher, 1977; Sabornie, 1987; Sabornie & Kauffman, 1985; Singleton & Asher, 1977). However, sociometric activities are best used in conjunction with other methods e.g. observation, interview and questionnaire. But there are problems with reliability and validity. Hollinger (1987) for example cautioned the researcher about 'social bias'. According to Hollinger, 'popular children's behaviour is interpreted in ways that are congruent with popular status and unpopular children's behaviour is
interpreted in ways that are congruent with unpopular status" (p. 22). The obvious result of this social bias, according to Hollinger, is that even though the child's behaviour has changed he or she may still have a low social status. Indeed some evidence (Coe & Dodge, 1983; Roff, Sells & Golden, 1972) has accumulated which indicates that rejected children and adolescents tend to remain in their social status position for many years. Morrison (1981) discussed the importance of using group (class) preference techniques with sociometric activities but cautions about the difference between measures of friendship and measures of level of acceptance. These cautions add credence to the premise that a combination of instruments should be used within the schools rather than to rely entirely on sociometric activities. Due to the difficulty some young children may have experienced in reading/determining what the words on the rating meant symbols were added above each of the sociometric choices e.g.

- my very, very best friend
- my other friends
- not friends but okay
- don't know them
- don't care for them
- dislike them
- ?

To further eradicate any misunderstandings by the younger children in interpreting the information the writer administered the test to all prep (kindergarten) grade one and some second grade children individually.

**Observational Procedures** As stated in the introduction of this chapter it was felt that quantitative methods on their own would not adequately examine the complex interactions involved in the process of integration. The interactions between teacher and student and student and their peers can often only be monitored through observation.

The observation schedule used was the Observer Rating Scale (ORS Center, Ferguson & Ward, 1988; see Appendix No. 2). This scale was a modified version of
an instrument used by Larrivee (1985). The Center, Ferguson and Ward schedule was used as it has been modified for Australian conditions. The reliability of the observation schedules had been assessed by the authors using a number of observers recording the behaviour patterns of the same child. The reliability figures ranged from 87% to 100%. The major area of discrepancy was the section labelled 'questioning patterns of teachers". The ORS was designed around a five minute observation period followed by a two minute recording period and is organised under four main headings: (a) Classroom Climate, (b) Structure, (c) Classroom Management, (d) Independence in the Classroom. These categories were based on the work of Berliner (1984). The Observation Schedule allowed for data on teachers' classroom practices and childrens' classroom responses to be compiled. This data was correlated with perceived social integration and perceived academic integration scores to ascertain whether the classroom factors, suggested by Berliner, influenced perceived integration success. In compiling data using observation methods a student checklist was also used.

The student checklist (SCL) was used to observe students in Maths, Reading and non academic areas. This check list was particularly useful when the students were observed in specialist subjects as it allowed the observer to record the child's reaction to certain academic areas and certain teachers. The SCL was a modified form of the Center, Ferguson and Ward (1988) schedule (see Appendix No. 3). A number of modifications were made to allow the schedule to be more appropriate for children with behaviour disorders. The Center, Ferguson and Ward schedule was designed to gather data on the integration of all children with disabilities. Certain questions related to children with physical disabilities only and it was thought appropriate to use only those sections relevant to children with behaviour disorders (e.g. section 1 - physical only parts 1.4,1.5,1.6 & 1.7).
All schools were visited for a period of up to three days. The observations were carried out in the playground, in the regular classrooms, specialised subject rooms and, where appropriate, special settings. All observations were undertaken by the writer. The writer had extensive discussions with research staff at Macquarie University regarding the administering of the Observer Rating Scale and the Student's Check List. The writer's previous experience as an itinerant teacher of behaviour disordered children (I.T.B.D.) has involved many hours of observation using similar scales and checklists (see appendices 2 & 3 for scale and checklist). The writer has also undertaken continuing education programs with the Australian Psychological Society (APS) on observing and assessing behaviour problems in children (Melbourne, Oct., 1986). The observations were undertaken on more than one day and at different times of the day (where possible) to allow for changes in behaviour due to time of the day or day of the week. These variations supplied more data on the child’s placement by indicating factors which may influence that placement.

**Teachers' Measures** In the present study a variety of instruments were used to gather data on the attitudes, strategies and style of teachers with the aim to probe deeply not only teachers' feelings but also aspects of their classroom practices. The Observer Rating Scale (ORS), discussed previously, was also used to enable data on teachers to be tabulated.

The Teachers' Questionnaire was based on a questionnaire designed at the University of Otago (Russell, 1987) (see Appendix no. 4). The Teachers' Questionnaire was modified in two ways; all questions relating to physical disabilities were excluded as they were not relevant to the children involved in this survey and secondly, some questions from the Otago questionnaire were reworded to allow them to be more open ended. This open ended approach allowed teachers to comment on additional issues that they saw as relevant. Pilot studies in the
Bendigo area (Bradshaw, 1987a) suggested that both the researcher and teachers did in fact find open questions more useful. In particular the open ended approach allowed some aspects of integration, which the teachers saw as critical, to be discussed. One aspect which concerned the Victorian teachers was the stress related to integrating children with behaviour disorders. So strong were their feelings on this topic that questions relating to teacher stress were included in the interview questions for New South Wales teachers.

The self report inventory, "Attitudes towards Integration of Disabled Children in Regular schools", (adapted Larivee, 1985; modified Center, Ferguson & Ward, 1988), (see Appendix no. 5), was used to gather data on teachers' attitudes towards integration in a global sense. The inventory was so designed that each question had five responses; Strongly Agree, Agree, Uncertain, Disagree, Strongly Disagree. Each of these responses were awarded a numerical score 5, 4, 3, 2, 1.

Roberts and Pratt (1988) investigated the reliability and construct validity of the inventory within the Australian context. The authors concluded that the inventory, "as a measure of teachers' attitudes towards integration has reliability within the Australian context" (p. 35). This writer supports Roberts and Pratts conclusion and hence the inclusion of the scale in the present study.

The teachers' interview schedule was one used previously at Macquarie University (see Appendix no. 6). The interview questions were so designed to be flexible and to probe into some responses gained from the questionnaire. As mentioned previously, additional interview questions were added for the New South Wales study. A question relating to teacher stress was included because this had been an area in which Victorian teachers had wanted to elaborate on during their
interviews. All teachers were sent a copy of the interview questions prior to the school visit.

**Staff Measures** As with classroom teachers, principals' views, attitudes and strategies were surveyed through the use of more than one instrument. Principals were surveyed using a questionnaire and an interview. The Principals' questionnaire was a modified form of one used by Center, Ferguson and Ward (1988) (see Appendix no. 7). The questions relating to physical disabilities were not included as the children surveyed had been referred for their behaviour problems only. The principals' interview questions were those developed at Macquarie University, 1988; (see Appendix no. 8). Many of the questions were open-ended and allowed the principal to elaborate on issues they considered important to their school. The interview questions were sent to the school prior to the writer's visit.

Support Staff (integration teachers and integration aides) were also questioned over their views on the placement of the child with behaviour disorders. The questionnaire was based on the one used by Larivee (1985). (see Appendix no. 9).

**Parent Measures** Parents' opinions concerning their child's social/emotional progress and the placement of their child were elicited through the use of a Parents' Questionnaire (see Appendix no. 10). The questionnaire was a modified form of one developed at Otago University (Russell, 1987). The modification of the questionnaire related to the omission of questions referring to physical disabilities.

**PROCEDURE**

To enhance the consistency of the observation and interview data, all schools were visited by the same researcher (this writer). As mentioned previously in this chapter the visits to the schools usually consisted of three visits up to three days in duration, depending on the size of the school (in some schools the principal,
classroom teacher and integration teacher were the same person and hence interview and discussion time was reduced). On arrival at the school the interview with the principal was conducted. This interview was followed by the initial contact with the classroom teacher. During the meeting with classroom teachers the teachers' interview was conducted. Some time, at least two sessions each day, was then spent in the classroom. Both observations and the sociometric activities were conducted during these classroom visits.

Parental interviews were conducted following observations and sociometric activities. These interviews involved completing the parents' questionnaire with the parents (see Appendix no 6). These parental interviews were arranged at a time convenient to the parent(s) by the principal. The questionnaires for the principals, classroom teachers and support staffs, if completed, were returned to the writer during the visit. If not, they were posted to the writer following the visits. In Victoria the complete series of questionnaires, interviews, self reporting scales, observation schedules and sociometric activities (see Appendices 1, 2, 3, 4, 5, 6, 7, 8, 9, 10) was received from all fifteen schools. In New South Wales likewise, all fifteen schools completed all questionnaires, interviews, self reporting scales, observation schedules and sociometric activities.

The visits to the schools were conducted during the third and fourth school terms 1988, 1989 for the Victorian schools and third and fourth terms 1990 and 1991 for New South Wales schools. The third and fourth school terms were chosen as it was felt that the students, teachers, principals and parents have had an opportunity to work together for a period of time. By the third and fourth terms of the school year it is anticipated that the peer group and the integrated child have established social bonds e.g. are familiar with each others classroom and playground behaviours.
INDICES

For each school/child scores were obtained of perception of academic integration success (PAI) and perception of social integration success (PSI) using different criteria (based on the work carried out at Macquarie University 1988). The importance of considering both social and academic aspects of integration separately has been stressed by researchers (Kaufman et al. 1975; Warnock Report, 1978). In addition, scores were obtained for perceptions of continued placement (PCP) and perceptions of the appropriateness of support (PAS).

The PSI success was derived by adding scores gained from responses to questions on a number of the questionnaires. As the instruments selected for this study were not previously used with children with behaviour disorders (Macquarie University did not survey children with behaviour disorders) their relevancy can only be on face validity. In support, pilot studies in the Bendigo area (Bradshaw, 1987a), where a number of the questions selected for this study were used, indicated that teachers felt the questions were most relevant. The questions were included because they related to important aspects of integration effectiveness as outlined in the literature and in addition were relevant for children with behaviour disorders. The questions selected in deriving the PSI were found to be valid for Phase 1 (Victoria) of this study and were not changed for Phase 2 (New South Wales).

The PSI success score was obtained by adding the scores gained from responses to questions on the following questionnaires:

1. Child's social/emotional progress (Teachers' Questionnaire, Question 37 parts 2 & 3. Maximum score ten points if answered 1 to both questions. Minimum score 2 if answered five to both questions).

2. How well child gets on with other children (Parents' questionnaire questions 18 & 19. Maximum score 6 if answered 'above average' for both questions. Minimum score 2 if indicated 'slow' for both questions).
3. Peer acceptance/social status (Sociogram, score out of ten depending on which decile the child was placed in relation to classmates. Score of ten indicates acceptance, score of one indicates rejection).

4. Child's social/emotional progress (Support staffs' questionnaire. Question 1 parts 2 & 3. Maximum mark out of ten, if a score of 5 is indicated for both parts. Minimum score of 2 if 1 is indicated).

5. Classroom behaviour (Teachers' Questionnaire, question 34 maximum score of 5 if 1 is indicated. Minimum score of 1 if 5 is indicated).

6. Playground interaction (Teachers' questionnaire, question 35. Maximum score 5 if 1 is indicated. Minimum score of 1 if 5 is indicated).

A total score of 46 was obtainable. A child's total score out of 46 was then converted to percentages (see Table 7).

The PAI success score was obtained by adding together the scores obtained in response to questions on a number of questionnaires, including:

1. Teachers' rating of child's academic progress (Teachers' questionnaire. Question 24 maximum score possible 3 if indicated above average. Minimum score possible 1 if indicated 'slow').

2. Parents' rating of child's academic progress (Parents' questionnaire, question 9 maximum score possible 3 if above average is indicated. Minimum score possible 1 if slow indicated).

3. Support Staffs' rating of child's academic progress (Support staffs' questionnaire, question 1 part a. Maximum score possible 5 if 5 is indicated. Minimum score possible 1 if a 1 is indicated).

4. Academic rating READING (Teachers'/parents' questionnaire, question 25 teachers' questionnaire, maximum score 3 if above average indicated. Question 10 parents'questionnaire, maximum score 3 if above average is indicated. Total combined maximum score 6.).
|   | Child’s social/emotional progress (Teachers’ Questionnaire) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| 1 | /10                                                      | 2 | 4 | 5 | 6 | 6 | 4 | 10 | 2 | 3 | 8 | 6 | 10 | 6 | 4 | 2 | 8 | 8 | 6 | 8 | 6 | 6 | 2 | 10 | 4 | 6 | 6 | 6 | 7 | 6 | 4 |
| 2 |                                                      | 2 | 2 | 3 | 4 | 2 | 2 | 6 | 2 | 2 | 4 | 2 | 3 | 3 | 2 | 2 | 6 | 3 | 4 | 2 | 3 | 4 | 2 | 3 | 3 | 3 | 3 | 4 | 4 | 3 | 2 | 2 |
| 3 | Peer acceptance (sociogram)                             | /10 | 10 | 10 | 3 | 3 | 1 | 1 | 4 | 1 | 1 | 2 | 1 | 7 | 4 | 3 | 6 | 8 | 4 | 2 | 10 | 2 | 10 | 1 | 2 | 2 | 5 | 2 | 2 | 9 | 3 | 1 |
| 4 | Support Staff (S/Staff Questionnaire)                   | /10 | 1 | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 1 | 3 | 2 | 4 | 2 | 3 | 3 | 3 | 7 | 10 | 5 | 9 | 3 | 5 | 5 | 6 | 3 | 5 | 10 | 5 | 6 | 5 | 10 |
| 5 | Class behaviour (teachers’ Questionnaire)               | /5 | 1 | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 1 | 3 | 2 | 4 | 2 | 2 | 3 | 4 | 4 | 3 | 3 | 3 | 3 | 1 | 5 | 3 | 3 | 3 | 3 | 2 | 1 | 2 |
| 6 | Playground Interaction (teachers’ Questionnaire)        | /5 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 1 | 3 | 2 | 4 | 2 | 2 | 3 | 4 | 4 | 3 | 3 | 3 | 3 | 2 | 1 | 2 |
|   | Total                                                   | /46 | 21 | 22 | 20 | 29 | 18 | 17 | 37 | 16 | 18 | 31 | 20 | 34 | 27 | 17 | 24 | 37 | 34 | 33 | 37 | 18 | 31 | 12 | 30 | 18 | 25 | 29 | 12 | 29 | 21 | 21 |
|   | %e                                                      | 45.6 | 47.8 | 43.4 | 62.0 | 39.1 | 36.9 | 80.4 | 34.7 | 39.1 | 67.3 | 43.4 | 73.9 | 58.6 | 36.9 | 52.1 | 80.4 | 73.9 | 50 | 80.4 | 39.1 | 67.3 | 26.0 | 65.2 | 39.1 | 54.3 | 63 | 26 | 63 | 45.6 | 15.6 |

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5. *Academic rating, MATHS* (Teachers'/parents' questionnaire, question 29 teachers'questionnaire. Maximum score 3 if above average is indicated. Question 13 Parents'questionnaire, maximum score possible 3 if above average is indicated. Total possible combined score 6.).

6. *Academic rating, MUSIC* (Teachers'/parents' questionnaire, question 32 teachers'questionnaire, maximum score possible 3 if above average is indicated. Question 16 parents' questionnaire, maximum score possible 3 if above average is indicated. Total possible combined score 6.).

7. *Academic rating, P.E.* (Teachers'/parents' questionnaire, question 33 teachers' questionnaire maximum score possible 3 if above average is indicated. Question 17 parents' questionnaire, maximum score possible 3 if above average indicated. Maximum possible combined score 6).

A maximum score of 35 was obtainable for PAI success. A child's total score out of 35 was then converted to a percentage score (see Table 8).

When examining perceived integration effectiveness it is important to consider both the academic and social aspects. Steer (1985) argued integration was/is "a process of maintaining the participation of all children in the educational programs and social life of regular schools" (p. 4). To establish a total perceived integration score for the child/school the total percentage score for PSI success score was added to the PAI success score (see Table 9). A PCP score was also established.

The **PCP** score was obtained by scoring the responses to questions on a number of questionnaires. The questions asked significant people, in the integration program of the child, to indicate whether the present placement should continue. The PCP score was obtained by responses to the following questions:
|   | Child’s Progress (Teachers’ Questionnaire) | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30   |
|---|------------------------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 1 |                                          | 3  | 1  | 1  | 2  | 1.5| 1  | 1  | 2  | 2  | 1  | 1  | 1  | 1  | 1  | 1  | 1  | 2  | 1  | 1  | 1  | 3  | 1  | 1  | 1  | 1  | 1  | 1  | 1  | 1  | 1  |
| 2 |                                          | 3  | 1  | 1  | 2  | 1  | 1  | 1  | 2  | 2  | 1  | 1  | 1  | 1  | 1  | 1  | 1  | 2  | 2  | 2  | 2  | 1  | 1  | 2  | 2  | 2  | 1  | 2  | 1  | 2  |
| 3 |                                          | 6  | 2  | 2  | 6  | 2  | 2  | 2  | 2  | 6  | 4  | 5  | 3  | 2  | 5  | 3  | 4  | 4  | 5  | 2  | 3  | 3  | 3  | 3  | 3  | 2  | 1  | 2  | 4  | 3  | 3  | 2  | 5  |
| 4 |                                          | 6  | 2  | 2  | 6  | 2  | 2  | 2  | 2  | 6  | 4  | 3  | 2  | 2  | 2  | 2  | 2  | 3  | 3  | 3  | 6  | 2  | 2  | 2  | 4  | 6  | 2  | 2  | 3  | 3  |
| 5 |                                          | 6  | 2  | 2  | 4  | 2  | 2  | 2  | 2  | 4  | 4  | 2  | 3  | 2  | 2  | 2  | 2  | 2  | 2  | 2  | 2  | 3  | 4  | 3  | 4  | 2  | 2  | 2  | 2  | 2  | 4  | 3  |
| 6 |                                          | 6  | 2  | 3  | 3  | 3  | 3  | 3  | 4  | 4  | 3  | 4  | 3  | 2  | 4  | 2  | 2  | 3  | 4  | 3  | 2  | 3  | 4  | 4  | 2  | 3  | 3  | 4  | 2  | 2  | 2  | 2  | 4  | 3  |
| 7 |                                          | 6  | 2  | 3  | 3  | 4  | 4  | 4  | 5  | 1  | 3  | 2  | 4  | 2  | 2  | 2  | 2  | 2  | 3  | 4  | 6  | 5  | 3  | 4  | 4  | 2  | 3  | 3  | 5  | 3  | 2  | 3  | 5  | 4  |
| %    |                                    | 31.4| 27.1| 62.8| 47.1| 45.7| 48.5| 68.5| 65.7| 48.5| 54.2| 37.1| 40.0| 42.8| 37.1| 45.7| 71 | 77.1| 45.7| 48.5| 65.7| 74.2| 37.1| 42 | 42.8| 65.7| 71.4| 37.1| 42.8| 57.1| 60 |

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# TABLE 9

**PERCEPTION OF CONTINUED PLACEMENT (P.C.P)**

|   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
|---|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 1 | Parents' Perception (parents' Questionnaire) | /3 | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 1 | 3 | 3 | 1 | 3 | 1 | 2 | 1 | 3 |
| 2 | Principals' (Principals' Questionnaire) | /2 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 1 | 2 | 2 | 2 | 1 | 1 | 2 | 2 | 1 | 2 | 1 | 1 | 1 | 1 | 2 |
| 3 | Support Staffs' perception (Support staffs' Questionnaire) | /2 | 1 | 2 | 2 | 2 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 1 | 2 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | 2 |
| 4 | Teachers' Perception (Teachers' Questionnaire) | /2 | 1 | 2 | 2 | 2 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 1 | 2 | 1 | 2 | 1 | 1 | 1 | 2 |
| Total | /9 | 6 | 7 | 9 | 9 | 9 | 7 | 8 | 9 | 9 | 9 | 9 | 6 | 8 | 9 | 9 | 8 | 9 | 9 | 7 | 4 | 9 | 9 | 4 | 9 | 4 | 6 | 4 | 9 |
| % |   | 66.6 | 77.7 | 100 | 100 | 77.7 | 88.8 | 100 | 100 | 100 | 100 | 100 | 66.6 | 88.8 | 100 | 100 | 88.8 | 100 | 100 | 77.7 | 44.4 | 100 | 100 | 44.4 | 100 | 44.4 | 66.6 | 44.4 | 100 |

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1. *Parents' perception of continued placement* (Question 29 parents' questionnaire, maximum score possible 3 if indicated regular class).

2. *Principals' perception of continued placement* (Question 17, principals' questionnaire, maximum score possible 2 if indicated yes).

3. *Support Staffs' perception of continued placement* (Question 2 support staffs' questionnaire, maximum score possible 2 if indicated yes).

4. *Teachers' perception of continued placement* (Question 38 part b teachers' questionnaire, maximum score possible 2 if indicated yes). A maximum score of 9 was obtainable.

A child's PCP score out of 35 was converted to a percentage score (see Table 9).

How appropriate was the support received by the school perceived to be? The *PAS* score was obtained by scoring responses to questions on the support staffs', principals' and teachers' questionnaires (see Table 10). The score for PAS was obtained from responses to the following questions.

1. *Support staffs' perception of appropriateness of support* (Support staffs' question 3, maximum score possible 4 if indicated very adequate for all areas).

2. *Principals' perception of appropriateness of support* (Principals' questionnaire question 10, maximum score possible 8 if indicated very adequate to both parts a & b).

3. *Teachers' perception of appropriateness of support* (Teachers' interview, question 4 parts a & b, maximum score possible 6 if indicated yes to all sections).

4. *Teachers' perception of appropriateness of support* (Teachers' questionnaire, questions 21 & 22, maximum score possible 4 if indicated yes to both questions)
| Support Staff | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
|---------------|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| Principal     | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| Teacher       | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| Teachers (Questionnaire) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| Total         | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |

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The total percentages achieved in PSI, PAI, PCP and PAS were averaged to form a total perceived score (see Table 11). Although the indices all measured different aspects of integration in the schools and a total percentage score is open to uncontrollable variables the total percentage score was used only as a guide to discuss certain case studies in more detail. The five schools in each state which scored the highest score on the total perceived score will be examined closely using the information gained from the case study compilations. Any trends which emerged will be discussed in more detail.

As mentioned in a preceeding section discussion in the form of addressing research questions will take place on a number of other variables suggested in the literature as factors influencing integration effectiveness.

A number of the correlations between the variables were calculated using Kendall's coefficient of concordance and Spearman's rank correlation. These two non-parametric measures were selected due to the use of ordinal variables and size of the sample. It cannot be argued that the data accumulated was truly representative of a normal distribution. Non parametric solutions do not rely on any assumptions except that the data represents some order hence an ordinal distribution of data (Siegel, 1956). The Kendall's coefficient of concordance were calculated for variables where a large amount of ties (similar scores) were achieved. Siegel (1956) suggested that when using non parametric statistics, Spearman's rank correlation coefficient (rho) is required when there are not many ties and Kendall's coefficient (r) when there are a large amount of ties. In considering the degrees of freedom, (15 case studies in both states) 0.25 would constitute a significant correlation. Discussion of these correlations will take place in Chapter 5.

As discussed in a previous section, Yesseldyke and Foster (1978) highlighted the need to consider bias in observing children with behaviour disorders. To control
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<th>PERCEIVED ACADEMIC INTEGRATION SUCCESS</th>
<th>TOTAL PERCEIVED INTEGRATION</th>
<th>PERCEPTION OF CONTINUED PLACEMENT</th>
<th>PERCEIVED APPROPRIATE-NESS OF SUPPORT</th>
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<td>67.9%</td>
</tr>
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</table>
to some extent observer bias and hence add to the validity of the observation data contact was made through a visit to seven regional offices in Victoria. Checklists were made on each student summarising observation data (see Table 5). At each of the seven regional offices a member of the visiting teacher service (integration officer), who was familiar with the child/school, was asked to indicate whether they supported or rejected the statements recorded on the observation summary checklists. The total amount of comments agreed with on each sheet were tabulated in percentage form. The results were as follows:

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<th>Case Study No</th>
<th>Percentage</th>
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<td>1</td>
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<tr>
<td>2</td>
<td>92.8%</td>
</tr>
<tr>
<td>3</td>
<td>No visiting teacher service at present, service has been stopped</td>
</tr>
<tr>
<td>4</td>
<td>85.7%</td>
</tr>
<tr>
<td>5</td>
<td>78.5%</td>
</tr>
<tr>
<td>14</td>
<td>90.9%</td>
</tr>
<tr>
<td>16</td>
<td>Visiting teacher on leave terms three and four 1989-no replacement</td>
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CHAPTER 5
RESULTS

As mentioned in Chapter 4 a series of research questions will be responded to in an attempt to achieve the stated aims of this study.

RESEARCH QUESTIONS

Research Question 1. "What factors outlined in the literature as important to integration effectiveness influence effectiveness of integration programs for children with behaviour disorders?" The literature review indicated a number of factors which appeared to influence integration effectiveness (see Figure 2). The data on these factors will be presented in the following order teachers' attitudes, gender of teacher, age/experience of teacher, principals' attitudes, experience of principal, staff attitudes, peer group acceptance, location of the school and size of the school.

Teachers' Attitudes. The literature review indicated that, in general, teachers were supportive of integration. In the present study the teachers' attitudes were surveyed using the "Attitudes towards integration of disabled children in regular classes" scale as this scale has been validated for the Australian setting (Roberts & Pratt, 1988). The scale is a self report (Likert) scale with a number of possible responses indicated and for each response a numerical score was allocated ranging from strongly agree = 5 to strongly disagree = 1. These numerical scores were totalled to indicate a score out of 150 which was scaled down to represent a percentage score (see Table 12). In the present study results gained by Victorian schools on the attitudes scale support the findings suggested in the literature i.e. that teachers generally have a positive attitude towards integration. A significant positive relationship was found between teachers' attitudes towards integration and PSI ($r=.3960$, $\rho=.5419$ see Table 13). No significant correlation was found between PAI and teachers' attitudes towards integration. Results gained on the
<table>
<thead>
<tr>
<th>Case Study</th>
<th>Classroom Structure</th>
<th>Classroom Management</th>
<th>Integration Format</th>
<th>Curriculum Format</th>
<th>Staff Qualification</th>
<th>Location of School Rural=R C=Rural City Metro.=M Size/School</th>
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CORRELATION BETWEEN VARIABLES: RESEARCH QUESTION 1

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<td>$\rho = .3993$</td>
<td>$\rho = .3912$</td>
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<tr>
<td>Social status of surveyed child and PA1</td>
<td>$r = -.3284$</td>
<td>$r = .2887$</td>
</tr>
<tr>
<td></td>
<td>$\rho = -.4297$</td>
<td>$\rho = .3643$</td>
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<tr>
<td>Location of School and PS1</td>
<td>$r = .1755$</td>
<td>$r = .0000$</td>
</tr>
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<td></td>
<td>$\rho = .2142$</td>
<td>$\rho = .0095$</td>
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<td>Location of school and PA1</td>
<td>$r = -.7218$</td>
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<tr>
<td></td>
<td>$\rho = -.8470$</td>
<td>$\rho = .1615$</td>
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<tr>
<td>School Size and PS1</td>
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<td>$R = .2717$</td>
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<td>$\rho = -.0627$</td>
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<tr>
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<td>$r = .4610$</td>
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</tr>
<tr>
<td></td>
<td>$\rho = .6541$</td>
<td>$\rho = .1972$</td>
</tr>
</tbody>
</table>

Note: $r \quad$ = Kendall's Correlation Coefficients

$\rho \quad$ = Spearman's Correlation Coefficients
scale by schools in New South Wales indicated a significant relationship between both PSI and PAI and teachers' attitudes towards integration (\(\text{rho} = 0.4518, r = 0.3290 \& \text{rho} = 0.5933, r = 0.4478\) see Table 13).

Although teachers were generally supportive of integration some difficulties were experienced when integrating children with behaviour disorders. Two factors; stress and lack of in-service courses, were mentioned by a large number of teachers from both states as additional problems associated with the placement of the surveyed child in the classroom. Teachers in New South Wales indicated that often this stress was as a result of not only the child but other staff members and parents of non-disabled children. Three teachers from Victoria and fourteen from New South Wales mentioned the lack of in-service programs for teachers integrating children with behaviour disorders. Only two teachers from New South Wales and four from Victoria had the opportunity to observe/visit the child in the previous class/situation. Eleven teachers from both states commented on the fact that they were spending too much time with the surveyed child at the expense of other children in the class. and were hence critical of their performance. Three teachers from New South Wales commented that they often had to change their natural teaching style to a more authoritarian one to keep the surveyed child on task and this too disadvantaged the other children in the class. Teachers from both states were critical of the level of services forthcoming particularly from regional offices. This lack of support had lead to a number of teachers to question the present placement.

**Gender of Teacher** The literature indicated that the gender of the teacher may influence integration effectiveness. The majority of teachers surveyed were female (11 in New South Wales & 9 in Victoria). The experience of these teachers in the roles however differed quite significantly. In New South Wales six of these female teachers had less than five years teaching experience while in Victoria all but
one had had at least ten years teaching experience. The gender issue was again significant when teachers were asked to comment on the placement of the child in their class the following year. Male teachers tended to be more positive about having the integrated child in their class the following year. In New South Wales only one teacher surveyed (male) would be having the surveyed child in his class the following year. In Victoria only three teachers indicated that they wanted, and would be having, the surveyed child in their class the following year, and all these teachers were male.

In the present study, all scores achieved on the self report scale "Attitudes towards integration of disabled children in regular classes" for male and female teachers (see Table 12) were totalled and a mean score for each established. The mean score for male teachers in Victoria was 76.6% and for female teachers 70.3%. The mean score for male teachers in New South Wales was 63.7% and for females 70.5%. No significant relationship was found between teachers' gender and attitudes towards integration in Victoria (see Table 13). When examining the relationship between New South Wales teachers' attitudes towards integration and gender a significant negative correlation was found (rho=-.2801 see Table 13). The result indicates that male teachers in New South Wales were less positive about integration than their female colleagues.

**Age/Experience of Teacher** Whether a teachers' age or experience influences attitudes towards integration was another variable examined in the present study. Berryman (1981) found that younger teachers had a more positive attitude towards integration than older, more experienced teachers. In the present study, the experience of the teachers was examined by grouping the teachers into three categories (see Table 14); category 1 (less than 10 years teaching), category 2 (10-20
<table>
<thead>
<tr>
<th>CASE STUDY</th>
<th>EXPERIENCE OF TEACHER</th>
<th>YEARS AS PRINCIPAL</th>
<th>GENDER OF PRINCIPAL</th>
<th>GENDER (TEACHER)</th>
<th>GENDER (CHILD)</th>
<th>GRADE DIVISION</th>
<th>DECILE RANK</th>
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</thead>
<tbody>
<tr>
<td>1</td>
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<td>Female</td>
<td>Male</td>
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<tr>
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<td>Male</td>
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<td>Male</td>
<td>Lower 3</td>
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<td>Male</td>
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<td>Upper 1</td>
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<td>Lower 1</td>
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<td>Female</td>
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<td>Female</td>
<td>Female</td>
<td>Lower 1</td>
<td></td>
</tr>
<tr>
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<td>Female</td>
<td>Male</td>
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<td>3</td>
<td>Male</td>
<td>Male</td>
<td>Female</td>
<td>Middle 1</td>
<td></td>
</tr>
<tr>
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<td>Male</td>
<td>Female</td>
<td>Male</td>
<td>Lower 7</td>
<td></td>
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<td>Upper 3</td>
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<td>Male</td>
<td>Female</td>
<td>Lower 6</td>
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<tr>
<td>CASE STUDY</td>
<td>EXPERIENCE OF TEACHER 1. &lt; 10 yrs 2. 10-20 yrs 3. &gt; 20 yrs</td>
<td>YEARS AS PRINCIPAL</td>
<td>GENDER OF PRINCIPAL</td>
<td>GENDER (TEACHER)</td>
<td>GENDER (CHILD)</td>
<td>GRADE DIVISION</td>
<td>DECILE RANK</td>
</tr>
<tr>
<td>------------</td>
<td>-----------------------------------------------------------</td>
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<td>3</td>
<td>16</td>
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<td>Male</td>
<td>Male</td>
<td>Middle 2</td>
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<td>Male</td>
<td>Female</td>
<td>Male</td>
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<td>Male</td>
<td>Middle 2</td>
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<td>2</td>
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<td>Female</td>
<td>Male</td>
<td>Middle 1</td>
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<td>Male</td>
<td>Female</td>
<td>Male</td>
<td>Lower 2</td>
<td></td>
</tr>
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<td>Female</td>
<td>Male</td>
<td>Male</td>
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<td>1</td>
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<td></td>
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<td>10</td>
<td>Male</td>
<td>Female</td>
<td>Male</td>
<td>Lower 1</td>
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<td>Female</td>
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</table>
years teaching) and category 3 (over 20 years teaching). A mean percentage score on the "Attitude toward the integration of disabled children in regular classes" scale was calculated for all three categories:

<table>
<thead>
<tr>
<th>Category</th>
<th>VICT. TEACHERS</th>
<th>N.S.W. TEACHERS</th>
</tr>
</thead>
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<tr>
<td>1</td>
<td>74%</td>
<td>80.2%</td>
</tr>
<tr>
<td>2</td>
<td>73.6%</td>
<td>62%</td>
</tr>
<tr>
<td>3</td>
<td>63.75%</td>
<td>56.9%</td>
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</table>

The results of the mean percentages scores indicated that the more experienced the teacher is the more negative their attitudes towards integration becomes. With Victorian teachers no significant relationship was found between age/experience of the teacher and attitude towards integration (see Table 13). With New South Wales teachers a large negative relationship (rho=-.8867, r=-.7702 see Table 13) was found between the age/experience of the teacher and their attitude towards integration.

**Principals' Attitude** The attitude of the principal was yet another variable indicated in the literature as influencing integration effectiveness. Generally the principals were positive about the surveyed child remaining at the present school. In Victoria twelve of the principals had been in the position for less than 10 years, six less than three years. Two principals had been in the position for over twenty years. In contrast New South Wales principals were generally experienced in their role with nine having more than ten years experience as principal. In Victoria only two principals were female. In New South Wales likewise the majority of principals (10) were male. All female principals in New South Wales were in their first appointment as principal while in contrast only one male principal was. School principals have generally been found to be more supportive of integration than classroom teachers (Barngrover, 1971; Center & Ward, 1987; Overline, 1977). The principals, unlike teachers, were not asked to respond to an attitude scale, rather
they were asked to respond to a question on the principals' questionnaire (Question, 17a) which asked, "Do you think this student should continue to be integrated into a regular class next year?". In Victoria the principals responded in a positive manner, however, the margin was not substantial (57% felt the child should continue to be integrated while 43% felt the child should not). In New South Wales ten of the principals (66.6%) indicated that they wanted the child to continue in a regular class the following year. Using the principals' responses (positive or negative for continued placement in a regular class, see Table 12) an examination was conducted to see if there was a significant relationship between principals' attitude and PAI. In Victoria the relationship was $r = -0.3895$, $\rho = -0.4513$ and in New South Wales the relationship was $r = -0.3411$, $\rho = -0.3953$ (see Table 13). No significant relationship was found between principals' attitude and PSI in either state (see Table 13).

**Experience of Principal** In the present study, the number of years as principal (see Table 14), for those Victorian principals who had responded positively to integration was 4.1 years and for New South Wales principals 12.1 years. The average number of years as principal for those Victorian principals who responded negatively was 11.5 years and for New South Wales principals 10.4 years. The Victorian result would tend to support the findings of Center et al. (1985), however the New South Wales results are in direct contrast. Using Spearman's rank-order correlation a significant relationship was found between the years spent as principals in Victoria and their attitudes toward integration ($\rho = -0.3721$ see Table 13). No such relationship was found in New South Wales schools.

**Staff Attitudes** Attitudes of staff were also examined by adding two additional scores to the teachers' attitude towards integration score (see Table 12). The responses to question 4, part 1, of the teachers' interview was allocated a score of two for each yes response (maximum score possible six). To this score was added
the response from principals to question 14 on the principals' questionnaire. For question 14 'generally positive' was allocated a numerical score of 3 'neutral' a score of two and 'generally negative' a score of one. These three scores were totalled (possible score 19) and scaled to obtain a percentage score for attitudes of staff (see Table 12). In the schools surveyed in Victoria a positive correlation (r=.3903, rho=.5599 see Table 13) was found between attitudes of staff and PSI. A significant relationship was found between PAI and staff attitudes (r=.3154, rho=.3993 see Table 13). In the schools surveyed in New South Wales a positive relationship was found between staff attitude and both PSI and PAI (r=.2648, rho=.3797 and r=.2759, rho=.3912 see Table 13).

The attitude of the staff towards the placement of the child surveyed was mentioned by the majority of principals from both states. The general attitude was that their staffs were supportive of the placement and wanted the placements to continue however there were some issues yet to be resolved. Three principals from New South Wales commented that they felt their staff were not supportive of the placement. In Victoria the size of the class was seen as an issue. The principals felt there was a need to reduce class sizes when integration placements are made, especially behavioural ones. This issue was raised by six Victorian principals yet was not raised by any New South Wales principals. Two principals from Victoria commented on the possibility of the surveyed child not being enrolled the following year unless certain support, previously agreed upon, was forthcoming.

Peer Group Acceptance: The relationship an integrated child develops with his/her peer group is considered to be one of the most important variables in achieving integration success. Through discussion with staff and observations it became apparent that, in many cases the surveyed children were unaware of how unpopular they are. This was supported in both states by the sociograms. In both states the surveyed child chose most of their classmates as their best friends.
especially classmates of the same gender. Unfortunately these choices were not reciprocated, the surveyed children were not chosen by their classmates as their best friend. Most of the surveyed children did not mix well with their peers in the playground, preferring to either play by themselves or with younger children. In Victoria one student surveyed preferred to play with older students. The peer group in most cases seemed to be aware of the child’s behaviour in the playground and preferred not to play with them. One teacher surveyed in Victoria made the comment that integrated children have little time to develop good peer relationships because they were too close to their aide, were withdrawn too frequently from class and had different recess times to their peers. Another problem which added to the difficulty of the child being accepted by the peer group was the number of children surveyed who had attended more than one school. Academically, many of the children were on different programs of work which may also make it difficult to develop acceptable social skills.

When the children were completing the sociograms gender appeared to be a significant factor. Except in case studies 16 & 17 the classes surveyed tended to reject the opposite gender more than their own gender. Interestingly in both case studies 16 & 17 children of the opposite gender were required to sit next to each other. The children in case study 17 were required to work co-operatively with all children in the class in all situations.

The results of the sociograms were often in contrast to comments made by the staff. Observation of children’s acceptance of each other seem to vary from what the children really thought, particularly when it came to rejecting the surveyed child. In four cases the school felt the child was socially integrated but the sociogram results indicated that the peer group had major reservations concerning the child. Only six students received a social status decile rating of five or above. Of
the remaining surveyed children most achieved a social status decile rating of either one or two.

As discussed in Chapter 4, a modified version of the Ohio social acceptance scale (Fordyce, Yauck & Raths, 1946) was administered to obtain responses from the peer group. Responses from this scale were used in the construction of the PSI score. It was important to examine also any relationship between social status ranking and PAI. From the results of the sociogram each child/school achieved a decile rank (see Table 14) this decile rank was then correlated with the school’s PAI score. The Victorian results indicated a negative correlation (r=-.3284, rho=-.4297 see Table 13) between the PAI and social status decile rank suggesting that the higher the peer acceptance level the less chance there was of PAI success. In New South Wales schools a significant relationship (r=.2887, rho=.3643 see Table 13) was found between PAI and social status decile rank.

**Location of the School.** The relationship between integration and factors such as where the school was located and how many children were enrolled in the school were also subjected to debate in the literature. Research into the relationship between effective integration and the location of the school is contradictory. Stephens and Braun (1980) found no significant relationship between the size of the area/region and integration effectiveness. Larrivee and Cook (1979) found that rural areas perceive themselves to be less successful in integration. Center et al. (1985) found that teachers/principals in schools in rural areas have a more positive attitude towards integration.

The schools surveyed in Victoria and New South Wales were situated in a variety of educational regions. For the purpose of this study the schools surveyed were placed into two categories (see Table 12), these two categories were R=Rural; and M=Metropolitan. For the Victorian schools a significant negative relationship
was indicated between location of the school and PAI (r=.7218, rho=.8470 see Table 13). There was no significant relationship between PSI and location of the school. In New South Wales schools no significant relationship was found between PSI and location of the school or between PAI and location of the school.

**Size of the School**  Size of the school and its relationship to integration effectiveness was also a variable investigated in the present study. Larrivée and Cook (1979) found that the size of the school is unrelated to perceived integration success. For the purpose of examining relationships between size of the school and perceived integration effectiveness, schools in the present study were categorized into four categories (see Table 12). These categories included:

- Category 1 = less than 100 students
- Category 2 = between 100 and 250 students
- Category 3 = between 251 students and 400 students
- Category 4 = more than 400 students.

In Victorian schools the correlation between school size and PAI was r=.4610, rho=.6541 (see Table 13). No significant correlation was indicated between PSI and school size. These results tend to suggest that larger schools perceive themselves as being more successful in academically integrating children with behaviour disorders. In New South Wales schools the relationship between the number of children enrolled in the school and PSI was r=.2717, rho=.3899 (see Table 13). No significant relationship was found between PAI and school size.

**Research Question 2**  "Are different strategies used by teachers who are perceived as more or less effective in the integration of children with behaviour disorders?"

**Introduction** Strategies a teacher/staff utilise often depend on environmental factors i.e. building design, school structure. Some discussion needs
to take place on the environmental factors of the schools visited before examination of strategies is undertaken.

Most of the schools visited could be described as traditional in appearance, organization, curriculum presentation and objectives. The schools visited were predominantly of brick construction and appeared to be constructed during the late fifties and sixties. Both states had, in all schools visited, a number of demountables; this was particularly true for Victorian metropolitan schools. Five schools in Victoria and three in New South Wales were presently involved in, or had recently been involved in, renovations/construction of new buildings. Two schools in both states had recently been given approval to commence renovations/construction of additional buildings. The construction/layout of schools visited varied. All schools visited in New South Wales had at least some grassed area for the children to play on unlike Victorian schools where two schools visited had no grassed areas at all.

The majority of schools in both states had opted for organizing classes along grade basis. One school (case study 6) was organised along an open plan design and in this school children from prep were working alongside children in grade 6. The pattern in both states was for composite classes. Four of the New South Wales schools had special education facilities located either in the grounds or next door. These facilities included a special unit staffed by the Spastic Centre, an emotionally disturbed unit, a special school for IM and IO students (intellectually disabled). Eleven schools from Victoria and thirteen from New South Wales used the withdrawal method for delivery of services to the child surveyed (in both states this was contrary to department guidelines). All schools surveyed in Victoria and 12 in New South Wales had established integration committees to oversee integration placements. These committees usually met monthly in Victoria and each term in New South Wales. Two principals in New South Wales commented that the
committees never met. A number of schools (8) in both states had a time-out room and used it with the surveyed child.

The organisation of the classrooms was, in most cases, traditional rows of desks or groups of desks facing each other and distributed around the room. Two classrooms in Victoria were set out in semi circles and in New South Wales eight of the classes visited had traditional row formation while seven classes had the group formation. The older the grade level the more the formation was inclined to be row like rather than groups. In both states the number of children in each class tended to be between 25 and 30 students. In New South Wales five classes had over 30 students and only one classroom had below 20 students. In Victoria a small number of classes had their numbers reduced due to the placement of the child with behaviour disorders. In both states the majority of classes were composites (16) and a number were located in demountables.

No classes visited in Victoria had classroom rules displayed yet in New South Wales five classes had placed their classroom rules in a clearly visible place. One school in New South Wales (case study no 17) had only one classroom rule "no-one has the right to interfere with my body, my property or my right to learn". Most classrooms were arranged so that various parts of the room could be used as activity centres including reading, art, craft, science and music centres.

The Instructional techniques/strategies used in the schools visited were varied and included: activities for early finishers, point systems, co-operative learning opportunities, direct instruction activities, the buddy system, thematic approaches and team teaching strategies. Three classes in New South Wales used text books as the core of their academic learning. Two techniques that were used by a number of schools were positive feedback (immediate) and humour, particularly on the part of the teacher and aimed at themselves. Only one school (Victorian) used a
social skills program and only two schools in either state utilised communication books between home and school. While twelve of the classrooms had computers only one was seen in operation. A variety of incentive systems were used, mainly behaviour modification programs. Certain aspects related to classroom strategies were closely examined these strategies included; classroom structure, classroom management, integration format and curriculum format.

**Classroom Structure**  The classroom structure score was tabulated by totalling the scores gained on the observer rating scale under the heading B. Structure. The observer rating scale is designed around a five minute observation period followed by a two minute recording period. One mark was allocated for each time a teacher made the appropriate response, indicated on the sheet, within the five minute period. Maximum mark possible would be 48 if all responses on the scale were included in all six five minute observation periods. Marks were scaled to percentages for convenience (see Table 12). The relationship between classroom structure and PSI and the relationship between classroom structure and PAI were examined (see Table 15). No statistically significant correlation was found between classroom structure and either PSI or PAI. In the New South Wales schools surveyed the correlation between classroom structure and PAI was rho = -.4029 and r = -.3310 (see Table 15). No significant relationship was found between PSI and classroom structure.

**Classroom Management**  The classroom management score was tabulated from responses made on the observer rating scale under the heading C. Classroom Management. One mark was allocated for each appropriate teacher response, within the five minute period. Maximum score possible was 36 and marks were scaled to percentages for convenience (see Table 12). The relationships between classroom management and PSI and classroom management and PAI were examined. In the Victorian schools surveyed there was no significant relationship
<table>
<thead>
<tr>
<th>VARIABLES</th>
<th>VICTORIA</th>
<th>N.S.W.</th>
</tr>
</thead>
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<td></td>
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<td>Classroom Management and PS1</td>
<td>$r = .1847$</td>
<td>$r = -.2668$</td>
</tr>
<tr>
<td></td>
<td>$\rho = .2247$</td>
<td>$\rho = -.3591$</td>
</tr>
<tr>
<td>Classroom Management and PA1</td>
<td>$r = -.3732$</td>
<td>$r = -.2681$</td>
</tr>
<tr>
<td></td>
<td>$\rho = -.4680$</td>
<td>$\rho = -.4007$</td>
</tr>
<tr>
<td>Integration format and PS1</td>
<td>$r = -.0422$</td>
<td>$r = .4677$</td>
</tr>
<tr>
<td></td>
<td>$\rho = -.0493$</td>
<td>$\rho = .5437$</td>
</tr>
<tr>
<td>Integration format and PA1</td>
<td>$r = .5259$</td>
<td>$r = .1074$</td>
</tr>
<tr>
<td></td>
<td>$\rho = .6094$</td>
<td>$\rho = .1245$</td>
</tr>
<tr>
<td>Curriculum format and PS1</td>
<td>$r = -.2400$</td>
<td>$r = .2714$</td>
</tr>
<tr>
<td></td>
<td>$\rho = -.2801$</td>
<td>$\rho = .3154$</td>
</tr>
<tr>
<td>Curriculum format and PA1</td>
<td>$r = .5303$</td>
<td>$r = .2727$</td>
</tr>
<tr>
<td></td>
<td>$\rho = .6145$</td>
<td>$\rho = .3160$</td>
</tr>
</tbody>
</table>

Note: $r$ = Kendall’s Correlation Coefficients  
$\rho$ = Spearman’s Correlation Coefficients
found between classroom management and PSI. The relationship between PAI and classroom management was $r = -.3732$, $\rho = -.4680$ (see Table 15). In the New South Wales schools surveyed the relationship between PSI and classroom management was $r = -.2668$, $\rho = -.3591$ and between PAI and classroom management $r = -.2681$, $\rho = -.4007$. The result in New South Wales schools suggests that the more rigid the class is managed the less chance there is of PAI and the reduced chance of PSI taking place. However this relationship is only supported in terms of PAI in Victorian schools.

Integration Format. A number of support services and approaches have been recommended to assist in the integration of children with behaviour disorders. In surveying Victorian and New South Wales primary schools two main approaches to support emerge, the resource (support) teacher approach and the consultant teacher approach (see Table 12), both of which have been discussed in Chapter 2. The mean score for PAI and the mean score for PSI for all schools using the consultant teacher and resource (support) teacher approaches were tabulated (see Table 16):

<table>
<thead>
<tr>
<th>TABLE 16</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEAN SCORES</td>
</tr>
<tr>
<td>INTEGRATION FORMAT</td>
</tr>
<tr>
<td>CONSULTATION TEACHER APPROACH</td>
</tr>
<tr>
<td>VICTORIAN SCHOOLS N=4</td>
</tr>
<tr>
<td>ACADEMIC</td>
</tr>
<tr>
<td>SOCIAL</td>
</tr>
<tr>
<td>NEW SOUTH WALES SCHOOLS N=8</td>
</tr>
<tr>
<td>ACADEMIC</td>
</tr>
<tr>
<td>SOCIAL</td>
</tr>
</tbody>
</table>
RESOURCE TEACHER APPROACH

VICTORIAN SCHOOLS  N=11
ACADEMIC  39.1%
SOCIAL  52.2%

NEW SOUTH WALES SCHOOLS  N= 7
ACADEMIC  57.1%
SOCIAL  54.3%

CURRICULUM FORMAT

SAME CURRICULUM

VICTORIAN SCHOOLS  N = 4
PAI  57.8%
PSI  46.1%

NEW SOUTH WALES SCHOOLS  N = 10
PAI  58.5%
PSI  58.8%

MODIFIED CURRICULUM

VICTORIAN SCHOOLS  N = 11
PAI  43.5%
PSI  55.7%

NEW SOUTH WALES SCHOOLS  N =
PAI  50.8%
PSI  46%
In Victorian schools the relationship between integration approach utilised and PAI was $r = 0.5259$, $\rho = 0.6094$ (see Table 15). No significant relationship was found between Integration format and PSI. In New South Wales schools the relationship between PSI and integration format utilised was $r = 0.4477$, $\rho = 0.5437$ (see Table 15). No significant correlation was found between PAI and integration format.

**Curriculum Format** Gow et al. (1988) claimed that "the most significant key to successful integration is the quality and appropriateness of the program provided for the individual student" (p. 17). The observer rating scale allowed the observer the opportunity to gather data on aspects of curriculum presentation. The schools surveyed were categorized into two groups; those where the children were using the same curriculum and those where a modified curriculum was being used (see Table 12). The mean score for PAI and PSI for all schools using the same curriculum and using modified curricula were tabulated (see Table 16).

The results for Victorian schools suggest that students on the same curriculum format have a better chance of being perceived as academically integrated than those on modified curriculum formats. In contrast however, students on modified curriculum formats have a better chance of being perceived as socially integrated. The results for New South Wales schools indicated that integrated students who are on the same curriculum as their peer group have a better chance of being perceived as both academically and socially integrated. The results also indicate that a student who is on a modified curriculum has less chance of being perceived as socially integrated than academically integrated. The Victorian results indicated a significant positive correlation ($r = 0.5303$, $\rho = 0.6145$ see Table 15) between type of curriculum and PAI. No significant relationship was found between PSI and curriculum format. In New South Wales the relationship between PAI and curriculum format was $r = 0.2727$, $\rho = 0.3160$ see Table 15). Similar
results were found for the relationship between PSI and curriculum format (r=.2714, rho=.3154 see Table 15).

**Research Question 3**  "Do staff with differing levels of qualifications and in-service training have different attitudes towards the integration of children with behaviour disorders?" Question 3 allows the researcher the opportunity to examine yet another factor suggested in the literature as a factor which can influence the effectiveness of integration programs for children with behaviour disorders.

**Staff Qualifications**  The qualifications of teachers was a factor worthy of examination. Only one teacher in New South Wales (case study 16) had any special education units in her pre-service training course. This teacher was at present enrolled in a post graduate course in special education. No teacher in New South Wales had any post graduate diplomas/degrees in special education and only one teacher (case study 22) had attended any in-service courses on children with behaviour disorders. In Victoria a majority of teachers had done some special education units during their pre-service training but only two had post graduate qualifications in special education.

The principals' qualifications, like that of teachers' qualifications, emerged as a factor worthy of closer examination. In Victoria only three principals had any special education training and only one had post graduate qualifications in special education. In New South Wales only one principal had any qualifications in special education (Graduate Diploma in Special Education). No other principal had undertaken any post graduate or pre teaching courses/units in special education. One principal in New South Wales had a post graduate degree in Business Administration (the same principal who had completed a post graduate course in special education).
Relationship between Staff Qualifications and Attitudes towards integration

Stephens and Braun (1980) found that the number of special education courses taken by staff was an important factor in integration success. A staff qualification index was tabulated using data gathered from a number of instruments. These instruments included:

1. The teachers' questionnaire (question 13, 14 & 15, one mark each for each positive response), maximum possible score 6.

2. The principals' questionnaire (question 2), two marks for each positive response, maximum score possible 8. The total possible score on the staff qualification index was 14, the scores being converted to percentages (see Table 12). In Victorian schools the mean score of thirty percent suggests that training in special education is still not widespread among staff. In New South Wales twelve of the fifteen schools surveyed (80%) scored 0% on the staff qualification index. This result suggests that special education training in New South Wales is not very widespread. It would appear that while both states have a lack of special education trained teachers Victoria fared slightly better. Using both Spearman's & Kendall's correlation coefficients a number of relationships were discovered in Victorian schools. The relationship between qualification of staff and PAI was $r = .4633$ and $\rho = .5689$ (see Table 17). No significant relationship was found between qualifications of staff and PSI. In New South Wales schools, owing to the small number of staff who had special education training, little information was gained from correlations.

Research Question 4  "What is the educational placement of the surveyed children one and two years after the initial survey? What factors have influenced this placement?"

Question 4 allows the researcher the opportunity to investigate the factors which may influence the length of time a child is enrolled in a regular school/class.
### TABLE 17
CORRELATIONS BETWEEN VARIABLES; RESEARCH QUESTION 3

<table>
<thead>
<tr>
<th>VARIABLES</th>
<th>VICTORIA</th>
<th>N.S.W.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualifications of Staff and PS1</td>
<td>$r = .0249$</td>
<td>$r = -.1821$</td>
</tr>
<tr>
<td></td>
<td>$\rho = .0000$</td>
<td>$\rho = -.1441$</td>
</tr>
<tr>
<td>Qualifications of Staff and PA1</td>
<td>$r = .5689$</td>
<td>$r = -.1747$</td>
</tr>
<tr>
<td></td>
<td>$\rho = .4633$</td>
<td>$\rho = -.1448$</td>
</tr>
</tbody>
</table>

A number of factors may be responsible for the educational placement of the child after one or two years. These factors can be grouped under a number of headings including: social, academic and resources.

**Social** A common argument put forward by proponents of integration including teachers, psychologists and parents, is that when placement in a regular school takes place social integration occurs. However there is sufficient evidence in the present study to question this argument.

All scores achieved by Victorian and New South Wales schools on the PSI index were added and a mean score for each state was obtained. Victorian schools obtained a mean score of 51.8% and New South Wales 51% (see Table 9). Eight of the schools surveyed in Victoria and six in New South Wales scored less than half the maximum score possible. One school (case study 8) surveyed in Victoria and two in New South Wales (case studies 22 & 27) scored less than 35%. The result suggests, that in some schools in Victoria and New South Wales, social integration is not perceived as taking place.
A number of interesting factors emerged concerning the school history of the children surveyed. In Victoria the majority (9) of the children surveyed were in only their second year or less at their present school. A small number of children (4) had only attended one other school. The majority of children have attended two or more schools in addition to their present placement. Although only in the primary grades five students had attended four or more schools. In New South Wales twelve children had been to two or more schools, five of whom had been to more than three primary schools. Absenteeism was an important factor in New South Wales. Eleven of the surveyed children had been absent from school ten or more days the previous year. Most of the children surveyed experienced academic as well as behavioural problems, some of the academic problems being described as "Self Inflicted".

Fourteen schools in Victoria and eleven in New South Wales had adopted withdrawal programs for the child where individual or small group programs were instigated. In the Victorian schools the majority of children surveyed displayed acting out behaviours with a large number (9) being considered physically dangerous to their peers. Due to the possibility of other children being hurt two children have had their recess and lunch times changed to a different time to that of their peers. Two teachers from New South Wales commented on the use of medication and the lack of communication/discussion concerning its use with medical personnel and parents. Both these teachers commented on erratic behaviour and one child had to be sent home at lunchtime most days as he was "basically unconscious" after lunch.

**Academic** A mean score of 47.48% was obtained for all the PAI success scores from schools surveyed in Victoria and 55.96% from those schools surveyed in New South Wales (see Table 9). Four of the schools surveyed in Victoria and seven from New South Wales scored above half the maximum score possible (case studies 3, 7, 8, 10, 16, 17, 20, 21, 25, 26, 29, & 30). Five schools surveyed in Victoria and
two from New South Wales (case studies 1, 2, 11, 12, 15, 22, & 27) scored 40% or less. One school surveyed in Victoria and six from New South Wales (case studies 7, 16, 17, 20, 21, 25, & 26) scored above 65% for PAI. These results would suggest that the Victorian primary schools surveyed are generally divided about the success of academic integration while schools surveyed in New South Wales were more supportive. The range of scores achieved from schools in Victoria (31.4%-68.5%) was similar to the range of scores achieved by New South Wales schools (37.1%-77.1%).

An interesting fact in New South Wales schools was that six of the teachers commented that the child's best subject was maths where the child often achieved at a level in advance of their peers. Generally however the surveyed children performed below the level of their peers. The vast majority of schools indicated that the surveyed child had great difficulty remaining on task for any period of time.

**Resources** A mean score of 57.22% was obtained from Victorian schools and a mean score of 55.1% from New South Wales schools on the PAS index (see Table 9). The results indicated that the schools, while not being totally satisfied with the level of support, were also not overly critical about the lack of it. Two schools in Victoria (case studies, 7 & 16) and three schools in New South Wales (case studies 26, 29 & 30) scored highly while the majority of the schools scored within the range of 31.8%-68.1%.

The availability and supply of resources to schools may never reach acceptable levels however, the allocation of these resources to schools may well influence attitudes towards integration and hence placement duration. The visits to the schools indicated that the distribution of resources, especially personnel, appeared to be inconsistent. Integration teachers/support teachers were not employed in all schools. One Victorian school, with the need for an integration
teacher, yet refused one by the Victorian Ministry of Education, had the parents' committee pay for an integration teacher. In New South Wales twelve of the schools surveyed had support teachers while only two had integration or teachers' aides employed to assist in the integration of the child with behaviour disorders.

In Victorian schools the appointment of integration aides varied from school to school. In the majority of schools, integration aides were employed, varying in appointments from one to three days a week. A number of schools were not allocated aides while others were not appointed integration teachers. In New South Wales ten of the schools had an itinerant support teacher (behaviour disordered) who, in all cases, according to the classroom teachers, visited too infrequently.

Generally the staff interviewed in both states were very critical about the lack of resources. In Victoria this lack of resources and support was in relation to ministerial support which, when forthcoming, was considered inadequate. This lack of visits to schools from ministerial support personnel was of particular concern and the most appropriate support apparently was gained from outside the ministry. A number of staff commented on the guidance and support gained from the integration support groups, local councils and particularly local special schools.

In New South Wales a number of classroom teachers commented that they received little in-class support as the support teacher usually used the withdrawal model. On a positive note five classroom teachers considered that the relationship they had established with the support teacher was a very beneficial one, two support teachers supported these views. The role of the school counsellor was criticised by two school staffs who argued that because of the number of children counsellors are required to see their results are inadequate. Two principals from both states commented that no other children with behaviour disorders will be enrolled in the school unless services and resources improve. A number of principals (8 from
Victoria & 9 from New South Wales) were concerned about the lack of resources and support from the Department/Ministry

Other factors which may have influenced placement after one/two years include: gender of the child and age of the child.

**Gender of the child** In the present study the relationship between the gender of the integrated child and the attitude of the teacher was examined by comparing the gender of the child with the teachers results on the "Attitudes towards integration of disabled children in regular classes" scale (see Appendix 5). No significant correlation was found between gender of the child and teachers attitudes towards integration for either Victorian or New South Wales teachers.

**Age of the Child** Larrivee and Cook (1979) discovered that teachers' attitudes towards integration tend to become less positive as grade level increases. In the present study the grades in which the integrated child was placed were grouped into three categories: grades prep (kindergarten), 1st and 2nd were the lower division; grades 3rd and 4th were the middle division and grades 5th and 6th were the upper division (see Table 15). A mean score for each division was calculated using the results gained by teachers on the self report scale "Attitudes towards integration of disabled children in regular classes"(see Appendix 5). The mean scores were:

<table>
<thead>
<tr>
<th>Division</th>
<th>VICTORIA</th>
<th>NEW SOUTH WALES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower Division</td>
<td>72.1%</td>
<td>72%</td>
</tr>
<tr>
<td>Middle Division</td>
<td>75.5%</td>
<td>66.8%</td>
</tr>
<tr>
<td>Upper Division</td>
<td>67%</td>
<td>61.4%</td>
</tr>
</tbody>
</table>

These mean scores indicate support for the Larrivee and Cook result i.e. that as grade level taught increases attitudes towards integration decrease. No
significant relationship was indicated between grade taught and teachers attitudes towards integration for Victorian teachers (see Appendix 14). For teachers in New South Wales, as in Victoria, no significant relationship was found between grade taught and teachers attitude towards integration (see Appendix 14).

**Continued Placement** The mean score on the PCP index for schools surveyed in Victoria was 84.4% and for New South Wales 80.7% (see Table 9). These results indicated that staff in both states, despite having mixed feelings about social and academic integration, are adamant the child should continue with the present placement. However, the most support for continued placement did not come from within the schools but from parents. All parents in Victoria (with one exception) and ten parents from New South Wales were very pleased with their child’s placement and wanted the present situation to continue. Four of the parents surveyed in New South Wales indicated that they had major problems with the placement of their child. The PCP score was, for both states, the most supportive aspect of integration indicated by the schools.

**Research Question 5** "*Do different implementational guide-lines in the two states influence the staffs' perceptions of integration effectiveness?*"

Question 5 was designed to investigate the differences in the way the two states implement their respective integration programs and whether the results they have achieved vary and if so why?

Integration programs in both states contrast each other on a number of philosophical and implementational issues. Do these contrasting viewpoints influence perceptions in relation to integration? If these perceptions are different can they be attributed to special education qualifications, size of classes and age/gender of teacher/principal?
In an attempt to address the questions posed the data will be analysed by comparing results gained in each state. The states were compared by examining the perceptions indices, by examining individual and institutional factors and the case studies compilations. Individual factors will include: Qualifications of Staff, Teachers' Attitudes towards Integration, Principals' Attitudes towards Integration, Staff Attitudes towards Integration, Parental Attitudes towards Integration, Age/Grade of Child and Peer Group Support (see Table 18). Institutional factors include: Classroom Structure, Classroom Management, Integration Format, Curriculum Format, Size of Class, Size of School and Location of the School (see Table 19).

Indices. The mean scores for Perceived Social Integration (PSI), Perceived Academic Integration (PAI), Perception of Continued Placement (PCP) and Perceived Appropriate of Support (PAS) for both states were tabulated (see Table 20). The results indicated that New South Wales scored a higher mean score in all areas except PAS score. The differences in the mean scores were insignificant except, once again, in the area of PAS. Victorian teachers, despite scoring lower mean scores on PSI, PAI & PAS indices, generally perceived support as being more appropriate than their colleagues in New South Wales. The highest mean score in both states was the PCP score and the lowest mean score in both states was PAI.
### TABLE 18

**COMPARISON SCORES FOR VIC & N.S.W.**

**INDIVIDUAL FACTORS**

<table>
<thead>
<tr>
<th></th>
<th><strong>VIC</strong></th>
<th><strong>N.S.W.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Qualifications</td>
<td>29.9</td>
<td>9.0</td>
</tr>
<tr>
<td>Teachers’ Attitudes</td>
<td>71.0</td>
<td>68.8</td>
</tr>
<tr>
<td>Principals Attitude</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Negative</td>
<td>46.6</td>
<td>40.0</td>
</tr>
<tr>
<td>- Positive</td>
<td>53.3</td>
<td>60.0</td>
</tr>
<tr>
<td>Staff Attitudes</td>
<td>71.0</td>
<td>65.0</td>
</tr>
<tr>
<td>Parental Attitudes</td>
<td>91.1</td>
<td>79.9</td>
</tr>
<tr>
<td>Experience Teacher (mean years)</td>
<td>12.5 yrs</td>
<td>12.8 yrs</td>
</tr>
<tr>
<td>Number of teachers in each group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Group 1</td>
<td>2</td>
<td>-7</td>
</tr>
<tr>
<td>- Group 2</td>
<td>9</td>
<td>-4</td>
</tr>
<tr>
<td>- Group 3</td>
<td>4</td>
<td>-4</td>
</tr>
<tr>
<td>Experience of Principal</td>
<td>6-9 yrs</td>
<td>11-5 yrs</td>
</tr>
<tr>
<td>Gender of Teacher</td>
<td>M = 11</td>
<td>M = 4</td>
</tr>
<tr>
<td></td>
<td>F = 4</td>
<td>F = 11</td>
</tr>
<tr>
<td>Gender of Child</td>
<td>M = 11</td>
<td>M = 15</td>
</tr>
<tr>
<td></td>
<td>F = 4</td>
<td>F = 0</td>
</tr>
<tr>
<td>Age/Grade of Child</td>
<td>L = 9</td>
<td>L = 7</td>
</tr>
<tr>
<td></td>
<td>M = 2</td>
<td>M = 6</td>
</tr>
<tr>
<td></td>
<td>U = 4</td>
<td>U = 2</td>
</tr>
<tr>
<td>Peer Group Support</td>
<td>Decile 4</td>
<td>Decile 5</td>
</tr>
</tbody>
</table>

**Note:** Mean scores for each of the indexes - see

- F = Female
- L = Lower Division
- M = Male
- M = Middle Division
- U = Upper Division
### TABLE 19
**COMPARISON SCORES FOR VIC & N.S.W.**

**INSTITUTIONAL FACTORS**

<table>
<thead>
<tr>
<th></th>
<th><strong>VIC</strong></th>
<th><strong>N.S.W.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom Structure</td>
<td>40.9</td>
<td>45.73</td>
</tr>
<tr>
<td>Classroom Management</td>
<td>40.2</td>
<td>35.6</td>
</tr>
<tr>
<td>Integration Format</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- resource teacher</td>
<td>(11)*</td>
<td>73.3</td>
</tr>
<tr>
<td>- consultation teacher</td>
<td>(4)*</td>
<td>26.6</td>
</tr>
<tr>
<td>Curriculum Format</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- modified curriculum</td>
<td>(11)*</td>
<td>73.3</td>
</tr>
<tr>
<td>- regular curriculum</td>
<td>(4)*</td>
<td>26.6</td>
</tr>
<tr>
<td>Size of Class</td>
<td>23.3</td>
<td>27.4</td>
</tr>
<tr>
<td>Size of School</td>
<td>30.7</td>
<td>38.4</td>
</tr>
<tr>
<td>Number of Schools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Category 1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>4</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>

**Note:** Mean scores on each index. See chapter 4.

* Number of schools
TABLE 20
MEAN PERCEIVED SCORES FOR VICTORIA & NEW SOUTH WALES.

<table>
<thead>
<tr>
<th></th>
<th>VICTORIA</th>
<th>NEW SOUTH WALES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Social Integration</td>
<td>51.8%</td>
<td>51%</td>
</tr>
<tr>
<td>Perceived Academic Integration</td>
<td>47.48%</td>
<td>55.96%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>84.4%</td>
<td>80.7%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>50.22%</td>
<td>55.1%</td>
</tr>
</tbody>
</table>

Staff Qualifications  A number of individual factors were examined including staff qualifications. A mean score was tabulated from the scores achieved on the Staff Qualifications index for both states (see Table 18). These scores indicate the number of staff who have some qualifications in special education. The results indicated that staff surveyed in Victoria were far more qualified in special education than their colleagues in New South Wales.

Teachers' Attitudes  The mean scores achieved by teachers in both states on the "Attitudes Towards Integration of Disabled Children in Regular Classes" scale was tabulated (see Table 18). The results indicated little difference in the attitudes of teachers in either state towards integration.

Principals' Attitudes  Principals' attitude towards integration in both states was also examined. The percentage of surveyed principals who indicated a negative or positive attitude towards integration was tabulated for both states (see Table 18). The results suggested that principals in both states had very similar views towards integration. What was also clear was that in both states principals were equally unclear about integration and in general more negative, in relation to integration, than their teachers.
Four of the principals surveyed in Victoria and four from New South Wales commented on the lack of resources forthcoming from their respective governments to assist with the placement. Three of the principals surveyed from each state also indicated that they were concerned about the negative attitude their staff had towards integration.

**Staff Attitudes** The mean score on the staff attitude index was tabulated for both states (see Table 18). The result indicated that staffs in both states have similar attitudes towards the integration of children with disabilities. The Victorian teachers surveyed scored slightly better than those teachers surveyed in New South Wales however the point of interest is that about one in three of the staff members surveyed had a negative attitude towards integration.

**Parental Attitudes** A comparison of parental attitudes towards integration was also examined. The mean score was tabulated for parents' response to continued placement of their child in the regular classroom in both states (see Table 18). The results of both states were quite different. Victorian parents were overwhelming in their support of the placement while parents in New South Wales were supportive with some reservations.

**Age/Experience of Teachers** The mean number of years taught by teachers surveyed in Victoria and New South Wales was calculated (see Table 18). The results indicated little difference between the mean number of years taught. Teachers in both states averaged 12 years of teaching experience. When age/experience was correlated with perceived social and academic integration the results were quite different. Teachers surveyed in New South Wales were found to perceive social and academic integration more positively as their age/experience increased. No such correlation was found with teachers surveyed in Victoria. Eleven of the Victorian teachers surveyed felt the present placement caused them
some stress. A question on stress was included in the interview questions for New South Wales teachers. Twelve of the New South Wales teachers indicated that they had experienced stress as a direct result of the placement of the surveyed child in their class. Two additional factors warrant mention: in-service and observing the integrated child in their previous setting prior to integration. Fourteen teachers surveyed in New South Wales indicated a lack of in-service programs on the area of children with behaviour disordered. Only three teachers surveyed in Victoria made similar comments in relation to in-servicing. Half of the teachers surveyed in Victoria had the opportunity to observe the surveyed child in their previous class/setting prior to entry into their class. In contrast only one teacher surveyed in New South Wales had the opportunity to observe the surveyed child before placement into their class.

Comments were made from three teachers surveyed in Victoria and 11 surveyed from New South Wales that the placement of the surveyed child in their class had taken time away from other children in the class. Two teachers surveyed in New South Wales further added that the placement of the surveyed child in their class had caused changes in their teaching strategies which they did not enjoy.

**Gender of Teacher.** As with principals, the gender of the teachers surveyed in both states was recorded (see Table 18). In both states female teachers outnumbered males, in New South Wales the ratio was 3:1. Phase 1 of the study found that male teachers were more positive in their attitude towards integration than female. In Phase 2 no relationship was found between gender of the teacher and attitude towards integration.

**Experience of Principals.** The mean number of years the principals surveyed had been in the role of principal was calculated for both states (see Table 17). The result indicated that in general the principals surveyed in New South Wales had
nearly twice the experience in the role of principal than those surveyed in Victoria. Both states had a number of principals in their first appointments (two in Victoria and five in New South Wales) yet New South Wales had six principals with over 18 years experience while Victoria had only one. The gender of the principals in both states was worthy of note. New South Wales had five female principals, Victoria two. Four of the female principals in New South Wales were in their first appointment as principal. Principals in both states had a lack of special education qualifications but Victoria fared the better. Three principals surveyed in Victoria and only one in New South Wales had qualifications in special education.

**Gender of the Child**  The gender of the child surveyed in both states was recorded (see Table 18). The result indicated that the overall ratio is about 6:1 in favour of males. Only four female students were surveyed out of thirty cases. All children surveyed in New South Wales were male. Teachers surveyed in Victoria were positive about perceived academic and social integration if the student was male. Due to all students being male in New South Wales no correlation between gender and perceived social and academic integration was possible.

**Age of Child**  The children surveyed in each state were categorised into three age/grade divisions; Kinder/Prep, 1st & 2nd = lower division; 3rd & 4th = middle division and 5th & 6th = upper division (see Table 18). Each state had similar numbers of children in each division. The most pleasing aspect was that both states had their largest group of integrated children in the lower division. When age/grade of child was correlated with perceived social and academic integration it was found that in Victoria, the younger the child was, the more positive staff were about the child's social and academic integration. No such finding was found for the schools surveyed in New South Wales.
**Peer Acceptance**  In each state a mean score was tabulated for the surveyed children's social status as achieved on the sociogram. Both states achieved a similar result (see Table 18).

**School History**  The number of schools attended by the children surveyed in both states was very high. In Victoria 12 of the children surveyed had attended two or more schools three having had attended four or more. In New South Wales 12 of the children surveyed had been to two or more schools, five attending more than three. The Victorian children surveyed had, according to their parents and teachers, a high attendance rate (1 or less days absent per term). In contrast the children surveyed in New South Wales had a high absentee rate. Eleven of the children surveyed in New South Wales had had ten or more days off from school the previous year.

A number of institutional factors were also utilised to examine the differences between the two states. These variables included Classroom Structure; Classroom Management; Integration Format; Curriculum Format; Size of Class; Size of School; Location of School.

**Classroom Structure**  The mean score on the Classroom Structure index was tabulated for all schools in both states (see Table 19). The results indicated that while the school surveyed in New South Wales scored a higher mean score the difference was not significant.

**Classroom Management**  The mean scores on the Classroom Management index for teachers surveyed in both states was tabulated (see Table 19). The results indicated that, in contrast to Classroom Structure, Victorian teachers had a higher mean score for Classroom Management than New South Wales teachers surveyed.
Integration Format. Two main forms of integration format were utilised in the schools surveyed: the resource teacher approach and the consultation teacher approach (these approaches have been described in Chapter 2). The percentages of schools using either approach was calculated for both states (see Table 19). The results indicated that schools surveyed in Victoria used the resource teacher approach three times as much as the consultation teacher approach while schools surveyed in New South Wales used the consultation approach more but the result was not significant.

Curriculum Format. The percentage of schools in both states using either a modified or regular curriculum was calculated (see Table 19). The results indicated that the majority of schools surveyed in Victoria use modified curriculums while the majority of schools surveyed in New South Wales use a regular (same as peer group) curriculum.

Size of Class. The average number of children in each class for each state was tabulated (see Table 19). The results indicated that the schools surveyed in Victoria have on average four less children than those surveyed in New south Wales. Only one school surveyed in Victoria had 30 or more children while one third (5) of the classes surveyed in New South Wales had 30 or more children in them.

School Size. The average number of children surveyed in each school from each state was tabulated (see Table 19). The result indicated that the schools surveyed in New South Wales had on average 25% more children enrolled in them than their counterparts in Victoria.

Location of School. When correlated with PSI & PAI the location of the school correlated positively for schools surveyed in Victoria. The results indicated that metropolitan schools perceived themselves as being more successful in the area of
academic integration while rural schools perceive themselves as being more successful with social integration. The schools surveyed in New South Wales did not duplicate these results.

In both states the schools surveyed had established integration committees. In Victoria all schools surveyed had formed integration committees. Eight met monthly, five met each term and two when needed. Twelve schools (80%) visited in New South Wales had established integration committees. Three of the schools met once a month, six met once a term, one when appropriate and two had never met. Four schools in New South Wales had a special needs facility either within their school grounds or adjacent to it. No school visited in Victoria had any special needs facility on site.

**Research Question 6** "What are the attitudes of the parents surveyed towards the integration of children with behaviour disorders? What factors appear to influence these attitudes?"

The literature reviewed indicated that parental attitudes have a major influence on the effectiveness of integration programs. In responding to Question 6 examination of the relationship between the effectiveness of integration programs for children with behaviour disorders and parental attitudes can take place.

A number of important factors emerged in relation to parental attitudes. Fourteen parents surveyed from Victoria and 11 from New South Wales were supportive of their child attending a regular school. The parents who had reservations about their child's placement commented on lack of resources available in regular schools in comparison to a special setting. Three New South Wales parents indicated clearly that they preferred that their child be educated in a special setting in the future. Although many parents commented on the importance of
communicating with the school six principals suggested that there was some conflict between the home and the school in relation to the child's educational and social program.

It was evident through discussion with staff that parents of children without disabilities play an important role in the integration process. Parents of children without disabilities clearly were concerned about the integration of children with behaviour disorders. This concern was expressed through complaints to the principals; most principals commented on the fact that many parents of children without disabilities had confronted them to complain about the behaviour of the surveyed child. The safety of non disabled children, particularly in the playground, was the main area of concern.

The structure of the family of the integrated child indicated some common trends. A number of the parents were single parents and the important role the grandmother had in raising the child was noted by the staff at four schools. Five teachers surveyed in New South Wales commented on the fact that they have never seen the father, two claiming to have never seen or talked to the mother.

Tarr (1987) claimed "integration into regular schools is increasingly being sought by parents who have thought through what they want for their child" (p. 13). In the present study it was seen as important to examine whether parents' attitude towards the placement of their child had any relationship with PAI and PSI. Parents were asked to complete a parents' questionnaire and a parents' attitude index was constructed using the responses to two questions (questions 24 & 25) from this questionnaire. In Victoria the results were convincing, all parents surveyed (with the exception of one) gained the maximum marks for this index. All parents responded with 'pleased' when asked 'how did you feel when you found out that your child would be going into a regular classroom?' (question 24). Additionally,
only one parent indicated any other response apart from 'pleased' when asked 'How do you feel now about your child being in a regular classroom?'

In the schools surveyed in New South Wales ten parents (66.6%) were completely happy with the placement of their child in the regular classroom and wanted this placement to continue. These ten parents indicated that they felt no changes in the integration program were necessary. Five parents (33.3%) had some reservations concerning placement, four requesting substantial changes to the child's integration program.

**DISCUSSION**

The data has been presented in the form of six research questions. Discussion on these six questions will take place in Chapter 7 following discussion on the three follow-up studies. The data examined in this chapter resulted in the emergence of a number of trends. The classrooms visited tended to be composite classes of two grade compositions and housed in demountables. While the classrooms were colourfully decorated with the children's work they were generally overcrowded. In most cases the classes consisted of over 25 children and a number visited in New South Wales were over 30 students. Classroom seating was a mixture of traditional row formation and groups of desks. The row formation tended to be utilised in older grades while desks grouped together tended to be used for the younger children. Each classroom visited had ready access to a computer, yet the computers appeared to be under-utilised. In only one classroom were computers seen to be used.

A number of instructional techniques were used in the classrooms including: strict adherence to text books, class point systems and activity centres established around the classroom. Other instructional techniques including team teaching, co-operative learning, communication books and buddy systems were seldom used.
Humour was acknowledged by teachers as an important teaching strategy. The classroom strategies of both states indicated little use of social skills training. Finally, contrary to the integration policies of both states, the withdrawal policy was used by all the schools. Closer examination of the data using correlation coefficients indicated that PAI may be influenced by the classroom structure yet PSI did not appear to be. The data also suggested that classroom management may influence PSI and PAI. In discussion with staff it was evident the resources were considered less than adequate. The data, when examined closer, indicated that the influence of either resource teacher approach or consultation teacher approach may be nullified by the widespread use of the withdrawal method. The curriculum format a school/teacher (modified or regular curriculum) utilised did appear to influence perceived integration effectiveness, both academically and socially.

In general, staff support for integration in most schools seemed to be divided. The gender and qualifications of staff formed interesting patterns. Principals were usually male, experienced in the role of principal, supportive of integration yet untrained in special education. The examination of the data using correlation coefficients indicated that the principals's attitude towards integration did appear to influence PAI but not PSI. A significant relationship between years spent as a principal and attitude towards integration was found only in Victorian schools.

The teachers were generally female, experienced in the classroom with no special education qualifications. These teachers appeared very aware of the stress factor involved in having a child with behaviour disorders in the class. Teachers were also concerned about the lack of in-service programs on the integration of children with behaviour disorders and the level of support/visits from their various departments. Only three teachers indicated that they had attended in-service courses on teaching children with behaviour disorders. A number of the teachers questioned the continued placement of the child in the regular school and very few
had opted to have the child in their class the following year. The majority of
teachers did not have the opportunity to observe the child before the placement
decision was made. On closer examination of the data it appeared that teachers in
general have a positive attitude towards integration. A teacher’s positive attitude did
apparently influence PSI but the relationship with PAI was less clearly indicated. The
results tended to support the premise that the more experienced a teacher is the
more negative their attitude towards integration becomes. The relationship between
teachers’ gender and attitudes towards integration were less clearly defined.

The students surveyed in the present study were generally male, had a
school history indicating enrolment in a number of schools and absenteeism was
above the average of their peers. Acting out behaviour, particularly aggressive
behaviour towards other children, was the most common behaviour highlighted by
staff. A number of the surveyed children appeared not to mix well with their peers
and gender appeared to be a crucial factor when completing sociometric activities.
Generally the results of the sociometric activities indicated that the children with
behaviour disorders were rejected socially by their peers. No significant correlation
was found between gender of the child and teachers’ attitude towards integration.
There was some indication that as the grade level taught increases teachers’
attitudes towards integration decreases.

The parents of the surveyed children strongly supported the view that their
child should remain in a regular school/class. Some parents in New South Wales
did have some reservations concerning resources available in regular schools. There
were some complaints from parents of non disabled children about the behaviour of
the integrated child.

The data gathered through observations, discussions, questionnaires and
surveys highlighted many issues in relation to the way in which the school
undertook the placement. Clearly the distribution of resources/support to schools had been inconsistent. No school had a full time teacher’s aide and many did not have a teacher’s aide at all. Many of the staff interviewed commented on the regular assistance they gained from special school staff. Stress was clearly a real issue. As a direct result of having the child with behaviour disorders in their class, two teachers were on stress leave, one other teacher was on leave without pay, two were taking the following year off from teaching and one had decided it was time to start a family (earlier than planned). A number of staff also mentioned that their various state departments were attempting to reduce the support offered to their school the following year.

As mentioned previously, full case study profiles for case studies 3, 4, 7, 10, 12, 16, 17, 19, 26 & 30 (the highest perceived total scores in each state) have been included in the appendix (see Appendix 13). A diagrammatical summary (see Table 21) and one page summary on all case studies (see Appendix 16) have been included in this study. (Full case study profiles on all case schools are available on request from the writer).
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**VICTORIA**

**Note:** M = Month  WN = When needed  W = Week  T = Term  F-T = Full Time
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<td>X</td>
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</tr>
<tr>
<td>Integration Support Meeting</td>
<td></td>
<td></td>
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<td></td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>M</td>
<td>WN</td>
<td>W</td>
<td>T</td>
<td>T</td>
<td>T</td>
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<td>M</td>
</tr>
<tr>
<td>Stress Factor</td>
<td></td>
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<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>X</td>
<td>X</td>
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</tr>
<tr>
<td>Integration Aide</td>
<td>.6</td>
<td>.6</td>
<td>.6</td>
<td>2</td>
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</tr>
<tr>
<td>Integration Teacher</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Communication Book</td>
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<td></td>
<td></td>
<td>X</td>
<td>X</td>
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</tr>
<tr>
<td>Lack of Professional Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Withdrawal Program</td>
<td></td>
<td></td>
<td></td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Relationship with Parents</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Lack of In-service Programs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Traditional Grade Structure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Humour of Teacher</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Time Spent on Integrated Child</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Composite Classes</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**N.S.W.**

Note:  M = Month    WN = When needed    W = Week    T = Term    F-T = Full    Time    NH = None Held
CHAPTER 6
FOLLOW-UP STUDIES

INTRODUCTION

It was envisaged that a number of follow-up studies would be made in relation to the initial (Victorian) study. Three follow-ups studies were conducted to examine whether the results gained in the initial survey were maintained over a period of time. The first follow-up questionnaire was sent to school principals in June 1989. In November 1989 the second follow-up questionnaire was sent to those principals who had responded to the first questionnaire. The final follow-up questionnaire was sent in December 1990 to all those principals who had responded to the first two questionnaires (see Appendix 12 for copies of the three follow-up questionnaires). Only those principals who responded to all three questionnaires were included in the results.

The three questionnaires were sent to principals because they were seen to be in a similar position, in relation to the integrated child, as they had been six, twelve and twenty-four months prior. This was not the case with classroom teachers as all but three of the children surveyed in the original research had changed classes after one year. After two years, only one of the teachers originally questioned still taught the surveyed child.

THE FOLLOW-UP QUESTIONNAIRES

Fourteen school principals returned the first follow-up questionnaire completed, one principal having been transferred to another school. The second follow-up questionnaire, completed by eleven school principals, was based on the first follow-up questionnaire. Two questions in the second questionnaire had been reworded to allow principals the opportunity to address issues relevant to their own particular school. The rewording did not change the objective of the original
question. The third follow-up questionnaire, worded the same as the second, was sent in December 1990 to the eleven principals who had completed and returned the second questionnaire. Ten principals returned the third follow-up questionnaire completed. The three follow-up studies created a longitudinal examination of the placement of these ten children in a regular school. Longitudinal studies are often plagued with problems such as attrition. While this research experienced a number of subjects becoming unavailable, their unavailability could indicate one of the difficulties in educating these children i.e. change of school/home environment.

The results for the third questionnaire varied somewhat from the first two follow-up questionnaires as a result of the fact that in the twelve month period following the second follow-up study five students (33.3% of the initial study, 50% of the response rate for this follow-up) had been expelled from school or have been transferred to a special setting. Within the two year period since the initial survey ten (66.6%) of the originally surveyed students had either progressed to high school, had been expelled or transferred back to a special setting. The history of schooling, for the last two years, of the fifteen Victorian students initially surveyed is as follows:

<table>
<thead>
<tr>
<th>CASE STUDY</th>
<th>SCHOOL HISTORY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Transferred to Special School full time - no plans for reintegration.</td>
</tr>
<tr>
<td>2.</td>
<td>Still attending surveyed school</td>
</tr>
<tr>
<td>3.</td>
<td>Left surveyed school - home tutoring</td>
</tr>
<tr>
<td>4.</td>
<td>Still attending surveyed school</td>
</tr>
<tr>
<td>5.</td>
<td>Left surveyed school - non attendance at any school</td>
</tr>
<tr>
<td>6.</td>
<td>Transferred to Special school full time - no plans for reintegration</td>
</tr>
</tbody>
</table>
7. Still attending surveyed school
8. Transferred to Special School full time
9. Still attending surveyed school
10. Still attending surveyed school part time placement
11. Transferred to special school, expelled from this school, enrolled in another Special setting.
12. Moved from district enrolment unknown
13. Left school - enrolment unknown
14. Left school - enrolment unknown
15. Attending surveyed school on a part time basis

Discussion will now take place on the results of the three follow-up studies.

RESULTS

The results will be discussed question by question in the format the questions were asked on the follow-up questionnaires. The results of each question will be examined for the three follow-up studies together.

**Question 1** “How adequate, in your opinion, are the present resources to support this student’s continued enrolment at this school?”

**Adequacy of Resources**

<table>
<thead>
<tr>
<th></th>
<th>1st(6/89)</th>
<th>2nd(12/89)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Adequate</td>
<td>10%</td>
<td>20%</td>
<td>30%</td>
</tr>
<tr>
<td>Adequate</td>
<td>70%</td>
<td>40%</td>
<td>40%</td>
</tr>
<tr>
<td>Not Very Adequate</td>
<td>10%</td>
<td>20%</td>
<td>30%</td>
</tr>
<tr>
<td>Not at All Adequate</td>
<td>10%</td>
<td>20%</td>
<td>0%</td>
</tr>
</tbody>
</table>
In general the results indicate that principals felt that resources were adequate. This view however was becoming more divided as the placement continued. A considerably larger proportion of principals indicated discontentment with resources in the second follow-up study. The third follow-up study was more positive, yet some concern was still indicated in regards to adequacy of resources.

**Question 2** (a) "How often are review meetings concerning this placement held?" (b) Who generally attends these meetings? (c) How is the student's progress evaluated? (d) What happens/ would happen if the student's placement does not appear to be working?

(A) **REGULARITY OF REVIEW MEETINGS**

<table>
<thead>
<tr>
<th>Frequency</th>
<th>1st(6/89)</th>
<th>2nd(12/89)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Once a Year</td>
<td>10%</td>
<td>20%</td>
<td>30%</td>
</tr>
<tr>
<td>Once a Term</td>
<td>60%</td>
<td>50%</td>
<td>70%</td>
</tr>
<tr>
<td>Once a Month</td>
<td>20%</td>
<td>30%</td>
<td>0%</td>
</tr>
<tr>
<td>Once a Week</td>
<td>10%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The regularity of review meetings tended to remain the same over the first twelve month period. The second twelve month period suggested that the majority of schools conducted their review meetings once a term or once a year, whereas previously once a month or more frequent meetings had been deemed necessary.

(B) **ATTENDANCE AT MEETINGS**

<table>
<thead>
<tr>
<th>Role</th>
<th>1st(6/89)</th>
<th>2nd(12/89)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class Teacher</td>
<td>80%</td>
<td>90%</td>
<td>100%</td>
</tr>
<tr>
<td>Parent/S</td>
<td>90%</td>
<td>80%</td>
<td>100%</td>
</tr>
<tr>
<td>Principal</td>
<td>80%</td>
<td>80%</td>
<td>100%</td>
</tr>
<tr>
<td>Health/Med Prof</td>
<td>90%</td>
<td>50%</td>
<td>20%</td>
</tr>
</tbody>
</table>
INTEGRATION TEACHERS/AIDES

<table>
<thead>
<tr>
<th></th>
<th>1st(6/89)</th>
<th>2nd(12/89)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>OTHER</td>
<td>30%</td>
<td>40%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Results indicate very little difference in the composition of the review (support) groups over the two year period. One interesting result was the decline in the number of outside health/medical personnel who were attending the review meetings and the presence of support staff (integration teacher/aid) was seen to be becoming more essential at these meetings.

(C) HOW PLACEMENT IS EVALUATED

<table>
<thead>
<tr>
<th></th>
<th>1st(6/89)</th>
<th>2nd(12/89)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>OBSERVATION</td>
<td>50%</td>
<td>80%</td>
<td>100%</td>
</tr>
<tr>
<td>CONSULTATION</td>
<td>20%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>ACADEMIC</td>
<td>20%</td>
<td>30%</td>
<td>30%</td>
</tr>
<tr>
<td>BEHAVIOUR</td>
<td>30%</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>CHECKLISTS</td>
<td>0%</td>
<td>30%</td>
<td>20%</td>
</tr>
</tbody>
</table>

The results indicated an increasing awareness of, and the use of, informal and formal methods of assessment. Observations and checklists in particular were being widely used as the duration of the placement increased.

(D) IF PLACEMENT UNSUCCESSFUL

<table>
<thead>
<tr>
<th></th>
<th>1st(6/89)</th>
<th>2nd(12/89)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHANGE CLASS</td>
<td>40%</td>
<td>30%</td>
<td>20%</td>
</tr>
<tr>
<td>CHANGE PROGRAM</td>
<td>10%</td>
<td>0%</td>
<td>20%</td>
</tr>
<tr>
<td>ASSISTANCE( REGIONAL OFF)</td>
<td>30%</td>
<td>30%</td>
<td>60%</td>
</tr>
<tr>
<td>OTHER SETTING</td>
<td>0%</td>
<td>30%</td>
<td>0%</td>
</tr>
<tr>
<td>OTHER</td>
<td>0%</td>
<td>20%</td>
<td>20%</td>
</tr>
</tbody>
</table>
The results indicated that assistance (usually external) was being considered more and more as the duration of the placement increased. A change in class seemed to be becoming less of an option if placement was unsuccessful.

In summary a number of patterns emerged from the responses indicated in question 2. Most review meetings were held monthly. The composition of most of these meetings was, parent, classroom teacher, integration teacher/aide, principal and at least one other professional from a medical discipline. The child's progress is usually assessed through observation, discussion and academic modes. If the placement was not successful assistance from external groups appeared to be the likely outcome.

**Question 3** "What has been the attitude of others in the school towards this student's placement, (other staff, other pupils and parents of other pupils). Generally positive, generally negative, neutral?

**ATTITUDES OF OTHERS TO PLACEMENT**

<table>
<thead>
<tr>
<th></th>
<th>1st(6/89)</th>
<th>2nd(12/89)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>STAFF</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>generally positive</td>
<td>70%</td>
<td>60%</td>
<td>100%</td>
</tr>
<tr>
<td>neutral</td>
<td>20%</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>generally negative</td>
<td>10%</td>
<td>30%</td>
<td>0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>1st(6/89)</th>
<th>2nd(12/89)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PUPILS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>generally positive</td>
<td>80%</td>
<td>70%</td>
<td>80%</td>
</tr>
<tr>
<td>neutral</td>
<td>20%</td>
<td>30%</td>
<td>0%</td>
</tr>
<tr>
<td>generally negative</td>
<td>0%</td>
<td>0%</td>
<td>20%</td>
</tr>
</tbody>
</table>
OTHER PARENTS

generally positive 50% 60% 60%
neutral 50% 30% 10%
generally negative 0% 10% 30%

In comparing the results between the first two questionnaires it is clear that there is a continuing negative response from both staff and other parents towards the placement of the child with behaviour disorders. Other pupils however continued to be generally positive. Responses to the third questionnaire indicated that staff have become far more positive, parents continue to have some reservations but in some cases the peer group are becoming more negative towards the placement.

**Question 4** "Are you aware of any specific problems arising from the student’s placement?" (a). in his/her present class Yes/No. (b). in this school Yes/No. Details.

PLACEMENT PROBLEMS

PRESENT CLASS 1st(6/89) 2nd(12/90) 3rd(12/90)

<table>
<thead>
<tr>
<th></th>
<th>1st(6/89)</th>
<th>2nd(12/90)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>40%</td>
<td>70%</td>
<td>60%</td>
</tr>
<tr>
<td>No</td>
<td>60%</td>
<td>30%</td>
<td>40%</td>
</tr>
</tbody>
</table>

THE SCHOOL

<table>
<thead>
<tr>
<th></th>
<th>1st(6/89)</th>
<th>2nd(12/90)</th>
<th>3rd(12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>40%</td>
<td>60%</td>
<td>60%</td>
</tr>
<tr>
<td>No</td>
<td>60%</td>
<td>40%</td>
<td>40%</td>
</tr>
</tbody>
</table>

The results indicated that placement problems continued to be of concern to principals in both the classroom and playground. Comments on specific problems included: time involved with the individual attention required for the child with
behaviour disorders, the limited expertise of staff, the lack of flexibility of the curriculum, the low morale of the classroom teacher, the complaints from the parents of non disabled children, the lack of background information on the child with behaviour disorders, the lowering of the class tone since placement, the extra discipline required since placement to maintain the classroom control, the forced changes in lesson programs required because the child with behaviour disorders disrupted the planned lesson and finally how tiring the placement was on the teacher. The most frequently made comments were those made in regard to the requirements of individual attention and discipline of class.

**Question 5** "What have been the major advantages of the placement of this child in your class/school for the student, staff and peer group?" (This question was presented in a different format for the first follow-up study).

<table>
<thead>
<tr>
<th>ADVANTAGES TO THE STUDENT</th>
<th>1st (6/69)</th>
<th>2nd (12/89)</th>
<th>3rd (12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>behaviour and schoolwork</td>
<td>50%</td>
<td>40%</td>
<td></td>
</tr>
<tr>
<td>socialization/role modelling</td>
<td>20%</td>
<td>40%</td>
<td></td>
</tr>
<tr>
<td>self esteem</td>
<td>20%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>others</td>
<td>10%</td>
<td>10%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADVANTAGES TO THE STAFF</th>
<th>1st (6/69)</th>
<th>2nd (12/89)</th>
<th>3rd (12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>developed skills</td>
<td>50%</td>
<td>70%</td>
<td></td>
</tr>
<tr>
<td>awareness of difficulties</td>
<td>20%</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>nil</td>
<td>10%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>aren't afraid to take class</td>
<td>10%</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>learnt integration can work</td>
<td>10%</td>
<td>10%</td>
<td></td>
</tr>
</tbody>
</table>

230
ADVANTAGES TO THE PEER GROUP

tolerance and compromise 40% 30%
acceptance of disabilities 30% 40%
empathy 20% 20%
other 10% 10%
nil 10%

The results indicate that in terms of the integrated child the advantages of the present placement are in the areas of behaviour, academic gains and self esteem. These advantages tended to be maintained over the two year period of the follow-up studies. The advantages of the placement to the staff appeared to be in the areas of teaching and programming skills. These advantages tended to become more clear as the duration of the placement extended. For the peer group the advantages of the placement were in the areas of acceptance of disabilities and the development of tolerance and the ability to compromise. This trend was maintained over the two year period.

Question 6 "What have been the major disadvantages of the placement of this child in your school? For the student; for the staff; for the peer group (This question was presented in a different format in follow-up 1).

DISADVANTAGES TO THE STUDENT 1st(6/89) 2nd (12/89) 3rd (12/90)
negative influence on self esteem 10% 10%
academic gains are not great 10% 10%
lack of individual attention 40% 20%
none 20% 40%
not placed in own age group 10%
constraints to conform to "normal" behaviour 10% 20%
behaviour 10% 20%
DISADVANTAGES TO THE STAFF

<table>
<thead>
<tr>
<th>Reason</th>
<th>30%</th>
<th>60%</th>
</tr>
</thead>
<tbody>
<tr>
<td>increased workload and stress</td>
<td>10%</td>
<td>30%</td>
</tr>
<tr>
<td>less energy for rest of children</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>frustration</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>intimidation</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>other</td>
<td>30%</td>
<td>10%</td>
</tr>
<tr>
<td>none</td>
<td>10%</td>
<td></td>
</tr>
</tbody>
</table>

DISADVANTAGES TO THE PEER GROUP

<table>
<thead>
<tr>
<th>Reason</th>
<th>30%</th>
<th>10%</th>
</tr>
</thead>
<tbody>
<tr>
<td>miss out on teachers' assistance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>sterile classroom (limited range of activities)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>behaviour problems can distract</td>
<td>10%</td>
<td>30%</td>
</tr>
<tr>
<td>physically hurt</td>
<td>10%</td>
<td>20%</td>
</tr>
<tr>
<td>loss of tolerance</td>
<td>10%</td>
<td></td>
</tr>
<tr>
<td>other</td>
<td>40%</td>
<td>10%</td>
</tr>
<tr>
<td>none</td>
<td></td>
<td>20%</td>
</tr>
</tbody>
</table>

The results indicate that the main disadvantage of being placed in the regular class to a child with behaviour disorders is in the area of a lack of individual attention. A number of principals commented that they saw no disadvantages, in terms of the child, to the present placement. The main disadvantages of the placement to the staff were in the areas of time and stress. Staff were concerned about the amount of time spent with the integrated child at the expense of other children in the class. These concerns appeared to be maintained over the two year period. The disadvantages to the peer group were in the areas of distraction as a result of the integrated child's behaviour and a reduced amount of time for the teacher to assist them.
**Question 7.** Do you think the integrated student should continue to be integrated into a regular class?

<table>
<thead>
<tr>
<th>CONTINUED PLACEMENT</th>
<th>1st (6/89)</th>
<th>2nd (12/89)</th>
<th>3rd (12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>80%</td>
<td>70%</td>
<td>100%</td>
</tr>
<tr>
<td>NO</td>
<td>20%</td>
<td>30%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Results indicated that over the period of two years the school principals were becoming more positive about the child's placement in the school/class.

**Question 8.** "Would you accept another student with similar disabilities for enrolment at your school?"

<table>
<thead>
<tr>
<th>ACCEPTANCE OF ANOTHER CHILD WITH BEHAVIOURAL PROBLEMS</th>
<th>1st (6/89)</th>
<th>2nd (12/89)</th>
<th>3rd (12/90)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>90%</td>
<td>80%</td>
<td>100%</td>
</tr>
<tr>
<td>NO</td>
<td>10%</td>
<td>20%</td>
<td>0%</td>
</tr>
</tbody>
</table>

The results indicated a more positive attitude towards acceptance of another child with behaviour disorders. The significant point is the number of principals who commented that they would be enrolling the child reluctantly. Most principals felt they had little say in the matter.

**Question 9.** "Are there any comments you would like to make regarding the integration of children with behaviour disorders into the regular school?"

**Follow-up 1.** The responses indicated that principals generally would accept another child with behaviour disorders in their school. The reasons given for not accepting another student include: "would only accept another student with extra
support". "I wouldn't accept another student because of the inadequate support I've received this time", "I wouldn't accept another student because it creates too many behaviour problems" and finally, "I would not accept another student because the placement is not a class placement but rather a school placement and the whole school has changed". Early in the placements it was evident that the principals saw a lack of support as the one major hurdle to the effective integration of children with behaviour disorders. This hurdle; lack of support, was added to as the follow-up studies continued.

Follow-up 2 A wide range of responses resulted from this question. Inadequate teacher training, in dealing with children with behaviour disorders, was mentioned by a number of principals. Stress on the classroom teachers, extra time and workload on the teacher and inadequate resources were also noted by a number of principals. The extra time which had to be found for the additional meetings required of integration. Concern was also expressed for the child with behaviour disorders being the "forgotten part of the integration program". The recommendation from a number of the principals was part-time placement for children with behaviour disorders. To the initial hurdle of lack of support principals added staff stress, time and additional workload.

Follow-Up 3 A number of the principals mentioned the fact that more than one or two children with behaviour disorders in the school stressed the system. Two school principals commented on the problems of part time placement if aides were not available and two school principals mentioned the importance of matching the student with the correct teacher in terms of personality and teaching style. Finally, three school principals mentioned the increased stress level for the classroom teacher and the peer group. Stress continued to be seen as a major hurdle to the effective integration of children with behaviour disorders. Principals continued to be
concerned about the lack of resources and teacher characteristics are increasingly being seen as vital to effective integration.

Question 10 "Are there any other comments you would like to make regarding the integration of students with disabilities into regular schools?"

Follow-Up 1 The responses made include: "As long as a child is improving isn't that effective integration?" "Perhaps integrated children should be placed not so much in age appropriate classes but developmentally appropriate ones". "In the case of students with emotional/social problems or for intellectually disabled students, services and support seem to be more ineffective and difficult to access". "The union must seek to protect its teacher members by: i) right to refuse ii) extra time release iii) time for aide/teacher and I.S.G. meeting iv) alternate year load." "Good school/parent relationships are required". "Integrated child must be seen as integrated into the school not the classroom-each child should have a paired placement to act as an alternative host classroom". "Too much discussion on individual children who are aware of their impact on parents, peers and staff". "Huge fraud perpetrated on primary schools by a government with unrealistic philosophical attitudes/reports to the ministry have been doctored - widespread dissatisfaction regarding the level of resources is evident". "What must this do to teachers?, stress, low self esteem because they cannot get satisfaction from their work. Aside from the educational problems some of the behavioural and social problems have to be experienced to be believed". "Because of the extra work load, both inside the classroom and also on the administration side, there is a deterioration in the quality of service delivered to the rest of the children. (I trust that this is not the practical way of attempting to bring about an egalitarian society, by dragging the rest down to the lower achieving levels)". "I feel that quite often "stop gap" measures are taken and the long term and future of this type of child is not taken into consideration by any agencies". "Many children have a history right
from pre school which continues right through into post school with short term input from a lot of personnel which quite often is ineffective". "I feel social/emotional children do not get sufficient recognition through integration mainly because they do not have a physical illness which can be labelled".

**Follow-Up 2** The response to this question was divided. The majority of the principals (60%) indicated they felt the policy was ineffective for children with behaviour disorders. The remaining principals indicated a positive response (20%) or an indifferent response (20%). The comments that accompanied the responses clarify the reasons for those responses. As previously indicated the stress factor was of concern. The principals commented that children with behaviour disorders appear to stress the school (teachers, peers and principals) more than other categories of children with disabilities. Despite the expressed concerns of educationalists (Pickering, 1986) the ministerial policy made little acknowledgement of this fact. A lack of suitable resources and support for teachers attempting to integrate children with behaviour disorders was also expressed. A number of the principals indicated the importance of adjustment centres as "staffed time-out facilities". (Adjustment centres were closed with the introduction of the ministerial review). Another factor that was included in the principals' comments was the concerns of the parents of non disabled children. These parents were concerned about both the time spent on the integrated child (at the expense of their child's time) and the safety of their child. Generally the principals were in agreement that the ministry were not aware of the difficulties created by the integration of children with behaviour disorders.

**Follow-Up 3** Three principals indicated the need for more resources while two stressed the importance of family commitment; the family must also acquire help. Two principals suggested that the success of the placement had nothing to do with government policy but derived from dedicated and trained staff. The majority of
principals who responded to the three follow-up questionnaires viewed the Ministerial policy on integration inappropriate for children with behaviour disorders.

DISCUSSION

The results of the three follow-up studies will be discussed under the headings of resources, review meetings, placement and general discussion.

RESOURCES

Generally the resources were considered to be adequate in all three questionnaires as indicated by responses to the questions on resources. However the more general questions (Questions 9 & 10) indicated that principals were far from happy with the level of resources. The third questionnaire was the most positive indicating that the initial concerns over inadequate resources may be disappearing over time. In the literature reviewed resources are seen as one of the most important factors related to integration effectiveness (Center, Ferguson & Ward, 1988) and the present follow-up studies would support this premise.

REVIEW MEETINGS

Review meetings are becoming more and more infrequent. One possible reason for this may be that once the child has been placed and appropriate programs implemented it then becomes only a process of monitoring the child's progress. Meetings, it appeared, are only now being held if the need arises or for the end of year evaluations. The composition of the membership committee was also changing as time in the school progressed, less and less medical personnel were attending once placement was underway. There are several possible reasons for this. Firstly, once the appropriate resources are in place the medical personnel may feel that their part in the process is complete. Secondly, it was obvious from the results that as the medical personnel involvement became less the input of support
staff became more. Perhaps with implementation the need changes from one of medical practicalities to one of educational practicalities.

**PLACEMENT**

The evaluation of placement, over the two year period, has shifted its base from formal methods to more informal methods. The placement of students was initially evaluated using such techniques as academic and behaviour objectives and this has shifted quite substantially to techniques such as observation and consultation. A possible explanation for this could be the increased awareness of the value of observation or an increasing belief that social skills are the priority areas for these children rather than academic skills. The schools also appeared to use regional offices more for support as the time in school increased. More than half the principals in the third questionnaire responded that they have sought, and would continue to seek, assistance from regional office, a result in direct contrast to the first questionnaire where most principals indicated that they would seek internal assistance/changes. Why this change in thinking? Principals seem to be more aware of the external resources available to them than they were initially, perhaps as a result of these services being created and advertised. There may be another reason, as one principal suggested “if the ministry of education wants the school to service these students then they had better supply adequate assistance”. In relation to the attitudes of the staff, pupils and parents towards placement attitudes became progressively more positive with time. A possible reason for this may be that there is just no other realistic alternative for a number of these children. While there may be problems with the placement the general feeling was that it was better than no educational alternative.

**GENERAL**

The aim of the three questionnaires was to examine whether the results gained in the initial survey were maintained over a period of time. When examining
the three studies, undertaken two years apart, a number of points need to be clarified. Firstly, the principals who returned all three follow-up surveys were the only ones considered when examining the data on the follow-up studies. The principals who returned all three questionnaires was 10. 66.6% of those originally surveyed. Given the size of the original survey (15 schools in Victoria) this return rate would influence the results gained. Secondly by the time of the third follow-up a number of the originally surveyed children had been expelled from their surveyed school the effect of which is difficult to guage. Finally only one of the classroom teachers initially surveyed still had the child with behaviour disorders in their class. A change of teacher may influence the responses of the principal depending on how much assistance the classroom teacher sought from the principal. Despite the need to consider the above factors the follow-up surveys did indicate some practical and attitudinal changes from those ten principals who responded to all three follow-up studies.

**Practical Changes** The composition and frequency of integration support groups changed over the period, less meetings, less medical professionals involved. Views on the adequacy of resources appeared to change very little with most school principals still indicating that resources were either not very adequate or adequate. The child with behaviour disorders appeared to be less of a problem in the classroom but still considered to be causing problems to the school. The principals were more inclined to use the services of the regional offices than they were in the initial survey.

**Attitude Changes** Staff attitude towards placement was positive while peer group attitudes were still mixed with many schools still indicating a negative reaction from the peer group towards the child with behaviour disorders.
As mention previously the results must be considered in light of the fact that almost one third of the originally surveyed children had been expelled and another third had moved to other schools. It would seem that if the child survived the first two years in the regular school (as a result of such factors as teacher effectiveness, school programs or peer group support) the long term prognosis was more positive.
CHAPTER 7
DISCUSSION

The results will be discussed by responding to the research questions one to six. In Chapter 6 the three Victorian follow-up surveys were examined. This study was not intended to include a series of follow-ups in New South Wales schools due to time restraints however it is anticipated that these follow-ups will be undertaken in the future.

RESEARCH QUESTIONS

In Chapter 5 the data was presented in the form of six research questions. The data gathered will now be discussed.

Research Question 1. "What factors outlined in the literature as important to integration effectiveness influence the effectiveness of integration programs for children with behaviour disorders?"

One of the stated aims of this study was to replace the list of variables suggested in the literature as factors which can influence integration effectiveness (see Chapter 3), with a practical classification schema, consisting of factors which influence the effectiveness of integration for children with behaviour disorders. By analysing the results of Phase 1 (Victoria) a practical classification schema will be developed (see Figure 5). It was anticipated that by then examining the perceptions of those involved in the integration of children with behaviour disorders in New South Wales schools an even more valid classification schema of integration effectiveness could be developed (see Figure 6). This classification schema cannot account for all factors and given the size of the surveys can only be considered as a guide for educational practice when contemplating the integration
FIGURE 5

VARIABLES PERCEIVED AS IMPORTANT IN THE INTEGRATION OF BEHAVIOUR DISORDERED CHILDREN

(Phase 1 - Victoria)

**Individual Variables:**
- Special Ed. Training
- Teachers Attitudes
- Principal Attitudes
- Principal Experience
- Staff Attitudes
  - gender of child
  - age/grade of child
- Support of the peer group
- Parents attitude
- Peer group acceptance
- Student’s social skills
- Support Personnel

**Instructional Variables:**
- Integration Format
- Classroom Structure
- Curriculum Format
- Classroom Management

**Institutional Variables:**
- Length of enrolment influenced by
  - social factors
  - academic factors
  - gender of child
  - age of child
  - Location of the school
  - Size of the School
  - Co-operation Model with
    - Special school
    - Observation of child
    - prior to integration
FIGURE 6

VARIABLES PERCEIVED AS IMPORTANT IN THE INTEGRATION OF CHILDREN WITH BEHAVIOUR DISORDERS

(Phase 2 - N.S.W.)

**Individual Variables:**

- Teachers Attitudes
- Staff Attitudes
- Principal's attitudes
- age/experience of teacher
- special ed. training
- peer group acceptance
- Peer group acceptance
- Support of the parents
- Students social skills
- Support personnel

**Instructional Variables:**

- Integration Format
- Classroom Management
- Classroom Structure
- Curriculum Format

**Institutional Variables:**

- Size of the school
- social factors
- age of child
- Co-operation Model with
- Special school
- Observation of child prior to
  integration
of children with behaviour disorders. Importantly, it will be a classification schema developed from the perceptions of those practitioners who are involved first hand in the process of integrating children with behaviour disorders. As there is a dearth of information on the integration of children with behaviour disorders it is envisaged that the classification schema will attract interest and further research. By responding to each of the research questions the writer will be given the opportunity to select those factors which need to be included on the above classification schema. The final classification schema will be presented in Chapter 8.

The literature indicated that a number of factors influence integration effectiveness. Is the influence of these factors the same for all categories of exceptionalities? Which factors influence the effectiveness of integration programs for children with behaviour disorders? Factors which were examined in the present study included; teachers' attitudes, gender of teacher, age/experience of teacher, principals' attitude, principals' experience, staff attitudes, peer group acceptance, location of the school and size of the school.

**Teachers' Attitudes** The results of the present study indicated that in general teachers' attitudes towards the integration of children with behaviour disorders are positive. The results of the Phase 1 study found that the more positive the attitude, the more chance there was of the child with behaviour disorders being perceived as socially integrated. The Phase 1 study found that while principals were positive, they were not as positive as teachers, a result which was in contrast to that of several other researchers (e.g. Barngrover, 1971; Center & Ward, 1987; Harvey, 1985; Keogh & Levitt, 1976; Overline, 1977 and Thomas, 1982). Each of whom found that the distance from the classroom positively related to attitudes towards integration. All of these studies examined numerous categories of children with disabilities, rather than just children with behaviour disorders. The present study suggests that teachers' attitudes are an important factor in the effectiveness of
integration programs for children with behaviour disorders. Teachers' attitudes will be included on both the Victorian and New South Wales classification schemas (see Figures 5 & 6).

**Gender of Teacher** The quantitative data from the Phase 1 study did not find a significant relationship between the gender of the teacher and their attitude towards integration. However qualitative data indicated that male teachers were more positive towards integration a result which is in contrast to Harvey and Green (1984) who found female teachers more positive towards integration. A possible explanation for the present result may well be the difference in the categories of children studied. The Harvey and Green study examined teachers attitudes towards the integration of all categories of exceptionalities. In the present study only, children with behaviour disorders were examined, suggesting that male teachers may well feel more positive towards the integration of children with behaviour disorders than female teachers. This result may have varied if other areas of disabilities had been included in the study. The results of the Phase 2 study did not indicate any substantial relationship between gender of the teacher and their attitude towards integration.

Data from the case study compilations allowed for further examination of the influence of teacher gender on continued placement of the child in the regular school/classroom. As indicated in Chapter 4 to assist in interpreting qualitative data the five schools, from both states, which scored the highest total perceived score (combination of PAI, PSI, PSP and PAS scores, see Table 9) were examined closely. In each of these five schools in Victoria the teachers were female, a fact that could be simply put down to coincidence when one considers that a high proportion of primary school teachers are now female. The gender issue becomes even more interesting on closer examination. The ratio in the Phase 1 study is 9:6 in favour of female teachers yet, despite similar male/ female representation, in terms of teacher
numbers, the schools perceived as being most effective in the integration process all had experienced female teachers. While the qualitative findings indicated that male teachers perceive themselves to be coping better, in so far as they wouldn't mind having the child for another year in their class, the female teachers scored the highest when all perceived indices were totalled. The question that emerges is, why are female teachers perceived to be more effective when integrating children with behaviour disorders? The fact that four of the female teachers were experienced teachers, may go some way in explaining the present results. Further research needs to take place in this area. In the five New South Wales schools which achieved the highest perceived score (see Table 9) no pattern emerged in terms of teacher gender, three of the teachers were female and two were male. The two male teachers were the most experienced teachers of the five case studies. Four of the classroom teachers had had children with behaviour disorders in the classroom before. The data from the Phase 1 study on teacher gender is unclear and further research is warranted before inclusion on the Victorian classification schema (see Figure 5). For the Phase 2 study the data on gender of teacher and attitudes towards integration was unclear and will not be included (see Figure 6).

**Age/Experience of Teacher.** The results of the Phase 1 study indicated no relationship between age/experience of teacher and attitudes towards integration. The result was in contrast to Berryman (1981) who found that younger teachers had a more positive attitude towards integration. The Berryman study examined all categories of exceptionalities and it may be that, because the children in the present study were all children with behaviour disorders, the results reflected the different sample. Younger teachers may well have a positive attitude towards integration but may be hesitant about having a child with behaviour disorders in their classrooms. *Age/Experience of Teacher will not be included in the Phase 1 classification schema (see Figure 5).*
The results of the Phase 2 study indicated a significant negative relationship between the age/experience of the teacher and their attitude towards integration (see Table 13). Teachers who were the most experienced were more negative towards integration than teachers who had little experience. The result supports Berryman (1981) who found that younger teachers had a more positive attitude towards integration. The Berryman study examined all categories of exceptionalities and it would appear that even when integrating children with behaviour disorders, the younger/less experienced teachers were more positive towards integration. Harvey (1992) offered a possible explanation for the positive attitude of younger teachers towards the integration of children with behaviour disorders. Harvey found that teachers in training held more positive attitudes than both primary and secondary teachers when it came to integrating children with behaviour problems. He concluded, "While it is pleasing to see high levels of self-efficacy among intending teachers it is also tempting to wonder if any have actually had to deal with students who present persistent discipline problems" (p. 43). Perhaps some of the young teachers surveyed in the Phase 2 study have yet to develop more negative attitudes towards integration due to the fact that they have not experienced children with behaviour disorders for any substantial length of time. Age/Experience of Teacher will be included on the Stage 2 classification schema (see Figure 6).

**Attitude of Principal** The attitude of the principal towards integration and the influence of their experience on their attitudes was also investigated. The Phase 1 and Phase 2 studies both suggested that, unlike other categories of children with disabilities, principals are less enthusiastic than teachers about integrating children with behaviour disorders. This result is in contrast to research (Harvey, 1985; Keogh & Levitt, 1976; Thomas, 1982) which argued that degree of support for integration is positively related to distance removed from the classroom.
There are a number of possible reasons for the present findings. Firstly, children with behaviour problems have traditionally been sent to the principal for disciplinary intervention as a result of their behaviour. Secondly, parents of non-disabled children frequently complain to the principal about the behaviour of certain children towards their children. Generally the principals' input into the integration of children with behaviour disorders would be far more time consuming and more in the form of devising practical solutions, as opposed to administrative ones, than that of other other integrated children. Most of this input would be as a result of negative feedback. Principals then, may not have the opportunity to experience and understand these children's positive aspects whereas a classroom teacher may. The Phase 1 study indicated that where principals were positive that attitude related in a negative way with PAI (see Table 13). The relationship between the principals' attitude and PAI is a most interesting result, suggesting that principals were pleased to see social progress (students not misbehaving and being sent to them) and this may well have been how they judged integration success rather than academic progress. Attitude of Principal was included on the Stage 1 classification schema (see Figure 5). The Phase 2 study indicated similar results to the Phase 1 study i.e. principal's attitudes towards continued placement were significantly related to PAI. The principal's attitude appears to be an important variable and hence was included on the Phase 2 classification schema (see Figure 6).

**Experience of Principal** In the Phase 1 study a relationship was indicated between the experience of the principals and their attitude towards integration (see Table 13). This result was in contrast to Center et al. (1985) who found that principals who had less than seven years experience as a principal were more positive towards integration than longer serving principals. Experience of principal was included on the classification schema for Victoria (see Figure 5). In the Phase 2 study, four of the five principals who were negative about continuing the placement of the surveyed child in their school had been principals less than five years. This
result is, once again, in contrast to Center et al. (1985). Despite qualitative evidence no statistical relationship was found between the attitudes of principals in New South Wales and their experience in the role. The experience of principals was not included on the Phase 2 classification schema (see Figure 6).

A possible explanation for the contrasting findings above may be that those principals who have recently been appointed to the position of principal may be more aware of alternative placements for the child than principals who have been in the role for longer periods of time. An alternate explanation may be that less experienced principals feel less able to cope with the requirements of a child with behaviour disorders (Center et al. 1985). More research needs to be conducted in this area.

**Staff Attitudes** In the Phase 1 study a relationship was found between staff attitudes and both PSI and PAI (see Table 13). The results of the Phase 2 study also found that there was a significant relationship between staff attitudes towards integration and both PAI and PSI (see Table 13). This result supports the premise put forward by a number of researchers (Cagler, 1981; Center & Ward; 1987) who claimed teachers' attitudes towards integration are one of the most crucial aspects of effective integration. The result also supports those researchers (Biklen, 1985; Center et al. 1985) who stressed the importance of the principals' attitude in the effectiveness of the integration program. Staff Attitudes were included on both the Phase 1 and Phase 2 classification schemas (see Figures 5 & 6).

**Peer Group Acceptance** Acceptance by the peer group has long been accepted as an important component of integration effectiveness. Is this also the case when integrating children with behaviour disorders? The results of the Phase 1 study indicated a significant negative relationship between PAI and social status decile rank (see Table 13); the higher the level of acceptance by peers, the less
chance the integrated child has of being perceived as academically integrated. There are a number of possible explanations for these findings. The teacher’s view could be that while the much needed social skills are developing the academic skills are considered of secondary importance (Grosenick, George, George & Lewis, 1991; Steinberg & Knitzer, 1992). Another possible explanation is that if the child is being ‘social’ in class this may be at the expense of learning new academic skills (Bradshaw, 1987b). Finally the behaviour of the integrated child might be such that it is difficult to evaluate academic performance.

The results of the Phase 2 study, in contrast to Phase 1, indicated a significant relationship between PAI and social status (see Table 13). The results suggest that if the child is perceived to be coping academically by peers/teacher then there is a better chance the child will be accepted socially. This result is in contrast to Center et al. (1988) who found that successful academic gains do not necessarily lead to social gains, "low social integration scores tend to swamp their more successful academic outcomes" (p. 37). The contrasting results of the Phase 2 study may be explained in part by the fact that the Center et al. study was conducted on children with a wide range of disabilities. The effects of having children with behaviour disorders on similar programs as their peer group may indicate to peers that the child is socially acceptable despite some behaviour problems. Peer group acceptance was included on both Phase 1 and Phase 2 classification schema (see Figures 5 & 6). Although contrasting results were found the relationship between acceptance of the peer group and academic integration need to be considered by practitioners before placement can be undertaken hence needs to be included in a classification schema to assist practitioners.

Location of the School Two other factors were examined; location of the school and size of the school. Cook (1979) found that teachers in schools in rural areas perceive themselves to be less successful with integration than teachers in
metropolitan schools. The results of the Phase 1 study supported this premise. The results indicated that metropolitan school personnel perceived themselves as being more successful with academic integration than school personnel in rural areas. The availability of resources and training centres in the metropolitan areas may explain, in part, the perceived success of metropolitan school personnel in the area of academic integration. In contrast the results of the Phase 2 study indicated no significant relationship between location of the school and either PAI or PSI (see Table 13). Location of the school was included on the Phase 1 classification schema (see Figure 5).

Size of the School The results of the Phase 1 study indicated that the larger the school enrolment, the more the school personnel perceived themselves as being successful in academically integrating children with behaviour disorders. In contrast staff at smaller schools perceived themselves to be more successful with social integration (although this was not a significant result and warrants further investigation). These results are in contrast to those of Larrivee and Cook (1979) who found that the size of the school was unrelated to PSI.

The results of the Phase 2 study indicated that there was a relationship between the size of the school and PSI (see Table 13). These results suggested that larger schools perceive themselves as effective when socially integrating children with behaviour disorders. A possible explanation for the present findings is that the majority of the larger schools were in the metropolitan area and according to Larrivee and Cook (1979) teachers in rural schools perceive themselves to be less successful with integration than teachers in metropolitan schools. One other factor which may explain in part the present findings is resources. Schools with higher enrolments have a much wider resource pool both in terms of personnel and materials. In schools with larger enrolments, the right classroom environment may be a matter of choice rather than one of necessity as it may be in schools with
smaller enrolments and hence less staff. Size of school was included on both Phase 1 and Phase 2 classification schemas despite contrasting results as it was evident that size of the school may well need to be considered when integrating children with behaviour disorders (see Figures 5 & 6). More research needs to be conducted in this area.

In responding to Question 1 a number of variables were shown to be important when integrating children with behaviour disorders. These variables included teachers', principals' and staff attitudes, principals' experience, peer group acceptance and size of the school. These variables have been included in the practical classification schemas for each state (see Figures 5 & 6).

**Research Question 2**  "Are different strategies used by teachers who are perceived as more or less effective in the integration of children with behaviour disorders?"

As indicated in the literature reviewed a number of institutional factors appear to be related to the effectiveness of integration programs. Discussion will now take place to ascertain whether these variables are also important when integrating children with behaviour disorders.

**Classroom Structure**  The first strategy examined was classroom structure. The results of the Phase 1 study indicated no significant correlation between PAI and classroom structure or between PSI and classroom structure.

The results of the Phase 2 study indicated a significant negative relationship between perceived academic integration and classroom structure (see Table 14). The results suggested that the more structured the classroom environment, the less chance the child with behaviour disorders will have of being perceived as
academically integrated. These findings are in contrast to a number of researchers (Gallagher, 1972; Oaks, 1979; Grosenick, George, George & Lewis, 1991; Riester, 1984) who found children with behaviour disorders benefited from a highly structured classroom environment. In support, Steinberg and Knitzer (1992) argued that highly controlled and structured classrooms are "unresponsive to these childrens' seriously underdeveloped social skills" (p. 149).

When looking closely at the five schools in each state which scored the highest perceived scores (see Table 9) certain trends emerge in relation to classroom structure. In both Victoria and New South Wales all schools had traditionally graded structures. Case studies 17 and 19 scored the lowest on the classroom structure index. The other case studies also achieved low scores with the highest being case study no. 26 which achieved a score of 55.5%. Although contrasting findings between quantitative and qualitative results in Phase 1 classroom structure was included on both Phase 1 and Phase 2 classification schemas (see Figures 5 & 6).

**Classroom Management.** Classroom management was also examined. The results of the Phase 1 study indicated a significant negative correlation between classroom management and PAI (see Table 14). The more the teacher managed or directed the class activities the less chance the child with behaviour disorders would have of being perceived as academically integrated. This result suggests that the teacher who controls most of the learning taking place in the class may overlook the individual learning styles of each individual child with behaviour disorders (Steinberg & Knitzer, 1992). If the child with behaviour problems becomes frustrated with a particular teaching style they may become despondent with their academic skills. In summary, the results suggested that the teacher whose lessons are teacher-oriented may not be catering for the individual learning styles of the children in their class.
The results of the Phase 2 study indicated a significant negative correlation between classroom management and both PAI and PSI (see Table 14). The more the teacher directed classroom activities, the less chance the surveyed child would have of being perceived as socially and academically integrated. It would appear that the teacher who controls most of the learning may fall to consider each of the individual learning styles of the students in their class. These teachers may also fail to allow the peer group the opportunity to assist the integrated child both academically and socially. The results support the work of Steinberg and Knitzer (1992) who claimed that during their observations they found teachers of students with behaviour disorders failed to cater for individual styles and needs and what they witnessed instead was "an explicit focus on control" (p. 148).

When examining closely the five schools in each state which achieved the highest scores on the total perceived score certain trends emerge in terms of classroom management. All schools had instigated withdrawal programs whereby the support teacher takes the child out of the classroom while the classroom teacher has the remainder of the class. This withdrawal method was, in four cases, for half an hour four times a week. The literature reviewed was clear on the use of withdrawal programs. Various policies (Integration in Victoria, 1984; The education of students with learning difficulties from preschool to year twelve, 1987) and researchers (Rennie, 1993) state why withdrawal programs should not be used. Rennie (1993) claimed that children with behaviour disorders need to be educated in the regular classroom with the assistance of a behavioural support teacher. In contrast the most effective placements in the present study were undertaken with the use of some withdrawal programs.

Another area of classroom management where the schools achieving the highest total perceived scores had similar findings was in the area of the use of classroom warmth and humour to manage the children. The observation data
indicated that the teachers, in case studies 3, 4, 7, 10, 12, 16, 17, 19, 26 and 30 were all liked by the children in their classes as well as by other staff members and parents. All teachers appeared to have a happy disposition which was supported by comments about the importance of humour and how essential it was in their classrooms. It seemed that humour was most well accepted by the children when it was made by the teacher and aimed at the teacher, [Teacher in case study no 3]).

A number of the principals surveyed commented on aspects of classroom management. They felt tolerance and understanding was needed for integrating children with behaviour disorders and that the classroom teacher was chosen for these traits. The schools which scored the highest total perceived scores all scored very low on the indices of classroom management (the highest score for New South Wales was 40% by case study no. 30). Case studies nos. 26 and 19 scored 11.1% and 16% respectively the two lowest scores. Classroom management was included on the classification schema for both Phase 1 and Phase 2 studies (see Figures 5 & 6).

**Integration Format** The examination of integration format and curriculum format was also undertaken. The review of the literature highlighted a number of approaches used in the integration process. In the Phase 1 study, only two of these approaches (the resource approach and the consultation approach) were being utilised. The results of the present study indicated that the relationship between integration format and PAI and PSI were contrasting between the states (see Table 14). In the Phase 1 study a positive correlation was found between PAI and integration format ($r=0.5259$, $\rho=0.6094$ see Table 14). No significant correlation was found between PSI and integration format (see Table 14). The suggestion from these findings is that the withdrawal of children from their regular class for special educational services (an approach used by all schools utilising the resource approach) helps the child with disabilities cope with their schoolwork but
contrastingly, prevents social interaction with peers. Two important factors emerged from the examination of integration format; firstly all schools utilized some form of withdrawal and many used the resource approach to deliver special education services. Both of these aspects are in direct opposition to the Victorian integration policy. Integration Format was included on the classification schema for Phase 1 (see Figure 5).

In the New South Wales schools surveyed, as was the case in Phase 1, only two approaches to integration were being used. These two approaches were: the support (resource) teacher approach; and the consultation (itinerant) teacher approach. A significant relationship was found between the integration format and PSI ($r=.4677$, $\rho=.5437$ see Table 14). This result is interesting when one considers that eleven of the fifteen schools surveyed in New South Wales were utilising some form of a withdrawal approach. When a child is withdrawn from his/her classroom by the support teacher one would assume that relationship building with peers may be affected. The results of the Phase 2 study suggest that even when most schools were using some form of withdrawal approach, the surveyed child was still perceived by staff to be more socially integrated than students whose schools operated a teacher consultation approach. The present findings may have been influenced by two factors; firstly, the withdrawal approach was used in conjunction with other methods and hence difficulty in measuring social integration as a direct result of the withdrawal approach. It may have been the combination of these strategies rather than just the withdrawal approach that was responsible for the present findings. Secondly measuring social integration is difficult. Although in the present study more than one measure was used to gauge PSI, writers (Chambers & Kay, 1992) have suggested that variables such as teacher bias, peer group bias and the surveyed child's age may make it impossible to generalise the findings from one setting to another. In summary while integration format correlated significantly
with PSI, the reasons for this relationship are difficult to identify. Integration format was included on the classification schema for Phase 2 (see Figure 6).

**Curriculum Format**. In relation to curriculum format the results of the Phase 1 study indicated that students who were on the same curriculum format as their peers were perceived as being more academically integrated. The results also indicated that those students who were on modified curriculum formats were perceived to be more socially integrated. A modified curriculum seemed to allow the integrated child the opportunity to develop a social relationship with peers. There are a number of possible reasons for the result achieved: the child being integrated is coping with his/her work academically thus allowing self esteem to be developed and maintained. The development of self esteem gives the child more confidence to engage socially with his/her peers. Another possible explanation may be that when the integrated child is trying to cope with the same curriculum there are many disruptions to the flow of the lesson as instructions are repeated by the teacher and questions are asked by the integrated child. The peer group without disabilities may react negatively to the integrated child because he/she 'spoil their lessons'. Morse (1980) cautioned that some classrooms can absorb and diminish the behaviours of children with behaviour disorders, while other classrooms climates can be destroyed by the addition of one child with behaviour disorders. It would appear that the curriculum format selected for the integrated child may well assist the peer group in 'absorbing and diminishing' the inappropriate behaviours. A significant negative relationship was found between PSI and curriculum format ($r = -.2400$, rho = .2801, see Table 14). A significant relationship was found between curriculum format and PAI ($r = .5303$, rho = .6145 see Table 14). Curriculum format was included on the classification schema for Phase 1 (see Figure 5).

The results of the Phase 2 study indicated a relationship between curriculum format and PAI ($r = .2727$, rho = .3160 see Table 14). Those students who were on the
same curriculum format as their peers were perceived to be more academically integrated. If a student was seen by the school staff as not coping academically, it would be feasible to assume that child would be placed on a modified format. It could be argued that all children who were on the same curriculum programs as their peers should have been on those programs because the school personnel felt they could cope with them. The point to consider at this stage is the number of children who were on regular curriculum programs (programs the same as their peers) and yet considered by staff not to be coping academically. Why were they not on modified programs? Steinberg and Knitzer (1992), after observing children with behaviour disorders being taught in 13 American states, found that teachers failed to adapt the curriculum to the individual differences, styles, and needs of their students” (p. 147). In the Phase 2 study curriculum format correlated significantly with PSI (see Table 14). This result was in contrast to the findings of Phase 1. In New South Wales schools the same curriculum was perceived to be the most valuable and similar gains appeared to be made in the areas of social and academic integration. In Victoria however the same curriculum was preferred for academic gains and a modified curriculum for social gains. This finding may be the result of such factors as special education qualifications or the availability of personnel resources. Victorian teachers may perceived themselves as more able to place the child successfully on modified programs because of their level of training or the availability of staff in the school with expertise to design these programs. New South Wales teachers on the other hand may perceive that the same curriculum is appropriate for all students because the expertise and and hence opportunities are not available to construct modified programs. Further research needs to be undertaken in this area. Curriculum format, as with Phase 1, was included on the Phase 2 classification schema (see Figures 6).

Research Question 2 allowed for the examination of institutional variables and their relationship on the effectiveness of integration programs for children with
behaviour disorders. A number of the variables were indicated by practitioners as influential in the effective integration of children with behaviour disorders. These variables included: integration format, classroom structure, curriculum format and classroom management. These variables were included on the Phase 1 and Phase 2 models (see Figures 5 & 6).

**Research Question 3** "Do staff with differing levels of qualifications and in-service training have different attitudes towards integration?"

Qualifications of staff was suggested in the literature as a factor which can influence effectiveness of integration programs for children. Does this influence extend to children with behaviour disorders? If qualifications of staff is perceived as an important factor it will be included in the classification schema formed from the perceptions of both states (see Figures 5 & 6).

The results of the Phase 1 study indicated a positive relationship between the qualifications of staff and PAI (r=.5689, rho=.4633 see Table 15). The relationship between PAI and qualifications of staff may be due to a number of factors. For instance, teachers who have taken special education courses may feel more confident in having integrated children in their classrooms. The increase in confidence could influence the expectations, strategies and behaviour techniques used by the teacher and hence improved academic results could be thought to be taking place. It may also be possible that teachers who are trained in special education are expected to be able to cope more effectively with integrated children. As a result of this expectation the teachers perceive themselves as more effective. Another explanation maybe that the best qualified teachers attract the best resources and hence the support of staff and parents. The results supported the earlier work of Center, 1987; Harvey and Green, 1984; Noble, 1988; Paul et al. 1977;
and Stephens and Braun, 1980 all who supported a link between the special education qualifications of staff and integration effectiveness.

The results of the Phase 2 study indicated that while there was no relationship found between staff qualification and either PSI or PAI (see Table 15) a lack of special educational training was evident. Twelve of the fifteen schools surveyed (80%) scored 0% on the staff qualification index. Only one principal surveyed had any special education qualifications. This lack of special education qualifications would make it difficult to attain any valid correlations from New South Wales and hence the relationship between staff qualifications and perceived academic and social gains needs further research. For this reason staff qualifications will be added to both the classification schemas of Phase 1 and Phase 2 (see Figures 5 & 6). The fact that Victorian teachers were better qualified than their New South Wales colleagues in special education yet were no more positive in their attitudes towards integration warrant some comment. It could be argued that if New South Wales teachers had more special education qualifications they may become far more positive than their Victorian colleagues in their attitudes towards integration. It could also be argued that special education qualifications on their own may not influence teachers' attitudes towards integration. The link between special education qualifications and teachers' attitudes towards integration requires further investigation.

**Research Question 4**  "What is the educational placement of the surveyed children one and two years after the initial survey? What factors have influenced this placement?"

The length of time a child with behaviour disorders remains enrolled in a regular school/class may be influenced by certain factors. Factors which are shown to influence this enrolment should be included on classification schemas for both
states (see Figure 5 & 6). As discussed in a previous question data gathered in Phase 1 & Phase 2 was used to form total perceived scores (see Table 9). A total perceived score was tabulated for each child/school. The total perceived score was a combination of the PAI score, PSI score, PSP score and the PAS score. The five schools from each state which scored the highest on this total perceived score were examined closely using the information gained from the case study compilations. The five schools from Victoria were case study nos. 3, 4, 7, 10 and 12 (schools marked with an asterisk on Table 9). These schools all scored over 65% in the total perceived score and results of the third questionnaire found that four of the five students who had scored the highest total perceived score were still attending the surveyed school. The other case study (case study no. 4) had left the school to go on to high school.

The five schools in New South Wales which scored the highest on the total perceived score were case studies nos. 16, 17, 19, 26, and 30 and all of these schools scored over 72% in the total perceived score. The results of a one year follow up indicated that all five students are still attending the surveyed school (see Table 22).

As stated in Chapter 5 several factors may influence the continued placement of the child with behaviour disorders in the regular school. These factors included: social, academic, resources, gender of the child and age of the child.

**Social** Social Integration is considered a critical element in any integration program (Collins, 1984; N.S.W. Department of School Education Special Education Policy, 1993). The literature reviewed indicated that a number of researchers (Madden & Slavin, 1983; Schiefelbusch, 1986) believed that the most important aspect of the concept of integration is its positive social ramifications for both children with disabilities and children without disabilities. In Phase I (Victoria) of
<table>
<thead>
<tr>
<th>CASE STUDY NO</th>
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<tbody>
<tr>
<td>16</td>
<td>Still enroled at surveyed school</td>
</tr>
<tr>
<td>17</td>
<td>Still enroled at surveyed school</td>
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<tr>
<td>18</td>
<td>Still enroled at surveyed school</td>
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<td>21</td>
<td>Still enroled at surveyed school</td>
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<tr>
<td>22</td>
<td>Expelled - Attends no school</td>
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<td>23</td>
<td>Still enroled at surveyed school</td>
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<td>24</td>
<td>Expelled - Attends no school</td>
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<tr>
<td>26</td>
<td>Still enroled at surveyed school</td>
</tr>
<tr>
<td>27</td>
<td>Still enroled at surveyed school with increased support</td>
</tr>
<tr>
<td>28</td>
<td>Transferred to Special Setting</td>
</tr>
<tr>
<td>29</td>
<td>Transferred to Special Setting</td>
</tr>
<tr>
<td>30</td>
<td>Still enroled at surveyed school with increased support.</td>
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</tbody>
</table>
the present study more than half of the schools surveyed scored less than half the maximum score possible (100%) indicating they are less than satisfied with the progress made by the child with behaviour disorders, in the area of social integration. What is more significant is that only one school scored 75% or more on the PSI index. This is a disappointing result if examined in terms of the Victorian integration policy which aims to increase and maintain, in relation to children with behaviour disorders, the participation of children with disabilities in the social life of the regular school. The results of the Phase 1 study support the findings of Danby and Cullen (1988), Hornby (1992) and Lindsay (1989) all who "failed to find support for the effectiveness of integration in attaining the goals espoused in its rationale" (Hornby, 1992, p. 132).

In the Phase 2 study nine schools (60%) surveyed scored more than half the maximum score possible (100%) on the perceived social integration index (PSI). This result indicated general support for the surveyed child's progress in the area of social integration. As indicated in the literature review (Swan, Brown & Jacob, 1987) it is possible to integrate between one third to one half of students presently labelled behaviour disordered. The results of the Phase 2 study would fall within these parameters.

The varying viewpoints expressed in the literature and the contrasting results of the two states surveyed may in part be explained by Gresham (1982). Gresham argued that integration, particularly that of students with behaviour disorders, is designed and argued around a number of undemonstrated assumptions. Gresham claimed the first false assumption is that physical placement in the regular classroom will lead to increased social interaction. The second false assumption is that physical placement in the regular classroom will lead to these children becoming more accepted by their peers without disabilities. The results of the Phase 1 study also tend to support Gresham's premise that
children with behaviour disorders need social skills training to assist in the social integration process. The students' social skills would appear to influence the effectiveness and length of their placement in the regular school. The social skills of the surveyed child was added to both Phase 1 and Phase 2 classification schemas (see Figures 5 & 6).

**Academic** The results of the Phase 1 study indicated that, generally, school personnel do not perceive that academic integration is taking place for children with behaviour disorders. This finding was supported in the literature reviewed by Ruhl and Berlinghoff (1992) who quoted United States Office of the Federal Register statistics which indicated that children with behaviour problems are not performing as well as expected in the regular classroom. The results of the Phase 2 study indicated that the schools surveyed were generally divided over their perception of PAI. In the Phase 1 study only 25% of the schools surveyed perceived the child with behaviour disorders to be successfully integrated academically. Only one school scored above 65% of the maximum score possible. The Victorian integration policy was designed to increase and maintain children with disabilities in the educational programs of regular schools. The school personnel surveyed perceived that this academic integration was not taking place. In the Phase 2 study four of the schools surveyed scored above 70% on the PAI index indicating the surveyed child's progress in the area of academic integration. The remaining eleven schools all achieved scores on the PAI index in the range of 37.1% to 65%. These scores indicated little support for or against academic integration. The literature reviewed indicated that in general children with behaviour disorders who have been integrated into the regular classroom do have difficulty in the academic area (Hornby, 1992; Ruhl & Berlinghoff, 1992). This view was not supported in the Phase 2 study. Academic factors was included in the classification schema for Phase 1 (see Figure 5).
Resources. The interesting result, in relation to support, is the narrow range of scores achieved. All schools surveyed in Victoria scored within the range 45% to 60% indicating that while they are not completely satisfied with the support services they were not overly critical about them. In New South Wales ten of the schools surveyed achieved a score of over 50% on this index. Apart from two schools which achieved a score of over 80%, most of the schools (9) achieved a score in the range of 40% to 60%. The scores indicated that the schools surveyed were neither overly satisfied nor critical of the appropriateness of support. When examining the five schools in each state who scored the highest on the total integration index (see Table 9) resources seem to play an integral part. All five schools surveyed from Victoria had an integration aide and all five from New South Wales had resource/support teachers. It would appear that the presence of extra personnel, in the form of aides or resource/support teachers, influences the effectiveness of integration programs for children with behaviour disorders. Support personnel was included on the classification schemas of both Phase 1 and Phase 2 (see Figures 5 & 6).

Gender of the Child. The influence of the child's age and gender on the teachers' attitude was also investigated. In the Phase 1 study a relationship was found between the gender of the child and attitude toward integration; teachers who were integrating boys had a more positive attitude towards integration. There are a number of possible reasons for this finding. Firstly, there were far more boys in the present study. Secondly, only one of the boys did not have a male teacher and earlier discussion had suggested that male teachers were more positive towards the integration of children with behaviour disorders. The size of the sample make discriminations between gender difficult (Ruhl & Berlinghoff, 1992). In the Phase 2 study, all of the children studied were male and hence no significant relationship was found between the gender of the child and the teachers' attitude towards integration.
When examining the data on the schools that achieved the five highest scores on the total integration scores (see Table 9) the influence of gender on program effectiveness becomes clearer. Students attending schools which achieved the highest perceived scores were male. This may not be a significant finding as the literature (Heward & Orlansky, 1984) has suggested that, in relation to children with behaviour disorders, the prevalence ratio may be as high as 8:1 in favour of males. The present result then is well within the realm of natural occurrences. Gender of child was included on the classification schema for Phase 1 (see Figure 5).

Age of Child The results of the Phase 1 study indicated a relationship between grade taught and the classroom teacher's attitude towards integration. The results suggested that as the grade level increased the teachers' attitude towards integration decreased. The result supported the earlier work of Larrivee and Cook (1979) who found that teachers' attitudes tend to become less positive as grade level increases. Many educationalists claim that if integration is to be effective, the earlier it occurs the better and these results tend to support this premise. The results of the Phase 2 study indicated no significant relationship between age/grade of the child and the teachers' attitude towards integration. This finding is in contrast to the literature (Bender, 1986; Larrivee & Cook, 1979; Ringlaben & Price, 1981; Stephens & Braun, 1980) which indicated that teachers attitudes become less positive as the age of the child increases.

Examination of the schools which achieved the highest total integration scores (see Table 9) indicated that in Victoria three of the students were in grade prep (first year at school) while one was in year 1. The remaining student was in year 5. In New South Wales three of the children were in the infants grades (years kindergarten, 1st & 2nd), one was in year 4 and one was in year 5. The interesting point was that the oldest child in the five case studies (case study no 26) scored the highest score on the total perceived score. A common theme in discussion with
school personnel was the belief that the earlier in the child's schooling years the integration process took place the more chance of placement success. This view was supported in the literature (Bender, 1986; Larrivee & Cook, 1979). Age of the Child was included in the classification schema for both Phase 1 and Phase 2 (see Figures 5 & 6).

School Community Links Perhaps the most important factor common to all of the case studies perceived as effective, and where the child was still enrolled one and two years later, was what this writer terms the co-operative model. Sapon-Shevin (1978) used the term "co-operative model" to describe individualised programs. Her description describes most effectively what should be operating during the integration process, particularly for children with behaviour disorders. In the co-operative model Sapon-Shevin stated that the model would make use of the positive aspects of each individual setting. In case study no. 7 (the school with the highest total perceived score in Victoria, by a considerable margin), the regular school staff had the opportunity to visit the child in his previous segregated setting prior to his enrolment at their school. In New South Wales case study no. 26, the school with the highest total perceived score, the regular school was located alongside a special school. In both these cases the regular staff maintained close contact with the special setting and now uses the special setting as an external resource. Frequent contacts are made to discuss the child's progress, program needs and possible behavioural strategies. Gow, Ward, Balla and Snow (1988) from their national review of integration concluded that there is a major need for a cooperation between special schools/teachers and regular schools/teachers. This view is supported by Kauffman, McCullough and Sabornie (1984) who claimed "special and regular education teachers should visit each other's classroom to observe, comparing student's behavior and curricula" (p. 207). Clearly for case study no. 7 this co-operative approach is being utilised as it is with the three other schools who scored highly in the total perceived integration index. In addition, the classroom
teacher and support staff had the opportunity to observe the surveyed child in his previous setting prior to his enrolment at their school. The regular school staff maintain contact with the special setting and the child's progress is continuously monitored. The Department of School Education in New South Wales have recently produced a policy statement (1993). This policy states that regions will "identify existing expertise in the field to assist clusters and schools" (P. 5). It would appear that in case study no. 26 the school is doing just that; it has identify expertise in the field and it is using this expertise to assist with the integration of the surveyed child.

In case study no. 16 the school has a special education unit within the school grounds. The school staff work very closely with the unit staff and most of the unit's eighteen children are integrated into a regular class during some time of their school week. While the surveyed child was not integrated from the unit, rather a local special school, the classroom teacher and principal have gained much support and knowledge from the unit staff in the areas of programming and discipline. In case studies no. 30 and 19 the regular school works closely with the local special setting. The local special school has representatives on the integration committees of both schools. In case study no. 17 the surveyed school has a special school adjacent and both schools work closely in developing and monitoring programs for integrated children. The regular school has ten children, with a range of disabilities, being integrated from the special school.

In case study no. 10, the student attends a special school in the same town as his regular school, two days a week. As in case study no. 7, the classroom teacher visited and observed the student in their segregated setting prior to enrolment at the regular school. The special school has designed a behavioural management program for the student which is being utilised in the regular classroom. The integration support group works co-operatively with the special school staff and together they will evaluate the present program. As a result of
arrangements made with the special school the student attends all specialist subjects with his regular classmates and visits to the special school are not organised when these subjects are timetabled. The integration teacher commented that, in addition to the positive returns for the integrated child, one of the advantages of the students attending a special school two days a week is that his regular classmates get some respite from the student's behaviour and the break gives peers the opportunity to progress academically. The special school is a valuable resource which these two schools seem to be utilising well. In addition to case studies nos. 7 and 10, case study no. 12 also had established a co-operative model with a special school.

In case study no. 12 the child is in his first year of school thereby not allowing the regular teacher the opportunity to observe the child in another setting. The regular class teacher/school has established a support group with a special school in a nearby town (60 kms away). The special school has arranged not only for a physiotherapist to attend the regular school for the first hour each day but to assist in the curriculum and strategies developed for the child. The special school also advises the school enrolment support committee and runs in-service programs for the teachers. Once again the co-operative model has been developed, if in a somewhat different form, to cater to the needs of the individual child and integrating school.

The integration programs perceived as being the most effective were all implemented using a form of the co-operative model. While each situation was unique it does suggest that, when integrating children with behaviour disorders the support of a special school, in the areas of curriculum design, behaviour strategies, services for the child/parent and support for regular class teachers, is an important variable. A co-operative link with local special schools was included on both Phase1 and Phase 2 classification schemas (see Figures 5 & 6).
The present findings support the work of Masat et al. (1980) who advocated a close relationship between the regular school and the special school. Masat and associates suggested a transitional plan involving the regular school co-ordinator and the special school co-ordinator. Each co-ordinator has a set of clearly stated roles (see Table 23) and a clear schedule of transition (see Table 24) is followed. Bradshaw (1987b) also outlined a set of transitional strategies that could be followed when integrating children with behaviour disorders (see Table 25).

**TABLE 23**

**ROLE OF CO-ORDINATORS**

**REGULAR SCHOOL CO-ORDINATORS**

1. Interview each behaviour disordered child at beginning of program
2. Arrange appropriate class placement
3. Access staff attitudes
4. Be sure all administrators know the behaviour disordered child
5. Treat the behaviour disordered child the same as other children
6. Work closely with the co-ordinator from special school
7. Meet parents of behavior disordered child

**SPECIAL SCHOOL CO-ORDINATORS**

1. Assess readiness of behavior disordered child for regular school placement
2. Establish rapport with regular school teacher
3. Meet all teachers working with behavior disordered child
4. Observe teacher, noting style, class atmosphere etc.
5. Monitor school progress
6. Meet regularly with regular school teacher for feedback
7. Support student
8. Meet with regular school co-ordinator twice weekly
9. Keep both staffs informed
10. Provide inservice for regular class teachers
11. Provide for academic continuity
12. Assist regular school co-ordinator in evaluation

(Masat et al. 1980, p. 11)

**TABLE 24**

**SCHEDULE FOR INTEGRATION-TRANSITION TO REGULAR SCHOOL**

1. Informal visit to regular school (library visit, school tour).
2. Transition group process...class assessment of readiness candidate.
3. Team assessment meeting.
4. Self-assessment conference meeting with student...transition to teacher, liaison with teacher. Does he/she feel ready? What classes might he/she be in?
5. Parents called to advise about process beginning:
   a. Need for support from parent
   b. Expectation of difficulty during this time
6. Contact with receiving school by liaison teacher
   a. Student interview
   b. Course selection made
7. Contact with student in transition team
   a. Time-two weeks
   b. Begin working in specific books from classes chosen
   c. Follows basis regular classroom contract monitoring own progress and checking with transition team to verify assessment.
8. Parent conference...at beginning of 9 week period
   a. Discuss anxiety student will have
   b. Have emergency care form signed
c Enlist help with homework, but encourage parents not to put too much pressure on student

9. Assessment of progress and readiness...need for more time

10. Check transportation arrangements

11. Liaison consultation with teachers
   a. Set up time to observe class
   b. Set up regular time to meet with teachers
   c. Give teacher student's I.E.P and other helpful information

12. Student meets teachers, locates classroom/s.

   (Masat, et al. 1980, p. 12)

**TABLE 25**

A POSSIBLE INTEGRATION STRATEGY FOR CHILDREN WITH BEHAVIOUR DISORDERS

1. Selection of the school, teacher and class. (Select being the key word-not forced).

2. First meeting between child and regular class teacher (if possible outside school time-perhaps a tour of the school grounds).

3. A student from the regular classroom selected to help the integrated child "fit in".

4. Integrated child to attend the regular classroom twice a week. (These lessons should be structured yet, allow for flexibility and variety in academic standards e.g. spelling. During these visits the child's special education teacher or some confidant from the special school should be present with the child).

5. Increase time spent in regular class to two one hour sessions a week/ (This should take place after several weeks-lessons should still be structured ones).

6. Amount of time in regular classroom should be further increased. (Gradual phasing out of special education personnel. Initial emphasis on behavioural/social skills, gradually, as development takes place, academic skills should be emphasised.)
7. Whole day visits (in some cases recess times may need to be closely monitored).
8. Full day, including recesses without close supervision.
9. Number of days increased. (During the process of integration the student needs to be constantly monitored by the classroom and special education teacher through regular meetings. In some cases step backs are needed. The introduction of behavioural/social skills, academic skills, unsupervised times need to be done slowly.

( Bradshaw, 1987b, p. 21).

Continued Placement. Despite staff perceptions suggesting that both social and academic integration were not taking place, the majority of the school personnel surveyed scored highly on the index of continued placement. It would appear that the majority of schools, although not perceiving integration as successful, want the present placement to continue. In New South Wales eight of the schools surveyed achieved a score of 100% indicating that they wanted, without reservations, the child’s present placement to continue. Three of the remaining schools wanted placement to continue but did have some reservations. Four schools scored 44% on this index indicating their uncertainty as to the continuation of this placement. This result is in contrast to the literature reviewed which in general indicated that children with behaviour disorders are among the most difficult groups of children to integrate effectively (Bradshaw, 1987a; Center, Ferguson & Ward, 1988; McGrath et al. 1986).

One reason for the results of the present study may be the closure of adjustment centres in the metropolitan areas and the fact that there are no services for these children in country regions. The schools often have nowhere else to send children with behaviour problems. Another possible reason may well be the "honeymoon phenomenon". The literature reviewed (Fuchs, Fuchs, Fernstrom &
Hohn, 1991) indicated that there is a well known initial acceptance of atypical behaviour which later becomes viewed as problematic if not intolerable.

The parents, as mentioned in Chapter 5, were also very supportive of the present placement for their children. The literature reviewed indicated far more support for special schools among parents than was indicated in this study. In one study (Dawson & Kierney, 1988) over 94 per cent of the parents, after experiencing both special and regular school placement, wanted their child to attend a special setting.

In the Phase 1 study after a two year period only one third of the original students surveyed were still enrolled at the surveyed school. In the Phase 2 study one year after the original study one third of the students had left. It would appear that factors such as the integrated child's social skills, academic skills and age have an influence on how long the child will remain in the regular school. The links the regular school has with local special schools also appear to enhance the child's prospects of remaining at the regular school.

**Research Question 5**  *Do different implementational guidelines in the two states influence the staffs' perceptions of integration effectiveness?*

The differences between the two states were examined under the following headings: Indices, Staff Qualifications, Teachers' Attitudes, Principals' Attitudes, Staff Attitudes, Parental Attitudes, Age/Experience of Teacher, Gender of Child, Peer Group Acceptance, Classroom Structure, Classroom Management, Integration Format, Curriculum Format, Size of Class, and Location of School.

**Indices**  There was little difference between the states in the mean scores for the PSI, PAI, PCP & PAS scores. Teachers in both states indicated that the surveyed
children were coping better socially than academically (see Table 20). This is an interesting result when one considers that children with behaviour disorders are usually associated with social problems.

**Staff Qualifications** Staff surveyed in Victoria were more qualified than their colleagues in New South Wales. A possible explanation for Victoria's supremacy in this area may be that mandatory pre-teaching special education units have been operating in Victoria since 1989. In New South Wales these mandatory units have only been instigated since 1992. The results also suggest that both states have a long way to go before the majority of their teaching staff have any training in special education.

**Teachers' Attitudes** There was little difference in the attitudes of teachers towards integration in either state.

**Principals' Attitudes** The results of the present study indicated that, in both states, principals were more negative towards integration than teachers. The present result is in contrast to Center *et al.* (1988) who found that principals "were more positive both about retraining disabled children in regular class and accepting other children with similar disabilities than were their respective teachers" (p. 44). A possible explanation for the contrasting findings may be that the Center *et al.* study was conducted in one state and on children with all categories of disabilities.

**Staff Attitudes** Staff surveyed in both states had similar attitudes towards integration although staff in Victoria fared slightly better. Harvey (1992) indicated that teachers in Victoria have overcome any apprehension they may have had towards integrating children with disabilities. The present result suggests that when considering the integration of children with behaviour disorders rather than
children with disabilities in general (as the Harvey study measured) staff in schools
do still have some reservations in relation to integration.

**Parental Attitudes** Parental views in both states varied i.e. Victorian parents
were very supportive of the placement of their child whereas New South Wales
parents were supportive but with some reservations. A possible explanation for this
result may be the role in which parents feel they play in the implementation of their
state's integration policy. Parents in Victoria have for a number of years been
considered a vital component of not only the formation of the integration policy but
in its implementation. New South Wales parents have only more recently been
couraged to become more involved in educational decision making. Fulcher
(1986) noted that the Victorian policy "gave a great deal of consideration to the issue
of rights, both children's and parent's" (p. 33). The model in New South Wales, on
the other hand, is described by Fulcher as a professionalism model dominated by
experts such as educational psychologists, administrators and specialist teachers
with little input on the part of parents. This description of the New South Wales
model as a professionalism model was strongly denied by Doherty (1987) who
claimed that the New South Wales policy is an assessment model. Rather than
become involved in the debate between these two writers, both of whom were
significantly involved in the formation of their respective states integration policies,
it is more worthwhile to note that parents surveyed in New South Wales appeared to
be less satisfied with their states policy than parents in Victoria were about theirs.
This lack of satisfaction, on the part of New South Wales parents, may be due in
some way to a feeling of frustration due to a perceived lack of involvement in the
development of their child's integration program. Whether this is true or not the
New South Wales Special Education Policy (1993) includes statements such as
"parents ... have the right to choose to participate in the planning of the child's
Individual Education Plan (p. 12). With this kind of collaboration being encouraged,
the difference between parents' attitudes in both states could well be non existent in
the near future.

Age/Experience of Teacher. Examination of teachers' experience indicated
that teachers in both states averaged twelve years of teaching. This result suggests
that when integrating children with behaviour disorders schools are generally
looking for the more experienced members of staff. While the schools surveyed
tended to select experienced teachers to integrate the child with behaviour disorders
the teachers' age did not appear to influence attitude towards integration.
Berryman (1981) found that younger teachers had a more positive attitude towards
integration yet the present study found no relationship between experience and
attitude towards integration.

Gender of Teacher. It would appear that a teacher's gender may have some
relationship with attitude towards integration. Harvey and Green (1984) found that
female teachers were more positive in their attitude towards integration than male
teachers. The present study did not support this premise. The fact that the
children in the present study were all children with behaviour disorders may have
some influence on the attitudes of both genders of teacher. When teachers' gender
was correlated with PSF and PAI male teachers in Victoria were more positive while
in New South Wales female teachers were more positive.

Gender of Child. Gender of the children surveyed was found to be in favour
of males 6:1. This result supports the findings of Heward and Orlansky (1984) who
claimed that prevalence ratios for children with behaviour disorders could be as
high as 8:1 in favour of males. Ruhl and Berlinghoff (1992) noted that males
represent a disportionately large percentage of students in programs for the
behaviourally disordered and thus "have greater representation in research on this
population." (p. 184). The authors cautioned that "results of studies using only
male participants may not generalize to females" (p. 184) thus a discussion between Victoria (mixed gender) and New South Wales (only male) on gender issues can only be a guide at best.

**Age of Child**  Larrivée and Cook (1979) found that teachers' attitudes tend to become less positive as grade level increases. The Victorian phase of the present study supported this premise but the New South Wales phase found no relationship between age taught and attitude towards integration. The contrasting results of the present study may be explained in part by the small number of case studies. Generally it has been accepted in the literature that the earlier the intervention program takes place the more chance of success it has.

**Peer Group Acceptance**  Peer group support for the integrated child was found to be similar in both states. In both states the most common decile score was the first decile indicating that in general children with behaviour disorders are not well accepted by their peers. In both states more than half the surveyed children scored in the first three decile ranks further supporting the premise that these children are rejected by their peers.

**Classroom Structure**  In relation to classroom structure both states scored below 50% of the maximum score possible. This result is in contrast to that of a number of researchers (Gallagher, 1972; Oaks, 1979 and Riester, 1984) who advocated the need for a highly structured classroom environment for children with behaviour disorders. Larrivée (1985) and Center *et al.* (1988) found that classroom structure was an important factor in effective integration programs for all children with disabilities. Steinberg and Knitzer (1992) argued that this over emphasis on highly structured classroom for children with behaviour disorders was seen as an end in itself. They argued that classrooms can be educationally sound when children are given opportunities to think solutions out rather than using the teacher
as the arbiter and reward giver. The present results suggest that the teachers surveyed in both states while aware of the significance of classroom structure also realize its limitations.

**Classroom Management** Classroom management scores for both states were also below 50% of the maximum score possible. Center *et al.* (1988) found that classroom management skills related positively with effective integration. The classroom management issue, according to Brophy and Rohrkemper (1981), was on whether the problem behaviour was perceived by the teacher as teacher-owned behaviour or student-owned behaviour. Teacher-owned behaviour included feelings of inadequacy, anxiety and self esteem while student-owned behaviour are those in which student behaviour interferes with the teacher's satisfaction e.g. aggression and unco-operativeness. Teachers tended to view student-owned behaviour as the most negative. A third category suggested by Gordon (1974) is shared problems. This is where the teacher and the student interfere with each other's needs. The general reaction to these shared problems are difficulties in classroom management. In the present study, given the low mean scores for classroom management it would appear that the teachers surveyed, in both Victoria and New South Wales, didn't see themselves as having shared problems but rather teacher-owned problems. These teacher-owned problems, while having little effect on classroom management strategies, are perceived by teachers as negative and long term.

**Integration Format** The results of the present study indicated that Victorian schools used the resource approach three times as much as the consultation approach while in New South Wales the consultation approach was used more than the resource approach. The results are interesting; the resource approach is not advocated by the Ministry of Education in Victoria yet the majority of schools surveyed used it. In New South Wales support teachers are placed in many schools yet a number of schools utilised the services of consultants such as itinerant
teachers. It would appear that the schools surveyed select what they consider to be the most appropriate resource for their situation irrespective of state policies. The results may also suggest that the teachers surveyed in New South Wales consider support teachers inappropriately trained to assist in the integration of children with behaviour disorders.

Curriculum Format  In relation to curriculum format the results may be explained by the higher number of staff in the schools surveyed in Victoria who had special education qualifications. The Victorian staff may have felt more confident in writing modified programs for their children. It may also have related to the fact that the Individualised Education Programs (I.E.P.s) have been encouraged (and mandatory in some cases) in Victoria for many years. In New South Wales reference to I.E.P.s have only recently become available (Draft Special Education Policy, 1992; Special Education Policy, 1993). Yet another possible explanation for the present findings is the high number of the schools surveyed in Victoria, compared to those surveyed in New South Wales, who use the resource teacher approach. It may well be that the resource person has been responsible for the formulation of these modified programs rather than classroom teachers.

Size of Class  Victoria has on average smaller class sizes. This may have been as a result of a number of principals in Victorian reducing class sizes when integrating children with behaviour disorders. Recent cutbacks in education funding in Victoria would suggest that the trend for smaller class sizes may not continue.

School Size  Victorian schools generally had fewer students enrolled than New South Wales schools.
Location of School: The larger schools were the metropolitan schools. These larger schools in Victoria indicated that they were more effective in both PSI and PAI. This result may be as a result of all Victorian schools having established integration committees and I.E.P.s were considered essential before funding could take place. While they perceived themselves as more effective the evidence from both states suggests that there was little difference in integration effectiveness.

By responding to Question 5 it was possible to make a comparison between the two states and their effectiveness in implementing their respective policies. The results of the present study indicate that there is very little in terms of effectiveness between the states. Different policy directions were opted for yet the outcomes appear to be similar. Victoria certainly has more teachers with special education qualifications and this can be attributed to the introduction of mandatory special education units earlier than New South Wales. Despite the introduction of the Victorian Special Education Policy some three years earlier than New South Wales no differences were found in teachers', staff or principals' attitudes towards integration. Parental attitudes in Victoria were more positive yet teachers' attitudes towards the level of resources was higher in New South Wales. Similar classroom strategies were being implemented in both states however schools in Victoria had opted for the resource approach to implement special education services while New South Wales schools had opted for the consultation approach.

Research Question 6: "What are the attitudes of the parents surveyed towards the integration of children with behaviour disorders? What factors appear to influence these attitudes?"

Literature reviewed indicated that while there was a dearth of literature on parental attitudes towards integration available literature suggested that parents play a vital role in integration effectiveness. Parents surveyed in the Phase 1 study
indicated overwhelmingly that the placement of their child in the regular classroom was, in their opinion, the correct one. There are a number of possible reasons why the parents in the Phase 1 study indicated so positively and convincingly for continued placement. Research (Bower, 1982; Wood, 1985) has suggested that, unlike other areas of disability, the child with behaviour disorders gains little support or sympathy from government/private funding committees, and hence there is little support for parents if their child is labelled behaviour disordered. With the closure of adjustment classes the only choice for parents is the regular classroom or an inappropriate segregated setting. The literature reviewed indicated that parental views on the placement of their child in special schools was quite dichotomous (Dawson & Kierney, 1988).

Many parents blame the school for their child's educational and behavioural problems and it is seen as the school's job to rectify the problem. A number of parents indicated that they were embarrassed by their child's behaviour, and that having the child educated anywhere else rather than a regular school may well draw more attention to the child and family. It would seem most parents surveyed in the Phase 1 study are happy with the present placement and see no reason to change the situation. A number of questions need to be asked about the role of parents in determining the placement of their child with behaviour disorders. Firstly, many parents feel a sense of guilt/anxiety in relation to their child's disability. Are these parents too emotionally involved to make an objective analysis? Secondly, it has been made clear in the literature reviewed that many behaviour problems emerge from an unstable home environment. Are the principle participants in this unstable home environment the most acceptable people to make an important decision on their child's placement? Finally, do parents of children with disabilities, particularly children with behaviour disorders, have an awareness of the full educational alternatives available for their child? Are there in fact any alternatives?
Parents surveyed in the Phase 2 study indicated convincingly that the present placement for their child was the correct one. A number of parents did however indicate some reservations in relation to the placement. These reservations concerned lack of resources and in one case the number of children in the classroom. The fact that a number of parents had reservations suggests that one of the provisions of the New South Wales integration statement is not being strictly adhered to. It is stated in the Integration Statement that "where an optimal educational environment cannot be provided for the student in mainstream class, the parents will be offered an alternative placement in a support class in a regular school or a school for specific purposes" (Winder, 1988, p. 2). Three parents responded that they preferred an alternative placement for their child, yet they had not been offered one. One parent commented that she was pressured into agreeing to withdraw the child to a special setting, then a term later the same pressure was exerted to have the child return to the same regular school. The question was raised by this writer previously and it seems relevant for discussion on Phase 2 of the study as well: do parents of children with disabilities, particularly children with behaviour disorders, have an awareness of the full educational alternatives available for their child? Are there in fact any alternatives?

When examining the schools where the highest total integration scores were achieved (see Table 9) some trends emerge. In all cases the parents were very supportive, in one case (no. 3) perhaps over supportive. In New South Wales (case studies nos. 16, 17, 19, 26 & 30) the role of the parent appeared significant. In all of these case studies a score of 100% was achieved on the parents' questionnaire in response to the questions on continued placement of their child in the regular classroom. All five sets of parents were very pleased with the placement of their child and each had developed a close working relationship with the school. Three of the mothers worked in the school canteen, all five parents were active in the schools' P & C association. In all five case studies the classroom teacher had commented on
the close working relationship between the school and the home. The finding of this study, i.e. that parents' support continued placement of their child in the regular school, is in contrast to the literature reviewed. A number of researchers (e.g. Dawson & Kierney, 1988; Gow et al. 1988; Steer, 1987) have indicated that parents are very supportive of special settings. These studies all dealt with a range of categories of children with special needs. Perhaps, because the present study dealt only with children with behaviour disorders, parental views differed. Parents of children with behaviour disorders may not see the same advantages of special settings as do parents of children with physical and/or intellectual disabilities. Further research needs to be undertaken to assess the needs/views of parents of children with special needs. At present it would appear that research on parental attitudes towards integration is scarce (Hayes & Gunn, 1988; Mlynek, Hannah & Hamlin, 1982).

In summary the attitudes of parents in both states towards the integration of children with behaviour disorders was positive. Factors such as perceived resources and links between the home and the school may have some influence on these attitudes. Parental attitudes was included in the classification schemas for both states (see Figures 5 & 6).
CHAPTER 8
CONCLUSIONS AND RECOMMENDATIONS

The aim of this study was to examine perceptions as to the effectiveness of the delivery of special education services to children with behaviour disorders in Victorian and New South Wales primary schools. Effectiveness of the services was examined by surveying the perceptions of those involved with the child's placement. It was also anticipated that these perceptions could assist in the construction of a classification schema of variables perceived as important in the integration of children with behaviour disorders.

The choice of Victoria and New South Wales as states for this study was based on the fact that they have recently upgraded their respective integration guidelines, statements and policies and have opted for different directions in terms of philosophy and implementation. In addition, Victoria and New South Wales have the most children enrolled in their respective school systems and hence, the largest number of children influenced by policy initiatives. Phase 1 of the study surveyed Victorian primary schools and Phase 2 of the study surveyed New South Wales primary schools. It was assumed that the two-phase sampling procedure would allow for generalisations to be made to the teaching of children with behaviour disorders in other states of Australia and other countries. In particular certain factors important to the effective teaching/integrating of children with behaviour disorders could be compiled.

The review of the literature drew attention to a number of factors considered to be important when integrating children with behaviour disorders (see Figure 2). Through the literature review it was possible to make a few generalizations. Firstly, educators are uncertain as to whom the label 'behaviour disordered' should apply. Secondly, the literature indicated that there is clearly a wide spectrum of causes but
was equally unclear as to the most appropriate intervention program for children with behaviour disorders. Thirdly, the literature outlined a large range of implementation strategies from which the Victorian and New South Wales policy makers could select. Fourthly, the research failed to resolve the question of which is the most appropriate educational setting for children with disabilities, let alone children with behaviour disorders. Fifthly, there is little agreement as to the most effective delivery service for children with behaviour disorders in the regular school system. Finally, the literature indicated, through a dearth of research on children with behaviour disorders, that international policy-makers had a complete disregard for children with behaviour disorders when they structured their various policies.

Using both quantitative and qualitative research methods, data were gathered on the perceptions of principals, parents, classroom teachers, support staff and peer groups. Quantitative measures included questionnaires, self reporting scales and sociometric activities. Data gathered using quantitative research methods was recorded in the form of a number of indices. These indices were correlated to examine any relationships between school and staff characteristics and integration effectiveness. Qualitative measures included observation data and interviews.

**Quantitative Measures** Apart from the Literature Review, another source of data was the key personnel involved in the integration process. The use of quantitative measures allowed for a number of factors to be examined. In general, teachers in both states did not perceive social or academic integration as being overly successful. The schools surveyed in Victoria achieved, on average, lower marks for both perceived social and academic integration than those in New South Wales. Perceived academic integration scores were generally lower than perceived academic scores. This is an interesting result when one considers these children were recommended for special educational services for their behaviour disorders not
their academic disorders. The child's present placement was generally supported by those surveyed. The schools' staff surveyed perceived that the appropriateness of support they received was neither overly inappropriate nor overly appropriate.

The quantitative measures also allowed for a number of variables perceived as being important in the integration of children with behaviour disorder to be examined (see Figure 5 p. 242). The training in special education received by a classroom teacher was perceived as being an important factor when integrating children with behaviour disorders. This factor related to perceived academic integration, teachers' attitudes towards integration and how effective they perceived that placement to be. The present study indicated that teachers surveyed in Victoria had more special education qualifications than their colleagues in New South Wales.

The attitudes of the teachers towards integration were shown to be an important factor in perceived integration effectiveness. Likewise, the principals' attitude towards integration was shown to be another important factor when considering the integration of a child with behaviour disorders. The gender of the teacher appeared to influence perception of integration effectiveness, however, the results warrant further investigation. Both phases of the study indicated the importance of teacher gender but they were in contrast as to which gender was the most positive in their attitude. There were a number of instructional variables that were found to be important when integrating children with behaviour disorders. These variables included integration format, classroom structure, classroom management and curriculum format.

In the present study, one institutional variable was shown to be important when integrating children with behaviour disorders into the regular school. This variable was size of the school. Both phases of the study indicated that the larger
the school, the more chance the child with behaviour disorders would be perceived to be academically integrated. This perceived academic integration however may well be at the expense of perceived social integration.

**Combination of Qualitative and Quantitative Data (Case studies)** The case studies were constructed with data gathered from teachers/principals interviews, observation schedules and the peer sociogram. The formation of the case studies added further information to that knowledge gained through the literature review and quantitative methods. A number of variables perceived as important when integrating children with behaviour disorders were isolated through this process. These variables included the importance of peer group support, the importance of parental support and the importance of a co-operative partnership with a local special setting. These variables were added to the classification schema designed to assist practitioners when integrating children with behaviour disorders (see Figure 7).

The compilation of case studies allowed this writer the opportunity to discuss with classroom practitioners other factors associated with the integration of children with behaviour disorders. These factors, like those variables discussed previously, need to be considered before placement in the regular class takes place. Factors practitioners indicated were associated with effective integration included; teacher stress, teacher personality characteristics, concerns over future placement, and administrative issues such as reduction in the number of children in the integrated class, in-servicing for teachers and appropriate levels of resources.

**General Findings** The perceptions of those surveyed in both states have indicated clearly that integration for children with behaviour disorders is far removed from the aims educational decision makers had planned for. The two-year follow up of those students surveyed in Phase 1 indicated that less than one third of
FIGURE 7

A MODEL TO ASSIST PRACTITIONERS WHEN INTEGRATING CHILDREN WITH BEHAVIOUR DISORDERS

**Individual Variables:**
- Special Education training of teacher, principal and support staff.
- Teachers' Attitudes
- Positive Staff Attitudes (Influenced by)
  - age/experience of teacher
  - experience of principal
- Stress levels
- Teacher characteristics
- Length of enrolment influenced by
  - social factors
  - age of child
- Support of peer group
- Support of parents

**Instructional Variables:**
- Integration format
- Classroom management
- Classroom structure
- Curriculum format

**Institutional Variables:**
- Size of School
- Co-operation with local Special School/Setting/People with experience
- In-service
- Observation of child prior to enrolment
- Personal resources
those students surveyed are still attending the surveyed school full time. A one-year follow up of those student surveyed in Phase 2 indicated that, in one school year, five (one third) of the students no longer attended the surveyed school. This high level of attrition is not isolated to this study. Fuchs, Fuchs, Fernstrom and Hohn (1991) referred to this dropout rate as a well-known honeymoon phenomenon" (p. 145). The phenomenon refers to many "teachers initial acceptance of atypical behaviour that they latter view as problematic if not intolerable" (p. 145).

Generally, resources are perceived to be sparse and unevenly distributed and teacher/principal stress levels are high. Both states, irrespective of their contrasting policies, have had little success. Where placement was perceived as being successful a number of common factors emerged. Consideration of these factors will not automatically result in a successful placement for the child with behaviour disorders but should be considered before any placement is made. These factors have been incorporated in the classification schema to assist integration effectiveness for children with behaviour disorders (see Figure 7).

Several limitations of the study were recognised, notably the small number (15) of case studies in each state. Secondly, the schools were recommended for the study by their respective regional offices and hence were not randomly sampled. Thirdly, children with behaviour disorders who are not receiving any services were not surveyed and thus the input of their teachers was not included. Fourthly, the failure in Phase 1 to include questions on teacher stress and teacher characteristics on the principals’ and teachers’ interview schedules restricted data on these issues being compiled. These were two issues teachers and principals wanted to discuss and hence were included on the interview schedules for Phase 2.

**Recommendations**  The present study suggests that special education qualifications are important when integrating children with behaviour disorders. It
was also clear that more teachers, particularly in New South Wales, need to become qualified in special education. Both states now have mandatory courses in special education at the pre-teaching stage and these courses will ultimately help teachers to understand the integration process. The continuing emphasis on pre-training courses in special education should continue, but perhaps tertiary educators may need to redesign their undergraduate courses. The present study indicated that, where school personnel perceived themselves as being successful with integration, those personnel had practical links with not only special schools and their facilities but also with children with special needs. Undergraduate students enrolled in mandatory special education units may well benefit from experiences with special needs children in their classrooms as teachers in the present study perceived themselves to have. Garner (1992) conducted a special education option course wholly within a school. Feedback from the college students included comments such as: "this has been invaluable as I don't think a college based lecture each week would have given me enough to cope with the real world" (p. 127); "the course location complemented the ideas, issues and discussion" (p. 127) and "I have appreciated the hands on experience with both pupils and staff" (p. 127). Units which expose trainee teachers to the requirements needed to assist children with behaviour disorders should be considered. On the other hand Bullock, Ellis and Wilson (1994) found that experienced teachers felt behaviour management programs were more relevant than field experiences. The authors argued that extensive teaching experience could distance practitioners from the importance of field experience. It would appear that when designing special education units at post graduate levels the emphasis should be shifted from field experiences to an emphasis on skills and knowledge.

The present study indicated that a co-operative model approach to the placement of children with behaviour disorders must be developed. Researchers (Forness, 1988; Grosenick, 1989; Knitzer, et al., 1990; Nelson & Pearson, 1991 &
Young, 1990) have advocated multifaceted support systems in an attempt to provide comprehensive services for children with behaviour disorders. The recent special education policy in New South Wales (1993) includes objectives such as inter-agencies working together with parents and other departments to provide services to children with disabilities. This collaborative approach must be encouraged when considering the integration of children with behaviour disorders.

The results of the present study indicate that the integration policies of both states fail to address the issue of children with behaviour disorders, rather they espouse the view of integration in the mainstream for all children with special needs. This philosophy needs to be redirected to individual needs based on individual disabilities. As Hornby (1992) stressed there has been no clear research evidence that suggests that one placement, segregated or regular, is better for children with special needs. This is especially true for children with behaviour disorders. The policy recommendation of both states that all children with special needs, including children with behaviour disorders, should be educated in their local school is clearly misdirected and should be abandoned. Instead of policies which focus on increasing levels of integration to the point where all children with special needs are integrated into their local school, the focus of integration "should be decided on the needs of each individual child and the exigencies of each situation" (Hornby, 1992, p. 133).

As has been mentioned previously, the present research indicated the importance of special education training. While training teachers in special education is to be commended, there is danger in believing that teachers will develop (in fact can develop) certain characteristics for teaching children with special needs, especially children with behaviour disorders. Perhaps, as Morse (1980) claimed, the idea should be to work with those teachers who are keen rather than try to change those who are not. Kauffman and Wong (1991) argued that "surprisingly little is known about what effective teachers of students with behaviour disorders actually
do in interactions with students" (p. 226). The authors commented that given the
wide range of behaviours considered disordered "one might hypothesize that
markedly different teacher characteristics are optimal for students having different
types of behaviour disorders" (p. 234). This writer believes that policy directives
encouraging teachers to adopt certain characteristics to make them more effective
teachers of children with behaviour disorders may well be misguided. Teachers who
feel unwilling to have a child with behaviour disorders in their class should perhaps
be by-passed and efforts concentrated on other teachers who feel more comfortable
in the role.

The present research indicated that, as with teacher characteristics (e.g.
humour, consistency, well organised and special education training) selection of the
most appropriate placement and the selection of the most suitable teaching
strategies (e.g. co-operative learning, social skills training, direct instruction) for
children with behaviour disorders has met with little success. The recommendation
arising from the present study is that we do not try to create one situation that all
children with behaviour disorders will be placed in, rather, we continue to offer a
range of educational options. Fuchs et al. (1991) claimed that "at present, there are
no empirically validated, large scale full-time mainstreaming strategies for students
with behaviour disorders" (p. 146). The time has come to perhaps look beyond the
mainstream classroom because "the evidence is accumulating that this is not a
sufficient condition for EBD children's development" (Steinberg & Knotzer, 1992, p.
152). Some of the alternative educational settings to be considered may include
alternative classrooms/schools, special settings, work training programs, even
adventure programs such as the Project Breakaway (1993). Policies should be
encouraging a range of educational options for children with behaviour disorders in
an attempt to meet individual needs.
The present study also indicated a number of other aspects which warrant consideration for the future, including the role of academic skills in the education of children with behaviour disorders. Most of the children surveyed in the present study had academic problems in addition to their social problems. Research (e.g. Office of the Federal Register, 1985) suggested that the present finding is widespread. Ruhl and Berlinghoff (1992) suggested that it is clear "most behaviourally disordered children do have academic difficulties" (p. 178). The authors claim that future plans should include mixed categories of students and the opportunity for teachers to be provided with greater guidance in their selection of academic intervention. The difficulty is that the social programs these children need are often not compatible with increased instructional time in certain areas. Teachers of children with behaviour disorders have a dual responsibility, academic competence and social competence. Often the achievement of these competencies work against each other, as the present study has indicated.

This thesis has also indicated that there was a certain amount of stress associated with the placement of the child with behaviour disorders into the regular classroom. Policy makers must address this issue. The stress levels associated with working with children with behaviour disorders is well known. Pullis (1992) claims that "the need for personnel to work with the behaviorally disordered/emotionally handicapped is perhaps the greatest in all the fields of special education" (p. 191). This shortage is due to attrition rates higher than regular education and "the highest among the various areas of special education" (Pullis, 1992, p. 191). The high attrition rate is due in no small way to the high levels of stress. Abelson (1986) found that teachers of the behaviorally disordered reported greater job dissatisfaction than did other types of special education teachers. Pullis (1992) reported that teachers cope with the high levels of stress in a number of ways including eating, drinking, smoking, and seeking out professional help from colleagues. When asked which personal approach they preferred,
teachers claimed that allowing time for them to collaborate/talk with colleagues and providing workshops/inservices courses to advanced their skills/knowledge was the most popular. One of the criticisms made by teachers in the present study, particularly teachers in New South Wales, was a lack of in-service courses. Teachers in the Pullis study felt that in-service courses were a release from stress. Obviously, the question of stress needs to be addressed and one acceptable method may well be more adequate in-servicing in the area of children with behaviour disorders. The Pullis study also indicated the important role that collaborate-talk plays in coping with stress. The present study indicated the importance of collaborative discussions with colleagues, especially colleagues in special settings (co-operative strategies). It appears that these co-operative decision making strategies also assist in coping with stress and should be encouraged by policy makers in each state.

A recent report by the Australian Council for Educational Research on the education for students with disabilities (de Lemos, 1994) has suggested that Victoria and New South Wales continue to differ over the provision of services for children with disabilities. Victoria continues to implement a policy of inclusive schooling with less than half of the children with disabilities enrolled in regular schools. In contrast New South Wales has 90% of students with disabilities enrolled in special settings. As the present study has indicated there continues to be a need for a wide range of educational services especially for students with behaviour disorders.
APPENDIX 1

OHIO SOCIAL ACCEPTANCE SCALE (& MATRIX).

(MODIFIED VERSION OF SABORNE & KAUFFMAN 1985).
APPENDIX 2

OBSERVER RATING SCALE

(CENTER, FERGUSON & WARD, 1988)
5 MINUTE OBSERVATION

2 MINUTE RECORDING

5 minutes - stop record

A. CLASSROOM CLIMATE

1. CO-OPERATION

a) Students help one another with academic tasks - teacher-initiated by arranging small groups with common aim - positive interdependence.

b) Students help one another with academic tasks teacher allows but has not structured the co-operative tasks.

c) Students work independently and academic interaction is kept to a minimum.

d) Students appear to work competitively by shielding their work etc., but not under active encouragement from teacher.

e) Teacher actively discourages students from working together. They compete for teacher attention, academic status and materials.

2. CLASSROOM WARMTH

a) One instance of smiling or laughing by the teacher is observed.

b) One instance of joking between student(s) is observed.

c) One instance of teacher expressing no emotion in interaction with students (neutral response).

d) One instance of the teacher frowning, glaring, gently scolding student.

e) One instance of the teacher shouting, criticising and belittling student.

f) One instance of the use of physical force against pupil.
3. RELATIONSHIP WITH STUDENT/PERFORMANCE
   EXPECTATION

   One instance of teacher commenting positively to a student(s) on expressing understanding of their difficulties - e.g. "you've worked hard", "aren't you sitting up straight" or expressing a positive expectation of academic success, either for the class or for an individual student.

4. TEACHER RESPONSIVENESS

   The teacher responds to the questions and comments of 4/5 students.

B. STRUCTURE

1. MONITORING STUDENT PROGRESS

   The teacher gives the class or group a revision test/quiz.

2. CLARITY OF PRESENTATION

   a) More than three children ask for clarification of instructions before and/or during seatwork.

   b) The teacher presents a lesson plan to students with at least two components, e.g. tells what will take place in the lesson and how the students will proceed.

3. FEEDBACK TO STUDENT

   a) The teacher corrects oral work.

   b) The teacher corrects written work.

4. TEACHER-STUDENT INTERACTION

   The teacher initiates 4/5 interactions.

5. TEACHER INVOLVEMENT

   During seatwork, the teacher is actively involved with the students by moving around the room checking, explaining etc. rather than doing unrelated tasks.

6. STRUCTURE

   The teacher gives step-by-step, sequenced lesson directions (as opposed to discovery learning).
C. CLASSROOM MANAGEMENT

a) The teacher spends hardly any time on discipline.

b) The teacher spends about 1/5 minutes on discipline.

c) The teacher spends about half the observation period on discipline.

d) The teacher reprimands more than 3 different students.

e) The teacher expects the students to follow classroom rules all the time.

f) The teacher expects the students to follow classroom rules about 60-80% of the time.

g) 50% of the time.

h) The teacher puts no restriction on students' behaviour.

i) The teacher uses verbal praise during the observation period.

D. INDEPENDENCE IN THE CLASSROOM

1. One instance of teacher encouragement of class independence by:

a) providing self-correcting materials.

b) expecting students to organise own work materials.

c) providing adapted instructions for poor readers in the class.

d) delegating authority to students, e.g. class monitors, peer tutors etc.

TOTAL

FOR OFFICE USE ONLY

A. Total Classroom Climate

B. Total Structure

C. Total Classroom Management

D. Total Independence in the Classroom

* If at least ONE instance observed, give a weighting of 6.
APPENDIX 3

STUDENT CHECKLIST

(MODIFIED VERSION OF CENTER, FERGUSON & WARD, 1988)
### STUDENT CHECK LIST

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. PHYSICAL</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 1.1 Appropriate placement of desk  
(can see blackboard, hear teacher, not distracted by peers etc.) |     |    |     |
| Comment |     |    |     |
| 1.2 Appropriate placement of chair |     |    |     |
| Comment |     |    |     |
| 1.3 Appropriate placement of light |     |    |     |
| Comment |     |    |     |
| 1.4 Seating normal in relation to other desks |     |    |     |
| Comment |     |    |     |
| 1.5 Special furniture required |     |    |     |
| Comment |     |    |     |
| 1.6 TS works in close proximity to class teacher |     |    |     |
| Comment |     |    |     |
| 1.7 TS has freedom of movement to appropriate work areas |     |    |     |
| Comment |     |    |     |

352
2. **CLASS PARTICIPATION**

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2.1</strong> TS works effectively in large groups (is not distractible, does not interfere with other children, doesn't call out etc.)</td>
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<tr>
<td>Comment</td>
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<td></td>
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<tr>
<td><strong>2.2</strong> TS works effectively in small group</td>
<td></td>
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<td></td>
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<tr>
<td>Comment</td>
<td></td>
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<tr>
<td><strong>2.3</strong> TS works effectively in 1:1 situation within class</td>
<td></td>
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</tr>
<tr>
<td>Comment</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>2.4</strong> TS works effectively on his own</td>
<td></td>
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<td></td>
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<tr>
<td>Comment</td>
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<td></td>
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<tr>
<td><strong>2.5</strong> TS works effectively as a peer tutor</td>
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<tr>
<td>Comment</td>
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<td></td>
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<tr>
<td><strong>2.6</strong> TS works effectively as a peer tutee</td>
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<tr>
<td>Comment</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td><strong>2.7</strong> Other students demonstrate awareness of student's special needs (by appropriate assistance etc.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comment</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

353
3. USE OF TEACHING STRATEGIES

3.1 Special teaching strategies required (concrete materials when other students use worksheets, oral presentation when others use aural etc.)

Comment

3.2 TS involved in same specialist subjects as other students (eg. P.E., Home Economics)

Comment

3.3 Teacher uses strategies to maintain TS's attention

Comment

3.4 Teacher uses strategies to keep TS on task

Comment

3.5 Homework, seat work is within child's ability level

Comment

3.6 Teacher has same academic expectations for TS as for other students

Comment

3.7 TS needs extra explanations before commencing work

Comment
3.8 TS needs individualised instruction for learning new task/concept

Comment

3.9 Teacher indicates awareness of student's special needs (eg. facing student, repeating instructions etc.)

Comment

4. MATERIALS

4.1 Special equipment required by TS (eg. Braille machine)

Comment

4.2 Class materials adapted for TS

Comment

4.3 TS needs self-correcting materials

Comment

4.4 TS needs a lot of time to complete task (eg. because materials are not appropriate, too many examples)

Comment

4.5 TS prefers other materials to regular class materials (eg. worksheets)

Comment
4.6 TS needs assistance to start working (materials too complex for independent seat work)

Comment

4.7 Teaching aids used by teacher (eg. audio-visual equipment) is appropriate for TS

Comment

5. CURRICULUM

5.1 TS on same curriculum as peers

Comment

5.2 TS on modified curriculum (specify subjects)

Comment

5.3 TS coping with same curriculum

Comment

5.4 TS coping with modified curriculum

Comment

5.5 Sequence and rate of presentation appropriate

Comment

5.6 An alternate, more appropriate curriculum is available but not being used

Comment
APPENDIX 4

TEACHERS' QUESTIONNAIRE

(MODIFIED VERSION OF RUSSELL, 1987)
SECTION 1

School Data:

Question 1: Type of School
   Primary (Public)
   Primary (Private)
   Special (Public)
   Others (Please specify)

Question 2: Number of students in school

Question 3: Region

Question 4: Class Size

Question 5: Number of behaviourally Disordered Children in Class

Question 6: Number of behaviourally Disordered Children in School

Question 7: Does the school have any?
   a) special classes
   b) resource teachers
   c) visiting special teachers
   d) integration teachers

SECTION 2

Personal Data:

Question 8: Male/Female

Question 9: Date of Birth (Optional)

Question 10: How many years have you been teaching?

Question 11: Single/Married/Other

Question 12: If Married, how many children in family?
Question 13: Did your pre-service education include special education training?

Question 14: Have you a Certificate/Diploma/Degree in Special Ed?

Question 15: Have you attended any in-service course on behaviourally disordered children in the last two years?

Question 16: Did you have a professional interest in behaviour disordered children before you knew you would have one in your class?

Question 17: How did you come to have a behaviour disordered child in your class (tick one)?

1. Volunteered
2. Child was assigned to class
3. Other (please specify)

Question 18: Have you previously had a behaviour disordered child in your class?

If yes, how much experience have you had with behaviour disordered children?

Question 19: How long have you had this child in your class?

Question 20: Did you have an opportunity to observe the child in his/her previous class?

Question 21: Do you feel you have adequate professional support within your school for handling a behaviour disordered child?

If no, what additional support do you feel you should have available in your school? (List in order of important).

1. 
2. 
3. 

Question 22: Do you have adequate support for educating a behaviour disordered child in your class from the Department of School Education
If no, what additional professional support do you feel you should have from the Department

1. 

2. 

3. 

**Question 23:** Do you:

1. Include your behaviourally disordered child in all your regular classroom programs

2. Set work programs at times for the child to do individually

3. Provide a special education program for this child

**SECTION 3**

How well is the child coping in relation to other children

<table>
<thead>
<tr>
<th>SLOW</th>
<th>AVERAGE</th>
<th>ABOVE AVERAGE</th>
</tr>
</thead>
</table>

**Question 24:** How well is the child coping academically?

**Question 25:** How well is the child getting on with reading?

**Question 26:** How well is the child getting on with printing/handwriting?

**Question 27:** How well is this child getting on with spelling?

**Question 28:** How well is this child getting on with language?

More specifically, can he/she

1) Write their own name

   YES

2) Compose and write a sentence

   YES

3) Compose and write a story of more than two sentences

   YES
**Question 29:** How well is this child getting on with maths?

**Question 30:** How well is this child getting on with oral language?

**Question 31:** How well is this child getting on with art & crafts?

**Question 32:** How well is this child getting on with music?

**Question 33:** How well is this child getting on with P.E.?

**Question 34:** How well is this child coping with a regular classroom? (Tick one)

1. No differently from others in class
2. Is coping very well
3. Is coping adequately
4. Is barely coping
5. Should not be in a regular class

**Question 35:** How well is this child coping in the playground? (Tick one)

1. No differently from others in class
2. Is coping very well
3. Is coping adequately
4. Is barely coping
5. Should not be in a regular class

**Question 36:** Which behaviourally disordered children should be integrated?

ALL □ SOME □ NONE □
Question 37: I believe this child’s integration is (please circle)

1. HIGHLY SUCCESSFUL
2. 3. 4. 5.

ACADEMICALLY ...................... 1. 2. 3. 4. 5.
SOCIALLY .......................... 1. 2. 3. 4. 5.
EMOTIONALLY ........................ 1. 2. 3. 4. 5.

Comments .........................................................................................
........................................................................................................

Question 38: I believe this child should continue to be:

a) In my class Yes □ No □
Comment .........................................................................................

b) In a regular class in this school next year Yes □ No □
Comment .........................................................................................

c) I think a more appropriate placement for this child would be
Comment .........................................................................................

Question 39: I would be happy to accept another child with similar disabilities in my class in the future
Yes □ No □

Question 40: Are there any other comments you would like to make regarding the placement of this child in your class and/or the integration of children with disabilities in general?
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................
APPENDIX 5

TEACHERS' SELF REPORT SCALE

"ATTITUDES TOWARDS INTEGRATION OF DISABLED CHILDREN IN

THE REGULAR CLASS"

(ADAPTED LARRIVEE, 1985, MODIFIED CENTER, FERGUSON & WARD, 1988)
INTEGRATION STUDY

ATTITUDES TOWARDS INTEGRATION OF DISABLED CHILDREN IN REGULAR CLASSES

The following statements seek to obtain your opinions about the integration of disabled children into regular classes.

Please indicate the extent with which you agree or disagree with each statement by placing a tick in the appropriate box.

\[ \checkmark \]

e.g. if you agree with a certain statement, please mark thus:

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Uncertain</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

13. Bearing in mind the support services which are currently available, I think a child with the following characteristics should be placed in a regular class.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Uncertain</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

1. a child who is hyperactive

2. a child who is incontinent (inadequate bowel control)

3. a child who is enuretic (inadequate bladder control)

4. a child who is deficient in self-help skills, e.g. dressing, feeding

5. a child who has mild mobility difficulties e.g. needs crutches, wears calipers

6. a child who has moderate mobility difficulties e.g. needs a wheelchair
   (a) if a school is reasonably accessible
   (b) if access is unsuitable

364
<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Uncertain</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. a child who requires special-sized and/or adapted instruction materials to progress academically, e.g. typewriter</td>
<td>[ ]</td>
<td>[ ]</td>
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<tr>
<td>8. a child who has impaired language skills (not ESL child)</td>
<td>[ ]</td>
<td>[ ]</td>
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<tr>
<td>9. a child who is at times uncontrollably aggressive</td>
<td>[ ]</td>
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<tr>
<td>10. a child who is noticeably withdrawn</td>
<td>[ ]</td>
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<tr>
<td>11. a child who has a phobic resistance to school attendance</td>
<td>[ ]</td>
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<tr>
<td>12. a child who requires intensive individualised instruction to progress academically</td>
<td>[ ]</td>
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<tr>
<td>13. a child who requires medical monitoring by the school staff, e.g. a child with diabetes, heart problems, haemophilia, epilepsy, etc.</td>
<td>[ ]</td>
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<tr>
<td>14. a child who requires assistance with artificial bowel or bladder</td>
<td>(a) whose parents are willing to assist</td>
<td>[ ]</td>
<td>[ ]</td>
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<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>(b) whose parents are not willing to assist</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td></td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Uncertain</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
</tr>
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<tr>
<td>15. a child who requires catheterization</td>
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<tr>
<td>(a) whose parents are willing to assist</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(b) whose parents are not willing to assist</td>
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<td></td>
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<tr>
<td>16. a child who has been assessed as mildly intellectually disabled (IQ 55-75/80)</td>
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<tr>
<td>17. a child who has been assessed as moderately intellectually disabled (IQ 30-55)</td>
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<tr>
<td>18. a child who often cannot recognize situations involving danger to himself/herself</td>
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<tr>
<td>19. a child who can stay engaged in academic tasks for only short time periods</td>
<td></td>
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</tr>
<tr>
<td>20. a child who displays inappropriate social behaviours, e.g. masturbation, often taking another's belongings, etc.</td>
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<tr>
<td>21. a child who has a mild visual impairment (which cannot be corrected fully by wearing of spectacles, contact lenses)</td>
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<tr>
<td>22. a child who has a moderate visual impairment (needs special equipment and/or services)</td>
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<tr>
<td>23. a child who is blind (uses Braille)</td>
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<tr>
<td>24. a child who has a mild hearing loss</td>
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<tr>
<td></td>
<td>Strongly Agree</td>
<td>Agree</td>
<td>Uncertain</td>
<td>Disagree</td>
<td>Strongly Disagree</td>
</tr>
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<tr>
<td>25. a child who has a moderate hearing loss</td>
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<tr>
<td>26. a child who has a profound hearing loss</td>
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<tr>
<td>27. a child who has a multi-disabling condition, e.g. physical and intellectual disabilities</td>
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</table>

**COMMENTS:**


APPENDIX 6

QUESTIONS FOR TEACHERS' INTERVIEW

(MODIFIED VERSION OF CENTER, FERGUSON & WARD, 1988)
QUESTIONS FOR TEACHER INTERVIEW : PRIMARY STUDENTS

INTEGRATION STUDY

SCHOOL

1. Do you think having a student with disabilities in your class has changed your attitude towards:
   (a) people with a similar disability? [ ] More positive [ ] More negative
   (b) people with disabilities in general? [ ] More positive [ ] More negative

2. What have you enjoyed most about having X in your class?

3. What have you found most difficult about having X in your class?

4. Do you feel you have had sufficient support in integrating this student?

FROM WITHIN SCHOOL

Executive staff [ ] YES/NO
Support staff [ ] YES/NO
Other staff [ ] YES/NO

FROM OUTSIDE SCHOOL

Regional staff [ ] YES/NO
(e.g. integration officer)
Integration - Teacher/aide [ ] YES/NO
Parents [ ] YES/NO

5. Do you feel there is any stress associated with this placement? [ ] YES/NO

6. Are there any characteristics of teaching style/personality that you feel are particularly important when integrating Behaviour Disordered children? [ ] YES/NO
APPENDIX 7

PRINCIPALS' QUESTIONNAIRE

(MODIFIED VERSION OF CENTER, FERGUSON & WARD, 1988)
1. How long have you been
   a teacher............................
   a principal........................

2. Have you had any training in Special Education
   Preservice...........................
   In-Service...........................
   Post-Service........................
   Post Graduate........................

3. Enrolment of students:
   a) Who first requested the student's enrolment at his school?
      Parent
      Principal of Special School
      Counsellor
      Regional Support Services
      Other
   b) Who made the decision to enrol the student?
   c) What in your view was the major purpose in placing this student in this class:
      Academic Integration
      Social Integration
      Combination of both academic and social integration.
      Comment:

4. a) Who was involved in the initial meeting about this student?
   Parents
   Class Teacher
   Executive Staff
   Support teacher
   Counsellor
   Other
   b) Where specific goals and objectives spell out at this meeting? YES/NO
c) Were these
    mainly academic
    mainly social
    combination of academic and social.

5. a) How much prior notice did you receive concerning this student's enrolment?

    b) Was this sufficient from your point of view? YES/NO

    Comment

6. RESOURCE SUPPORT

    Were additional resources deemed necessary prior to acceptance of the student's enrolment?

7. Were these resources received? YES/NO

    Details

8. What preparations (if any) were carried out before he/she arrived?

    a) Staff general preparation
    b) Staff specific preparation (e.g. in relation to student's specific disability)
    c) Other pupils
    d) Parents of other students
    e) Other (Please give details)

9. a) Have any further adjustments been found necessary since the student's arrival? YES/NO

    b) If yes, please give details.
10. a) How adequate, in your opinion, are present resources to support this student's continued enrolment at this school?

- very adequate
- adequate
- not very adequate
- not at all adequate

Comment

b) How appropriate are these resources?

- very appropriate
- appropriate
- not very appropriate
- not at all appropriate

11. Who was involved in the decision to place the student in his/her present class/classes?

- Principal
- Parents
- Previous teachers
- Class teachers
- Other (please specify)

12. Are you aware of any specific problems arising from the student's placement?

- In his/her class
- In this school
- YES/NO
- YES/NO
- details

13. a) How often are review meetings concerning this placement held?

- once a year
- once a term
- once a month

b) Who generally attends these meetings?

c) How is the student's progress evaluated?

d) What happens/would happen if the student's placement does not appear to be working?
14. What has been the attitude of others in the school towards this student’s placement?

Generally . . . . . . . Generally . . . . . . . Neutral
Positive . . . . . . . Negative

Other staff
Other pupils
Parents of other pupils
Comments

15. What are the major advantages of this integrated placement?

To the student
To the staff
To the other students.

16. What are the major disadvantages?

For the student
For the staff
For other students.

17. a) Do you think this student should continue to be integrated into a regular class next year?

YES/NO

b) If not, what in your view would be the most appropriate placement for this student and why?

18. Would you accept another student with similar disabilities for enrolment at your school?

YES/NO

Comment

19. a) Do you have a school-based policy concerning the enrolment of students with disabilities?

YES/NO

b) If YES, is the policy a written one?

YES/NO

c) Who is primarily responsible for the articulation of this policy?

d) Who else was involved in its development?
20. What is the usual procedure when a parent/guardian/special school teacher applies to enrol a student with disabilities in this school?

21. a) What is the nature of your involvement in the integration program at this school?

Purely administrative
Solving problems as they arise
Liasing with parents and other professionals
Determining appropriate educational programs
Discussing student's progress with teachers
Chairing meetings about students
Ensuring teachers have adequate support (materials and personnel) for students with special needs.

b) As a principal, what do you see as being the most important aspect of your role?

22. Are there any other comments you would like to make regarding the integration of students with disabilities into regular schools?
APPENDIX 8

QUESTIONS FOR PRINCIPALS INTERVIEW

(CENTER, FERGUSON & WARD, 1988)
INTEGRATION STUDY - QUESTIONS FOR PRINCIPAL'S INTERVIEW

SCHOOL

1. DO YOU HAVE A SCHOOL POLICY WHICH ACTIVELY PROMOTES:
   (a) Personal development  YES/NO
   (b) Student welfare       YES/NO
   (c) Staff development     YES/NO
   (d) Basic skills          YES/NO
   (e) Integration of students with disabilities YES/NO

2. HOW MANY DISABLED STUDENTS HAVE BEEN ENROLLED IN YOUR SCHOOL. WHAT SORTS OF DISABILITIES DO THEY HAVE?

3. DO YOU PERSONALLY HAVE ANY RESERVATIONS ABOUT THE DEPARTMENT'S INTEGRATION POLICY?

4. DOES YOUR STAFF GENERALLY HAVE ANY RESERVATIONS ABOUT THE INTEGRATION POLICY?

5. WHAT PARTICULAR PROBLEMS HAVE YOU EXPERIENCED IN IMPLEMENTING THE DEPARTMENT'S POLICY? e.g.
   1. time in administration
   2. difficulty in finding appropriate personnel
   3. insufficient resources to support enrolment
   4. staff inexperience
   5. staff opposition
   6. parental attitudes
   7. teacher stress

6. ARE THERE ANY CHARACTERISTICS OF TEACHING STYLE/PERSONALITY THAT YOU FEEL ARE PARTICULARLY IMPORTANT WHEN INTEGRATING BEHAVIOUR DISORDERED CHILDREN?
APPENDIX 9

SUPPORT STAFFS' QUESTIONNAIRE

(MODIFIED VERSION OF LARRIVEE, 1985)
1. Do you believe the student's present placement is: (please circle)

<table>
<thead>
<tr>
<th>5 = highly successful</th>
<th>1 = not at all successful</th>
</tr>
</thead>
<tbody>
<tr>
<td>academically</td>
<td>5  4  3  2  1</td>
</tr>
<tr>
<td>socially</td>
<td>5  4  3  2  1</td>
</tr>
<tr>
<td>emotionally</td>
<td>5  4  3  2  1</td>
</tr>
</tbody>
</table>

Comment: ________________________________

2. Do you believe the student should continue to be:

   a) In this class this year? YES/NO

   Comment: ________________________________

   b) In a regular class in this school next year? YES/NO

   Comment: ________________________________

   c) I think a more appropriate placement for this student would be:

      This year ________________________________

      Next year ________________________________
3. How adequate is the level of support/cooperation which you have received from the following school personnel: (leave out where appropriate)

<table>
<thead>
<tr>
<th>Very Adequate</th>
<th>Fairly Adequate</th>
<th>Not Adequate</th>
<th>Not at all Adequate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Principal</td>
<td>Executive Teacher/</td>
<td>Head of Dept.</td>
<td>Class teacher</td>
</tr>
<tr>
<td>Year coordinator</td>
<td>Support teacher</td>
<td>School counsellor</td>
<td>Itinerant teacher</td>
</tr>
<tr>
<td>Integration teacher</td>
<td>Teacher from special school</td>
<td>Special Ed. Consultant</td>
<td>Teacher's aide</td>
</tr>
<tr>
<td>Parents/volunteers</td>
<td>Other (please specify)</td>
<td>Comment:</td>
<td></td>
</tr>
</tbody>
</table>

4. How adequate is the amount of time you spend working on academic subjects with the student?

Sufficient
Not quite sufficient
Sufficient in some subjects but not in others
Insufficient in some subjects but not in others.

Comment: 

5. Who decides how much time the student needs for academic support in the classroom?

Comment: 

A:questn.doc
6. What method of support teaching is used?
   a) In-class assistance
      - individually
      - small group
      - combination
   b) Withdrawal
   c) Assistance while the class attends other subjects e.g. art, music.
   d) Other (please specify)

Comment:


7. Who decides on the method of support which you will use when assisting the student?
APPENDIX 10

PARENTS' QUESTIONNAIRE

(MODIFIED VERSION OF RUSSELL, 1987)
**QUESTIONNAIRE**

**PARENT/GUARDIAN**

**SECTION 1**

**About your child**

- [ ] Mother
- [ ] Father
- [ ] Other

**Question 1:** When was he/she born ___/___/___

day/month/year

**Question 2:** What gender is your child

- [ ] Boy
- [ ] Girl

**Question 3:** How many brothers and sisters does he/she have

(Enter number)

- [ ] Brother(s)
- [ ] Sister(s)

**Question 4:** Do any of his/her brothers or sisters have a disability

- [ ] Brother(s)
- [ ] Sister(s)

**SECTION 2**

**About your child's school**

**Question 5:** How many schools has your child been to since he/she was five

_______

**Question 6:** How many full days was your child off school last year? Estimate as accurately as possible?

_______

**Question 7:** Are you or your partner on a Committee associated with the school?

- [ ] YES
- [ ] NO

**Question 8:** How many times did you visit your child's school last year

_______

**Question 9:** How well do you feel your child is doing at school generally?

**Question 10:** How well do you feel your child is getting on with reading?

**Question 11:** How well do you feel your child is getting on with spelling?
**Question 12:** How well do you feel your child is getting on with written language?

More specifically

1) Can your child write their own name?  
   - SLOW:  
   - AVERAGE:  
   - ABOVE AVERAGE: 
   - YES ☑️  
   - NO  

2) Can your child compose and write a sentence?  
   - SLOW:  
   - AVERAGE:  
   - ABOVE AVERAGE: 
   - YES ☑️  
   - NO 

3) Can your child compose and write a story of more than two sentences  
   - SLOW:  
   - AVERAGE:  
   - ABOVE AVERAGE: 
   - YES ☑️  
   - NO  

**Question 13:** How well do you feel your child is getting on with maths?

**Question 14:** How well do you feel your child is getting on with oral language?

**Question 15:** How well do you feel your child is getting on with art & craft?

**Question 16:** How well do you feel your child is getting on with music?

**Question 17:** How well do you feel your child is getting on with P.E.?

**Question 18:** How well do you feel your child gets on with other children generally?

**Question 19:** How well do you feel your child gets on with other children at school?

**SECTION 3**

**How do you feel about your child attending a regular school?**

**Question 20:** Has your child always been in a regular class?  
   - SLOW:  
   - AVERAGE:  
   - ABOVE AVERAGE: 
   - YES ☑️  
   - NO  

**Question 21:** If not was your child previously in

1) A special school for behaviourally disordered children?  
   - SLOW:  
   - AVERAGE:  
   - ABOVE AVERAGE:  

2) A special class for behaviourally disordered children?  
   - SLOW:  
   - AVERAGE:  
   - ABOVE AVERAGE:  

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iii) A special class for behaviourally disordered children at another school?

iv) Other (Please specify) ________________________________

Question 22: How long has your child been in a regular class?

Just this year

Longer, put down how many years or months

Question 23: Were you consulted about your child going into a regular class?

YES ☐ NO ☐

Question 24: How did you feel when you found out that your child would be going into a "regular" class?

PLEASSED ☐ DOUBTFUL ☐ OPPOSED ☐

Question 25: How do you feel now about your child being in a regular classroom?

PLEASED ☐ DOUBTFUL ☐ OPPOSED ☐

SECTION 4

Health

Question 26: Does your child have any sleeping difficulty?

NO ☐

YES-MILD ☐

YES-SEVERE ☐

If yes, is it

Difficulty going off to sleep

Waking up during the night

Waking early in the morning

Other, please describe ________________________________

Question 27: In the last year, have you sought help or advice for a behaviour or emotional problem your child has?

YES ☐ NO ☐
If yes, please tick who you sought advice from:

- General Practitioner
- School Teacher
- Education Dept. Psychologist
- Clinical Psychologist
- Psychiatrist
- Paediatrician
- Public Health Nurse
- Health Dept. Doctor
- Social Worker
- Voluntary Social Agency
- Other (please specify)

Question 28: Is your child currently receiving treatment from a specialist (outside of the school environment)?

- YES
- NO

Question 29: I would prefer my child to be in (tick one)

1. Regular class
2. Special school for behaviour disordered
3. Special class for behaviour disordered

Question 30: In your opinion should children with disabilities be placed in regular classrooms?

- YES
- NO
APPENDIX 11

PERMISSION NOTES

Dear Parent,

Bendigo College of Advanced Education is conducting a study to ascertain the effectiveness of the Victorian Integration Policy as it relates to children with behaviour disorders. Your child has been randomly selected to take part in this study and we would be very grateful for your permission to include him/her in it.

Yours sincerely,

KEITH BRADSHAW,
Lecturer in
Special Education.

I give/do not give permission for my son/daughter ____________________________
to take part in the Bendigo College study on the integration of Behaviour Disordered children.

Signed: ____________________________ Parent/Guardian

Date: ____________________________

NOTE: All information regarding your son/daughter is confidential and no data pertaining to any individual child or school will be presented in the conclusions of the study.
Dear Parent,

I am presently conducting a research across New South Wales to ascertain the effectiveness of the Department of School Education's Integration Policy as it relates to children with behaviour disorders. Your child has been randomly selected to take part in this study and we would be very grateful for your permission to include him/her in it.

Yours sincerely,

Keith Bradshaw
Lecturer in Special Education

I give/do not give permission for my son/daughter to take part in the study on the Integration of Behaviour Disordered children.

Signed: Parent/Guardian

Date:

NOTE:

All information regarding your son/daughter is confidential and no data pertaining to any individual child or school will be presented in the conclusions of the study.
1 August 1988

Mr Keith Bradshaw
Bendigo College of Advanced Education
P.O. Box 199
BENDIGO 3550

Dear Mr Bradshaw

I refer to your letter of 22 July 1988 requesting approval to conduct research in Government schools.

The procedure for granting approval for research in schools is set out in our School Information Manual: School Operations. A copy of the relevant extract is enclosed. It should be noted that the statement is currently under review, in order to take account of recent changes in the structure and organisation of the Schools Division. Broadly, however, the procedure in relation to the type of project your propose is as follows:

1. Approval in principle must be obtained from me, acting on behalf of the Chief General Manager.

   The granting of such approval takes into account the purpose and methodology of the research, and the benefits it may have for schools.

   Approval means that the Schools Division has no objection in principle to the research being conducted in Government schools. It therefore allows you to approach individual school principals to seek their cooperation in the research program. It does not however guarantee that cooperation.

2. You should provide a list of the schools you wish to include in your research program to the general manager(s) of the region(s) in which the schools are located, together with an outline of your research program and a copy of this letter of approval in principle. This should occur before any approach is made to schools.
3. You must obtain approval for the research to be conducted in any particular school directly from the principal, again with reference to details of your program and this letter of approval. Each principal retains the right to grant or deny access to the school.

4. No student is to participate in the research survey unless he or she is willing, and unless the permission of the parents or guardian has been obtained through the principal. Surveys involving other members of the school community similarly can proceed only with the agreement of the people involved.

In view of the information you have provided, I am pleased to inform you that your proposed research on Integration in Government Schools is approved, subject to Conditions 1, 2, 3, and 4 above being met.

I wish you well with your project.

Yours sincerely

J K MATTHEWS
Assistant General Manager
Education Planning and Policy Branch
Dear Mr Bradshaw,

I refer to your request to conduct research in Departmental schools involving the integration of behaviour disordered students into regular primary classrooms.

Approval has been given by the Director-General of School Education, Dr F. G. Sharpe, for you to approach Principals of the nominated schools.

In conducting research, you should be aware of the following requirements:

- the Principal must approve how the study is to be carried out, and approve each phase before it is undertaken;
- the Principal must approve the methods of gathering information in the school;
- the Principal has the right to withdraw the school from the study at any time;
- teachers have the right to withdraw from the study at any time;
- the privacy of the school and the students is to be protected.

You are reminded that the participation of teachers and students must be voluntary and must be at the school's convenience.

When your study is completed, you are asked to provide this Department with a report of your findings. Please forward your report to the Department marked "Attention: Director, Policy, Planning and Educational Audit".

Yours sincerely,

Director,

Policy, Planning and Educational Audit

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APPENDIX 12

FOLLOW UP QUESTIONNAIRES ONE, TWO & THREE
INTEGRATION QUESTIONNAIRE
(6 MONTH FOLLOW UP)

NAME:

SCHOOL:

1. How adequate, in your opinion, are present resources to support this student's continued enrolment at this school?

very adequate

][adequate

not very adequate

][not at all adequate

Comment:

2. How appropriate are these resources?

very appropriate

][appropriate

not very appropriate

][not at all appropriate

3. Are you aware of any specific problems arising from the student's placement?

in his/her present class

Yes

No

in this school

Yes

No

Details

4. a) How often are review meetings concerning this placement held?

once a year

[ ] once a term

[ ] once a month

b) Who generally attends these meetings?

c) How is the student's progress evaluated?

d) What happens/would happen if the student's placement does not appear to be working?
5. What has been the attitude of others in the school towards this student's placement?

<table>
<thead>
<tr>
<th></th>
<th>Generally Positive</th>
<th>Generally Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other pupils</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parents of other pupils</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments

6. What are the major advantages of this integrated placement?

<table>
<thead>
<tr>
<th></th>
<th>Generally Positive</th>
<th>Generally Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>To the student</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>To the staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>To the other students</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. What are the major disadvantages of this integrated placement?

<table>
<thead>
<tr>
<th></th>
<th>Generally Positive</th>
<th>Generally Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>For the student</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>For the staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>For other students</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. a) Do you think this student should continue to be integrated into a regular class next year? YES ☐ NO ☐

b) If not, what in your view would be the most appropriate placement for this student and why?

9. Would you accept another student with similar disabilities for enrolment at your school? YES ☐ NO ☐

Comment

10. Are there any other comments you would like to make regarding the integration of students with disabilities into regular schools and the results found from this present study. (Answer on back of page please)
INTEGRATION QUESTIONNAIRE (1 year follow up)

NAME: .................................. SCHOOL: ..................................

1. How adequate, in your opinion, are present resources to support this student's continued placement in the regular school?
   very adequate [ ] adequate [ ]
   not very adequate [ ] not at all adequate [ ]
   Comment

   _____________________________________________________________

2. a) How often are review meetings concerning this placement held?
   once a year [ ] once a term [ ] once a month [ ]
   b) Who generally attends these meetings?

   _____________________________________________________________
   c) How is the student's progress evaluated?

   _____________________________________________________________
   d) What happens/would happen if the student's placement does not appear to be working?

   _____________________________________________________________

3. What has been the attitude of others in the school towards this student's placement?

<table>
<thead>
<tr>
<th>Generally Positive</th>
<th>Generally Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other staff</td>
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<td></td>
</tr>
<tr>
<td>Other pupils</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parents of other pupils</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
   Comments

   _____________________________________________________________
   _____________________________________________________________

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4. Are you aware of any specific problems arising from the student's placement?

in his/her present class  YES  NO
in this school  YES  NO
Details

5. What have been the major advantages of the placement of this child into your class/school for:

A. The student

B. The staff

C. Peer group

6. What have been the major disadvantages of the placement of this child into your class/school for:

A. The student

B. The staff

C. Peer group

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7. a) Do you think this student should continue to be integrated into a regular class next year?

YES ☐ NO ☐

b) If not, what in your view would be the most appropriate placement for this study and why?

____________________________________________________________________
____________________________________________________________________

8. Would you accept another student with similar disabilities for enrolment at your school?

YES ☐ NO ☐

Comment

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

9. Are there any other comments you would like to make regarding the integration of students with behaviour disorders into regular schools?

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

10. Do you think the Policy of Integration in Victoria has been effectively implemented in relation to Behaviour Disordered Children?

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
INTEGRATION QUESTIONNAIRE (2 year follow up)

NAME: ..........................  SCHOOL: ..........................

1. How adequate, in your opinion, are present resources to support this student's continued placement in the regular school?

very adequate □  adequate □
not very adequate □  not at all adequate □

Comment ____________________________________________________________

2. a) How often are review meetings concerning this placement held?

once a year □  once a term □  once a month □

b) Who generally attends these meetings? _________________________________

c) How is the student's progress evaluated? _____________________________

d) What happens/would happen if the student's placement does not appear to be working?

____________________________________________________________________

3. What has been the attitude of others in the school towards this student's placement?

<table>
<thead>
<tr>
<th></th>
<th>Generally Positive</th>
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<td></td>
</tr>
<tr>
<td>Parents of other pupils</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments ____________________________________________________________

____________________________________________________________________
4. Are you aware of any specific problems arising from the student's placement?

   in his/her present class  YES  NO
   in this school             YES  NO

Details ____________________________________________

________________________________________________________________________

5. What have been the major advantages of the placement of this child into your class/school for:

   A. The student ____________________________________________

   ____________________________________________

   ____________________________________________

   B. The staff ____________________________________________

   ____________________________________________

   ____________________________________________

   C. Peer group ____________________________________________

   ____________________________________________

   ____________________________________________

What have been the major disadvantages of the placement of this child into your class/school for:

   A. The student ____________________________________________

   ____________________________________________

   ____________________________________________

   B. The staff ____________________________________________

   ____________________________________________

   ____________________________________________

   C. Peer group ____________________________________________

   ____________________________________________

   ____________________________________________
7. a) Do you think this student should continue to be integrated into a regular class next year?

YES [ ] NO [ ]

b) If not, what in your view would be the most appropriate placement for this study and why?

_________________________________________________________

8. Would you accept another student with similar disabilities for enrolment at your school?

YES [ ] NO [ ]

Comment

_________________________________________________________

9. Are there any other comments you would like to make regarding the integration of students with behaviour disorders into regular schools?

_________________________________________________________

_________________________________________________________

_________________________________________________________

_________________________________________________________

10. Do you think the Policy of Integration in Victoria has been effectively implemented in relation to Behaviour Disordered Children?

_________________________________________________________

_________________________________________________________

_________________________________________________________
APPENDIX 13

CASE STUDIES 3,4,7,10,12,16,17,19,26,30.
CASE STUDY No 3 MALE:

GRADE: 5th

Perceived Academic Integration score: 62.8%

Perceived Social Integration score: 43.4%

Perception of Continued Placement: 100%

Perceived Appropriateness of Support: 65.9%

Total Perceived Score: 68%

THE SCHOOL:

The large primary school (four hundred children - Prep to sixth) is set on flat land on the outskirts of a large rural city. The prep (first year of schooling) grades are situated in an annex approximately one kilometre from the main school. The school has a grass oval and plenty of open spaces for the children to play/relax. The classrooms/toilet block/administration block are all set on one level. The children are allowed into the classrooms before class begins and at recesses to play board games, read and talk. Several integration students (3) attend the school. The school staff appear divided over the integration question. Several specialist teachers and the deputy principal have little time for the integration program or the students involved in these programs. The school has an integration teacher and an integration aide to support the classroom teacher/s. The student surveyed has been at the school for several years.
and is well known to all staff members and most parents. The school has an integration policy which was formulated along ministerial guide-lines with staff and parental involvement. The staff are very young (eighteen inexperienced teachers). The principal is very supportive and has post graduate qualifications in Special Education. The school is structured along traditional lines with parallel grade classes. The students go to specialist teachers for art, music and F.E.. The curriculum structure of the school is very traditional with clear expectations for each grade level and this presents some problems for the surveyed student. The school has a clear set of school rules which are presented under two headings, safety rules and general rules they total seventeen together. The school rules also include the children's rights and their responsibilities. A list of unacceptable behaviours is clearly presented in a booklet.

THE CLASSROOM:

The classroom appears roomy. There are twenty four students in the room including two integrated children and an integration aide. The children sit in pairs in tables formed in a semi circular formation around the chalkboard. Each table contains a boy and girl. The student surveyed sits by himself alongside his aide in a table approximately half way around the semi circle at the back of the room. There is a pleasant atmosphere in the room with plenty of humour displayed by both the teacher and children. The surveyed student is on a different program to other students but does involve himself in social interaction at many levels. The classroom computer is often used as a social interaction centre for the student and his peers. The student and the integration aide are very close with the aide spending the majority of her time in the room working with the surveyed student only. The student does go with his class to other specialist subjects but joins in little. During art the aide does not join the student for the first fifteen minutes hoping for some interaction to take place but at this stage
This plan hasn't worked. The school has a time out room adjacent to the classroom. The student does have some difficulty in conforming to classroom rules. All academic programs (reading, writing and maths), for the student, are attempted in the morning session. The student is involved in individual, small group and withdrawal models.

The teacher has displayed children's work around the room. The activities in the classroom are arranged so that more structured activities take place in the morning session and more individual activities in the middle and afternoon sessions. Classroom rules are expected to be followed in all sessions. There is constant positive feedback to all students. Little time is spent on discipline as the teacher clearly expects the children to follow classroom rules at all time. The noise level in the classroom is productive yet never allowed to become excessive. The children are expected to organise their own work. The children are treated with respect by the teacher and they reciprocate. The children are treated as individuals.

**THE TEACHER:**

The teacher is an experienced middle aged female. She is married with two young children and has been teaching for ten years. She has a post graduate qualification in special education and has taught in a special school prior to coming to this school. The teacher has had many years experience with children with behaviour disorders in special schools. The teacher has a friendly manner, frequently smiles and is inclined to use humour at regular intervals. The students frequently receive positive feedback in a calm and supportive manner. The teacher appears to spend equal time on all class members (including the integrated students).
Independence is encouraged yet classroom rules are stressed. The children respond well to the teacher. Individual differences are recognised and catered for. Competition is not encouraged by the teacher. According to the questionnaire on "Attitudes towards Integration of disabled children in regular classes" the teacher indicated by her responses that while she is supportive of the principle of integration she has reservations (in fact the teacher's score on the Questionnaire was one of the lowest recorded). The teacher felt she had appropriate support most of the time from the school but definitely not from the Ministry of Education. The teacher sees the student as achieving below average in most academic subjects and less socially. The teacher stated she is enjoying the challenge of teaching the student.

THE CHILD:

The student has attended the school for a number of years and is well known. The student is capable of outbursts (can be violent at times) has hit teachers on occasions. The student has a habit of touching other students. It is apparent in the morning, by his attitude, what sort of a day it will be. The integration support group meets monthly to discuss the student's progress. A social skills and Gross motor, Fine motor program have recently been designed. The student has obsessions with certain topics, at present it is sunken ships. The student constantly reads and writes vivid stories but doesn't like the stories to be displayed and frequently destroys his work. The student has a strong dislike for music and often reacts in a negative way to it. The student is working on a different curriculum level than his peers as his attention span seems limited. At present the Alde is working on a social skills program. During recesses and lunchtime the student reads in the library and very seldom joins in activities with peers. When playing games with peers the student must win. The school staff are concerned about the student's diet. According to the teacher's aide and
classroom teacher some progress, socially and academically is taking place, but there is a long way to go. Academic subjects must be done in the morning. The student works in individual, withdrawal and small group situations. He is very seldom involved in extra curricula activities and has not been to a school camp or school social and the family have never been involved in family activities at the school.

PEER ACCEPTANCE:

According to the sociogram the student has a low sociometric status. He is in the bottom third of the class. Several points are suggested from the results of the sociogram, firstly, the student was chosen by only one other student as a best friend, secondly, the student was one of only two students who received best friend choices from the opposite sex and thirdly while not being chosen by many students as a best friend the student was rejected by no students in the class. The student chose no one as a best friend. Despite these findings the teacher felt that the student was well accepted by his peers. This view is supported by the principal who commented that the student was well accepted by his peers because they had grown up together. The principal felt the peer group tolerated the student's behaviour. The teacher noted that there was inconsistency in the way the student was treated and how other students were treated and sometimes if the student stopped working so would the rest of the class. More achievement was made with the peers when the student was working with alde. The student didn't appear to mix with peers during recess and lunch. There was little evidence of the student joining in with peers during specialized subjects. It is obvious that the peer group have been well trained not to react to the student's behaviour and to include him wherever possible in their activities yet this happened rarely in reality.
PARENTAL ATTITUDE:

The school staff are cautious in their relationship with the parents. On the surface the situation is co-operative but the school staff are concerned that the full extent of behaviour at home is not being presented and thus cannot be given assistance. The classroom teacher, although having the student in her class for three terms, has never seen the student's father. The parents believe their son's behaviour is their problem and they are not keen to share the situation. The parents are very wary about this research project and indeed any professional asking questions about their child's behaviour. The parents were informed as to the reasons for the research project but never co-operated. The school feels the student is given little parenting at home. There is little social interaction in the home situation. The parents are very keen to have a label attached to their son yet are very pleased that their son is at a regular primary school and want him to continue to attend this school. The parents (and indeed the school), are very concerned about the prospects of high school. The parents have indicated that they may withdraw their son from school altogether when he reaches secondary level. The mother attends integration support meetings and has a close relationship with the students aide. The school staff are concerned about the student's dietary habits at home (student also has a habit of having his meals in his room by himself). The parents of other children in the school have indicated some concern about the way the student 'touches' their children but there has not been any real problems in this area to date. According to the principal parents who have recently enrolled their children and don't now the student as well are the main ones to complain about the student's behaviour.
USE OF RESOURCES:

The student has an integration teacher and an integration aide three days a week. The aide does work with another child but most of her time is spent with the surveyed student. An Integration Support Group is convened once a month. The school Integration teacher is an experienced, senior teacher who has a good rapport with the student. Support is forthcoming from regional office. The student is often withdrawn from class by the integration teacher who uses the withdrawal model. There is some conflict between school and specialist services over the methods recommended to assist the student. This conflict in particular arises over how to deal with the student's obsessive behaviour. The school cannot accept outside suggestions because they believe they are unrealistic for the classroom situation. The majority of the people involved with the student at school stress the need for full time support at school. The teacher indicated that resources are adequate most days but "don't be away when the aide is not there e.g. Wed, Thurs the student is very difficult to contain. Some staff members claim that the student has too many considerations, "all he needs is a good kick up the b...!" These staff members, the teacher noted are unable to handle the student at all if classroom teacher is absent, particularly if the teacher's aide is also away. In addition to some aspects of the Consultation Model (Resource Model) the school has adopted the Integration Teacher Model (Resource Model). The withdrawal mode is the main form of instruction.

CONCLUSIONS

The student is being maintained at present in the regular system despite limited resources. The integration teacher is coping but admits that there is little academic integration taking place. The results of the sociometric activities indicated that like the
academic areas there is little social integration taking place. The classroom teacher, integration aide and the principal all stressed the need to increase trained personnel support to full time. The classroom teacher is taking maternity leave next year and there is some concern amongst the staff as to whom the class will be allocated next year.
CASE STUDY No 4  MALE:

GRADE: Prep

Perceived Academic Integration score: 47.1%

Perceived Social Integration score: 63%

Perception of Continued Placement: 100%

Perceived Appropriateness of Support: 59%

Total Perceived score: 67.2%

THE SCHOOL:

The school is situated in a medium sized country town. The school has two hundred and thirty three students in grades prep to year six. The school has not documented a separate integration policy at this stage rather integration is part of the school policy on personal development. The school only has one integrated child. The Integration Support group meets once a month to assess student's development. The school principal indicated a number of initiatives designed to assist the surveyed child. Daily programs and weekly programs will be established and goals will be more specific so that the principal and other interested people can evaluate the student's progress.

The school staff have developed some general objectives for the student including, independence, safety, peer group co-operation and responsibility, concentration development and the refining of motor skills. It is these objectives the
(newly appointed) principal wants to make more specific. The school principal has no special education qualifications but he is an experienced teacher/principal who has had a lot of previous experience at integrating a wide range of disabled students. The school staff seem quite divided over the policy of integration. The classroom teacher made the comment that, "certain staff members think, well he is in your class you can handle him the best way you can". The teacher stressed that the integration of a disabled child, particularly a child with behaviour disorders, was a whole staff responsibility. Certain specialised subject teachers would not allow the student to attend their classes unsupervised. The classroom teacher felt that at times she was going it alone. The principal was concerned about the placement of the child in 1989 and to staff reaction. The principal felt the great need to reduce the size of the class which contained the integrated student and he also emphasised the need for a full time integration aide. The principal hinted that the student would not be enrolled in 1989 unless a full time aide was appointed. The school has no integration teacher and the integration aide was appointed for an equivalent of three days a week. The school playground is large and open, the school buildings are a combination of very old and very new a real dichotomy. The school has a traditional school curriculum with clear academic expectations for each grade. The school has a number of composite classes.

THE CLASSROOM:

The classroom is situated in the older section of the school and needs some updating. Despite this the room is presented well with the walls, door and bulletin board crowded with the children's work. The room has a computer area, an area at the front to sit together for show and tell and a reading area including a number of cushions. The children sit in groups of six scattered around the room. The student sits by himself alongside his aide. The classroom is a noisy one with children responding to each other in loud voices and the teacher frequently raising her voice.
In frustration. Despite this the children seemed to respond well to the teacher even if at times this meant who could call out the loudest. The students were given plenty of responsibility and the curriculum was presented in an interesting way full of variety. There was plenty of positive feedback to all students. The teacher did appear to spend more time with the surveyed student often making an effort to acknowledge his achievements by interrupting the other children. The surveyed student usually worked on a one to one program with the integration side. This program was general and appeared to lack a clear direction. A feeling that the principal agreed with. The student didn’t appear to mix with his peers in the room and they often giggled at his behaviour. The class size was small, twenty one students, and this created some friction from other teachers who had to have larger numbers to accommodate the small numbers in this room.

THE TEACHER:

The teacher was a married female with eleven years teaching experience who lived in a nearby town. The teacher had no special education qualifications but had attended an in-service on children with behaviour disorders recently. The teacher has had no previous experience with special needs children. The teacher commented that, "she volunteered under sufferance" when the situation for staffing the class was considered. The other staff member on that grade had refused to have the student in her classroom. The teacher did have the opportunity to visit the child at his pre-school kindergarten but on the day of the visit the student was absent. The teacher is a very anxious person who constantly questions her abilities to teach and in particular her ability to handle a child with behaviour disorders. According to the questionnaire, "Attitudes Towards Integration of Disabled Children in Regular Classes" the teacher has a positive general attitude to integration and this was supported by comments made that she can see many advantages of the integration policy but resources, particularly personnel must be forth coming. The teacher
indicated that she could not cope with the stress of having the student in her class for another year. She commented on the need for more support from regional support staff and the immediate appointment of a full time aide for the student.

THE CHILD:

The student has been at the school for one year. He is adopted and his adopted family comprises of two much older brothers and four much older sisters. All but one of the siblings have completed school. The student is, according to the school and parents, having problems in most academic areas except for physical education. The student can write his own name but cannot compose and write a sentence. The student has progressed well, according to the integration aide, with recognition of colours, numbers and letters. The classroom teacher feels a one to one supervision is constantly needed as the student finds the classroom and it's routines quite restricting at times. The classroom teacher also suggested the need for the student to have access to a speech therapist and a remedial gymnastics program. The student often interrupts the class with bursts of affection and attention seeking behaviours including loud noises and cuddling other students. The student has difficulty following class and school rules (particularly school rules). He has been found on the roof, in the middle of the o’al in pouring rain and yelling out in the library. The student can have extreme mood swings where he finds it very difficult to follow any guide-lines. The student works on a separate program academically and this involves individual and withdrawal strategies. The student attends all specialist subjects with his peers provided his aide is present. The classroom teacher commented that working with the student has taught her many things including, tolerance, understanding and the limits of her ability. The student has assisted in changing her attitudes towards integrated children in a positive way. The student finds it very difficult to concentrate for more than a couple of minutes. During observation the student ate a pencil, drew on another child pants, knocked
all the books out of a library shelf and drew over another child's finished piece of work. The student displayed very little on task behaviour.

**PEER ACCEPTANCE:**

According to the sociogram the student had an average social status. An average social status is where there are peergroup members who are more popular and there are peergroup members who are more unpopular. The interesting pattern with this child was that a large number of children chose him as their best friend and a large group rejected him. It seemed he was either liked or disliked, the students were quite clear in their choices. The student only chose two people as his best friends. From observation it seemed that the peer group ignored the student most of the time and occasionally they were entertained at his expense. This view was supported by the classroom teacher who indicated that the student preferred to play with older children or by himself rather than his peers. This view was also supported by his parents who mentioned the student got on much better with older children. This is probably due to the age of his siblings.

One of the major aims of the school has been the development of peer group relations. Both the classroom teacher and principal hope that having the student in the class has helped the peer group to become more understanding of individual differences but there is no indication as to whether this has been successful at this stage. The principal was concerned that the student (and many other integrated children) become too dependent on their aides. If social integration was to be successful, he claimed, the student needs to outgrow the aide. The aim of social integration is too general, the principal argued, the aim needs to become more specific. The principal posed the question, "should the child be so reliant on one person"? The principal was concerned that social integration if achieved is often
short lived as the peers reach high school/puberty the gap in their common interests widens. He felt this would certainly happen to this situation.

PARENTAL ATTITUDES:

The principal made the comment that initially his role was one of a referee. The principal indicated that because there had been insufficient time prior to enrolment a "very nasty situation" developed. The parents of the student are very pleased to have their son enrolled at a regular school. It is clear that at times their has been a number of disagreements between the school and the parents as the best direction to take. The classroom teacher knew the parents previously and they seem to get on well. It is anticipated that more friction will happened in 1989 as the student will not be enrolled until there is an increased amount of time for the teachers aide. At times the classroom teacher has felt like a mediator between school and parents as both put forward their views. According to the principal the reaction by other parents is neutral. The classroom teacher suggested that one of the greatest challenges she had to face was the attitudes, mostly negative, from other parents who regularly complained to her about the student's behaviour. These negative attitudes were almost always conveyed to their children. Negative comments were usually related to the safety factor, will my child be hurt?

USE OF RESOURCES

The school staff is very angry over the time allocation for the Integration aide. The principal is concerned about the Integration aide's job specification. He feels that the role of the Integration aide, as described by the Ministry, hampers the development of social integration. The principal believed that even if the student and aide outgrow each other they may be forced to spend many years together. Apparently at present in Victoria, there is no method for reviewing the Integration
aide position. The principal feels that attention is focused on one child to the detriment of others and this also inhibits social integration. The integration aide is often deployed in a number of different schools however as the principal pointed out, the needs in each of these schools might be different and the individual students might not all relate well to the aide. The school has used computers to assist the integrated child and all staff seem to pleased with the progress in this area. The student appears to receive most of his instruction in a withdrawal one to one mode with the integration aide. These programs seem to be unorganised and the principal has obtained a copy of a program from a special school which he hopes to adapt for the student next year. The school does not have an integration teacher and the consulting teacher has been adopted but little support has been forthcoming.

CONCLUSIONS:

The parents, classroom teacher (although she doesn't want the task), and the integration aide all feel that the student should continue in the present school. The principal feels a special school placement must be considered if a full time aide is not appointed. Academically the student has made little progress, socially progress seems to have been even slower. The Integration program at the school will be revitalised with the newly appointed principal having clear views and an interest to see things are more organised and specific than in the past. With full time support a more appropriate choice of teacher and an interested principal the present placement may be able to be maintained.
CASE STUDY No 7  MALE:

GRADE: Prep

Perceived Academic Integration Score: 68.5%

Perceived Social Integration Score: 80.4%

Perception of Continued Placement: 100%

Perceived Appropriateness of Support: 86.3%

Total Perceived Score: 83.8%

THE SCHOOL:

The school is in a suburb on the outer fringe of a very large city. The school was built in the fifties and is designed along the lines of a long corridor with classrooms on either side. The school is situated in a very leafy area and the school playground reminds one of a national park. The buildings are well cared for and are traditional in appearance. The school has three integrated students, one behaviour disordered, one physically disabled and one intellectually disabled. The school has one integration support meeting a term to assess the students' development or as needed. The school has an integration teacher and two integration aides. None of the integrated students have a full time aide. The integration teacher withdraws the surveyed student out daily for one hour, three times a week individually and twice in a small group. The school
has devised a number of strategies in dealing with the student including changing teachers, changing grades, time out class (a fifth grade), behaviour modification programs and remediation programs for curriculum areas. The principal of the school is an experienced teacher/principal. The principal has had no experience or qualifications in special education. According to the principal the staff have a positive attitude towards integration. The staff (except classroom teacher) had the opportunity to observe the student in his previous setting. The school keeps in contact every term with previous teacher (at special school). Despite the enthusiasm from the school staff all staff involved are critical of support from regional staff. The school while having clear academic guide-lines has a flexible program allowing all children to benefit from the school's input.

THE CLASSROOM:

The class consisted of twenty eight children. The classroom is a colourful sight with children's work displayed copiously. The visitor can sense a very warm and supportive atmosphere in the classroom. Humour abounds as does encouragement and positive support. The children appear supportive of each other and yet independence is encouraged. The children's work is of a very high standard. There is a plenty of positive communication between the teacher and the children and each child (including the integrated child) receives an equal amount of the teacher's time. There appears to be few discipline problems although the children are aware of and are expected to follow classroom and school rules. The classroom is set out in traditional blocks with six children in each block. The surveyed student sits next to his aide/s when they are rostered on. The student, when not withdrawn, attempts the same work as the rest of the class with assistance from the integration aide. The student attends all specialist curriculum activities with the rest of the class. The student was placed in
another class (in fact another grade, grade-1) however, this did not work out due to the teacher's personality. The present class teacher, integration teacher and integration aide all commented that the student was in the right place but still needed to be withdrawn daily to place greater emphasis on certain skills.

THE TEACHER:

The teacher is a middle-aged female who is married with two children. The teacher has been teaching for eight years and has a Post Graduate Diploma in Special Education. The Integration teacher is also an experienced special educator having taught in special schools for a number of years. According to the Questionnaire, "attitudes towards the integration of disabled children in regular classes" the teacher indicated that she has a very positive attitude towards integration. Despite the positive attitude, the teacher and principal both indicated that support had to be forthcoming. The teacher also indicated that she felt that some children with behaviour disorders need segregated settings. The teacher has a very cheerful disposition, as the integration aide noted, "the happy nature of the class teacher has been the key to the student's general good behaviour". The teacher had little say about the student being in her class and had attempted to involve the surveyed student in the class activities as much as possible.

THE CHILD:

The surveyed student lives with both parents and has one younger brother. The student is the oldest student in this grade but the school thought it was the most logical placement for him. The student attended a special setting last year. The student has a good general knowledge although there is some difficulties with
mathematics. He needs prompting to get work done. The student has in the past been labelled autistic however the school consider what he can do not what he can’t do.

Apart from mathematics the student finds it difficult to follow instructions. The student is withdrawn each day where maths is presented in a Direct Instruction mode. There is also some phonics work using direct instruction. In the group activities twice a week counting games are practised. In addition self esteem skills, a motor perception program, ball skills and balance deficits are being catered for. The student still finds it difficult to work in large groups. The peer tutor and buddy system have been tried unsuccessfully on the child. The student when working with his peers on the same curriculum activities needs far more explanations before commencing and requires a lot of time to finish the task. The student often prefers other materials to regular class materials. The integration aide sees the child as being effectively integrated academically and socially. These views are supported by both the classroom teacher and parents who both indicated that there were academic areas (reading, spelling) where he was above average. The student goes to specialist subjects with his peers and aide. Physical education appears to be the area where problems are developing recently. The aide has recommended that a remedial program be designed to assist in this area and this program is presently being developed.

PEER ACCEPTANCE:

According to the results of the sociometric activities undertaken the student has a low sociometric status in the classroom. The student was placed in the lowest twenty per cent of the class. All children acknowledged knowing the student but many indicated they disliked him. On a positive note a number of children indicated the student was their best friend or other friend. The student chose nearly half the class as
his best friends. The student is older than most of the children in the class, he should be; and was in, grade one, but was returned due to the personality and training of the teacher and the need for a full time aide. Being older and being physically larger than all other children in the room might have had an influence on the sociometric status. Observations indicated that the student did spend most of his time alone or with his aide. All the school staff involved and the parents felt very strongly that social integration has taken place. While not being as positive as the other staff the integration aide commented that while social integration was successful being with his correct age peers may have helped success be achieved a little easier.

PARENTAL ATTITUDES:

The parents are very happy that their child has made the transition from special setting to a mainstream setting successfully. The parents are very happy with the child's progress and would like him to remain at the present school. The school has a good relationship with the parents and has had so from the initial meetings. As the principal pointed out, at the time of admission the parents were very supportive of the school and were willing to wait until integration resources were made available by the region. The parents have a realistic concept of how their son is progressing at school both academically and socially. When asked whether, in their opinion, children with disabilities should be placed in regular schools the parents supplied a thoughtful answer, "It depends on the child, the disability and the teacher". While very supportive and happy with the placement the parents indicated an awareness that other situations are not always as successful. The classroom teacher and integration aide both commented that they have a good positive working relationship with the parents. There appears to be a generally supportive attitude from other parents in the school although the class teacher and integration teacher did mention that the child is seldom,
if at all, invited home to other children's homes after school because the parents don't feel they could cope. The principal indicated that there was some members of the community whose attitude was negative about integration and in particular children with behaviour disorders.

**USE OF RESOURCES:**

With two integration aides and a integration teacher the school is well supported internally however there is some concern that the three integrated children don't have their own aides. The school has set up a well organised internal system with a number of strategies and ideas being continuously tried and assessed. The school staff are not scared to try new directions. The school is also fortunate in the personnel it has, both the integration teacher and classroom teacher have special education qualifications and experience and the aides are both trained teachers. The school also uses its external resources well, the special school the student came from is contacted frequently, a specialist from regional office visits (unfortunately she only talks to the integration teacher not the classroom teacher who may also gain something from the visits). The school has a well set up integration support group and a very supportive executive and school council who are generous in their support. The school uses commercially produced resources well including computer softwares, direct instruction packages, reading programs, phonics program and physical education programs.

The school successfully combines the individual, small group and in-class modes of instruction. The student is required to do the same curriculum and follow the same rules as his peers. The special setting worked with the regular school before the student was enroled. While still enroled at the special school the same expectations
were placed on the child as would be expected at the regular school. The regular school has adapted the Resource Model well.

CONCLUSIONS:

The initial aims of the school's integration program were social integration and academic integration. In relation to the success of social integration the results are unclear. According to the sociogram the student's peer group social status is low however staff and parents both feel very strongly that social integration has been successful. In relation to the success of academic integration the situation is far clearer. All involved feel very strongly that the student is progressing very well thanks, it would seem, to a good internal and external support system, positive staff and a well organised yet flexible program. It would appear that those involved in the integration of this student perceive the program to have been successful in both areas. The willingness of the staff to try new ideas, the important support from a special setting, the correct matching of student and teacher and a supportive family have combined well to present a workable integration program.
CASE STUDY No 10 MALE:

GRADE: 3rd

Perceived Academic Integration Score: 54.2%

Perceived Social Integration Score: 67.3%

Perception of Continued Placement: 100%

Perceived Appropriateness of Support: 50%

Total Perceived Score: 67.8%

THE SCHOOL:

The school is a large one (three hundred and ninety students) situated in a large industrial town close to a large city. The school has two integrated children, one physically disabled and one child with behaviour disorders. The school principal is an experienced teacher/principal with over twenty years service to the Ministry of Education. The principal has no qualifications in special education and has no experience in integrating children at previous schools. The school's integration policy was formulated along ministerial guidelines and involved the staff, parents and outside professionals. The integration support committee meets once a term or when required. The school has a very experienced (and organised) integration teacher but no integration aides. The integration teacher keeps a daily record on both integrated students as well as assisting other children in the school. The principal commented that about seventy of the parents in the school (about twenty five per cent) were on some form of pension. The school is traditionally
designed along grade lines but there are a number of composite classes. The principal has only been at the school this year but has made a number of changes. Each staff member pairs off with another staff member who helps them to evaluate themselves and give them clear goals. Most of the school policies are being rewritten or updated giving more emphasis on the student's rights. The physical layout of the school is very cramped and extensions are expected to be started in the near future. The playground is cramped but does have both asphalt and grassed areas for the children.

THE CLASSROOM:

The classroom is situated in one of the many portables (which now seem permanent) in the school. The room is cramped, hot in summer and cold in winter. The room also has been known to leak during a good rain (which is quite common in the area). There are thirty children in the room seated in two rows on both sides of the room. The children's work is displayed where there are available spaces around the walls. The teacher appears to have a good relationship with the class although the noise level is extremely high at times and the loudest voice usually takes control (which happens to be the teacher in most cases). The surveyed student is, when in the classroom, expected to follow the same routine as the rest of the class. The student attends a special school in the town two days a week (this has recently started) and is withdrawn by the integration teacher on a regular basis. The student usually goes to specialist subjects without too much problem. The student sits next to his peers in one of the rows of desks and no special consideration appears to be taking place within the classroom situation.
THE TEACHER:

The teacher is a young inexperienced teacher (one and a half years out of college) in her first teaching position. The teacher has no qualifications in special education and no experience with integrating children. The teacher is unmarried and lives in a nearby town. The teacher was assigned the student to her class but did have the opportunity to observe him in his previous setting. According to the Questionnaire, "attitudes towards integration of disabled children in regular classes" the teacher has a very positive attitude towards integration despite having indicated that she had no interest in the area and making the comment, "it seems easier in my opinion to cope with physically disabled children than behaviour problems". The teacher has a pleasant nature and appears well liked by the children but at times became frustrated with the noise level and raised her voice (yelled) loudly. The teacher is enthusiastic and spends a lot of her own time attending meetings on how to assist the student. The teacher is very adamant that a full time aide is needed for the student in the near future. The teacher feels she is not receiving any support from the Ministry of Education and would like to see more information being distributed on behaviour management and more in-servicing. It was noted by the teacher, the integration teacher and the principal that the teacher's time is taken up quite frequently by the student. The teacher and the principal both commented on the stress factor as being one that has been overlooked by the Ministry of Education but needs to be considered very carefully. The staff claim that the integration policy is very much biased in favour of physically disabled students.

THE CHILD:

The child has been at the present school for two years and now spends two days a week at the local special school (who are prepared to accept children with behaviour disorders because they have developed appropriate programs). The
student is on a behavioural management program at the special school and this has successfully followed through to his regular school placement. The student will continue to attend the special school for the next year. The integration support group co-operates well with the special school and together they will evaluate the program next year. The student has not been seen by the regional special education officer this year due to the number of children in the area requiring assessment. This lack of support partially explains the school staff's criticism of the Regional office and its role. The student attends all specialist subjects with his regular classroom grade (arrangements were made that he would not be at the special school when these subjects were being attended by his class). Academically the student is having difficulty but is making progress. He is withdrawn individually and in small groups for remedial work with the integration teacher. The student has had to be withdrawn from class on occasion because of his behaviour but this has decreased of late. The school does not have a time-out room. The student can be violent towards other children but the teacher feels that he would never hurt her. The student finds it very difficult to accept praise. Physical Education appears to be his favourite curriculum area. The classroom teacher commented that at times the student becomes too excitable to communicate with. The staff describe him as being a likeable child despite his problems because he is straightforward in his approach. Due to the fact that the student finds it difficult to remain on tasks activities and topics have to be changed to accommodate the student's behaviour.

**PEER ACCEPTANCE:**

According to the results of the sociogram the surveyed student has a very low social status in the classroom. Three children were rejected overwhelmingly by the children in the class one of these was the student. The two other students rejected are also receiving additional support from the integration teacher. The student indicated that he considered a lot of children in the class as his very best friends. It
would appear from the sociometric activities included in this research that students who are rejected by their peers on a large scale seem unaware how their peers feel about them. Perhaps they choose all the students hoping they will like them for choosing them. The surveyed student was mainly rejected by the opposite sex but most children indicated that they didn't like him or he was alright. The principal indicated that he felt certain students in the class became upset at the number of interruptions. The classroom teacher suggested that certain topics often had to be changed due to the behaviour of the student and that the other students were aware of this. The teacher suggested that the other children in the class were developing in their ability to cope with the student's behaviour. In general the classroom teacher felt that lately the student was coping very well with other children particularly in the playground. The integration teacher suggested that one of the advantages of sending the student to a special school was that his peers in the regular class get some respite from the student's behaviour and gave them the opportunity to progress academically. The parents seem to believe that their son is getting on well with his peers at both schools.

PARENTAL ATTITUDES:

The parents seem very pleased with the present arrangements at both schools. The two schools work very closely together and it would appear that the student is reaping the benefits from both. The parents feel strongly that disabled children should attend regular school whenever possible. The school seems to have a good reputation with the parents but there is some suggestion that the parents may need assistance in parenting skills. The classroom teacher indicated that she felt that a lot of the student's problems stemmed from home. She commented on the parents inability to control the student's behaviour. The integration teacher stipulated that, "more and more I see the need for a parenting program not the S.T.E.P. program but something more basic in how parents can handle and cope
with their children". The principal indicated that it was quite common in the school for parents to complain about the behaviour of other children and the student certainly received his share. The principal had to change some of the class rolls due to parents complaints. The principal indicated that the general feeling about the student and integration in general by the parents was negative.

USE OF RESOURCES:

Due to the school’s initial failure to acquire a full time integration teacher the school council supplies the funds to allow the Integration teacher to be full time at the school. The funds are raised through locally arranged activities. The school council also raises funds to be spent on the physically disabled child. An occupational therapist is supplied. The school staff feel these resources should be supplied by the Ministry of Education. The student has a valuable resource in the local special school which provides a remedial program, a behaviour program and offers assistance by enrolling the student twice a week. The schools involved feel very strongly that the student must have a full time aide next year to assist him at both schools. The school staff feel very strongly that the integration policy overlooks the needs of a child with behaviour disorders. The school staff are also very critical of special education assistance from regional office (in fact sited opposite the school). The office hasn't visited the student this year. The school is forced to use a Integration (resource) teacher model.

CONCLUSIONS

The school’s main aim for this student was social integration. The results of the sociogram indicated that in terms of social acceptance the peer group has not socially accepted the student and hence the school's aim has not been achieved. In contrast the school staff have indicated that they feel social integration has been
successful. The positive indicators of the staff must be considered when evaluating this placement. Academically the child is behind his peers however there is general agreement that improvement in this area has taken place. The principal, classroom teacher, integration teacher and parents want the existing placement to continue next year with the added resource of a full time integration aide. Enough progress has appeared to have taken place to warrant continued monitoring of the existing arrangements. The co-operation between both school's has indicated the potential of a co-operative model.
CASE STUDY No 12 MALE:

GRADE: Prep

Perceived Academic Integration Score: 40.0%

Perceived Social Integration Score: 73.9%

Perception of Continued Placement: 100%

Perceived Appropriateness of Support: 49.9%

Total Perceived Score: 66.95%

THE SCHOOL:

The school is a medium sized school (two hundred and sixty students) situated in a small town. The school has been traditionally designed along grade lines and each grade has a clear set of academic expectations. The physical layout of the school is quite horrific, particularly for physically disabled children. The school is situated on the side of a hill and has four distinct levels. There is no ramp access to the second, third and fourth levels which include the most popular playground areas. The school has a large slippery slide where the children can slide down to the lowest level of the playground.
The school has three integration children, two physically disabled and one child with behaviour disorders. The school will have four integrated children next year. The school has a very comprehensive integration policy. The policy deals with questions of roles, rights, preparing school climate, on-going servicing, resources and the duties involved. The policy was developed along Ministerial guide-lines and involved staff, parents and outside professionals.

The principal is an extremely experience teacher/principal who while having no special education qualifications has had experience with special needs on both a professional and personal level. The integration support committee meets on a regular basis to evaluate the student's progress. The school has an integration teacher (who is presently on stress leave) and an integration aide. The integration teacher position is currently being filled by an emergency teacher.

The staff are supportive of integration however some problem areas do exist. The school, according to the principal has a shortage of trained teachers and the majority of teachers on the staff feel inadequate to handle integration children especially the behaviour disordered child. The staff are also concerned about the physical environment of the school in terms of integrating children. The staff, as one, are most concerned about the lack of resources. The school has been sending the surveyed child home when the aide is not available (with parental permission) however the school was directed by the Ministry of Education not to continue this practise. The union was called in and according to the principal "the most amount of pressure I have ever experienced in a school" took place. The aftermath of this dispute still lingers and the staff feel bitter towards the Ministry of Education.
THE CLASSROOM:

The classroom is situated in an old part of the school (the school is currently under renovation). The room is old and small but decorated very brightly, and tastefully, with the children’s work. The room is arranged to make use of the limited space. There are twenty students in the room and the seats are arranged in a half circle shape, all the desks joined together. The surveyed student sits in a separate desk, not for his behaviour but for his physical disability, cerebral palsy. At the front of the room is a carpeted area where the children assemble and sit (including the integrated child with assistance) at the start of each day and whenever the teacher groups the children together. The student has the aide support for a limited period each day. He is also withdrawn by the integration teacher who on occasions functions within the classroom. The student, in general, is expected to follow the same curriculum program as his peers. The integration teacher keeps a check-list on the students progress including such areas as colours, shapes, money, following directions, answering questions, sight vocabulary and letter formation. On the check-list comments are also recorded as to general social development. The classroom climate is a co-operative, warm and caring one with humour frequently used and both the children and teacher treated with respect. The student is treated the same as his peers and the expectations for behaviour are quite clear and patiently waited for by the teacher. These expectations are also reinforced by the integration teacher and the aide. The student joins in frequently with peers and goes to the same specialist subjects. The only modifications necessary were for the use of more hands on/concrete activities.
THE TEACHER:

The teacher is a middle-aged female who has been teaching for twenty years, married with a son at the school in another grade. The teacher has no special education qualifications and no previous experience with integrated children. According to the questionnaire "attitudes towards integration of disabled children in regular classes" the teacher has a very positive attitude towards integration. The teacher scored one of the highest marks in the questionnaire. The teacher has a very pleasant manner and is well liked by the children. She has a very even temperament and the class flows with little need for discipline. The teacher appears genuinely interested in all children in her class and they all receive a lot of positive kudos.

The classroom teacher is very positive when discussing support from within the school but very negative when discussing the support from outside the school. As the child is in prep the teacher did not have the opportunity to observe the child in a previous setting. The surveyed student is a triplet and the class includes his two sisters. The teacher has been careful to avoid any favouritism between them. The teacher seems to have used the sisters' understanding of their brother's needs to an advantage by using them as role models and peer tutors. The teacher feels very strongly that there should be more in-service training especially for teachers in isolated areas. The visiting teacher service never visits the area and this is seen as a disadvantage. The teacher would also like the school to form a time-out area. The teacher sees the student developing well socially but not academically. In support the integration teacher pointed out, "it is going to take a long time to find the true potential of this child". The teacher works well with the integration teacher and the aide although the aide tends to let the student take control at times. The teacher also has the support of the principal and a special school in a nearby town (sixty kilometres away).
THE CHILD:

The student is a triplet and one of five children in the family. Both his identical sisters are in the same class. The student has cerebral palsy but the general opinion of the staff is that his behaviour problems are far more debilitating in terms of school performance and furthermore don't appear to be directly related to his physical disability. The student is able to stand and walk with some assistance from a frame but a wheelchair is the usual mode of transport. Due to the geography of the school environment the student is very limited in mobility around the school grounds.

The student is on a modified curriculum program but he is still not coping academically. He requires a long time to complete set tasks. The classroom teacher indicated that the student's best subject areas are language and the specialist areas of music and art. The student is withdrawn by the integration teacher individually or in a small group to concentrate on academic areas.

Playground and classroom behaviour is improving but there is still episodes of swearing and yelling in class which call for sudden changes in direction from the teacher. The integration teacher commented that the student is improving socially and emotionally but academically there is still much progress to be made. The school is keen to encourage the student to become more independent and games and activities which can be carried out in wheelchairs is being taught in physical education. Survival skills such as posting letters, eating certain foods and shopping are all being catered for and improvement is being noted in all these areas particularly with shopping. The student appears to have a sense of humour and, apart from too much volume, no language problems. The school staff commented on a lack of concentration in most areas.
PEER ACCEPTANCE:

The results of the sociogram indicated that the student has a very high social status. As mentioned previously, the student is one of triplets, all of whom are in the class. In the sociogram, interestingly, the student's sisters did not do well but, the surveyed student, was in the top twenty-five per cent of the class. The student was chosen by many children as their best friend and rejected by very few. A possible explanation for the sociometric result could be that because the child is physically disabled as well as being behaviour disordered (there appears little relationship between the two, with his behaviour being far more debilitating), the children may have felt sorry for him. It has been shown that physically disabled children receive more positive peer support than children with behaviour disorders. A second explanation may have been the teacher's influence, she was continually stressing the need to be the student's friend and assist where possible. Observation indicated that the peer group had little to do with the student until the recess bells would ring whereby there would be a debate to see who was going to push the wheelchair. The student chose the majority of the children in the class as his best friends. The classroom teacher indicated she felt social integration was highly successful. The integration teacher and the integration aide were not as positive in their sentiments but they did suggest that social integration was taking place at a reasonable level. The student attends specialist subjects with another class to give peer group a break.

PARENTAL ATTITUDES:

The parents have three children in the class and want very much to see the three children educated together in a regular classroom. After refusing to acknowledge
that the student had cerebral palsy for a long period the parents are now supportive of the school program. The parents are frequent visitors to the school and are involved in the integration support meetings which determine the direction programs should take. The mother is a former pupil of the school and together with her husband is a very strong advocate of all disabled children attending regular schools.

The teacher indicated that she felt the parents had not really come to terms with the student's disabilities. She further added that she felt the parents may appear to be supportive of the school however they were not supportive of her as the classroom teacher. Both the integration teacher and the integration aide felt that the support they received from home was very adequate. The principal indicated that a number of parents of other children contacted the school concerned about the effects on their children academically (less time spent on them) and in terms of their safety (the student has physically attacked other students before).

USE OF RESOURCES:

The school has adopted a resource (integration) model with the integration teacher being responsible for developing, (with assistance from the integration support group) and implementing the students academic and behaviour programs. The school has the services of an integration aide part time and it is hoped that this position will become full time in the future. The school receives assistance from a special school (sixty kilometres away). This school has arranged for a physiotherapists to attend the school for the first hour each day. The local council has also been responsible for purchasing a second hand wheelchair and special chairs for the student. The principal has obtained the services of a trained integration teacher for next year. The internal support (within the school) has been positive but all staff involved are critical of the lack
of support from the Ministry of Education. The principal indicated that he felt the resources were "pathetic" and he was also critical that the very few in-service meetings held were after school some sixty kilometres away.

CONCLUSIONS:

The school's main aim is social integration. The sociogram results, classroom teacher, integration teacher and integration aide have all indicated that generally the social integration aim has been successfully achieved. In contrast however classroom observation didn't indicate important aspects of social integration were taking place. Academically the student is well behind his peers but as the integration teacher commented, "it is going to take a long time to find the true potential of this child". All personnel involved are positive in the reactions to progress to date but stress the need to update resources in the following year. Stress, in relation to this placement, must be considered. The integration teacher is on leave due, according to the staff, to the "hassles" to do with this student. The school has coped well with the integration of this student with most outside assistance coming from other avenues unrelated to the Ministry of Education. The placement appears to be successful enough to warrant it's continuation for next year (with increased support) but staff members consider the placement and strategies to be short term.
CASE STUDY NO 10 MALE

GRADE 2

Perceived Academic Integration Score: 71.4%

Perceived Social Integration Score: 80.4%

Perception of Continued Placement: 100%

Perceived Appropriateness of Support: 54.5%

Total Perceived Score: 76.5%

THE SCHOOL

The school is a medium sized school (308 students), situated in a upper middle class suburb of the capital city. The school was built in the 1970s and consists of one two storied brick building surrounded by a number of single storied brick buildings and a lone timber building which houses the kindergarten children. The school's enrolment numbers are declining and recently the Infants department has been transformed into a special education unit for the spastic centre. The unit has had a lot of money spent on it and in keeping with the condition of the unit the school too has been renovated. The school buildings are situated on a flat block of land well below the road level which results in a reduction of traffic noise. The grounds are beautifully maintained with a very large grassed area and a number of smaller asphalt areas available as the children's play areas.
The school has both a support (resource) teacher and an itinerant support teacher (behaviour disorders) based at the school in addition to the eight staff members of the special education unit. The school staff are attempting to integrate most of the unit's eighteen children into regular classes and have arranged for regular classes to have some of their lessons with the children with disabilities in the unit.

The school is fortunate to have a school principal who has both undergraduate and postgraduate qualifications in special education. The principal is a middle-aged male who has been a principal of several special schools before coming to the school this year. He has been teaching for twenty years and has been a principal for the last ten years. He has a degree in business administration as well as his special education qualifications both of which appear to be most relevant to a school principal in the nineties. While the principal commented that the staff don't appear to have any reservations concerning the integration policy he does, particularly concerning the lack of resources and services available. The school staff are, at present, attempting to integrate two children with behaviour disorders, one from a local special class and the other from a unit at a nearby school.

The school is traditional in the way the grades have been organised. Only two classes are composites but all the classes are large with only two more children needed to gain another teacher. While the school has staff development, basic skills and integration policies they all, according to the principal, need refreshing. At this stage the school does not have a personal development or student welfare policy.
THE CLASSROOM

The classroom is situated on the lower floor of the doubled storied brick building. The room appears to be in excellent condition and made even more attractive by the vast amounts of children's work displayed around the room. Each wall has at least two display boards on it. The windows have attractive curtains and the carpet looks relatively new. At the front of the room is a tiled area where the teacher groups the children for reading, poetry and songs. The classroom rules are clearly displayed as is the spelling results, displaying (unfortunately for some) a large range in spelling abilities. The children's desks were arranged in groups of two, four and six seats. There was a nature corner (including caterpillars), a reading corner and a fast workers corner (full of worksheets for those who finished early). There were thirty one children in the class many with an English as a second language background. The daily reading sessions included a number of mothers who came to the school each day to hear the children read.

The classroom is one of warmth, humour and industrious undertakings. There is plenty of positive feedback and the children work well as a group (they have been together as a class for all their school lives).

THE TEACHER

The teacher is a married, middle aged female who has two children. She graduated from teachers college eighteen years ago but has taught for only 7 years in that period of time. She is presently enrolled in a post graduate course in special education. According to the self report scale "Attitudes towards integration of disabled
children in regular classes" the teacher has a very positive attitude towards integration (she scored the highest score recorded in either state).

The teacher was very concerned about the lack of support from both within the school and from the regional office. She had no opportunity to visit the child prior to him being placed in her class (although she had her about him). The teacher was very interested in attending in-service courses on children with behaviour disorders and gaining access to modification programs.

The teacher felt the child was below average in all academic areas except for maths. This view was supported by the child's mother and the support staff. Socially they all agreed that he was liked by his peers. The teacher felt that the main characteristics that a teacher integrating a child with behaviour disorders needed are the ability to avoid confrontation and help the child resolve any conflicts. Humour, consistency and a high level of organization were also seen as important skills for the teacher. The teacher also commented that she was a tactile person, and at times she backed up her verbal positive reinforcements with a hug and the child responded well to this.

THE CHILD

The child was initially enrolled at this school in kindergarten. He attended the school, with some difficulties, for four terms at which stage he was recommended for enrolment to a support class at another school. He was enrolled in the special unit for three terms before enrolling back at the surveyed school this year. He has an older sister at the school who is a very popular and well liked (the mother made the comment that "at least the teachers know I can raise a nice kid"). The mother claimed that the
surveyed child was just like his father at that age, and he grew out of it. A number of professionals have told the mother that her son is hyperactive. He has recently been placed on medication by a psychiatrist but little information has been passed onto the school or little asked for in the way of monitoring side effects.

The child is behind his peer group in most academic areas, except for maths and oral language. The teacher commented that the child has always been unco-ordinated. When asked what she liked most about having the student in the class the teacher commented that she had seen an improvement in his behaviour and that his academic abilities (maths) had come to the fore.

PEER ACCEPTANCE

The classroom teacher, principal, support staff and parents all commented that the child was well liked by his peer group. Observation indicated that the child interacted and played with other children in an acceptable way although he was always very active. The results of the sociometric activities indicated that the child was in fact well accepted by his peers. The child scored a social status decile rating of 8. The class, generally, did not reject any member of the class, to a large extent they appeared to be a most harmonious group. The surveyed student was only rejected by one child and was chosen by 13 as their best friends. His one rejection coming from another boy. As was the case with so many of the children surveyed in both Phase 1 and Phase 2 the surveyed child chose the whole class as his best friends what was unusual in this case was that more than three quarters of the class chose him as their best friend or other friend. There was no apparent gender differences, the surveyed child was chosen by both boys and girls as their best friends. He achieved the highest number of mutual
choices in the class. A very interesting result when it is considered that the child was away from his peers for three terms.

PARENTAL ATTITUDES

The parents, particularly the mother are very supportive of the school and always wanted their son to be educated at the same school as their daughter. The mother is the treasurer of the parent's club and is very well known by staff, other children and other parents. The child has recently been placed on medication and the parents are delighted by the results achieved thus far. The mother is up at the school most days to collect the takings from the canteen and often has informal discussions with the classroom teacher who claimed that she had never met the father and didn't know the mother well. The parents are aware of how their child is going academically which they describe as average in all subjects except for music and art. Socially, they felt the child was progressing well. As with the principal the parents were concerned and surprised by the lack of communication from the adjustment class when it was time for the child to be re-enrolled at the present school. At the present time there is no negative feedback from other parents.

USE OF RESOURCES

The principal is highly critical about the lack of resources and the lack of discussion before the child was reenrolled back at this school. The school has a support teacher and an itinerant support teacher (behaviour disorders). The teacher and principal were both critical about the lack of support from the department of education and real concern was expressed in relation to the child's medication. No
contact has been made by the medical personnel who recommended medication as a means of monitoring the dosage.

The child is withdrawn by the support teacher each morning for reading in a small group situation and is seen by the itinerant support teacher (behaviour disorders) individually on an infrequent basis.

CONCLUSIONS

The student appears to be making good progress thanks to the enthusiasm of the teacher, principal, parents and the acceptance of the peer group. There is genuine concern by the school staff as to the role of medication in the child’s progress. The school staff see the medication as a short term solution and are worried about side effects and what happens when the medication is withdrawn. Socially the prognosis appears favourable (while medication is appropriate) academically the child still has many difficulties compared with his peers.
CASE STUDY NO 17: MALE:

GRADE: 4th

Perceived Academic Integration Score: 77.1%
Perceived Social Integration Score: 73.9%
Perception of Continued Placement: 100%
Perceived Appropriateness of Support: 50%
Total Perceived Score: 75.25%

THE SCHOOL:

This large school (400 + students) is situated in a low socioeconomic area on the outskirts of a large regional city. The school was built in the mid seventies and is a series of single storied, brick buildings arranged in a square formation. The buildings look in reasonable condition but recently the surveyed class and one other class had their classrooms condemned and spent the remainder of the 1991 school year in the school assembly hall. The school is situated on a very large flat block of land with large grassed areas for the children to play on. The play areas are grouped into three sections, section 1 infants children, section 2 third and fourth grade and section 3 fifth and sixth grade. In addition the school has a large asphalt area for use as a basketball court and two well maintained tennis courts. A well stocked library is the centre of the
school. The library door, walls, windows and even the roof are beautifully decorated with the children's work.

The school is organised along traditional parallel grade lines however over one third of the classes are composite classes including the surveyed class. The school curriculum is based along clear expectations for each grade. The school has a personal development policy, a student welfare policy a basic skills policy and a school integration policy. In implementing the school integration policy the school works closely with the local special school (still referred to as a hospital school). This close working relationship has lead to the integration of two physically disabled children (in wheelchairs) four days a week. The school has a staff development policy which is implemented regularly, this policy has recently resulted in the exchange of a classroom teacher with an Irish school and in a reciprocal fashion the school at present has a teacher from Ireland on the staff. This staff development policy is seen as important by the principal and staff as most of the staff are very experienced teachers looking for new and interesting teaching strategies.

THE CLASSROOM:

The classroom is a double classroom beautifully decorated with the children's work. The classroom seats are arranged in groups around the room in no particular order. There are four to six children seated at each group. The children's seats are situated at one end of the classroom while at the other end there are cushions for silent reading, individual work centres and a small class library. In the middle of the classroom is a large carpet square which is used to group the children for certain lessons.
The classroom environment is one of warmth and humour. There is a mutual respect between the children and the teacher and the children with each other. The teacher described the classroom as a non sexist classroom with plenty of positive feedback. There is only one classroom rule, "no-one has the right to interfere with my body, my property or my right to learn". Music, poetry and the arts are a most important element in the classroom curricula.

The teacher has a number of classroom strategies which encourage the warmth that is observed in this classroom. Firstly, there is a point system where points are awarded for manners, effort and dress, the teacher sets the example by wearing a tie each day and encouraging the children to wear their school uniform. The class has the highest percentage of children wearing school uniforms in the school. Each piece of chalk used has its own name, songs/poetry are used as a break between lessons and co-operative learning strategies are used frequently. A thematic approach is used to stimulate the children's interest in the subject matter. A "tea party" is held each Thursday where children try tea from countries around the world and discuss books recently read. The class has a buddy class in the school with whom they go on excursions, to craft/art together read to or invite to their "tea party". The classroom noise level is low with the children very aware of the allowed limit, a limit the teacher never went beyond this limit as well.

THE TEACHER:

The teacher is a young unmarried male. He has been teaching for eight years, four as a casual teacher and four as a full time teacher. The teacher has always taught in rural areas. This is his first year at the present school and indeed his first year in this city. The teacher has no qualifications in special education although he has had
experience with children with behaviour disorders. In addition he has an interest in the education of children with behaviour disorders. The teacher stated a number of rules he follows when teaching, love children, each day is a separate unit (don't hold grudges), let them know you know where they are coming from, ask them to vocalize their problems and let them know the consequences of their behaviour. The teacher stated, "its no good worrying about academics until social aspects are on task".

Through observation and discussion with the teacher it was obvious that the teacher really loved children, he quoted from Kahlil Gibran, "you are the bows from which your children as living arrows are sent forth". He commented that it was a privilege to teach, not just some children but all, "we are, as a civilisation, to be judged on our compassion not how we relate to our most lovable children but how we relate to our least lovable".

The teacher commented on the level of stress associated with the integrating of children with behaviour disorders. This stress was not associated with the child but rather other people. Other staff were always watching to see how you handled each situation likewise the other children in the class. The child was often referred to by other staff as "your child".

THE CHILD:

The child is the eldest of two boys in the family. His younger brother attends the same school and while having a quieter personality he is similar academically. The student finds it difficult to remain on task for any period of time. He is very fidgety. The student is well liked by his teacher who feels that he is "a nice child, keen to please and full of vitality. If he thinks someone has him pegged he often shows some respect.
The teacher, support staff, principal and parents all believe the child is coping well academically particularly in maths and P.E..

The student has attended this school since kindergarten when his family moved up from the capital city. He is not seen by the support teacher (behaviour disorders) as the itinerant teacher does not have time. He is on the same academic program as the rest of the class and is expected to follow the same classroom rules.

PEER ACCEPTANCE:

According to the results of the sociometric survey the student was neither a popular or unpopular child. The student received a decile ranking of 4 for his social status. He was rejected by only one student in the class (opposite sex) and was selected by four students (all same sex) as their best friends. The student had one mutual choice. According to his classroom teacher and support staff the student gets on well with his peer group. The results of the sociogram indicated that in this particular class no child was really unpopular, a most harmonious group due in no small way to the atmosphere of respect and support encouraged by the classroom teacher. During observation the peer group seem to work very well together despite the fact that this is a composite 4th/5th. There appears to be no gap between the grades in sharing, communicating or playing classroom games. Academically the children work together as one grade but individual expectations are very different. The seating position is such that all children have the opportunity to work together and boys sit next to girls.
PARENTAL ATTITUDES:

The students parents were very pleased with their child’s placement at the present school and in the present classroom. The classroom teacher commented that he never saw the parents very much as they both worked long hours and the student spends a lot of after school time at his grandmothers place. The classroom teacher found the parents hard to motivate however the student’s mother did attend the last parent’s night. There has been no complaints from parents of other children about the child’s behaviour.

USE OF RESOURCES:

Generally the school appears to be well resources for assisting in the integration of children. The school has a support teacher (learning difficulties) and the regional support teacher (behaviour disorders) is located at the school. The latter only spends one day a week at the school and does not see the surveyed child because "he does not have time". The classroom teacher felt that he received adequate support from within the school but inadequate support from the regional office. The classroom teacher suggested more access to inservice programs on children with behaviour disorders, more support documents (not just a two page statement) and more consultants per region (one support teacher behaviour disorders for almost one third of the state.) would help integrate children with behaviour disorders. The role of school counsellor was criticised due to the number of children and range of problems they were expected to help left little time to really assist anyone. Both the support teacher (learning difficulties) and the support teacher (behaviour disorders) predominantly withdraw children form their regular classrooms.
CONCLUSIONS:

The student appears to be coping very well with this placement. The peer group, classroom teacher, principal and parents all appear very happy with the child's progress academically, socially and emotionally. Despite encouraging results the classroom teacher claimed that there was a distinct lack of support from regional office and the unrealistic expectations placed on support teachers and school counsellors. While the school personnel are supportive this placement is encouraging mainly as a result of an individual teacher's efforts to create a responsive and caring classroom environment. The classroom teacher will not be having this child next year and the class will probably be divided up to form another class. This placement will need to be monitored very closely next year.
CASE STUDY NO 19 MALE:

GRADE: Kindergarten.

Perceived Academic Integration Score: 48.5%
Perceived Social Integration Score: 80.4%
Perception of Continued Placement: 100%
Perceived Appropriateness of Support: 68.1%
Total Perceived Score: 74.25%

THE SCHOOL:

The school is a very large one (616 students) situated on the outskirts of a large industrial city. The school is situated in an area which contained all realms of the socioeconomic sphere, government assisted housing to large new areas on large blocks of land. The school is situated on the side of a hill with extremely picturesque views of the ocean, mountains and the city. The school block while being picturesque is extremely steep with all buildings being on different levels. The surveyed class was in a room three levels below the principal's office and the staff room. All buildings are brick, the kindergarten classes (4) are all grouped together in the newest brick building. There is a large grassed area (sloping) for the children to play on as well as a number of asphalt areas for ball games. All grades in the school play in the same areas.
The school has a personal development, student welfare, staff development, basic skills and school based integration policy. The school is very supportive of integration and about twenty integrated students have been enrolled in the last four years. The school curriculum is designed along departmental requirements for each grade. All classes in each grade are given the same assessment procedures twice a year. The school integration support group meets weekly or as required.

The school is structured along traditional grades, parallel classes, a number of the classes are composite. The school has a large staff of teachers and support staff with principal, non teaching deputy principal, assistant principal infants and assistant principal primary. The principal is in his first year at the school. He has no qualifications in special education but is a very experienced principal (20 years) and a very experienced teacher (35 years).

THE CLASSROOM:

The classroom is situated in a new brick building with the other three kindergarten classes. The room is a very large one, beautifully decorated with the children's work. The children's seats are arranged in two parallel rows. Each desk has the child's name on it although, for group work, which is most of the activities, the children are allowed to sit where they like. The classroom has two large storeroom of its own and a toilet adjacent (the school toilets are a long walk from the classroom and up many flight of stairs). The children are grouped frequently at the front of the room by the teacher to listen to stories, introduce new concepts and for news. All the children have their own jobs and they show a lot of responsibility in carrying them out. Humour is an important part of the classroom environment.
THE STUDENT:

The student is an only child who lives with his single mother. Although only in his first year at school the student is well known to the education department from his pre-school behaviour. Before the child was enrolled at this school he had to undertake a number of assessments by the school counsellor, psychiatrist at child development centre and a social worker. He is still in contact with all three of these services but they offer little feedback or assistance to the classroom teacher.

The child has been described by the classroom teacher as "very affectionate and well mannered yet his behaviour is inconsistent and at times he lacks the appropriate responses". The child is on medication described by the family doctor but his behaviour is still erratic. The student goes home at lunch time most days as his behaviour in the afternoon is very erratic. Behaviour consists of off task behaviours, a loud scretch, running out of the room and refusing to follow instructions. The classroom teacher felt that she or the children were not at risk as he had never physically hurt anyone at school felt that he really was aware about not hurting anyone. The medication continues to be monitored by the doctor but little contact is made with the classroom teacher. The student was placed on a diet program with little result, it was believed his mother lacked any understanding of what was required and failed to maintain strict supervision of food intake at home. The student continues to have a large number of days off.

Academically the child is making little progress. His mother indicated that she felt his reading was improving but school personnel indicated that academically he is slow in all areas of his work. At the end of his first year at school the student cannot write his own name, write a sentence yet verbal language is developing well. Socially the situation appears a little more positive, the child appears to be well liked.
by his peers. The classroom teacher and support teacher commented on his improvement in this area, the support teacher commenting, the "student has been accepted by all students in school, major part of integration completed".

PEER ACCEPTANCE:

The school staff were very positive when they discussed the student's social development. All personnel involved felt that the child had been well accepted by his peers. According to the results of the sociometric activities the child was one of the most popular students in the class. His score placed him in the tenth decile. Only one child in the class put him in any column apart from "my very best friends" or "my other friends". From observation of the child in the classroom and playground it was obvious that he played with his peers very well but preferred to do his own thing in the classroom. The student tended to play in the school sand-pit each day. Different children appeared to play with him, sharing toys without any problems at all. He didn't appear to have a group of close friends rather children played with him as they felt inclined and he responded well.

PARENTAL ATTITUDES:

Mother is a single parent who is unaware of the presence of the child's father. The mother went to this school as a child and was in the remedial class. She is illiterate and has had difficulty following through on instructions given by the school and child development centre. There is some concern at school that she may be having difficulty administering the medication as well. She is keen to help and comes up to pick up the child most afternoons and likes to have a talk with the classroom teacher. The classroom teacher has been a good friend to her and has helped her fill out forms, taught her to cook appropriate meals and constantly
monitors medical reports on the child. The classroom teacher commented that she finds it difficult to give her time to other parents.

USE OF RESOURCES:

Due to the size of the school there is a number of support facilities based at the school. The school has a support teacher (learning difficulties), a support teacher (behaviour disorders), a school counsellor several days a week and the classroom teacher has an aide. Despite the availability of resources the classroom teacher, support staff and principal felt that they lack adequate assistance. The classroom teacher commented that she felt the department had not provided enough support and that she would like to see more support, more training for teachers in teaching children with behaviour disorders and different program initiatives. The support staff was particular critical of regional services all of which were described as not very adequate. The support given to the classroom teacher was all in-class support, no withdrawal groups were used.

CONCLUSIONS:

Socially this child is progressing well unfortunately academic gains have been minimal. Once again the classroom teacher has commented on lack of support from the region. Support from home is limited due to the mother's learning problems. The school is trying to establish communication links with the family doctor in an effort to monitor medication. Once again any major benefits from this placement have been as a direct result of the input and enthusiasm from the classroom teacher. This demanding level of input does have its cost, the teacher admits to being under a great deal of stress due to the placement. The principal also commented on the high level of stress the teacher was expected to function under. The classroom teacher commented on the lack of time to discuss with other
parents their children, some who had equally debilitating problems at school. This placement will have to be monitored very closely. More support will be needed externally for the mother, more support will be needed for the classroom teacher next year and the school and medical services will have to communicate re medication side-effects.
CASE STUDY NO 28 MALE

GRADE 5th

Perceived Academic Integration Score: 71.4%

Perceived Social Integration Score: 63.0%

Perception of Continued Placement: 100%

Perceived Appropriateness of Support: 81.8%

Total Perceived Score: 79.05%

THE SCHOOL

The school is a middle size school (330 children) situated on the outskirts of a large country town. The school grounds are most picturesque with views of mountains and a large valley. The school buildings are located on the side of a hill in a three tier formation and the playground is a large grassed block. The school is adjacent to a special school and high school. The buildings are all brick and are well maintained.

The school principal is an experienced teacher (37 years) the last twenty years as a principal. He has had no training in special education and thus no qualifications in the area. The principal felt the main aim of the placement was social integration.
The school staff have developed a personal development, student welfare, staff development, basic skills and a school integration policy. Additionally, the staff have developed an integration program with the adjacent special school. The school staff, according to the principal, are all supportive of integration. The principal felt that tolerance and understanding were important characteristics of teachers in the integrating process. The major role of the principal, according to the principal, was "being positive and supportive while ensuring there was enough resources to cope".

THE CLASSROOM

The classroom is a small room situated in a block with four other classrooms. There are twenty eight students in the class which is a 5/6th composite class. Due to the small size of the room and the fact that some of the sixth grade children were the size of adults the room seemed more than usually crowded. The desks were arranged in rows, fifth grade to the left hand side sixth grade to the right. A number of the children sat next to the opposite gender but that was their own decision. The classroom was sparsely decorated with children work, which appeared to have been up on the wall for quite a period of time. The teacher had arranged the room so that his table and chair were situated in the back of the room.

The classroom was very traditional in many respects. The students all used text books for most subjects, particular emphasis being given to maths and spelling. The students sang the national anthem and the school song each morning. The school had set expectations for each grade and these were expected to be followed. Each week there were maths and spelling tests and homework was set each night. Despite a traditional base the classroom had a very warm atmosphere. The teacher had a wonderful sense of humour and treated the children with respect this respect
was reciprocated. The students all respected each other, worked co-operatively when it was required and worked independently when it was required.

The surveyed child sat with another fifth grade boy. He was expected to work on the same curriculum as the rest of the class. The support teacher would come into the class each day and work with him in a small group situation.

THE TEACHER

The teacher was an experienced teacher (21 years), married with three children who lived locally. He has no qualifications in special education, has had no in-service courses on children with behaviour disorders and has had little experience in teaching children with behaviour disorders. The teacher did have the opportunity to observe the child in his previous class. According to the results of the "Attitudes Towards Integration of Disabled Children in Regular Classes" self report scale the teacher has a cautious attitude towards integration. He was quite adamant that many children with disabilities would be better served in segregated settings.

The teacher felt that he had received adequate support from within the school and from the Department of Education. The teacher commented that teachers of children with behaviour disorders require a number of characteristics including, humour, fairness, consistency and the ability to clearly state what will not be tolerated. He also commented that the teacher should, "be prepared to back off from serious confrontation when the child is in a high state of emotion, come back and deal with the situation/behaviour when the child has calmed down". The most rewarding situation for the teacher was seeing the child's first positive response to humour to defuse a possible confrontation.
THE CHILD

The child is the eldest of three children. His two sisters also attend the school. The child was initially enrolled at this school in kindergarten. At the completion of first class it was suggested strongly to his parents that he be enrolled at a local special school for third grade. He was at the special school for eighteen months and then enrolled back at this school midway through third class. He was enrolled on the conditions that there would be appropriate resources supplied.

The student is an intelligent child and according to the classroom teacher, is of above average intelligence and can easily detect insincerity. He appreciates fairness and is able to accept that the consequences of inappropriate behaviour are justified, if they are fair. The classroom teacher, principal, parents and support staff all indicate that the child is above average academically, particularly maths and reading. Socially the child is improving because, according to the support teacher, he "has formed secure relationships with a couple of his peers this year. He has also respect for his current classroom teacher which has helped him to integrate more successfully. The child will have the same teacher next year but plans have been made for him to have more contact with the other sixth grade teacher in an attempt for him to become use to changes in staff as is the case at high school.

PEER ACCEPTANCE

The results of the sociometric activities indicated that the student is not popular with his peers. The student achieved a social status decile of two. The attitude of the peer group was one of tolerance rather than dislike, one third of the class indicated that the student was, "not friends but okay". Only three children indicated that the student was their very best friend. The student had the highest number of classmates who indicated that they "dislike". Only boys chose him as
their very best friends and all his rejections were from girls. Very few children in this class received any rejections. The surveyed student chose only two boys as his very best friends and these two choices were mutual.

Classroom observation supported the results of the sociogram. The student only communicated with the two other students both of whom he had indicated were his best friends. The other class members did not appear to reject him rather they just didn't appear to have much to do with him. The school staff were all aware that the social area of integration is the one that they must continue to develop and appropriate steps were being planned for this development to be continued next year.

PARENTAL ATTITUDES

The parents are very supportive of the school especially the mother. The classroom teacher said that he had not seen the father at all this year. The mother is a very articulate person who spoke at length about the placement. She initially felt that she was pushed into enrolling her child at the special school. She talked about numerous meetings between herself and the principal, school counsellor, principal of the special school and "people from regional office". She felt that she was "outvoted" and finally agreed to the special school placement. She commented that just when the child appeared to be settling into his new school the department again suggested a transferred back to his old school. She claimed that her son reacts badly to change and at first she did not want him to leave the special school. She now feels very happy about the present placement. The mother claimed that while her son made good gains in the special placement he was subjected to a number of negative influences. The student had experienced peer group pressure and his language had deteriorated and he felt he had been punished and placed a label on himself.
The mother was very much in favour of special settings as she felt it was the "best way to go to provide services". The mother felt she was gaining more confidence and was becoming more involved in the school programs for her son. Unlike the school staff she placed her son's academic ability as only average but did agree that maths was his best subject.

USE OF RESOURCES

The school has a support teacher and a school counsellor. The support teacher has an excellent working relationship with the class room teacher. Together they have developed plans for the integrated child next year to assist him in his transition to high school the following year. The support teacher uses both withdrawal and in class support. In class support is the usual mode in the form of team teaching.

The classroom teacher and support teacher both indicated that the support he received, both internal and external, was adequate. the principal indicated that he sought various conditions before the placement took place. All of these conditions have been met but some adjustments to staff preparation had to take place. He indicated that the resources received were both appropriate and adequate. The school staff had decided to review the placement once a year.

CONCLUSIONS

This placement, according to those involved, would be deemed successful. The initial aim for the school staff was social integration and there is no doubt in the minds of the school staff and parents that this is being achieved. The results of the sociogram did not support this optimism however. In defence of staff views the
classroom teacher commented that the sociometric results told an interesting story. The few students that the surveyed child chose as his best friends are three of the most accepting children in the class. The fact that the student chose them is a sign that he is aware of the social milieu in the classroom and is gradually working his way to social acceptance.

The enthusiasm of the classroom teacher and the support of the parents, the support staff and principal has assisted this placement considerably. The fact that the child is above average academically has also allowed him to experience some success in the regular classroom. With the same teacher next year the prognosis for this placement is positive.
**CASE STUDY NO 30 MALE**

**GRADE 2ND**

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**THE SCHOOL**

The large primary school (423 students) is located in a outer suburb of a capital city. The school is a mixture of demountables and single brick buildings constructed on a large flat block of land. The school has a large grassed area in which all grades are allowed to play. The principal indicated that a number (5) of children with physical disabilities had been integrated into the school in the last two years.

The school has a support teacher and the local itinerant teacher of behaviour disorders is located at the school. The school staff are, in general, experienced teachers but there are two first year out teachers on the staff. The principal is very support of integration and believes that his staff is also.
The school is structured along traditional single grade in each classroom concept but there are two composite classes in the school including the surveyed class. The school has an integration support committee which meets every two months. Because the surveyed child was enroled under the policy for disabilities the extra funding was used to pay a parent to supervise the child in the playground as this was the area where unprovoked acts of aggression tended to happen.

THE CLASSROOM

The classroom is a demountable one situated well away from the rest of the classrooms. There is twenty four children in the room sitting in seats arranged in blocks of eight students. The classroom rules are clearly displayed as is a chart noting each child in the class responsibilities. Lists of reading and news groups, charts of birthday months, block competition and weather statistics also decorate the classroom walls. Text books are used for maths and spelling. The present classroom is the second classroom for this class this year as the other room was considered unfit for a classroom. The atmosphere within the classroom is noisy but industrious.

THE TEACHER

The teacher is a young inexperienced teacher in her first year at the school. The teacher has no qualifications or training in special education. The teacher commented that she applied for an in-service course on teaching children with behaviour disorders was overlooked. While the teacher has had one other child with behaviour disorders in her class she believes that children who are being integrated should be placed into those classes where the teacher has special education qualifications. The teacher did not have the opportunity to visit the integrated child at his previous school.
The teacher indicated that there was a lot of stress associated with the placement of the child. This stress has led to sleepless nights and a concern that other children in the class are suffering because of a lack of time to spend with them. Despite the stress the teacher believed that the child has just settled down and should remain at the present school.

THE CHILD

The child is one of twin boys enrolled in the school. The boys are in separate classes. The child is fostered and recently the foster parents had their own child resulting in some erratic behaviour returning. The child was enrolled at this school eighteen months ago under the government's policy of enrolling children with disabilities and extra funds were allocated to the school. This school was chosen for the enrolment because it is the local school for the area in which the foster parents live.

The child was initially enrolled with the aim of both academic and social integration being achieved. According to the teacher and foster parents the child is average to below average in all subjects. In contrast the support teacher felt the child was coping extremely well in academic and social areas. The principal made the comment that he is still worried about the child's aggressive outbursts. These outbursts influence the attitudes of the staff and other parents to be negative towards the placement.

PEER ACCEPTANCE

The classroom teacher and parents indicated that the child was still experiencing difficulties socially with his peer group. This view was supported by
the results of the sociogram. The sociogram indicated that the surveyed child was the most disliked child in the class by a considerable score. The child's results on the sociogram were interesting, children either felt the child was their best friend or they disliked him. The positive sign was that a number of children did indicate that they liked him.

PARENTAL ATTITUDES

The parents are supportive of the school and appear to be in constant contact with the school. The mother is on the P & C committee. The parents indicated that they felt the child was below average in all subject areas. The parents feel very strongly about keeping their child in a regular school. The parents also commented that they are aware of the child's aggression towards other children/people as it is often displayed at home.

Parents of non disabled children in the school are very negative towards the child. The principal indicated that enrolment numbers were down due to the surveyed child being enrolled. The parents were very much in favour of children with disabilities being integrated in the regular school.

USE OF RESOURCES

The principal was concerned about the provision of ongoing funds. He was also critical that the teacher's aide was phased out after two terms. The school have used integration funds to appoint a teacher's aide (a parent) to supervise the child in the playground during recess and lunch.

The school is the area base for the itinerant support teacher (behaviour disorders). The support teacher sees the child on a regular basis and uses both
withdrawal and in-class support strategies to assist both academic and social programs. The classroom teacher was critical of the support offered by the Department of School Education. The teacher stated that she particularly wanted the opportunity to attend in-service courses on the integration of children with behaviour disorders.

CONCLUSIONS

The child appears to be starting to make some progress due in some way to the school staff's ability to utilize limited funding in the most appropriate way. While the child is not socially acceptable to all his classmates a limited number of his peers did indicate that they consider him a friend. The prognosis for social integration is good.

According to the support teacher "mainstreaming is ideal for N" academically. The surveyed child is still below the rest of the class in all subjects (except handwriting) but once again some progress has been noticed by the classroom teacher. Overall placement of the child seems appropriate.
APPENDIX 14

SPEARMAN'S CORRELATION COEFFICIENTS: VICTORIA & NEW SOUTH WALES
### Spearman Correlation Coefficients

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Note: Correlation coefficients range from -1 to 1, with 1 indicating a perfect positive correlation, -1 indicating a perfect negative correlation, and 0 indicating no correlation.
APPENDIX 15

KENDALL'S CORRELATION COEFFICIENTS: VICTORIA & NEW SOUTH WALES
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ACDINTG  -.0736  -.3457  .3239  -.0174  -.3488*  .1873  .0752  .1291  -.2620  -.0574
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***** WORKSPACE ALLOWS FOR 54706 CASES FOR NONPARAMETRIC CORRELATION PROBLEM *****

10-Nov-92 SPSS RELEASE 4.0 FOR IBM VM/CMS
14:58:39 UWSM - T & S COMPUTING CENTRE IBM 9221-150 VM/ESA 1.1.0

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TATCONPL
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QFNPNPL
SOCINTG
ACDINTG

APRSUP
SOCINTG
ACDINTG
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0There may be up to 8,192 value labels for each variable.

10-Nov-92 SPSS RELEASE 4.0 FOR IBM VM/CMS
14:58:40 UWSM - T & S COMPUTING CENTRE IBM 9221-150 VM/ESA 1.1.0

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22 0 NPAR CORR ALL /print = KENDALL nosig

0 There are 6,670,224 bytes of memory available.
The largest contiguous area has 5,346,672 bytes.

0 ***** WORKSPACE ALLOWS FOR 54708 CASES FOR NONPARAMETRIC CORRELATION PROBLEM *****

- 10-Nov-92 SPSS RELEASE 4.0 FOR IBM VM/CMS
14:58:40 UWSM - T & S COMPUTING CENTRE IBM 9221-150 VM/ESA 1.1.0

0 - - - - - - - - - - - - - - KENDALL CORRELATION COEFFICIENTS - - - - - - - - - - - - - - - - -

0

GENDER      -.6002
SOCSTAT     -.0617    .1907
GRADE       .1017     -.1257    -.1978    -.2007
SCHSZ1      -.0663    .1024     -.0239    -.2238    .5421**    .5287*
SCHSZ2      .0667     -.0588     -.1234     -.2338    .5792*     .5521*    -.5345    .4264
LOCATN      .1107     -.2279     -.3718     -.0629    .4950     .4414    -.7977**
CURFMT      -.0588     -.0227     -.3814     -.0629    .4950     .4414    -.7977**
INTEGFM1    -.0828     -.2132     -.1193     -.2359    .5925*     .5521*    -.5345    .4264
YRSPNL      -.2214     -.1244     -.2827     -.2796    .0234    -.1007    .1040    .0000    .2771    -.2186
QFNPNL      -.2197     -.0998     -.0558     -.1519    .4199     .3490    -.1335    .0200    .0375    .3721
PATCNPL     .0261     -.0403     -.3381     -.0000    -.0757    -.1043    .4041    -.2619    .0945    -.4497
ERATRES     -.0655     -.0843     -.0118     -.0466    .3165     .3055    -.2535    -.0000    .1393    -.1829
CSTRUC      -.0673     -.0000     -.0208     -.1849    .4909     .5096*    -.1614    .0891    -.3792    .0426
CRMANGT     .0201     -.0466     -.0435     -.1738    .0777     .2105    -.1235    .1941    -.2933
STAFFT      .2105     -.0591     -.0678     -.1900    .5827*     .4917*    -.5133    .3071    -.3790    .0332
QFNSTAF     -.3034     -.1616     -.3251     -.0207    -.1803    -.0291    .2883    -.4500    -.1548    -.1947
TATINTG     -.5341*    -.0900     -.3251     -.0207    -.1803    -.0291    .2883    -.4500    -.1548    -.0413
TAGEEXP     .2087     -.4432     -.2395     -.0418    .2402    -.1656    .3207    -.4264    -.1000    -.3209
TGENDER     .3036     -.5330     -.3280     -.3981    .0925     .1594    -.1543    .0154    .3753    -.0947
APRSUP      -.1394     -.1077     -.0430     -.1490    -.1014    -.0291    .1755    -.2400    -.0422    .1334
SCCINTG     .0680     -.2550     -.4300     -.3320    -.0514    -.0291    .1755    -.2400    -.0422    .1334
ACDINTG     -.0490     -.2424     -.3284     -.1677    .4211     .4610*    -.7218**    .5303    .5259    -.1659
| TATCONPL | .1922 | .1113 | -.2335 | -.2952 | .1812 | .2162 | -.4342 | .4454 | .1393 | -.1524 |
| CLSSIZE  | -.1380 | .1523 | -.1810 | -.1369 | .4118 | .3943 | -.4963 | .5178 | .6286* | .3230 |
| STATE    | .   | .   | .   | .   | .   | .   | .   | .   | .   | .   |
| SCHOOL   | GENDER | SOCSTAT | GRADE | SCHSIZE1 | SCHSIZE | LOCATN | CURRFMT | INTEGFMT | YRSPNPL | .   |

| PATCONPL | -.0354 |
| PATRES   | .3850  | -.4183 |
| CRSTRUC  | .3002  | -.2107 | .4076 |
| CRMANGT  | -.1913 | .1038 | -.2306 | -.4065 |
| STAFATT  | .1039  | -.2490 | .3618 | .1353 | -.1113 |
| QFNSTAF  | .5964* | -.2149 | .4315 | .2535 | -.3428 | .2103 |
| TATINTG  | -.1054 | .0645 | .0379 | .0490 | .2053 | .4683* | -.1920 |
| TAGEEXP  | .2124  | .1250 | .0896 | -.0395 | -.2067 | -.1310 | .0000 | -.0665 |
| TGESEX   | .2810  | .1890 | .0474 | -.1115 | .2771 | .0416 | -.2123 | .2252 | .3969 |
| TGESEX   | .2810  | .1890 | .0474 | -.1115 | .2771 | .0416 | -.2123 | .2252 | .3969 |
| APRS     | .1757  | -.0818 | .3880 | -.0402 | -.0737 | .3903 | .2407 | -.0914 | .0955 | .1299 |
| SOCINTG  | -.1845 | -.1995 | .0445 | .0294 | .1847 | .3903 | .0000 | -.3940 | .2127 | -.3940 |
| ACDINTG  | .0266  | -.3895 | .3483 | .1089 | -.3732 | .3154 | .4633 | -.0800 | .0672 | -.2416 |
| TATCONPL | -.3261 | -.6086* | .2202 | .0364 | -.2412 | .2052 | .0528 | -.0245 | -.0822 | -.4256 |
| CLSSIZE  | .0669  | -.0810 | .0000 | .1393 | -.2917 | .0297 | .4007 | -.2915 | .1350 | -.2571 |

| STATE  | .   | .   | .   | .   | .   | .   | .   | .   | .   | .   |
| QFNPNPL | PATCONPL | PATRES | CRSTRUC | CRMANGT | STAFATT | QFNSTAF | TATINTG | TAGEEXP | TGESEX |

| PATRES   | .3850  | -.4183 |
| CRSTRUC  | .3002  | -.2107 | .4076 |
| CRMANGT  | -.1913 | .1038 | -.2306 | -.4065 |
| STAFATT  | .1039  | -.2490 | .3618 | .1353 | -.1113 |
| QFNSTAF  | .5964* | -.2149 | .4315 | .2535 | -.3428 | .2103 |
| TATINTG  | -.1054 | .0645 | .0379 | .0490 | .2053 | .4683* | -.1920 |
| TAGEEXP  | .2124  | .1250 | .0896 | -.0395 | -.2067 | -.1310 | .0000 | -.0665 |
| TGESEX   | .2810  | .1890 | .0474 | -.1115 | .2771 | .0416 | -.2123 | .2252 | .3969 |
| APRS     | .1757  | -.0818 | .3880 | -.0402 | -.0737 | .3903 | .2407 | -.0914 | .0955 | .1299 |
| SOCINTG  | -.1845 | -.1995 | .0445 | .0294 | .1847 | .3903 | .0000 | -.3940 | .2127 | -.3940 |
| ACDINTG  | .0266  | -.3895 | .3483 | .1089 | -.3732 | .3154 | .4633 | -.0800 | .0672 | -.2416 |
| TATCONPL | -.3261 | -.6086* | .2202 | .0364 | -.2412 | .2052 | .0528 | -.0245 | -.0822 | -.4256 |

** - SIGNIF. LE .01   "" - SIGNIF. LE .001

10-Nov-92 SPSS RELEASE 4.0 FOR IBM VM/CMS
14:58:41 UWSM - T & S COMPUTING CENTRE IBM 9221-150 VM/ESA 1.1.0

0Preceding task required .22 seconds CPU time; .51 seconds elapsed.
APPENDIX 16

ONE PAGE SUMMARIES CASE STUDIES 1-30
### Summary

**Perceived Indices of Integration**

<table>
<thead>
<tr>
<th>Perception</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>31.4%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>45.6%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>66.6%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>40.9%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>46.1%</td>
</tr>
</tbody>
</table>

**Grade:** 2nd  
**Gender of Student:** Male  
**History:** Student has attended two schools and has been at present School for two years.  
**School Attitude:** Extremely Negative attitude toward placement  
**Family Attitude:** Positive - single minded in relation to placement  
**Support:** Integration Aide .5  
**Type of School:** Rural  
**Size of School:** Category 4  
**Success Rate:** Low  
**Social Low**  
**Academic Low**  
2 year follow up transferred to Special School - no plans for re-integration.
CASE STUDY NO: 2

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>37.1%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>47.8%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>77.7%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>59%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>55.4%</td>
</tr>
</tbody>
</table>

Grade: 1st
Gender of Student: Male
History: Attended present school for 18 months previously at special school
School Attitude: Principal, aide-classroom teacher Supportive with reservations Integration teacher - very positive
Family Attitude: Very supportive of present placement
Support: Integration teacher Integration Ide .5
Type of School: Rural
Size of School: Category 2
Success Rate: Medium Socially improving Academically low 2 year follow up - student still attending surveyed school.
CASE STUDY NO: 3

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>62.8%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>43.4%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>65.3%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>68.0%</td>
</tr>
</tbody>
</table>

Grade: 5th
Gender of Student: Male
History: Has attended school for a number of years. Has had special education assistance all school life.
School Attitude: Supportive of present placement with Reservations.
Family Attitude: Father negative
Support: Integration teacher
Integration aide 0.5
Type of School: Rural (city in rural area) CR
Size of School: Category 3
Success Rate: Academic Low
Social - moderate
2 year follow up - left surveyed school home tutoring.
CASE STUDY NO: 4

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Score Description</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>47.1%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>63%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>59%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>67.2%</td>
</tr>
</tbody>
</table>

Grade: prep.
Gender of Student: Male
History: First year at present school
Difficulties at pre-school
School Attitude: Mixed - Principal negative
Classroom teacher positive with limits
Staff - generally negative
Family Attitude: Very supportive
Support: Aide .5
Type of School: Rural
Size of School: Category 2
Success Rate: Academic - low
2 year follow up - still attending surveyed school.
CASE STUDY NO: 5

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>45.7%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>39.1%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>77.7%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>63.6%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>56.5%</td>
</tr>
</tbody>
</table>

Grade: 6th
Gender of Student: Male
History: Special school - a number of primary schools
Second year at present school
School Attitude: Negative
Family Attitude: Supportive
Support: Integration aide
Type of School: Rural
Size of School: Category 2
Success Rate: Academic - low
Social - low
2 year follow up - left surveyed school - non attendance at any school.
Summary

Perceived Indices of Integration

<table>
<thead>
<tr>
<th>Perceived Academic Integration Score</th>
<th>48.5%</th>
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<tbody>
<tr>
<td>Perceived Social Integration Score</td>
<td>36.9%</td>
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<tr>
<td>Perception of Continued Placement</td>
<td>88.8%</td>
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<tr>
<td>Perceived Appropriateness of Support</td>
<td>50%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>58.05%</td>
</tr>
</tbody>
</table>

Grade: 2nd
Gender of Student: Male
History: Always a disruptive student
Came to school from special school
Mixed - support staff positive
Classroom teacher - negative
Family Attitude: Unsupportive of school
Lack of control over child
Support: Integration teacher
Type of School: City
Size of School: Category 3
Success Rate: Academic - positive
2 year follow up - transformed to special school
full time - no plans for re-integration.
CASE STUDY NO: 7

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>68.5%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>80.4%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>80.3%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>83.8%</td>
</tr>
</tbody>
</table>

Grade: prep.
Gender of Student: Male
History: Has been at this school for last year. Previously at special school.
School Attitude: Very positive from all involved
Family Attitude: Very supportive
Support: Integration teacher
2 Integration aides .5 each
Type of School: City
Size of School: Category 3
Success Rate: Academic - good
Social - good
2 year follow up - still attending surveyed school.
CASE STUDY NO: 8

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>65.7%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>34.7%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>59%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>64.85%</td>
</tr>
</tbody>
</table>

Grade: 1st  
Gender of Student: Male  
History: Has attended 5 schools  
School Attitude: Supportive  
Family Attitude: Generally supportive - particularly mother  
Support: No aides  
Type of School: Integration Teacher  
Size of School: City located in rural area  
Success Rate: Category 3  
Social  
Academic  
2 year follow up - Transferred to special school.
## SUMMARY

### PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>48.5%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>39.1%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>45.4%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>58.25%</td>
</tr>
</tbody>
</table>

Grade: 1st  
Gender of Student: Male  
History: A number of schools prior to the present one. Special placement recommended early in her schooling.  
School Attitude: Mixed - administration positive, Staff - mixed, Teacher - negative  
Family Attitude: Supportive  
Support: Integration teacher  
Type of School: City  
Size of School: Category 3  
Success Rate:  

Experiences: Academic - inconsistent, Social - poor  
2 year follow up - still attending surveyed school.
CASE STUDY NO: 10

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>54.2%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>67.3%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>50%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>67.8%</td>
</tr>
</tbody>
</table>

Grade: 3rd
Gender of Student: Male
History: Previous placement in Special School
School Attitude: Positive
Family Attitude: Supportive
Support: Integration teacher
Type of School: City in rural area
Size of School: Category 3
Success Rate: Academic - moderate
Social - positive
2 year follow up - still attending survey school part time.
CASE STUDY NO: 11

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Metric</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>37.12%</td>
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<tr>
<td>Perceived Social Integration Score</td>
<td>43.43%</td>
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<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>59%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>59.8%</td>
</tr>
</tbody>
</table>

Grade: 3rd
Gender of Student: Male
History: A number of regular schools as well as special placement
School Attitude: Mixed - classroom teacher negative, Integration aide - positive
Family Attitude: Supportive
Support: Integration aide .3
Type of School: Rural
Size of School: Category 1
Success Rate: Academic - moderate, Social - moderate

2 year follow up - transferred to special school, expelled from this school - enrolled in another special setting.
CASE STUDY NO: 12

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>40.2%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>73.9%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>49.9%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>65.95%</td>
</tr>
</tbody>
</table>

Grade: Prep.
Gender of Student: Male
History: Only school attended - large amount of special resources required and provided only for certain times
School Attitude: Positive
Family Attitude: Supportive - difficult to acknowledge problem
Support: Integration teacher
Integration Ind. .5
Type of School: Rural
Size of School: Category 2
Support: Academic - moderate
Success Rate: Social - high
2 year follow up - moved from district enrolment unknown.
CASE STUDY NO: 13

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perception</th>
<th>Score</th>
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</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>42.82%</td>
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<tr>
<td>Perceived Social Integration Score</td>
<td>58.63%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>52.2%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>63.4%</td>
</tr>
</tbody>
</table>

Grade: 6th
Gender of Student: Male
History: Special schools, catholic and non government schools and present school
School Attitude: Positive - concern for the future
Family Attitude: Non-accepting of disability
Support: Integration teacher, Integration aide, 5
Type of School: Rural
Size of School: Category 4
Success Rate: Academic - very poor
Social - fair
2 year follow up - left school enrollment unknown.
SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perception</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>37.1%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>30.9%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>66.6%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>45.4%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>46.58%</td>
</tr>
</tbody>
</table>

Grade: 6th
Gender of Student: Female
History: Child has been at the school for two years
School Attitude: Positive with reservations
Family Attitude: Very supportive
Support: Integration aide .5
Type of School: Rural
Size of School: Category 2
Success Rate: Socially very successful
Behaviourally - moderate
Academic - prior
2 year follow up - left school enrolment
unknown.
CASE STUDY NO: 15

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perceived Academic Integration Score</th>
<th>45.7%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Social Integration Score</td>
<td>52.13%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>68.8%</td>
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<tr>
<td>Perceived Appropriateness of Support</td>
<td>72.7%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>64.8%</td>
</tr>
</tbody>
</table>

Grade: 1st
Gender of Student: Female
History: Special school placement prior to present school
School Attitude: Positive with reservations
Family Attitude: Very supportive
Support: Integration teacher
Integration aide .5
Type of School: Rural
Size of School: Category 3
Success Rate: Academic - poor
2 year follow up - attending surveyed school first time.
CASE STUDY NO: 16

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>71.4%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>80.4%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
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</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>54.5%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>76.57%</td>
</tr>
</tbody>
</table>

Grade: 2nd
Gender of Student: Male
History: Child enrolled at present school in kinder. During Year 1 transferred to special setting for two terms then transferred back to present school.
School Attitude: Both teacher, support teacher and principal very supportive of placement.
Family Attitude: Very supportive of placement
Support: Resources (Support) Teacher. I.T.S.T (Behaviour)
Type of School: Metropolitan Region
Size of School: Category 3
Success Rate: 1 year follow up - still enrolled at present school.
SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perception</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>77.1%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>73.9%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>60%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>73.5%</td>
</tr>
</tbody>
</table>

Grade: 4th
Gender of Student: Male
History: Child has been enrolled at present school for two years. Transferred from Capital City.
School Attitude: Classroom Teacher, I.T.S.T. (Behaviour) & Principal all supportive of placement.
Family Attitude: Support of placement
Support: Itinerant Teacher Support (Behaviour)
Type of School: Rural Region
Size of School: Category 4
Success Rate: 1 year follow up - still enrolled at present school.

501
CASE STUDY NO: 18

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>45/77%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>50%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>88.8%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>54.5%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>57.37%</td>
</tr>
</tbody>
</table>

Grade: 3rd
Gender of Student: Male
History: Child enrolled at present school in kindergarten. Transferred to another local school (Non Government). Expelled and enrolled in Special setting then re enrolled in present school.

School Attitude: Teacher not supportive of placement.

Principal supportive of placement.

Family Attitude: Raised by grand mother who is supportive mother (single parent) non supportive.

Itinerant support teacher (behaviour).

Support:

Type of School: Rural Region

Size of School: Category 4

Success Rate: 1 year follow up - still enrolled at surveyed school.
CASE STUDY NO: 19

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>48.5%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>80.4%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>68.1%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>72.29%</td>
</tr>
</tbody>
</table>

Grade: Kindergarten
Gender of Student: Male
History: Enrolled at present school after school was approached by Regional health services.
Classroom teacher supportive with reservations.
Principal supportive.
School Attitude: Single parent - supportive of placement.
Family Attitude: Support (Resource) Teacher
Support:
Type of School: City Region
Size of School: Category 4
Success Rate: 1 year follow up - still enrolled at surveyed school.
CASE STUDY NO: 20

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perception</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>63.7%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>39.1%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>68.1%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>65.05%</td>
</tr>
</tbody>
</table>

Grade: 4th  
Gender of Student: Male  
History: Child was enrolled at present school in Kindergarten as his siblings attended this school. Has been disruptive in each year.  
School Attitude: Both principal and classroom teacher supportive of present placement (with increased support).  
Family Attitude: Lack of interest in child’s education and behaviour problems.  
Support: Itinerant Support Teacher (Behaviour).  
Type of School: City Region  
Size of School: Category 2  
Success Rate: 1 year follow up - still enrolled at surveyed school.
### SUMMARY

**PERCEIVED INDICES OF INTEGRATION**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>74.2%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>67.3%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>77.7%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>59%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>69.79%</td>
</tr>
</tbody>
</table>

**Grade:** 3rd

**Gender of Student:** Male

**History:** Enrolled at present school in kindergarten. 1st and 2nd Grades at another school. Grade three re enrolled at present school.

**School Attitude:** Both principal and classroom teacher very supportive of present placement.

**Family Attitude:** (Single parent) very supportive.

**Support:** Support Teacher, Itinerant Support Teacher (Behaviour)

**Type of School:** Metropolitan Region

**Size of School:** Category 4

**Success Rate:** 1 year follow up - still enrolled at surveyed school.
CASE STUDY NO: 22

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perceived Academic Integration Score</th>
<th>37.1%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Social Integration Score</td>
<td>26%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>44.4%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>31.8%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>34.17%</td>
</tr>
</tbody>
</table>

Grade: 5th
Gender of Student: Male
History: Enrolled at present school aged 5 after being expelled from Pre-school. Transferred to Special setting 1st grade re-enrolled in Grade 4.
School Attitude: Both classroom teacher and principal are not supportive of present placement.
Family Attitude: No support - have little control over child's out of school behaviour.
Support: None
Type of School: City Region
Size of School: Category 3
Success Rate: 1 year follow up - Expelled does not attend any school.
CASE STUDY NO: 23

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Metric</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>42.8%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>65.2%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>40.9%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>60.28%</td>
</tr>
</tbody>
</table>

Grade: 1st  
Gender of Student: Male  
History: Enrolled at present school in kindergarten.  
School Attitude: Classroom Teacher supportive of placement. Principal is not supportive of placement.  
Family Attitude: Single parent - very supportive - limited ability.  
Support: Support (Resource) Teacher  
Type of School: Metropolitan Region  
Size of School: Category 3  
Success Rate: One year follow up - still enrolled at surveyed school.
SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>42.8%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>39.1%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>68.1%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>62.5%</td>
</tr>
</tbody>
</table>

Grade: 3rd
Gender of Student: Male
History: Enrolled at a number of schools (3) attendance at all has been irregular.
School Attitude: Classroom Teacher supportive with reservations.
Family Attitude: Principal supportive of present placement.
Support: Itinerant Support Teacher (Behaviour)
Type of School: Rural Region
Size of School: Category 2
Success Rate: One year follow up - Expelled does not attend any school.
SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perception</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>65.7%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>54.3%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>44.4%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>45.4%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>52.45%</td>
</tr>
</tbody>
</table>

Grade: 1st
Gender of Student: Male
History: Child has been enrolled in three schools.
School Attitude: Present placement a result of expulsion from previous school.
Family Attitude: Both principal and classroom teacher are not supportive of present placement.
Support: Single parent - child looked after by grandmother - keen but difficulty in coping.
Type of School: Rural Region
Size of School: Category 1
Success Rate: 1 year follow up - Transferred to special setting.
## SUMMARY

### PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>71.4%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>63%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>81.8%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>76.68%</td>
</tr>
</tbody>
</table>

### Grade: 5th
### Gender of Student: Male
### History:
Enrolled at present school in Kindergarten.
Transferred to local special setting for Grades 3 and 4 re-enrolled at present school in Grade 5.

### School Attitude:
Very Supportive of placement.

### Family Attitude:
Very Supportive

### Support:
Itinerant Support Teacher (Behaviour).

### Type of School:
City Region

### Size of School:
Category 3

### Success Rate:
1 year follow up - still enrolled at surveyed school.
SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Measure</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>37.1%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>26%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>44.4%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>40.9%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>37.1%</td>
</tr>
</tbody>
</table>

Grade: 2nd
Gender of Student: Male
History: Enrolled at present school in kindergarten.
School Attitude: Classroom teacher supportive with reservations.
Principal is not supportive of present placement.
Family Attitude: Lack of co-operation and support for school.
Support: Support (Resource) Teacher.
Type of School: Metropolitan
Size of School: Category 3
Success Rate: 1 year follow up - still enrolled at surveyed school with increased support.
CASE STUDY NO: 28

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perceived Academic Integration Score</th>
<th>42.8%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Social Integration Score</td>
<td>63.0%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>66.6%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>36.3%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>52.17%</td>
</tr>
</tbody>
</table>

Grade: 2nd
Gender of Student: Male
History: Initially enrolled at another school in kinder transferred to special setting - enrol at this school this year.
School Attitude: Classroom Teacher supportive with reservations.
Family Attitude: Principal not supportive of present placement.
Support: Supportive of present placement.
Type of School: Itinerant Support Teacher (Behaviour)
Size of School: Metropolitan
Success Rate: Category 4

1 year follow up - Transferred to special setting.
CASE STUDY NO: 29

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Perceived Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>57.1%</td>
</tr>
<tr>
<td>Perceived Social Integration Score</td>
<td>45.6%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>44.4%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>77.2%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>56.0%</td>
</tr>
</tbody>
</table>

Grade: 4th
Gender of Student: Male
History: Initially enrolled at another local school - transferred to special setting for two years then enrolled at present school.
School Attitude: Both classroom teacher and principal are not supportive of the present placement.
Family Attitude: Supportive of present placement.
Support: Itinerant Support Teacher
Type of School: Metropolitan
Size of School: Category 3
Success Rate: 1 year follow up - transferred to special setting.
CASE STUDY NO: 30

SUMMARY

PERCEIVED INDICES OF INTEGRATION

<table>
<thead>
<tr>
<th>Index</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Academic Integration Score</td>
<td>60.0%</td>
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<tr>
<td>Perceived Social Integration Score</td>
<td>45.6%</td>
</tr>
<tr>
<td>Perception of Continued Placement</td>
<td>100%</td>
</tr>
<tr>
<td>Perceived Appropriateness of Support</td>
<td>86.3%</td>
</tr>
<tr>
<td>Total Perceived Score</td>
<td>72.97%</td>
</tr>
</tbody>
</table>

Grade: 2nd
Gender of Student: Male
History: Was enrolled at present school in kindergarten.
School Attitude: Classroom teacher supportive with some reservations. Principal supportive.
Family Attitude: Are very supportive.
Support: Itinerant Support Teacher (behaviour)
Type of School: Metropolitan
Size of School: Category 4
Success Rate: 1 year follow up - still enrolled at surveyed school with increased support.
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