Challenges facing educators' in the inclusion of Attention Deficit Hyperactivity Disordered (ADHD) learners in the mainstream classroom

by

SHIREEN D. HARIPARSAD

PED (RAU); FDE (University of Stellenbosch); B.Ed. Honours- Ed. Psych. (North West University); ACE- Ed. Management & Leadership (UNISA)

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Supervisor: Prof M.S. Vos

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SHIREEN D. HARIPARSAD

DECLARATION

"I declare that this dissertation *Challenges facing* educators' in the inclusion of *ADHD learners* in the mainstream classroom represents my own work. All the sources that I have used or quoted have been acknowledged by means of complete references."

.....

S.D. HARIPARSAD

DURBAN

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This work is dedicated to

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and to

the memory of

My late dad, Mr Harrie Singh

who taught me to reach for the stars but to keep my feet rooted on the ground

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SUMMARY

The aim of this study was to investigate the challenges facing educators' in the inclusion of ADHD learners in the mainstream classroom.

As an introduction to the study the challenges faced by educators' in the inclusion of ADHD learners in mainstream classes were reviewed by means of a study of available and relevant literature. Educators are people who make learning and teaching possible and their own challenges in what is happening in the classroom are of crucial importance. Research done in South Africa on challenges faced by educators' in inclusive education indicated that educators in mainstream classrooms generally express negative attitudes to mainstreaming policies and thus finds himself with many challenges. In the new education dispensation educators in mainstream classrooms have to accommodate learners with impairments, such as the ADHD child. Inclusion makes additional demands on educators because of the special educational needs of learners with impairments. The challenges facing educators in inclusion and their efficacy in meeting the special needs of learners with impairments play a determining role in the successful implementation of an inclusive education policy.

For the purpose of the empirical investigation a self-structured questionnaire was utilized. An analysis was done of 110 questionnaires completed by primary school educators from the Mafukezela Gandhi

district on the North Coast of KwaZulu Natal. The data was processed and interpreted by means of descriptive statistics.

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Essentially the following were the main findings from the empirical study:

- ➤ Educators lack the necessary knowledge, skills, training and experience of learners with special educational needs.
- ➤ Educators have difficulty in identifying ADHD learners.
- ➤ Educators needed to change their teaching methods to accommodate learners with diverse educational needs.
 - The study concludes with a summary and findings from the literature study and descriptive statistics. Based on these findings the following recommendations were made:
- ➤ The development of curricula, institutions and methods of assessments must include a variety of strategies to accommodate learners with special educational needs, such as ADHD learners.
- ➤ The basic training of educators must include compulsory courses such as orthopedagogics that will enable them to cope with the demands for inclusion of learners with special educational needs.

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ORIENTATION

1.1 INTRODUCTION

Attention deficit hyperactivity disorder (ADHD) is one of the most common childhood disorders and can continue through adolescence and adulthood. Symptoms include difficulty staying focused and paying attention, difficulty controlling behaviour, and hyperactivity (over-activity) (American Psychiatric Association, 1999:34). This restricted ADHD learners from being admitted into mainstream schools.

The 1994 elections brought about changes such as democratization, equality, non-discrimination, equity and redress, as well as the Reconstruction and Development Programme (DoE, 2001a:10). The new education system stipulates that no unfair discrimination may take place against anyone on the following grounds: age, gender, ethnicity, language, class, disability, HIV or other infectious diseases. All learners, regardless of their impairments, should be accommodated in the mainstream schools.

The South African Schools Act, Act No. 84 of 1996 (DoE, 1996:10) categorically states, "a mainstream school must admit all learners and serve their educational requirements without unfair discrimination in anyway." This implies that based on the rights of all learners and their parents, no learners may be turned away from any mainstream school if it is at all possible to accommodate the learner.

This further implies that, inclusion of all learners, including ADHD learners in mainstream education will help do away with the labeling of learners with impairments/disabilities. Learners with impairments will therefore be able to live with their parents, siblings or relatives and attend a mainstream school (DoE, 2001a:3).

The aim of inclusive education is to enable learners with impairments to maximize their opportunities, potential and personal fulfillment in their family environment, in school and in the wider community (Engelbrecht, 2010:26).

1.2. ANALYSIS OF THE PROBLEM

Various research studies in South Africa on inclusive education indicate that educators in mainstream classrooms generally faces many challenges to mainstreaming policies (Bothma, Gravett & Swart, 2000:20: 200 – 204). If educators in the mainstream classroom have a negative attitude to inclusive education, this could become a critical barrier to learning and development and the successful implementation of the policy of inclusive education.

There are some concerns about the inclusion of ADHD learners in the mainstream classrooms. These concerns include the following (Vaughn, Bos & Schumm, 2000:160);

➤ South African educators are confused and insecure because of a series of radical changes that have transformed their working environment.

- Educators are not acquainted with the principles of the National Curriculum Statement (NCS).
- ➤ Educators struggle to involve parents and communities in the learning process.
- ➤ Educators feel that they are obliged to implement the inclusion policy about which they were not consulted.
- > The availability and provision of sufficient support and resources.
- ➤ Educators lack confidence in their own abilities to teach ADHD learners.
- ADHD learners require individual attention.
- ➤ Educators struggle to get mainstream learners to accept and accommodate ADHD learners in the classroom.
- ➤ Educators sometimes have very little control over the ridicule and labeling of ADHD learners in and out of the classroom.
- Some schools don't have a school-based support team.

1.3. STATEMENT OF THE PROBLEM

The problem that will be investigated in this study pertains to the special needs and problems, such as uncertainties, difficulties and

adjustments that are created for educators, with the inclusion of Attention Deficit Hyperactive Disordered (ADHD) learners in mainstream education. The following are questions that require answers concerning inclusive education of ADHD learners:

- What are the challenges facing educators in the inclusion of ADHD learners?
- ➤ Are educators in the mainstream class adequately equipped to meet the special needs of ADHD learners?
- ➤ Are the special needs of the ADHD learners sufficiently met in a mainstream classroom?
- ➤ Is sufficient professional support available to assist educators to meet the special educational needs of ADHD learners?

1.4. ELUCIDATION OF CONCEPTS

The study on challenges facing educators' in the inclusion of ADHD learners will cover a variety of concepts. To ensure a clear understanding of the problem to be investigated it is necessary to explain some of these concepts:

1.4.1 Gender issue

In this study all references to any gender include references to the other gender.

1.4.2 Educator

According to the South African Schools Act, Act No. 84 of 1996 (DoE, 1996:5) an educator is any person who teaches, educates or trains other persons or who provides professional educational services, including professional therapy and education psychological services at any public school, further education and training institutions, departmental office or adult basic education center, and who is appointed in a post or any educator establishment under this Act (DoE, 2001a:10).

1.4.3. Education

Education are those actions in which human beings attempt to produce lasting improvements in the structure of the psychic and physical dispositions of other people in accordance with what is morally justifiable and worthwhile, to retain or reinforce dispositions they consider positive or to prevent the formation of dispositions they regard as negative (Smith , 1999:26).

1.4.4. Inclusive Education

Inclusive education is the restructuring of special education to permit all or most students to be integrated in mainstream classes through reorganization and instructional innovations, eg. co-operative consultation and team teaching (Engelbrecht & Jansen, 2003:19).

All learners have the right of access to a learning environment that values, respects and accommodates diversity and that provides education appropriate to the learners' needs within an integrated system of education (Swart & Pettipher, 2001:33). This policy on inclusive education stipulates that all learners, irrespective of race, gender, class, religion, disability, culture or sexual preference have a right of access to a learning environment in a single system of education that values, respects and accommodates diversity (DoE, 2002:3).

The ultimate purpose or aim of inclusive education is to enable learners impairments to maximize their opportunities, potential and personal fulfillment in their family environment, in school and in the wider community (DoE, 2000:26).

1.4.5. Disability

According to Engelbrecht and Jansen (2003: 118) disability is a defect that can take place at any stage of life or at birth. The nature and degree of severity of the disability may influence the impact of such a disability on a learner, the family and all those involved with the learner. For those learners with physical or sensory difficulties the nature of the problem is often clearly recognizable. In other cases it may not be obvious to the teacher that the learner has a problem at all, eg. intellectual problems, such as retaining information or concentrating on required classroom tasks for any length of time. It is extremely important to keep in mind that those

who learn differently as a result of intrinsic disability share the same developmental needs common to all learners (Lazarus, Daniels & Engelbrecht, 1999:47). Thus, disabilities can be congenital or acquired. From the above it is clear that the definitions of "impairments "and "disability" overlap and a clear distinction between the two terms is not possible.

1.4.6. Challenges

Challenges prepare people for action, are learned from experience and exert a motivating force on behavior. Sdorow and Rickabaugh (2000:478) say challenges are cognitively and emotionally toned dispositions acquired through maturation and experience and they influence a person's approach-avoidance behavior towards persons, objects, events and ideas. All challenges are learned consciously or unconsciously and usually they become stronger and long lasting. Pintrich and Schunk (2002:268) maintain that a challenge always involves a relationship and will involve a certain disposition or action. The cognitive component is the factual information one has and the effective component is the emotion associated with the challenge. For the purpose of this study a challenge is seen as a conscious state of readiness which has a direct or indirect influence on a person's action towards all related objects and situations.

1.4.7. Handicap

A handicap refers to an identifiable deficiency in the child's given potential, such as sensory, neural, intellectual or physical deficiencies (Kapp,

2002:27). The handicap is due to the society and environment within which the individual must function.

1.4.8. Disorder

Disorder is a problem or illness that affects a person's body or mind (Engelbrecht & Jansen 2003:28). It is the disturbance of the normal state of the body or organ, thus causing a skeletal, muscular or neurological problem. Disorders may occur in various degrees of severity from barely perceptible to profoundly disabled (Kapp, 2002:420).

1.4.9. Attention Deficit Hyperactivity Disorder(ADHD)

ADHD is a significant deficit in age- appropriate attention, impulse control and rule governed behavior (compliance, self-control and problem-solving) that arises at infancy or early childhood, is significantly pervasive in nature, and is not the direct result of general intellectual retardation, severe language delay or emotional disturbances or gross sensory or motor retardation (Picton, 2002:3).

ADHD is the inattention, hyperactivity and impulsivity of a person's behavior. It is normal for all children to be inattentive, hyperactive and impulsive sometimes, but children with ADHD, these behaviours are more severe and occur more often. To be diagnosed with the disorder, a child must have symptoms for 6 or more months and to a degree that is greater than other children of the same age ((Dulcan & Martini,1999:39).

According to Bostic and Bagnell (2004:39) children who have symptoms of inattention may:

- be easily distracted, miss detail, forget things and frequently switch from one activity to another;
- have difficulty focusing on one thing;
- become bored with a task after only a few minutes, unless they are doing something enjoyable;
- have difficulty focusing attention on organizing and completing a task or learning something new;
- have trouble completing or turning homework, assignments, often losing things (eg. pencils, toys, assignments) needed to complete tasks or activities;
- not seem to listen when spoken to;
- daydreams, becomes easily confused and moves slowly; and
- have difficulty processing information as quickly and accurately as others.

According to Dore (2010:9) children who have symptoms of hyperactivity may:

- fidget and squirm in their seats;
- talk nonstop;
- dash around, touching or playing with anything and everything in sight;
- have trouble sitting still during dinner, school and story time;
- be constantly in motion; and
- have difficulty doing quiet tasks or activities.

According to Dulcan and Martini (1999:39) children who have symptoms of impulsivity may:

- be very impatient;
- blurt out inappropriate comments, show their emotions without restraint and act without regard for consequences; and
- often interrupt conversations or others' activities.

1.4.10. Mainstreaming and inclusion

A complement to mainstreaming, inclusion can best be described as the "full-time education of students with and without disabilities in regular classroom settings" (Engelbrecht, 2000:112). Inclusion has been described as a total integration process with special education support given according to the special education student's needs provided primarily within the general education classroom (Ritter, Michel & Irby, 1999: 10). Villa and Thousand (2001:20), described inclusion as the "principle and practice of considering general education as the placement of first choice for all learners." Central to understanding purposes for mainstreaming and inclusion, "least restrictive environment" can best be described as the general education classroom (Schwartz, 2007:40).

1.5. AIMS OF THE STUDY

The aim of this study are:

➤ To pursue a study of relevant literature in order to establish challenges faced by educators' in the inclusion of ADHD learners in the mainstream education.

- ➤ To conduct an empirical investigation into the challenges faced by educators in the inclusion of ADHD learners in mainstream education.
- ➤ To make certain recommendations in order to provide accountable support for educators to meet the special needs of the Attention Deficit Hyperactivity Disordered (ADHD) learner in mainstream education.

1.6. METHODS OF RESEARCH

Research with regard to this study will be conducted as follows:

- > A literature study of available, relevant literature.
- An empirical survey comprising self-structured questionnaires to be completed by primary school educators with ADHD learners in their mainstream classes.

1.7 FURTHER COURSE OF THE STUDY

Chapter 2 will be a literature review of the challenges facing educators' in the inclusion of ADHD learners, with emphasis in mainstream classrooms.

In Chapter 3 the method of the empirical research followed in this study will be explained.

Chapter 4 will represent an analysis of the data.

In Chapter 5 a summary, research findings from the literature and empirical studies, shortcomings and certain recommendations will be presented.

LITERATURE REVIEW

2.1. INTRODUCTION

Attention Deficit Hyperactivity Disorder (ADHD) has been described in the medical literature for about one hundred years. In 1902, pediatrician, George Still, described a group of children who were hyperactive, impulsive and inattentive. Unfortunately he didn't understand that ADHD is a medical disorder and labeled these children as 'morally defective.' ADHD affects approximately 6% of the population, while less than 2% receive treatment. According to the National Institute of Mental Health (2010:48), there was no evidence that ADHD is over diagnosed in our society, and child psychiatrist Peter Jensen from the National Institute of Health found that less than one in eight children who met diagnostic criteria for ADHD were taking medication. ADHD is a serious societal problem which can make children of this nature to be misunderstood at times (Landsberg, 2005:378). Often they are unpopular and cause frustration to peers and teachers.

Children with ADHD will usually have a short attention span and are easily distracted, and may also be hyperactive and impulsive. These symptoms are usually noticed before the child is seven years old and occur in more than one setting, for example both at home and at school. Statistics have also shown that over the years, from 1997 – 2006, there has been an increase of children with ADHD having learning disabilities (Patricia & Pastor, 2010:1). These children then had a primary and a secondary

barrier to deal with and thus educators and parents had to seek guidance and support from various mental health professionals in order to cope and educate such children (National Institute of Mental Health, 2009:32). Children with ADHD and Learning Difficulties (LD) had to have contact with a mental health professional, use prescription medication, and have frequent health care visits. These children also have to use special education services.

It is important to remember that ADHD is not the only medical condition that can cause impulsivity and hyperactivity. Children with anxiety, depression or a learning disability can also have a short attention span and be hyperactive and/or impulsive. Paediatricians and school psychologists can assist children with ADHD to cope with the educational and societal demands. (National Institute of Mental Health, 2009:35).

2.2. BACKGROUND ON ADHD

ADHD is a cluster of developmental symptoms, characterized by an age and situation inappropriate ability to focus and sustain attention; and/or impulsive response style; and/or unfocused, excessive movement, restlessness and fidgetiness, severe enough to handicap the learner's optimal motor, cognitive, social and/or emotional development at specific stages of life, spanning from childhood to early adulthood(Engelbrecht & Jansen, 2003: 85).

ADHD is characterized by poor attention and concentration, impulsiveness, motor hyperactivity before the age of seven years, and

must persist for at least six months. There is a tendency to divide the syndrome into attention deficit with hyperactivity, and attention deficit without hyperactivity, because some learners do not present with motor hyperactivity (Engelbrecht & Jansen, 2003:85).

Bostic (2004:15) highlights that the principal characteristics of ADHD are;

- Hyperactivity;
- Inattention; and
- Impulsivity

No one knows exactly what causes ADHD. It runs in families, so genetics may be a factor. A complete evaluation by a trained professional is the only way to know for sure if a child has ADHD. Treatment often includes medications to control symptoms. Structures at home and at school is also important. Parenting classes or behavioral therapy may also help (National Institute of Mental Health, 2009: 38).

Difficulties in sustaining attention, impulsivity and hyperactivity are commonly associated with learning difficulties. Children who cannot concentrate experience learning difficulties. It is therefore important to understand the close relationship between these two difficulties (Goodyer & Fourie, 1999:55).

The terminology of Attention Deficit Disorder(ADD) has changed because this disorder is now viewed as having two distinct components, namely inattentiveness and hyperactivity.

- ➤ Inattention occurs when a child has difficulty in paying attention to the details of tasks or activities: when he or she struggles to listen to full instructions: and when he or she is forgetful and easily distracted from tasks (Engelbrecht & Snyman, 1999:86).
- ➤ Hyperactivity occurs when the child can't sit still; when they constantly move, fidget and squirm; when they move or run excessively; when they talk more than other children their age; and when they are impulsive and cannot wait for their turn (Engelbrecht & Snyman, 1999:87).

Because of these two factors, this disorder is commonly called Attention Deficit with or without Hyperactivity Disorder(AD/HD). It is important to understand this distinction as there are many children who display inattentiveness without Hyperactivity- which can be overlooked when teaching such children (Picton, 2002:4).

2.3. PREVALENCE OF ADHD

ADHD is more prevalent in boys than girls, and it affects 3 – 5 percent of children in South Africa.

Statistics have shown that the prevalence of diagnosed ADHD children are aged 6 -17 years, with and without learning difficulties (Patricia & Pastor, 2010:15), contends:

Gender

Boys are more likely than girls to have been diagnosed with ADHD.

Boys (6.7%) are more than twice as likely as girls (2.5%) to have ADHD.

Boys (5.1%) are about twice as likely as girls (2.3%) to have both ADHD

and LD (Learning Difficulty).

Age

Older children 12-17 years of age are more likely than younger children 6-11 years of age to have ADHD with and without LD.

Race and ethnicity

The treatment and diagnosis for Attention Deficit Hyperactivity Disorder (ADHD) in South Africa are lower for black children than for white children (1.7% versus 4.4% in 2005).

Family structure

Children who lived in a mother only family are more likely than those in a two-parent family to be diagnosed with ADHD. Also, in each sex and age group, children living in a mother only family were more likely than those living in a two-parent family to have both ADHD and LD.

Health conditions

Children with ADHD are likely to have chronic health conditions, such as Asthma. ADHD is also prevalent in children with mental retardation and other developmental delays.

2.4 CHARACTERISTICS OF ADHD

Some learners who suffer from attention deficit are diagnosed later than the learner who presents with motor hyperactivity. The following are typical characteristics of attention deficit, impulsivity, and hyperactivity;

2.4.1. Attention is a perceptual, self-reinforcing selection process. Learners who select activities purposefully are exploratory, efficient and goal- directed for much of the time, and the level and quantity of their involvement adjust to changing demands and environmental requirements (Picton, 2002:5).

Attention is the "active selection of certain stimuli or certain aspects of experience with consequent inhibitions of others" (Engelbrecht & Snyman 1999:86). Selection of stimuli is important, because the human brain cannot accommodate all the information the senses pick up. Attention goes through different stages of development.

- **Phase 1** During the first year of life the baby's attention span is very short. He can only pay attention for a few seconds.
- **Phase 2** At the age of two years, more or less, the toddler can concentrate on activities and objects of his/her choice. Attention is still short, but very rigid. When the toddler is busy with something it appears as if the he/she is stubborn, because he does not react to other stimuli, eg. does not react when mother calls.

Phase 3 - At this stage the adult must focus the learner's attention, but the learner can sustain attention. When calling his attention, he looks up, makes eye contact and is then able to do what is asked.

Phase 4 - The learner now focuses without support, but only one thing at a time. He will stop, listen spontaneously to a request, and then continue with his task before reacting to the request.

Phase 5 - At this stage the learner should be able to listen to a request while busy with another task, and then do the requested task without reminder or repetition of the request.

At least three of the following characteristics indicate attention deficit (Engelbrecht & Snyman, 1999:87):

- does not complete tasks and fails to finish chores;
- often does not seem to listen to what is being said to him or her;
- easily distracted by extraneous stimuli;
- cannot concentrate on schoolwork, often shifts from one incomplete activity to another; and
- has difficulty sustaining attention in tasks or play activity.
- 2.4.2. Hyperactivity is a developmental disorder of age-inappropriate attention span, impulse control, restlessness, and rule-governed behavior that develops in late infancy or early childhood, is pervasive in nature, and is not accounted for on the basis of gross neurological, sensory, or severe emotional disturbance (Engelbrecht & Jansen, 2003:87).

At least two of the following characteristics indicate hyperactivity (Dore, 2010:5):

- excessive running and climbing activities;
- cannot sit still, fidgets excessively;
- is always busy; and
- often engages in physically dangerous activities without considering possible consequences, e.g. jumps from a tree without realizing the height.
- 2.4.3. Impulsivity manifest as acting without planning or thinking and the learner does not take any consequences of his/her action into account.

At least three of the following characteristics indicate impulsivity (Engelbrecht & Jansen, 2003:89):

- acts without thinking;
- rapidly changes from one activity to another;
- cannot organize work, often loses things necessary for tasks or activities at school or home, e.g. pencils, books, assignments;
- needs supervision, often interrupts or intrudes on others, e.g. butts into other learners games;
- noisy in the classroom, talks excessively; and
- has difficulty in waiting his/her turn in games or group situations.

2.5. CAUSES OF ADHD IN CHILDREN

According to Lewis (2002:64) the causes of ADHD are multiple and varied and may include the following:

2.5.1. Neurological factors

Neurological immaturity might be an important cause. In the past it was said these learners suffer from minimal brain dysfunction. There might be certain neurological soft signs, eg. slow motor and speech development, poor visual perceptual development, poor social skills.

2.5.2. Genetic factors

About 20% of ADHD learners have a father or uncle who is described as having been the same, always busy and very naughty as learners. It seems as if there is a strong genetic indication, but there is uncertainty as to the mechanisms involved.

2.5.3. Psychological factors

The learner's temperament, emotional stability and his/her general psychological make up may contribute to ADHD.

2.5.4. Health factors

Allergies may cause tension-fatigue syndrome. Allergens cause an upset in the chemical balance of the brain, which in turn results in hyperactivity and later in attention deficit. Undetected sensory deficits, such as visual or gearing loss, may also cause ADHD, because the learner does not understand what is expected of him/her.

2.5.5. Family factors

Learners with poor family structures and role models do not have clear guidelines on behavior. They are allowed to do as they please, and discipline is not consistent.

2.5.6. Environmental factors

The most common known environmental factors causing hyperactivity are food coloring, preservatives and salycilates. Other factors could be lead poisoning, and low levels of radiation.

2.5.7. Educational factors

If the learner is placed in a school or class that is inappropriate for his/her needs, such as too high or low expectations, attention deficit and/or hyperactivity (ADHD) may manifest. Sometimes the teacher's personality, eg.. a restless, jerky, impatient personality, may cause the learner to manifest attention deficit and/or hyperactivity. Learning disabilities accompanied by under or over stimulation may also result in attention deficit and/or hyperactivity

2.5.8 Brain injuries

Children who have suffered a brain injury may show some behaviors similar to those of ADHD. However, only a small percentage of children with ADHD have suffered a traumatic brain injury.

2.5.9. Sugar

The idea that refined sugar causes ADHD or makes symptoms worse is popular, but research discounts this theory than supports it. In one study researchers gave children foods containing either sugar or a sugar substitute every other day. The children who received sugar showed no different behavior or learning disabilities than those who received the sugar substitute. In another research in which children were given higher than average amounts of sugar substitutes, showed similar results (Picton, 2002:13).

2.6. CHALLENGES FACING EDUCATORS

2.6.1. Identification of ADHD

Owing to his daily association with the child and his professional training, the educator is in a good position to notice behaviour and learning problems. The school offers a favourable venue for the systematic observation of the child in different situations; in the teaching-learning situation in the classroom, in his sport involvement and in his participation in other extramural activities. By observing the child over a broad spectrum and in different situations, the educator can gather data which

will enable him to reach a better understanding of the child, intimate knowledge ensures a greater dissociation which gives a more objective stance to the interpretation. The educator is in a good position to do the initial identification. In the initial identification his opinion or judgment plays an important role, yet his intuitive or pre-scientific understanding or comprehension of the child is insufficient (Dore 2010:3).

Early identification of the underlying disorder and a comprehensive treatment plan can help avert many difficulties, Bostic (2004:29), says children with ADHD may experience a combination of the symptoms below:

- Difficulty paying attention, focusing on schoolwork and remembering tasks. A child with ADHD may be easily distracted by peers, sounds, or even artwork on classroom walls.
- Problems organizing schoolwork and remembering tasks. Multiple part verbal directions, such as requesting a student :turn to page 133 in your math book, complete problems 1-6, then begin reading pages 20 –25 in your history book," may be confusing. Homework assignments and textbooks may be forgotten or misplaced frequently, and papers and notebooks may be quiet cluttered.
- Inability to sit still and remain seated. Children with ADHD may not know why it is difficult for them to sit still. They may be unable to sit quietly, despite frequent reminders to do so.

- Difficulty waiting their turns in line, waiting to give an answer during class, or waiting their turn during games. These children may appear impatient or may insist upon being first. These behaviors can be misunderstood and can easily annoy others.
- Learning disorders are common in people with ADHD. A child's
 difficulties in school should not be presumed to be due entirely to
 ADHD. If the child still has academic difficulty after ADHD
 symptoms are treated, an educational evaluation for a learning
 disorder should be considered. A child's repeated reluctance to
 attend school may be an indicator of an undiagnosed learning
 disability.
- Other mental health conditions, compounding any learning and behavioral challenges. Having one mental health condition does not "inoculate" the child from having other conditions as well. Children with ADHD commonly have co-existing mood and anxiety disorders.
- Speech and language problems that may need evaluation by specialists.
- Side effects from medications. Medications may have cognitive or behavioral effects or physically uncomfortable side effects that interfere with school performance. After a child begins receiving medical treatment for symptoms, any mood changes or new behaviors should be discussed with parents, as they can reflect medication side effects.

2.6.2. Training and competency

According to Kapp (2002:400) remediation of the problems of learning disabled children, ie. ADHD is a highly specialized subject area which demands specific knowledge and skills from practitioners/teachers. Remedial teachers are specifically trained for this purpose by universities, colleges and education departments to identify and teach ADHD children and to help them with their particular problems.

Learners are increasingly finding themselves in disadvantaged situations that stem mostly from poverty, lack of parental support for education and specific learning needs. It is therefore utmost important for educators to have a good understanding of these learners' needs in their unique and relevant contexts (Engelbrecht & Jansen 2003:3). Running a classroom so that it becomes an optimally healthy and inclusive learning environment for all the learners is an extremely complex task. It involves you in a number of different roles each of which needs to be constantly adjusted and co-ordinated into a harmonious and productive whole (Donald, Lazarus & Lolwana, 2002:183).

The educator needs to qualify to teach learners with barriers to learning by doing constant researches, attend workshops/seminars and perhaps also, consider doing in-service courses to uplift their knowledge and understanding of learners with ADHD. Educators depend and rely on School Based Support Teams to assist and guide them with the teaching and learning process by identifying and addressing learner disabilities, thus empowering them to develop preventative and promotive strategies in the health-promoting school framework (DNE, 2001:48).

Bothma, Gravett and Swart (2000:201) state that the challenge facing many South African educators is that they have not been trained to cope with the diversity of learners entering mainstream schools. Educators will have to be adequately prepared to assess special educational needs, to adapt curriculum content to the needs of learners in the classroom, and to utilize special assistive devices and instructional aids required by some of the ADHD learners.

2.6.3. Knowledge and Experience

Educators' feelings that they are not adequately trained or have the abilities that are needed to cope with ADHD learners can be seen as one of the causes of their negative attitudes to inclusive education (Weeks,2000:258). According to Sethosa (2001:76) educators' challenges in inclusive education are closely related to their feelings of competency and effectiveness. Educators feel that they are adequately equipped (competent and effective) to teach learners with disabilities and/or handicaps if they have relevant training in that field (Mastropier & Scruggs, 2000:201). The training of educators also seem to be a problem for inclusive education in South Africa. The challenge thus facing many South African educators is that they have not been trained to cope with the diversity of learners entering schools.

In schools, educators must assume varying roles. One of their primary roles is to advance the principle of inclusion. According to Dore (2010:8) the framework for upholding the law is not well defined, and educators struggle with how best to make accommodations to initiate best practice. The role of general education educators in public education environments

in relationship to special education is one of the most challenging obstacles general educators indicate they experience, apart from understanding the different disabilities. One of the main concerns that general education educators express is in carrying out mainstreaming and inclusion is in making appropriate accommodations for special education students, such as, ADHD learners. Often, appropriate accommodations are not well defined (Lilly, 2001:82). These obstacles sometimes create difficulties.

2.6.4 Acceptance of ADHD learners

Acceptance implies unconditionality. No preconditions may be set. The parent or educator who sets preconditions or makes certain demands before accepting a child, with ADHD, is already alienating himself from the child (Henning, 2010:20). According to Kapp (2002:459) acceptance is more than mere intellectual acceptance or acquiescence. It is a spiritual and emotional oneness of the parent with the child and of the child with the parent and with the educator thereof. It is important, because acceptance by the parent teaches the child to accept himself and others, hence the importance for the atmosphere in the family to be such that the child actually experiences this acceptance.

This child will then feel that sense of acceptance in any environment, especially school. When that happens, the educator will also begin to foster such acceptance of learners with diverse needs, such as ADHD, thus adjusting the class programmes and drawing Individual Educational Plans (IEPs) to accommodate learners with ADHD (Green, 2001:5).

2.6.5 Disposition

The most important requirement for the class and subject teacher to fulfil his ortho-pedagogical task lies in his personality. Even the knowledgeable and competent teacher will not succeed in helping the child with problems if his disposition precludes a willingness to:

- accept the child with his problems unconditionally;
- become involved with the child and try to assist him;
- make time and take the trouble to collect the required information,
 to plan for the child and to assist him;
- work together with others (the parents, other teachers, etc.), in a professional and tactful manner; and
- evaluate his own conduct critically.

2.6.6 Changes in teaching methods

Inclusive education implies that ADHD learners must be confronted with a differentiated curriculum and evaluation system that will enable them to progress at their own rate and at their own level while placed in mainstream classes. ADHD learners to reach optimal learning (Engelbrecht, 2000:2). Inclusive education is assisting all children by facilitating problem-solving and learning to develop their abilities by exposing them to the abilities of normal people, and *vice versa* (Swart & Pettipher, 2001:33). This involves drastic fundamental changes to school curricula, the role of educators in the classroom and educator training or development.

2.6.7 Time allocation

The DoE (2002:6) indicates that pupils with "mild learning disabilities" are recommended to remain in mainstream schools and receive additional help which includes special materials and equipment and consultation, tutoring, itinerant services, resource room with special education teacher and a diagnostic prescriptive teaching center with their times adjusted so that they could understand and complete their tasks.

Dulcan and Martini (1999:64) predicts that the standards would possibly drop due to the neglect of the "regular" learners in order to accommodate the ADHD learners. Educators feel that it is not fair to expect the regular learners to support and carry the ADHD learners when their focus should be on their own education (Pillay, 2001:94).

2.6.8 Classroom

(1) Class size

Learners with diverse needs, such as ADHD require individual attention, support and guidance from their educator's, which becomes impossible with the large class of 38 - 40 learners (Clarke, 1999:9). According to Kapp (2002:72) the ADHD child naturally requires more attention and assistance. For teaching to be effective, the traditional size of the class will have to be adjusted considerably. Smaller classes are essential.

According to Pretorius (2000:5) educators generally felt that having to cope with the normal day-to-day problems in large classes was nearly more than

they were able to do. The concern aired was that an impaired learner demanded so much more attention, yet no allowance was made for this by the education department in the prescribed class sizes (Pretorius, 2000:6).

(2) Diversity

Educational transformation within an inclusive framework impacts on the roles and responsibilities of principals and educators. In inclusive schools it is vital that the school's vision for inclusive education is publically stated and based on the democratic and egalitarian principles of inclusion: the belief that all children can learn, that all children have the right to be educated with their peers in age-appropriate mainstream classrooms, and that meeting the diverse educational and psychological needs of all children is the responsibility of the whole-school community (Engelbrecht & Jansen, 2003:89-90).

Depending on the wishes and based on the rights of all learners and their parents, including ADHD learners, no learner may be turned away from any public school if it is at all possible to accommodate the learner. This means that schools may be legally obliged to provide appropriate educational support services and make structural adjustments to accommodate ADHD learners, should they want to attend a regular public school, irrespective of age, gender and race.

(3) Discipline

In order to manage individual behaviours, teachers could match different discipline approaches to different learners, ie. talk to a learner, have learners

visualize appropriate behavior, peer-group counseling, behavior contracts, etc. Sometimes the best strategy for a learner may be one matched by a poorly developed intelligence. For example, if a learner has behavior problems due to poorly developed interpersonal intelligence, he may benefit more from activities that seek to develop his social skills. In most cases however, the best strategies will be in a learner's area of strength, which is somewhat difficult with ADHD learners (McCarty, 2006:12).

2.6.9 Parental involvement

According to Kapp (2002:142) some parents have a negative attitude towards the school, which leads to their children manifesting poor school attendance and a resistance towards the school in general and some parents generally lack interest in their children, do not supervise their schoolwork/homework and do not create adequate opportunities for communication with their children in order to bring them up effectively.

According to Engelbrecht and Jansen (2004:122) some parents may be willing to be voluntary teacher aides, either assisting in the classroom or in the preparation of material. Teachers should make sure that they avail themselves of this valuable voluntary resource and should regularly send out invitations to parents. A productive parent-teacher relationship provides greater understanding of the needs of a learner. Central to any concerted effort regarding learners with behavioural and emotional needs are parents. Parents are fundamental to the uninterrupted and continuous development of the learner between home and school, without which, the education process would be retarded (De Jong, 2000:15).

2.6.10 Adequate funds

According to Dyson and Forlin (1999:33) inclusive education requires a certain degree of capital investment (in buildings and equipment) and an even greater degree of investment in human resources (educators, managers and administrators). In June 1998 an international conference was held in Salamanca, Spain with the purpose of developing an international policy document on special needs education. The Salamanca statement reaffirmed that inclusive education is not only cost efficient but also co-effective. The most immediate challenge facing a new South African funding framework is to redress the legacy of apartheid of backlogs and inequities. However, this should be achieved within the policy of inclusive education and a commitment to the accommodation of the full diversity of learning needs and the addressing of learning difficulties (DNE, 1999:90).

2.7 SUPPORT

Support is when one receives implicit as well as explicit instruction and guidance concerning the world in which one lives. One learns to cope with one's world through language; to think, to differentiate, to see similarities and differences, as well as to understand relationships (Kapp, 2002:124).

2.7.1. Management

The school management team plays a pivotal role in directing and managing the development of an inclusive school, and hence needs competencies and knowledge in accommodating diversity as well as addressing barriers to learning and development. Where these

competencies are absent, attempts should be made to develop them. Management should provide leadership in the process of building an inclusive school (Engelbrecht & Jansen, 2003:40).

Educators as well as other staff members should be involved actively. The principal has the responsibility of encouraging positive attitudes as well as arranging collaboration, support and defining roles. The whole – school community should share responsibility for the individual learner and not only the educator (Engelbrecht & Jansen 2003:40). According to Lilly (2001:88) healthy guidance and positive support by the principal was critical in upholding the law of inclusion. Principals are central in helping alleviate personality conflicts, providing adequate planning time, providing collaboration among staff, and in allowing special education educators to spend structured and sufficient time in general education classrooms.

Daam, Beirne-Smith and Latham (2001:336) maintain that all educators should be given more training in collaboration, and special education educators, general education educators, and management should be provided with professional development to help them understand their lawful responsibilities in providing a collaborative environment in which inclusion is made available to all groups.

From a school-wide approach, Villa and Thousand (2003:20) state that school management should carry out a "systems approach" for developing successful promotion and implementation of inclusive education. They recommended a program of "visionary leadership and administrative support" complemented by redefined roles and relationships between students and professionals, and a collaborative, supportive educational

environment. Additionally, they advised that inclusive education has been most successful in school communities that already reorganized to meet the diverse needs of students.

Management should fulfill a facilitating role in this process of change, as change cannot be forced, and the fear of change must be acknowledged and faced. Management should promote openness to change, model risk-taking and reward honest attempts of creating an inclusive climate for all learners (Williams, 2000:8).

2.7.2 School governing body

The school governing body (often referred to with the acronyms of SGB or GB) is a legally constituted body governed by stipulated processes of election. The parent select five parents to represent them. The educators elect two representatives, the non-educators appoint one member. The principal is the only non-elected member who ex officio becomes a part of the governing body (DoE, 1999: 10-14). The number of representatives increases in larger schools with the condition that the parent members must always be one more than half of all the members who may vote, thus having more votes also means having the power to make all decisions at school, ie. finances, budgets funding for resources, in-service for educators, learner welfare, etc.

The school governing body also plays a pivotal role in directing and managing the development of an inclusive school, in developing a common vision for the school, and incorporating the values and principles embodied in the school's mission statement in a practical school policy (Donald, Lazarus & Lolwana 2002:152).

Advocates for improving schools need to unite and endorse the principle that "good schools are good for all students"

Engelbrecht (1999:63) suggests that school governing bodies together with the principal should create the following critical elements for creating inclusive and effective schools:

- Develop a common philosophy and a strategic plan
- Provide strong leadership
- Promote school-wide and classroom cultures that welcome, appreciate and accommodate diversity
- Develop support networks
- Use deliberate processes to ensure accountability
- Develop organized and ongoing technical assistance
- Maintain flexibility
- Examine and adopt effective teaching approaches
- Celebrate success and learn from challenges
- Be knowledgeable about the change process, but do not allow it to paralyze one.

2.7.3 School – based support teams

A school-based support team is a team of members within the school which lends support, guidance and assistance to anyone in need of help. The establishment of school-based support teams is in keeping with the notion that the capacity of the school community needs to be developed in

order to ultimately meet the individual needs of all learners. Although principals, educators, parents and learners as equal members fulfill a vital role on such teams, the team can also be strengthened by the expertise of external facilitators and consultants (Engelbrecht & Jansen 2003:98)

Changing roles require reflection, re-thinking of one's values, beliefs and attitudes towards diversity, education and learning, movement from isolation to collaboration, changing leadership roles and perceptions of leadership, and a focus on new instructional strategies to accommodate diversity. The primary function of these teams will be to put in place properly coordinated learner and educator support services that will support the learning and teaching process by identifying and addressing learner, educator and institutional needs (DNE, 2001:48).

2.7.4 Teacher support teams

Teacher support teams differ from didactic aid and assistance teams. The latter emphasize direct service delivery and support to learners, whereas teacher support teams focus on empowering teachers to develop preventative and promotive strategies in the health-promoting school framework (Engelbrecht & Jansen, 2003:99).

The teacher support team is composed of teachers in the school who act as the core support team and, where appropriate, include parents and learners. Preferably the coordinator of this team should be an educator with training and/or experience in working with learners with difficulties. This team functions as a permanent structure in the school setting, but involves different teachers, parents and learners on an ongoing basis,

based on the needs of the teachers, parents and learners themselves and the role they have to play in the process of providing support to learners (Engelbrecht, 2003:99).

Once team members have been selected, they should acquire the essential skills which will enable them to understand not only the concept of teacher support teams, but also that of small group collaborative work. They also need experience in the accuracy of describing, analyzing and principles for interviewing, selecting and conceptualizing learners' needs and classroom problems, communication goals, conducting problemsolving meetings, brainstorming strategies, procedures for assessing intervention effectiveness, and in planning how to orientate teachers in their schools with regard to the teacher support team concept (Engelbrecht, 2003:99).

2.7.5 District based support teams

District based support teams comprises of staff from provincial and regional departments of education and from special schools, and would include therapists, psychologists and school councilors. The aim would be to pool limited available resources in order to make optimum use of them. The primary function of these district based support teams will be to evaluate programmes, diagnose their effectiveness and suggest modifications (Engelbrecht & Jansen 2003:90).

2.7.6 Special schools as Resource Centers

Special schools and settings will be converted to resource centers and integrated into district based support teams so that they can provide specialized professional support in curriculum, assessment and instruction to neighborhood schools. This new role will be performed by special schools and settings in addition to the services that they provide to their existing learner base (DNE, 2001:29).

2.7.7 Community-based education support

Community-based education support should comprises of all human resources and services that could support the system and work collaboratively. Educators now need to actively participate and contribute towards shaping a vision and mission statement that reflect the values and characteristics of an inclusive learning community. The shaping process includes connecting people so that they eventually arrive at sharing beliefs. This requires a great deal of collaboration. "Collaboration is no longer an ideal to be pursued, but has become a necessity" (Engelbrecht & Green 2001:41).

2.7.8 Psychological service

Psychological services comprises of experts in the "field of education." They are the professional support personnel who works with many stakeholders to address the needs inclusive education. Their role is to ensure that there is collaboration and support to learners and educators. The role of the collaboration is at the heart of a more preventative and

developmental approach in inclusive education. White Paper 6 (DoE 2001) recommends a community-based approach to support with the establishment of institutional level as well as district-based support teams, including psychological services, as strategies to facilitate this approach. These teams will provide the full range of education support services by pooling limited available professional and other resources in order to make optimum use of them (Muthukrishna 2001:43).

Collaboration must be recognized as a critical feature for success in this approach. The collaboration itself should be inclusive, encompassing educators, principals, administrators, parents, learners, professional support personnel(psychological services) and should focus on shared decision making in governance, planning, delivery and assessment in education (Friend & Cook, 2000:59).

2.8 ATTITUDES

Attitudes are the feelings expressed in a situation, such as inclusive education. Since educators are the people who make learning possible, their own attitudes, beliefs and feelings with regard to what is happening in the schools and in the classroom are of crucial importance (Engelbrecht, 2003:47). It is generally accepted that change is challenging and may be perceived as either a threat or an opportunity. Various researchers undertaken in South Africa on challenges faced by educators' in the inclusion of ADHD learners, indicate that educators in mainstream classrooms generally express negative attitudes to mainstreaming policies (Bothma, Gravett & Swart, 2000:200-204).

Engelbrecht and Forlin (1998:3) on the other hand found that a number of South African educators in mainstream classrooms were positively disposed towards inclusive education. Educators in mainstream classrooms will be, and in many cases are, accommodating learners with disabilities, such as ADHD. Inclusive education makes additional demands on educators and educators' sense of efficacy in including ADHD learners in mainstream classes, and plays a determining role in the successful implementation of an inclusive educational policy

2.8.1 Educators

According to Bothma, Gravett and Swart (2000:200-204) there are a number of views that may influence the challenges facing educators in the inclusion of ADHD learners in the mainstream classroom.

According to Sethosa (2001:169-192) educators perceive ADHD as:

- less desirable to have in the classroom relative to other children;
- > less attentive:
- less able to organize themselves
- less able to cope with new situations;
- less socially acceptable to others;
- less able to complete assignments and tasks; and
- > less tactful than classmates.

Statistics have shown that mainstream educators lack the understanding, tolerance and knowledge of ADHD learners(Dore, 2010:9). They therefore pretend not to see the problem in the learners or sometimes shuts the learner out from class lessons (Ramphal, 2010:11). Mainstream

educators lack the expertise in handling and coping with ADHD learners. Some educators attempt to research the problem and assist such learners whilst some educators wait for support and assistance from other educators, professionals, psychologists, etc.

The National Institute of Mental Health (2010:34) has found that many ADHD learners with and without Learning Difficulty/Disability(LD) have been moved/placed in special schools following special programmes, thus being deprived of formal education (mainstream).

Educators currently seem to experience a disturbing level of uncertainty and awareness (Ainscow, 1999;24) regarding:

- > how to deal with the problem, ie. ADHD
- how to deal with diversity among learners
- how to identify needs in learners and within the school and community
- how to accomplish curriculum flexibility,
- and how to provide effective learning support
- how to involve parents and communities in the learning process?

Hence, educators need to have more open minds and work collaboratively to overcome their challenges they experience in their classrooms.

2.8.2 Learners

According to Kapp (2002:107) the child with a learning restraint, such as ADHD experiences school in a negative way because he feels that he cannot satisfy the set requirements and expectations of the school, as upheld by the teacher. Because the child feels insecure, unaccepted and unworthy, he is not prepared to explore the living and learning worldwith which the school presents him. Instead, he displays an escapist or avoidance attitude characterized by a lack of initiative, poor co-operation, poor concentration, withdrawal, anxiety and insecurity. He experiences the school's norms as threatening and meaningless and this can give rise to:

- disobedience towards the teacher,
- early school leaving,
- truancy,
- other serious behavior problems such as alcohol and drug abuse, association with youth gangs, etc.

Regarding learners with diverse needs, the traditional approach was mainly based on the so-called medical model. The prevalent view was that the problem was seated in the learner himself, and emphasis was placed on the learner's limitations and disabilities. Such learners were consequently diagnosed and labeled as "mentally retarded" (or slow learners), and they were regarded as special and inferior, in line with such an approach, the provision of education was characterized by segregation and by different educational systems for learners with and without disabilities. Such those learners were ridiculed and labeled.(Engelbrecht, 2000:102).

Educators also felt that these so-called "slow-learners' were disrupting class programmes and therefore wanted such learners to be placed in special schools. Learners felt very rejected, confused and helpless. (McCarthy, 2006:23). Hence, learners have been so set in their routine and settings, they will need reassurance, support and proper guidance for inclusive education. They will also need a sense of acceptance and understanding from educators and learners (McCarthy, 2006:25).

2.9 STIGMATIZATION

'Stigma', the prejudice and discrimination linked to individuals with mental illness has been a mainstay of psychiatric and social science research. Yet a resurgence of academic, policy and provider interest began in the mid – 1990's and culminated in 1999 with the White House Conference on Mental Health and the first ever Surgeon General's report on mental illness. Interest has continued with several programmatic efforts surrounding the recommendations of the President's New Freedom Commission on Mental Health. As a result, we now have a solid, if not complete, knowledge base about the nature levels and correlates of community-based attitudes, beliefs and behavioral dispositions towards mental disorders (American Psychiatric Association, 2007;248).

2.9.1 The effects of stigmatization on children

In separate educational facilities the child with ADHD is cut from the mainstream of the life of which is part and this inevitable leads to a degree of labeling. The American Psychiatric Association refer to research in this regard and state: "From these studies it has been concluded that negative

effects of labeling include reduced academic achievement, social isolation, lowered self-concept, lowered levels of aspirations, and job discrimination". Bernice (2007:30) maintain that a label can become a self-fulfilling prophesy. The child classified as ADHD later behaves as expected of a ADHD/handicapped person.

2.9.2 The role of educators in stigmatization

The task of the class or subject teacher with regard to the child with problems has changed radically in the past few years. Where it was customary in the past to identify the child with problems as early as possible with a view to placements in a special class or school for special education, the child is now kept in the regular class as far as possible, in agreement with the principles of normalization, integration and mainstream education (Bernice, 2007:33).

For the teacher/educator this change is far-reaching. Where he normally followed a standard curriculum, taught the children as a class and placed a high premium on the orderly progress of class routine, he is now expected to make provision for glaring individual differences such as in learning styles or achievements (Ainscow, 2000:101-105). The educator should not only be able to identify problems but to render aid up to a certain level. He should therefore be able to set individual objectives and adjust the content and the rate of progress expected. In addition, this may mean that such children should receive attention on a one-to-one basis. Gipps (2000::X1) summarize the situation as follows:

"This highly skilled professional task was now to be seen first and foremost as the responsibility of the class teacher, perhaps helped by a support service, the same class teacher who in the past had usually been encouraged to pass these children on to someone else for intervention".

2.10. SUMMARY

ADHD is characterized by poor attention and concentration, impulsiveness, motor hyperactivity before the age of seven years, and must persist for at least six months. Children with ADHD will usually have a short attention span and are easily distracted, may also be hyperactive and impulsive. Statistics have shown that there are learners with ADHD with learning difficulties and without learning difficulties.

Statistics have also shown that ADHD is more prevalent in boys than in girls. Learners with ADHD undergo many neurological, genetic, psychological, health, family, environmental and educational factors. However, there are many interventions that aides in the treatment of such learners. Some of which are medical treatment, dietary control, psychological treatment and behavior therapy.

Educators and parents dealing with ADHD learners need to have high levels of understanding, knowledge and tolerance towards them. There are many support structures and guidelines to assist and guide educators and parents to cope and handle such learners. Educators and parents can work towards collaborative consultation to overcome the challenges/difficulties they face with ADHD learners.

The next chapter will focus on the research methodology used in the investigation.

CHAPTER 3

PLANNING OF THE EMPIRICAL RESEARCH

3.1. INTRODUCTION

In the preceding chapter educators' challenges towards the inclusion of ADHD learners were described by means of literature research. The literature study has revealed numerous factors which may influence educators' challenges towards inclusive education for ADHD learners. Mainstream educators feel that they are not adequately trained and hence they lack the abilities to cope with a diversity of learners, which includes ADHD learners. Lack of relevant knowledge and experience of learners with special educational needs also affects the educators' challenges towards inclusive education. In order to gain insight into educators' challenges towards inclusive education and their perceptions of the success of each education, a research instrument was developed to provide the necessary data. This research instrument comprised a questionnaire administered to 110 primary school educators in the Mafukezela Gandhi district on the North Coast of KwaZulu Natal.

3.2. PREPARATION FOR THE RESEARCH

3.2.1. Permission

With the aim of administering the questionnaire to educators it was required to first seek permission from the KwaZulu Natal Department of Education and Training (KZN – DET). A letter to seek the necessary

permission was drafted (Annexure B) and directed to the Mafukuzela Gandhi Circuit Manager, being the area where the research sample would be selected. A copy of the questionnaire (Annexure A) was sent with the letter for approval by the department. After permission was granted by the Circuit Manager for the intended research to be undertaken (Annexure C) the researcher visited the principals of the randomly selected schools with the letter of approval in order to seek their permission to administer the questionnaire to the educators at the schools.

3.2.2. Selection of respondents

Twenty schools were randomly selected from the list of primary schools in the Mafukezela Gandhi District on the KwaZulu North Coast, however the names of schools had to be with-held due to the sensitivity and confidentiality of the research. The district comprises predominantly of semi-urban areas. From each school five to ten educators were randomly selected. This provided the researcher with a randomly selected sample of 110 educators as respondents, ie. 46 male educators and 64 female educators, which can be considered as an adequate sample for reliable data analysis by means of descriptive statistics.

3.3. THE RESEARCH INSTRUMENT

3.3.1. Quantitative research

The purpose of a research design is to provide the most valid and accurate answers possible to research questions. McMillan and Schumacher (1998:34) say that since there are many types of research

questions and many types of designs, it is important to match the design with the questions. Quantitative research methods collect data to be translated into a statistical format. The responses of respondents to the questions in a questionnaire are recorded in coded format, presented in frequency tables, graphs and/or chart formats, analyzed and interpreted (De Vos, 2001:208). The simplest form of data analysis is univariate analysis, which means that one variable is analyzed, mainly with the view to describing that variable (Patricia & Pastor, 2010:6). It can thus be stated that where a first time researcher requires information, quantitative data collection and analysis seem to be the most suitable method. The researcher selected the quantitative approach because:

- it is more formalized;
- > is better controlled:
- has a range that is more exactly defined, and;
- uses methods relatively close to the physical sciences.

3.3.2. The questionnaire as research instrument

According to Leedy and Ormrod (2001:5) a questionnaire is a set of questions dealing with some topic or related group of topics, given to a selected group of individuals for the purpose of gathering data on a problem under consideration. Edyburn (1999:190) say the questionnaire is a prepared question form submitted to certain persons (respondents) with a view to obtaining information.

Monteith, Westhuizen and Nieuwoudt (2002:20) have shown that the measuring instrument has the greatest influence on the reliability of

research data. The characteristics of measurements are best controlled by the careful construction of the instrument. There is, however, insufficient appreciation for the fact that a questionnaire should be constructed according to certain principles (De Vos, 2001:89).

A well-designed questionnaire is the culmination of a long process of planning the research objective, formulating the problem, generating the hypothesis, etc. A questionnaire is not simply thrown together. A poorly designed questionnaire can invalidate any research results. notwithstanding the merits of the sample, the field workers and the statistical techniques (Leedy & Ormrod, 2001:277). In their criticism of questionnaires, Mills (2000:102) object to poor design rather than to questionnaires as such. A well-designed questionnaire can boost the reliability and validity of the data to acceptable tolerances (Ormrod, 1999:126).

It therefore stands to reason that questionnaire design does not take place in a vacuum. According to Edyburn (1999:191) the length of individual questions, the number of response options, as well as the format and wording of questions are determined by the following:

- ➤ The choice of the subject to be researched.
- > The aim of the research
- The size of the research sample.
- > The method of data collection.
- The analysis of the data.

Against this background the researcher can now look at the principles that determine whether a questionnaire is well-designed. It is thus necessary to draw a distinction between questionnaire content, question format, question order, type of questions, formulation of questions and validity and reliability of questions.

3.3.3. Construction of the questionnaire

Questionnaire design is an activity that should not take place in isolation. The researcher should consult and seek advice from specialists and colleagues at all times during the construction of the questionnaire (Lei & Young, 1998:134). Questions to be taken up in the questionnaire should be tested on people to eliminate possible errors. A question may appear correct to the researcher when written down but can be interpreted differently when posed to another person. There should be no hesitation in changing questions several times before the final formulation whilst keeping the original purpose in mind. The most important point to be taken into account in questionnaire design is that it takes time and effort and that the questionnaire will be re-drafted a number of times before being finalized. A researcher must therefore ensure that adequate time is budgeted for in the construction and preliminary testing of the questionnaire. All these were taken into consideration by the researcher during the designing of the questionnaire for this investigation.

An important aim in the construction of the questionnaire for this investigation was to present the questions as simply and straightforwardly as possible. The researcher further aimed to avoid ambiguity, vagueness, bias, prejudice and technical language in the questions.

The aim of the questionnaire (Annexure A) was to obtain information regarding educators' challenges towards the inclusion of ADHD learners in mainstream classrooms. The questions were formulated to establish educators' responses with regard to the following:

- Educators' challenges towards inclusive education
- ➤ The requirements for the successful implementation of inclusive education.

The questionnaire was sub-divided into the following sections:

- Section one, which dealt with the biographical information of t he respondents, namely primary school educators, and consisted of questions 1 to 9.
- Section two and three of the questionnaire consisted of closedended questions. The respondents were requested to indicate their responses to the statements pertaining to educators' challenges towards the inclusion of ADHD learners in the mainstream class and the successful inclusion thereof. The educators had to state their views concerning the latter in three ways, namely agree, disagree and uncertain.

The questions were grouped as follows:

 Section two contained questions concerning educators' challenges in the inclusion of ADHD learners in the mainstream classroom. Section three consisted of questions relating to the requirements for the successful inclusion of ADHD learners.

3.3.4. Characteristics of a good questionnaire

Throughout the construction of the questionnaire the researcher had to consider the characteristics of a good questionnaire in order to meet the requirements necessary for the research instrument to be reliable. The characteristics of a good questionnaire that were considered by the researcher are, according to Leedy & Ormrod (2001:), *inter alia*, the following:

- ➤ It has to deal with a significant topic, one the respondent will recognize as important enough to warrant spending his or her time on. The significance should be clearly and carefully stated on the questionnaire and in the accompanying letter.
- It must seek only that information which cannot be obtained from other sources.
- ➤ It must be as short as possible, but long enough to acquire the essential data. Long questionnaires frequently find their way into the wastepaper basket.
- Questionnaires should be attractive in appearance, neatly arranged and clearly duplicated or printed.
- ➤ Directions for a good questionnaire must be clear and complete and important terms clearly defined.

- ➤ Each question has to deal with a single concept and should be worded as simply and straightforwardly as possible.
- ➤ Different categories should provide an opportunity for easy, accurate and unambiguous responses.
- ➤ Each question must be of a simple, clear and unambiguous language.
- Objectively formulated questions with no leading suggestions should render the desired responses. Leading questions are just as inappropriate in a questionnaire as they are in a court of law.

Questions should be presented in a proper psychological order, proceeding from general to more specific and sensitive responses. An orderly grouping helps respondents to organize their own thinking so that their answers are logical and objective. It is preferable to present questions that create a favorable attitude before proceeding to those that are more intimate or deliberate in nature. Annoying and/or embarrassing questions should be avoided if possible.

3.3.5. Advantages and disadvantages of the questionnaire

Data can be gathered by means of a structured questionnaire in, *inter alia*, the following ways: a written questionnaire that is mailed, delivered or handed out personally; personal interviews or telephone interviews (Lei & Young, 1998:138). Each mode has specific advantages and disadvantages which the researcher needs to evaluate for their suitability

to the research question and the specific target population being studied, as well as relative cost.

The researcher used the written questionnaire as research instrument taking into consideration the following advantages:

(1) Advantages of the written questionnaire

The written questionnaire as a research instrument to obtain information has the following advantages (Ormrod, 1999:128):

- ➤ Affordability is the primary advantage of written questionnaires because it is the least expensive means of data gathering.
- Written questionnaires preclude possible interviewer bias. The way the interviewer asks questions and also the interviewer's general appearance or interaction may influence respondents' answers. Such biases can be completely eliminated with a written questionnaire.
- ➤ A questionnaire permits anonymity. If it is arranged such that responses are given anonymously, this will increase the researcher's chances of receiving responses which genuinely represent a person's beliefs, feelings, opinions or perceptions.
- They permit a respondent a sufficient amount of time to consider answers before responding.

- Questionnaires can be given to many people simultaneously, that is to say a large sample of the target population can be reached.
- They provide greater uniformity across the measurement situations than do interviews. Each person responds to exactly the same questions because standard instructions are given to the respondents.
- Generally the data provided by questionnaires can be more easily analyzed and interpreted than the data obtained from verbal responses.
- A respondent may answer questions of a personal or embarrassing nature more willingly or frankly on a questionnaire than in a face-toface situation with an interviewer who may be a complete stranger. In some cases it may happen that respondents report less than expected and make more critical comments in a mail questionnaire.
- Questions requiring considered answers rather than immediate answers could enable respondents to consult documents in the case of the mail questionnaire approach.
- Respondents can complete questionnaires in their own time and in a more relaxed atmosphere.
- Questionnaire design is relatively easy if the set guidelines are followed.

➤ The administering of a questionnaire and the coding, analysis and interpretation of data can be done without any special training

(2) Disadvantages of the questionnaire

The researcher is also aware of the fact that the written questionnaire has important disadvantages. According to Booth (2000:94), the disadvantages of the questionnaire are *inter alia*, the following:

- Questionnaires do not provide the flexibility of interviews. In an interview an idea or comment can be explored. This makes it possible to gauge how people are interpreting the question. If questions asked are interpreted differently by respondents, the validity of the information obtained is jeopardized.
- ➤ People are generally better able to express their views verbally than in writing.
- Questions can be answered only when they are sufficiently easy and straightforward to be understood with the given instructions and definitions.
- The mail questionnaire does not make provision for obtaining the views of more than one person at a time. It requires uninfluenced views of one person only.
- ➤ Answers to written questionnaires must be seen as final. Rechecking of responses cannot be done. There is no chance of

investigating beyond the given answer for a clarification of ambiguous answers. If respondents are unwilling to answer certain questions, nothing can be done about it because the mail questionnaire is essentially inflexible.

- ➤ In a written questionnaire the respondent examines all the questions at the same time before answering them and the answers to the different questions can therefore not be treated as "independent."
- Researchers are unable to control the context of question answering and specifically, the presence of other people. Respondents may ask friends or family members to examine the questionnaire or comment on their answers, causing bias if the respondent's own private opinions are desired.
- ➤ Written questionnaires do not allow the researcher to correct misunderstandings or answer questions that the respondents may have. Respondents might answer questions incorrectly or not at allude to confusion or misinterpretation.

3.3.6 Validity and reliability of the questionnaire

There are two concepts that are of critical importance in understanding issues of measurement in social science research, namely validity and reliability (Leedy & Ormrod, 2001:98). All too rarely do questionnaire designers deal consciously with the degree of validity and reliability of their instrument. This is one of the reasons why so many questionnaires are

lacking in these two qualities (Fetterman, 1998:22-26). Questionnaires have a very limited purpose. In fact, they are often one-time data gathering devices with a very short life, administered to a limited population. There are ways to improve both the validity and reliability of questionnaires. Basic to the validity of a questionnaire is asking the right questions phrased in the least ambiguous way. In other words, do the items sample a significant aspect of the purpose of the investigation? Terms must therefore be clearly defined so that they have the same meaning to all respondents (Kontos, 1999:363-366).

Ormrod (1999:131) mentions the fact that although reliability and validity are two different characteristics of measurement, they "shade into each other." They are two ends of a continuum but at points in the middle it is difficult to distinguish between them. Validity and reliability are especially important in educational research because most of the measurements attempted in this area are obtained indirectly. Researchers can never guarantee that an educational or psychological measuring instrument measures precisely and dependably what it is intended to measure (Edyburn, 1999:198). It is essential, therefore to assess the validity and reliability of these instruments. Researchers must have a general knowledge as to what validity reliability are and how one goes about validating a research instrument and establishing its reliability.

(1) Validity of the questionnaire

Leedy and Ormrod (2001:103) define validity as the extent to which a measuring instrument satisfies the purpose for which it was constructed. It also refers to the extent to which it correlates with some criterion external

to the instrument itself. Validity is that quality of a data-gathering instrument or procedure that enables it to determine what it was designed to determine. In general terms validity refers to the degree to which an instrument succeeds in measuring what it has set out to measure.

Monteith, Westhuizen & Nieuwoudt (2002:44-45) distinguish between three types of validity:

- Content validity, where content and cognitive processes included can be measured. Topics, skills and abilities should be prepared and items from each category randomly drawn.
- ➤ Criteriun validity, which refers to the relationship between scores on a measuring instrument and an independent variable (criterion), believed to measure directly the behavior or characteristic in question. The criterion should be relevant, reliable and free bias and contamination.
- Construct validity, where the extent to which the test measures a specific trait or construct is concerned, for example, intelligence, reasoning ability, attitudes, etc.

The validity of the questionnaire indicates how worthwhile a measure is likely to be in a given situation. Validity shows whether the instrument is reflecting the true story, or at least something approximating the truth. A valid research instrument is one that has demonstrated that it detects some "real" ability, attitude or prevailing situation that the researcher can identify and characterize (Mills, 2000:141). If the ability or attitude is itself

stable, and if a respondent's answers to the items are not affected by other unpredictable factors then each administration of the instrument should yield essentially the same results (Edyburn, 1999:208).

The validity of the questionnaire as a research instrument reflects the sureness with which conclusions can be drawn. It refers to the extent to which interpretations of the instrument's results, other than the ones the researcher wishes to make can be ruled out. Establishing validity requires that the researcher anticipates the potential arguments that skeptics might use to dismiss the research results (Leedy & Ormrod, 2001:106).

The researcher employed the questionnaire as an indirect method to measure educators' challenges in inclusive education. Because of the complexity of the respondents' attributes one is never sure that the questionnaire devised will actually measure what it purports to measure. Items in the questionnaire cannot be measured like height, mass, length or size. From the interpretation of the results obtained in this investigation and the sureness with which conclusions could be drawn, the researcher is convinced that the questionnaire, to a great extent, did measure that which it was designed for.

(2) Reliability of the questionnaire

According to Strauss and Corbin (1998:212), reliability is a statistical concept and relates to consistency and dependability; that is consistency of obtaining the same relative answer when measuring instrument is one that, if repeated under similar conditions, would present the same result or a near approximation of the initial result.

Ormrod (1999:131) distinguish between the following types of reliability:

- ➤ Test-retest reliability (coefficient of stability) consistency estimated by comparing two or more repeated administrations of the measuring instrument. This gives an indication of the dependability of the results on one occasion and on another occasion.
- ➤ Internal consistency reliability this indicates how well the test items measure the same thing.
- Split-half reliability by correlating the results obtained from two halves of the same measuring instrument, one can calculate the split-half reliability.

In essence, reliability refers to consistency, but consistency does not guarantee truthfulness. The reliability of the question is no proof that the answers given reflect the respondent's true feelings (Mills,2000;142). A demonstration of reliability is necessary but not conclusive evidence that an instrument is valid. Reliability refers to the extent to which measurement results are free of unpredictable kinds of error. Sources of error that effect reliability are, *inter alia*, the following (Lei & Young, 1998:136):

➤ Fluctuations in the mood or alertness of respondents because of illness, fatigue, recent good or bad experiences, or temporary differences amongst members of the group being measured.

- ➤ Variations in the conditions of administration between groups. These range from various distractions, such as unusual outside noise to inconsistencies in the administration of the measuring instrument, such as omissions in verbal instructions.
- Differences in scoring or interpretation of results, chance differences in what the observer notices and errors in computing scores.
- ➤ Random effects by respondents who guess or check off attitude alternatives without trying to understand them.

When the questionnaire is used as an empirical research instrument there is no specific method, for example the "test-retest" method to determine the reliability of the questionnaire. Therefore it will be difficult to establish to what extent the answers of the respondents were reliable. The researcher, however, believes that the questionnaire in this investigation were completed with the necessary honesty and sincerity required to render the maximum possible reliability. Frankness in responding to questions was made possible by the anonymity of the questionnaire. In the coding of the responses to the questions it was evident that questionnaires were completed with the necessary dedication.

3.4. PILOT STUDY

A pilot study is an abbreviated version of a research project in which the researcher practices or tests the procedures to be used in the subsequent full-scale project (De Vos, 2001:178). For the purpose of the pilot study in

this research project ten educators were selected from amongst the researcher's colleagues and educator friends. The pilot study is a preliminary or "trial run" investigation using similar questions and similar subjects as in the final survey. Leedy & Ormrod (2001,297) say the basic purpose of a pilot study is to determine how the design of the subsequent study can be improved and to identify flaws in the measuring instrument . A pilot study gives the researcher an idea of what the method will actually look like in operation and what effects (intended or not) it is likely to have. In other words, by generating many of the practical problems that will ultimately arise, a pilot study enables the researcher to avert these problems by changing procedures, instructions and questions.

The number of participants in the pilot study or group is normally smaller than the number scheduled to take part in the final survey. Participants in the pilot study and the sample for the final study must be selected from the same target population. For the purpose of this study the researcher conducted a pilot run on her colleagues.

According to Ormrod (1999:66) the following are the purposes of a pilot study, and these were also the aim of the researcher in this survey:

- ➤ It provided the researcher with the opportunity of refining the wording and ordering the layout, which helped to prune the questionnaire to a manageable size.
- ➤ It permitted a thorough check of the planned statistical and analytical procedures, thus allowing an appraisal of their adequacy in treating the data.

- ➤ It greatly reduced the number of treatment errors because unforeseen problems revealed in the pilot study resulted in redesigning the main study.
- ➤ It saved the researcher major expenditures in time and money on aspects of the research, which would have been unnecessary.
- Feedback from other persons involved was made possible and led to important improvements in the main study.
- ➤ The approximate time required to complete the questionnaire was established in the pilot study.
- Questions and/or instructions that were misinterpreted were reformulated.

Through the use of the pilot study as "pre-test" the researcher was satisfied that the questions asked complied adequately with the requirements of the study.

3.5. ADMINISTRATION OF THE QUESTIONNAIRE

If properly administered the questionnaire is the best available instrument for obtaining information from widespread sources or large groups simultaneously (Mills, 2000:56). The researcher personally delivered questionnaires to the selected schools in the Mafukuzela Gandhi District and collected them again after completion. This method of administration facilitated the process and the response. A satisfactory return rate of 73%

was obtained with 110 questionnaires completed and collected out of a distributed 150.

3.6. THE PROCESSING OF THE DATA

Once data was collected it had to be captured in a format, which would permit analysis and interpretation. This involved the careful coding of the 110 questionnaires completed by the randomly selected educators. The coded data was subsequently transferred onto computer spreadsheet using Quantro Pro 6.0 programme. The coded data was analysed using the same programme in order to interpret the results by means of descriptive statistics.

(1) Descriptive statistics

Descriptive statistics serve to describe and summarize observations (Venketsamy, ,2000:120). Frequency tables, histograms and polygons are useful in forming impressions about the distribution of data.

According to Leedy and Ormrod (2001:203) frequency distribution is a method to organize data from questionnaires to simplify statistical analysis. A frequency table provides the following information:

- it indicates how many times a particular response appears on the completed questionnaires.
- ➤ It provides percentages that reflect the number of responses to a certain question in relation to the total number of responses.

➤ The arithmetic mean (average) can be calculated by adding all the scores and dividing it by the number of scores.

3.7. LIMITATIONS OF THE INVESTIGATION

This investigation was constrained by a number of factors. The following are likely that might have influenced the reliability and validity of the questionnaire:

- ➤ Although anonymity was required in the questionnaire the possibility exists that, because of the educators' cautiousness, they might not have been frank and truthful in their responses.
- ➤ The sensitive nature of items in the questionnaire might have elicited false or misleading responses that influenced the reliability of the results.
- ➤ To restrict the investigation to manageable proportions, the researcher limited the study to educators of schools which are easily accessible.

3.8. SUMMARY

In this chapter the planning and design of the empirical research was discussed and a comprehensive description of the questionnaire as research instrument was given.

In the following chapter the data obtained from the completed questionnaires will be analyzed and interpreted.

CHAPTER 4

PRESENTATION AND ANALYSIS OF THE RESEARCH DATA

4.1. INTRODUCTION

In this chapter, the data that was collected from the completed questionnaires will be analyzed, findings will be interpreted and some comments will be presented. The data comprised the respondents biographical information and their perceptions of the challenges facing educators in the successful inclusion of ADHD learners in the mainstream classroom. Respondents correctly completed one hundred and ten (110) questionnaires.

4.2. DESCRIPTIVE STATISTICS

Leedy and Ormrod (2001:5) state that the purpose of research is to gain insight into a situation, phenomenon, community or person. Descriptive research is one of the methods of research used to study a person or persons scientifically in the educational situation. It attempts to describe the situation as it is, thus there is no intervention on the part of the researcher and therefore, no control. Venketsamy (2000:125) says descriptive studies do not set out with the idea of testing hypotheses about relationships, but want to find the distribution of variables. In this study homothetic descriptive research was employed with the aim of describing the challenges facing educators towards the inclusion of ADHD learners in the mainstream classroom.

The researcher was primarily concerned with the nature and degree of existing situations in mainstream schools.

4.2.1 Gender of respondents

Table 1: Frequency distribution according to the gender of respondents

| Gender | | Frequency | % |
|--------|--------|-----------|------|
| 1 | Male | 46 | 42% |
| 2 | Female | 64 | 58% |
| | TOTAL | 110 | 100% |

Table 1 shows that the majority (58%) of the respondents in the research sample are females. Possible reasons for the finding are the following:

- There were more females than males in the teaching profession. According to the ELRC (2005:10), schools in KwaZulu Natal are overstaffed by 1500 female educators especially in post level one. In terms of the Department of Education's profile as at 1 April 2005, there are 37.4% males and 62% females in the teaching profession (DoE, 2005:6). Hence the research sample is in line with the KwaZulu Natal profile as at 1 April 2005.
- ➤ The research sample involved only primary schools (cf. 4.2.8). Primary schools tend to appoint more female than male educators, as female educators always tend to reward good performance from learners (Pintrich & Schunk, 2002:311).

- ➤ A female educator represents a motherly figure and is more acceptable by younger children as *in loco parentis* (Kapp, 2002:37).
- ➤ Visagie (2009:24) believes that female educators have special qualities to care and notice unusual behaviour in junior primary learners.
- ➤ Also, female educators have chosen education as their career because it affords them more time to be with their own children and attend to family demands (Naidoo, 2006:80).

4.2.2 Age of respondents

Table 2: Frequency distribution according to the age group of the respondents

| | Age group | Frequency | % |
|---|-------------|-----------|------|
| 1 | 20-25 years | 9 | 8% |
| 2 | 26-30 years | 8 | 7% |
| 3 | 31-35 years | 15 | 14% |
| 4 | 36-40 years | 26 | 24% |
| 5 | 41-45 years | 29 | 26% |
| 6 | 46-50 years | 10 | 9% |
| 7 | 51-55 years | 8 | 7% |
| 8 | 56-60 years | 5 | 5% |
| | TOTAL | 110 | 100% |

Half of the respondents (50%) that partook in the research were in the age group of 36 – 45 years (Table 2). The table also showed that nearly a third

(29%) of the respondents were 35 years and younger. The possibility exists that younger educators may stay in the education profession for a longer period of time to gain more experience with the aim of possible promotion. Younger educators are probably more amenable to the changes required in an inclusive classroom ie. younger educators possibly trained in more recent methods, however they lack the understanding and experience of teaching ADHD learners in an inclusive classroom (Engelbrecht & Jansen, 2003:104).

4.2.3 Qualifications

Table 3: Frequency distribution according to the qualifications of respondents

| | Qualifications | Frequency | % |
|---|----------------------------|-----------|------|
| 1 | Academic qualification | 28 | 25% |
| 2 | Professional qualification | 61 | 55% |
| 3 | Academic & Professional | 21 | 20% |
| | qualification | | |
| | TOTAL | 110 | 100% |

From Table 3 it emerges that the minority (20%) of the respondents possess academic and professional qualifications that by many are perceived as being better qualified for the teaching profession. However, the finding that most (55%) of the respondents have diplomas and certificates, professional qualifications, may be because they are teaching in primary schools. The contents (curricula) of teaching diplomas and certificates are more practical than theoretically orientated degree courses and therefore more appropriate for teaching younger primary school children, thus providing them with positive attributes and hence makes them excellent educators (Kruger, Du

Plessis, Maseko, 2008:4). In order to be an effective educator a person should have obtained the most suitable qualifications.

4.2.4 Years in the teaching profession

Table 4: Frequency distribution according to the respondents years of completed service in the teaching profession

| | Completed years of service | Frequency | % |
|---|----------------------------|-----------|------|
| 1 | 0 - 5 years | 18 | 16% |
| 2 | 6 – 10 years | 26 | 24% |
| 3 | 11 – 15 years | 16 | 15% |
| 4 | 16 – 20 years | 18 | 16% |
| 5 | 21 – 25 years | 11 | 10% |
| 6 | 26 – 30 years | 13 | 12% |
| 7 | 30 years and more | 8 | 7% |
| | TOTAL | 110 | 100% |

Table 4 showed that the majority of respondents (60%) in the research sample had more than 10 years teaching experience. Experience together with adequate training is needed for the responsibilities and the demands imposed on educators (Snyman & Engelbrecht, 1999:i). The experience and training an educator has, the more confidence and expertise he would have acquired to be an effective educator. Engelbrecht (2000:25) suggests continuous professional development and experience are pre-requisites for educators to keep up with the rapid pace of change in knowledge, advancement of technology and increasing demands imposed upon educators.

Research has also shown that experience is a pre-requisite for the successful implementation of inclusive education (cf. 2.2.2.).

4.2.5 Post level of the respondents

Table 5: Frequency distribution according to the post level of the respondents

| Post level | | Frequency | % |
|------------|-------------------------|-----------|------|
| 1 | Principal | 9 | 8% |
| 2 | Deputy principal | 6 | 5% |
| 3 | HOD | 15 | 14% |
| 4 | Educator (Post level 1) | 80 | 73% |
| | TOTAL | 110 | 100% |

According to the frequency distribution in Table 5 nearly three quarters (73%) of the respondents were level one educators. This finding is consistent with the composition of educators in most schools. According to Chetty (2004:113) level one educators generally comprise a little over seventy percent of the teaching personnel at schools.

Level one educators are the ones who have the most amount of interaction with learners, especially ADHD learners, thus placing them in quite a challenging position concerning inclusive education (DoE,2005:5).

4.2.6 Type of post

Table 6: Frequency distribution according to the type of post held by respondents

| Type of post | | Frequency | % | |
|--------------|----------------|-----------|------|--|
| 1 | Permanent | 80 | 73% | |
| 2 | Temporary | 21 | 19% | |
| 3 | Governing Body | 9 | 8% | |
| TOTAL | | 110 | 100% | |

Table 6 showed that the majority of the respondents (73%) in the research sample were on the permanent staff. This high percentage can be seen as a favourable situation in a school. To be in the permanent capacity, staff has the following advantages (Chetty, 2004:114):

- Permanent staff are entitled to a housing subsidy, which enables them to buy a house or flat.
- They can provide for their retirement, as they are contributors to a pension fund.
- They can join a medical aid benefit scheme to which the employer contributes a percentage of the monthly premium.

The above fringe benefits may act as motivators in their teaching and commitment to inclusive education.

4.2.7 Area in which schools are situated

Table 7: Frequency distribution according to the area in which respondents' schools are situated

| | Area in which school is situated | Frequency | % | |
|-------|----------------------------------|-----------|------|--|
| 1 | Urban area | 31 | 28% | |
| 2 | Semi-urban area | 49 | 45% | |
| 3 | Rural area | 30 | 27% | |
| TOTAL | | 110 | 100% | |

The larger percentage (45%) selected for administration of the questionnaire were situated in semi-urban areas. The Mafukuzela Gandhi District from which the primary schools for the research sample were randomly selected is situated on the North Coast of KwaZulu Natal and includes large semi-urban areas.

The geographical location of Verulam is classified as semi-urban, as there are many indigent communities that surround the schools even from informal dwellings, thus 45% of the educators have indicated that their schools are semi-urban. ADHD learners will therefore need to be transported to their schools.

4.2.8 Type of school

Table 8: Frequency distribution according to the classification of respondents' schools

| | School | Frequency | % |
|---|-----------------|-----------|------|
| 1 | Junior primary | 58 | 53% |
| 2 | Senior primary | 36 | 33% |
| 3 | Combined school | 16 | 14% |
| | TOTAL | 110 | 100% |

In accordance with the focus of the research the schools where the questionnaires were administered is composed of junior and senior primary schools.

According to the aim of the research, the investigation of ADHD learners was aimed at junior and senior primary schools in Verulam, as the initial observations and identifications of ADHD learners takes place in these schools.

4.2.9 <u>Challenges facing educators' in the inclusion of ADHD</u> <u>learners</u>

Table 9: Frequency distribution according to the challenges facing educators in the inclusion of ADHD learners in the mainstream classroom

| Question No | Agree | Disagree | Uncertain | Total |
|-------------|-------|----------|-----------|-------|
| 2.1 | 101 | 7 | 2 | 110 |
| | 92% | 6% | 2% | 100% |
| 2.2 | 29 | 77 | 4 | 110 |
| | 26% | 70% | 4% | 100% |
| 2.3 | 78 | 22 | 10 | 110 |
| | 71% | 20% | 9% | 100% |
| 2.4 | 40 | 64 | 6 | 110 |
| | 37% | 58% | 5% | 100% |
| 2.5 | 80 | 22 | 8 | 110 |
| | 73% | 20% | 7% | 100% |
| 2.6 | 84 | 20 | 6 | 110 |
| | 77% | 18% | 5% | 100% |
| 2.7 | 79 | 25 | 6 | 110 |
| | 72% | 23% | 5% | 100% |
| 2.8 | 92 | 12 | 6 | 110 |
| | 84% | 11% | 5% | 100% |
| 2.9 | 58 | 42 | 10 | 110 |
| | 53% | 38% | 9% | 100% |
| 2.10 | 81 | 24 | 5 | 110 |
| | 74% | 22% | 4% | 100% |
| 2.11 | 71 | 24 | 15 | 110 |
| | 64% | 22% | 14% | 100% |
| 2.12 | 79 | 22 | 9 | 110 |
| | 72% | 20% | 8% | 100% |
| 2.13 | 78 | 20 | 12 | 110 |
| | 71% | 18% | 11% | 100% |
| 2.14 | 76 | 24 | 10 | 110 |
| | 69% | 22% | 9% | 100% |
| 2.15 | 79 | 21 | 10 | 110 |
| | 72% | 19% | 9% | 100% |
| 2.16 | 75 | 30 | 5 | 110 |
| | 68% | 28% | 4% | 100% |
| 2.17 | 76 | 28 | 6 | 110 |
| | 69% | 26% | 5% | 100% |
| 2.18 | 78 | 23 | 9 | 110 |
| | 71% | 21% | 8% | 100% |

The responses in Table 9 reflected the respondents views regarding the challenges facing primary school educators in the inclusion of ADHD learners. In the following discussion the frequency distribution of the responses from Table 9 will be analyzed, interpreted and commented upon.

Acceptance of ADHD learners (2.1.): Successful inclusive education expects mainstream educators to accept ADHD learners like any other "normal" child (Green, 2001:6). The majority of the respondents (92%) supported this statement. Green (2001:4) maintains that inclusion is unconditional and the program must fit the child rather than children fitting the program. The inclusive classroom should foster acceptance, tolerance and caring in all learners. The educator has the responsibility of creating and maintaining a classroom atmosphere, which nurtures the personal, cognitive and social development of all learners (cf. 2.6.4).

Changes in teaching methods (2.2): Most of the respondents (70%) in the research sample said that to educate ADHD learners there must be fundamental changes to the teaching method in mainstream classes. According to Moore and Gilbreath (1998:9) educators felt threatened by having to change their tried and tested teaching methods and having to cope with too much diversity in their classroom (cf. 2.6.5).

ADHD learners require more time (2.3): The majority of the respondents (71%) admitted that educators had to spend more time attending to the needs of learners with ADHD. According to Engelbrecht and Jansen (2004:33), educators are very concerned about the "normal" learner in their classroom. The general sentiment appeared to be that the "normal" learners in the

system would be neglected due to the educators' time and effort being consumed by the ADHD learners in their class (cf. 2.6.6).

Negative feelings towards ADHD learners (2.4): Most of the educators (58%) that partook in the research said they did not experience negative feelings towards ADHD learners because of inclusion. A positive feeling towards inclusive education is closely tied to educators' feelings of competency and effectiveness in educating learners with disabilities (Moore & Gilbreath, 1998:10).

Recent research at international and national level shows that school educators are by far not unanimous in their views of inclusive education (cf. 2.8.1). In fact, relatively high percentages of school principals and teachers report negative feelings and attitudes towards inclusion (Engelbrect, 2000:32).

Learner diversity (2.5): Nearly three quarters (73%) of the respondents indicated that they experienced difficulty in meeting the needs of learner diversity in an inclusive class. The White Paper on special needs and education support services points out that ordinary educators are now challenged with the task to accommodate diversity and to prevent and address barriers to learning and development (DNE, 1998:36). Educators perhaps felt inadequately prepared and therefore unable to cope with ADHD learners in the classroom (DNE, 1999:10).

In research by Lomofsky, Roberts and Mvambu (1999:71) it was found that a number of South African educators are already accommodating learners with a diverse range of needs. They work with learners of different ages and stages of development, cultural and linguistic diversity and a wide range of

ability/disability and special educational needs. According to their findings a low percentage of educators (20%) were able to meet the needs of learners diversity (cf. 2.6.8).

Networking (2.6): Networking refers to the interaction between mainstream schools. The majority of the respondents (77%) indicated that networking with educators in similar circumstances is essential for successful interaction. Educators felt that there was a need to work collaboratively with other mainstream schools so that they could overcome some of their common challenges. According to Engelbrecht and Jansen (2003:51) networking with other mainstream schools was essential to serve the needs in the classroom and provide support to teachers as well. A support network should take place to brainstorm, problem-solve or perform any other activity that is required.

Class size (2.7): According to Clarke (1999:9) in the current class sizes of 38 – 40 learners to one educator, ADHD learners would not receive anywhere near the kind of individual attention they need. The majority of the respondents (72%) supported the statement that educators felt they would not have the time to give adequate individual attention to ADHD learners, because of the large number of learners in their classes (cf. 2.6.8).

Training (2.8): The majority of the respondents (84%) in the research sample agreed that educators need more training to educate ADHD learners. According to Snyman and Engelbrecht (1999:15) educators need to receive in-service education and training to gain the necessary knowledge, skills and values to cope with learners of varying abilities and diverse needs (cf. 2.6.2).

According to the Department of Education (2000:6) the objective is not to train subject educators as specialized remedial educators but to provide information about problems that may be encountered and how these may be solved. The successful implementation of inclusive education will depend on in-service training and ongoing retraining (educator development of all educators). This training should have a reflective and research approach, exploring innovatory ways of responding to day-today concerns in the workplace (DoE, 2001:28).

Identification of ADHD learners (2.9): The larger percentage (53%) of the respondents agreed that they experienced difficulty identifying ADHD learners According to Visagie (2009:24) parents and very often teachers are the first to notice something wrong with the learner, however they have difficulty identifying the learner as ADHD. The learner is therefore referred to the psychologist, neurologist or pediatrician to make a correct diagnosis (cf. 2.6.1).

Although in many cases, the teacher is unable to identify the child's problems and its ramifications, he remains an important key to, and is usually the start of, the identification process. The teacher is usually the one who notices developmental/learning problems and in many instances is able to pinpoint causes such as a poor socio-economic environment, mental handicap, didactical shortcomings, and in the case of learning disability, neurological dysfunction, ie. ADHD (Kapp, 2002:404).

Discrimination (2.10): Nearly three quarters(74%) of the respondents in the research sample agreed that educators should not discriminate against ADHD learners. According to Davies and Green (1998:97) educators who

have negative attitudes to inclusive education would reject learners with special educational needs and this would hinder the successful implementation of inclusive education (cf. 2.7.1). Engelbrecht *et al.* (1999:64), state that educators' attitudes are expected to influence the extent to which ADHD learners become not only physically integrated, but the integral members of the regular classes benefiting academically, socially and emotionally from the experience.

Treatment (2.11): Most of the respondents (64%) indicated that educators should avoid treating learners with ADHD more sympathetically in class. Lomfsky, Roberts and Mvambu (1999:71) say inclusion requires that ADHD learners are not simply thought of with pity but viewed more positively in terms of their abilities rather than their disabilities. Care should be taken not to emphasize individual disabilities, but to look at the class holistically, in a total context (Biersteker & Robinson, 2000: 23).

Discipline (2.12): The majority of the respondents (72%) that partook in the research agreed that all learners must be disciplined in the same manner. Lomofsky, Roberts and Mvambu (1999:72) maintain that educators have the responsibility of creating and maintaining a classroom atmosphere that nurtures the personal, cognitive and social development of all learners. Discipline in the classroom will be influenced by the ethos of the school. Most schools follow a democratic system of discipline that encourages the participation of parents, teachers, learners and the community. Swart and Pettipher (2001:33), maintains that all learners must be disciplined in an appropriate manner within the regular classroom (cf. 2.6.8).

Understanding ADHD learners (2.13): Seventy one percent (71%) of the respondents were in agreement that educators require more relevant knowledge to better understand ADHD learners. Engelbrecht and Green (2001:22) state that educators need to understand the challenge of successful inclusive education and to recognize that they do have the power and the responsibility to act as agents of change in education and in society (cf. 2.6.2).

To support the inclusion of learners with ADHD, educators have to understand not only the particular needs of the individual learners, but also their own challenges and feelings concerning ADHD learners (Engelbrecht & Jansen, 2003:90).

Patience and tolerance (2.14): The majority of respondents (69%) confirmed that the education of ADHD learners require more patience and tolerance from educators. The success of inclusive education is dependent on the educators' attitudes towards the special needs of ADHD learners and to the extent of their willingness to make adaptations to accommodate these learners (Alizan & Jelas, 2000:52).

According to Snyman and Engelbrecht (1999:17) educators need to have tolerance and patience in teaching ADHD learners by drawing up an individual education plan (IEP) in line with Curriculum 2005, implement it and monitor it and also apply good classroom management strategies.

Remedial educators (2.15): In most mainstream schools there are a significant percentage of learners with learning problems (Engelbrecht & Jansen, 1999:30). These learners require specialized assistance to ensure

that their learning potential is realized and for this purpose intensive teaching, known as remedial teaching is necessary (Green, 2001:4). The majority of respondents (72%) were in agreement that the assistance of remedial educators are needed to educate ADHD learners. In spite of normal intellectual, physical and sensory abilities, the disabled child is affected in such a way that their learning problems cannot be rectified in the normal class situation. Remedial teaching is mainly given on an individual basis due to the uniqueness of each child and his specific learning disability (Engelbrecht, 2000:22). According to Lerner (2000:25), remedial and special teaching has improved the performance of ADHD learners.

Parental involvement (2.16): Most of the respondents (68%) agreed that parental involvement is important in inclusive education. Engelbrecht and Jansen (2004:121) maintains that parent involvement and contribution is valuable in an inclusive classroom. Parents can provide valuable information about their child, and most parents are willing to cooperate with teachers by reinforcing classroom programmes at home. Teachers should therefore, involve as many parents as possible in school activities, academically as well as for extramural activities (cf. 2.6.9).

Adapted curriculum (2.17): The majority of the respondents (69%) agreed that there should be an adapted curriculum to suit the learners special educational needs. Teaching learners with disabilities and diverse needs can become quite frustrating not only for the educator but also for the learner. Engelbrecht and Jansen (2004:64) contend that teachers should adapt and adjust their teaching methods and programming to suit the different levels of learners in their class. Teachers should gain support, assistance and

guidance from support structures, so that a suitable programme can be drawn, whereby learners learn optimally (cf. 2.6.6).

Effort (2.18): More than seventy percent (71%) of the respondents acknowledged that educators' need more effort to better understand ADHD learners. Without proper understanding of the diverse educational needs of learners, it becomes difficult to cope and teach ADHD learners. Engelbrecht (1999:99) state that teachers need to put in more effort in order to better understand the diverse needs of learners. By attending in-service training, forming teacher support groups and attend workshops and seminars, will equip teachers to better understand learners with ADHD.

Time allocation for tasks (2.19): Most of the respondents (71%) in the research sample said that there needs to be more time allocated for tasks and tests for ADHD learners. These learners tend to become easily distracted, hence losing time and failed to complete tasks. Engelbrecht and Jansen (2004:125) say that learners with ADHD have problems with concentration and they may tire quickly due to the efforts needed to study. Also, ADHD learners work and learn through repetition of instruction, which also takes time.

4.2.10 Successful inclusion of ADHD learners

Table 10: Frequency distribution according to the availability of facilities or strategies for the successful inclusion of ADHD learners

| Question No | Agree | Disagree | Uncertain | Total |
|-------------|-------|----------|-----------|-------|
| 3.1 | 94 | 15 | 1 | 110 |
| | 85% | 14% | 1% | 100% |
| 3.2 | 8 | 98 | 4 | 110 |
| | 7% | 89% | 4% | 100% |
| 3.3 | 44 | 58 | 8 | 110 |
| | 40% | 53% | 7% | 100% |
| 3.4 | 46 | 52 | 12 | 110 |
| | 42% | 47% | 11% | 100% |
| 3.5 | 51 | 46 | 13 | 110 |
| | 46% | 42% | 12% | 100% |
| 3.6 | 49 | 56 | 5 | 110 |
| | 45% | 51% | 4% | 100% |
| 3.7 | 71 | 30 | 9 | 110 |
| | 65% | 27% | 8% | 100% |
| 3.8 | 61 | 46 | 3 | 110 |
| | 55% | 42% | 3% | 100% |
| 3.9 | 73 | 29 | 8 | 110 |
| | 66% | 27% | 7% | 100% |
| 3.10 | 69 | 34 | 7 | 110 |
| | 63% | 31% | 6% | 100% |
| 3.11 | 81 | 22 | 7 | 110 |
| | 74% | 20% | 6% | 100% |

The responses in Table 10 refer to the facilities and strategies needed for the successful inclusion of ADHD learners in a mainstream classroom. In the following discussion the response frequencies from Table 10 will be analyzed, interpreted and commented upon.

A school-based support team (3.1): The majority of the respondents(85%) agreed that a school-based support team for assisting educators with ADHD learners should be available in their schools. Muthukrishna and Schoeman (2000:319) point out that the reports of the National Commission on Special

Educational Needs and Training and the National Committee for Education Support Services (NCSNET / NCESS) state that an inclusive education policy will place some of the responsibility for addressing barriers to learning and development on the shoulders of the school support teams that will be developed in the schools over the next few years (cf. 2.7.3).

In-service training (3.2): Nearly ninety percent (89%) of the respondents indicated that in-service training opportunities are not available for mainstream educators to cope with ADHD learners. Levitz (1996:9) states that UNISA and other universities and training colleges present courses for Diplomas in Special Education. However, the more urgent concern at the moment is the upgrading of educators to be equipped to educate ADHD learners. According to Nell (1996:39), successful inclusive education has major implications for the pre-service and in-service training of educators. Appropriate preparation of all educational personnel is vitally important. Indepth knowledge of the philosophy of inclusion and the need for educators to develop the commitment and caring required to accommodate ADHD learners as much as possible in mainstream classes should be developed during preservice and in-service training (cf. 2.6.2).

Adequate funds (3.3): More than half (53%) of the respondents that partook in the research said that their schools lacked the necessary funds for resources to implement successful inclusive education. Adequate funding is required for the successful inclusion of ADHD learners in the mainstream class (cf.2.6.10).

According to Bolowana (2005:6) many parts of the country have large classes, inadequate or no support facilities, a lack of ortho-didactic materials

as well as a lack of expertise of educators to deal with ADHD learners. This makes it impossible to fully implement placement of ADHD learners in mainstream classes. To provide for effective inclusive education the financial issues will have to be addressed carefully so as to be cost-effective (Kochhar, West & Taymens, 2000:170-193).

Networking (3.4): The larger percentage (47%) of the respondents acknowledged that they don't have adequate opportunities for networking with special schools where they would be able to gain more knowledge and understanding of the special educational needs of ADHD learners. Engelbrecht and Jansen (2004:12) maintain that there has to be continuous networking between special school educators and mainstream educators ,as special schools will provide services for learners and educators who require support and guidance. Special schools can provide particular expertise and support, especially professional support in curriculum, assessment and instruction, as part of the district support team to neighbourhood schools, especially "full-service" schools (DoE, 2001:21).

Support services for parents (3.5): Less than half (46%) of the respondents said that there is educational support services for parents of ADHD learners at their school. According to Snyman and Engelbrecht (1999:10) parents of ADHD learners are likely to require greater support and guidance than most other parents. Establishing constructive relationships with parents is a key element of meeting the educational needs of ADHD learners. There are also many ways in which such parents can help teachers in providing the most effective education for their children, such as a productive parent-teacher relationship can provide greater understanding of the needs of their child and the objectives of the teacher.

Parents of ADHD learners are sometimes in need of support, though they may not actually request it. The support can be provided by the teacher or the school support team. The school support team functions as a permanent structure in the school setting, but involves different teachers, parents and learners on an ongoing basis, based on the needs of the teachers, parents and learners themselves and the role they have to play in the process of providing support to parents and learners (Hall, Campher & Smit, in Engelbrecht, 1999:99)

School governing body (3.6): More than half (51%) of the respondents said that their school governing bodies does not support inclusive education. For the successful inclusion of ADHD learners, parents need to become more involved in the education of their children through the governing body. This involvement could include insight into progress, participation in decisions, and information on educational issues. An efficient school governing body would include parents' understanding of the movement towards inclusive education and can influence views more positively. According to Hall and Engelbrecht (1999:33) parents who respect diversity and are willing to become involved, can influence a community.

Belknap, Roberts and Nyewe (1999:177) point out that the school governing body is the key element in empowering parents in the school communities and facilitating their greater involvement in the formal education of their children.

Effective management (3.7): Nearly two thirds (65%) of the respondents that partook in the research agreed that the school's management team has the knowledge to implement successful inclusive education. Lazarus,

Daniels and Engelbrecht (1999:60) state that the style and manner of leadership and management practice of educational managers (particularly, that of the school principal) is a critical factor in ensuring that inclusive education is successfully implemented.

Engelbrecht (1999:66) mentions that the school's management team need competencies and knowledge in accommodating diversity as well as addressing barriers to learning and development. Management should provide leadership in the process of building an inclusive school and provide support for teachers in acquiring new skills

Life-skills programmes (3.8): Although most of the respondents (55%) in the research sample said that special life-skills programmes for the integration of ADHD learners are available at their school, more than forty percent (42%) indicated that life-skills programmes for integration of ADHD learners is lacking in their schools.

According to Bender (2002:iii) life-skills education and training programmes offer skills to help ADHD learners cope with everyday life and in recent years have become a highly popular method of intervention and prevention in social work. It is a proactive method and supports the developmental approach of social welfare.

Discriminating attitudes (3.9): Most of the respondents (66%) indicated that their schools have strategies in place to combat discriminatory attitudes towards ADHD. According to Engelbrecht and Jansen (2004:33) mainstream schools with inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an

inclusive society and achieving education for all. Moreover, they provide an effective education to the majority of learners and improve the efficiency and ultimately the cost-effectiveness of the entire education system (cf. 2.8.1).

Harassment of ADHD (3.10): Despite the result that the majority of respondents (63%) said that procedures to deal with the harassment of ADHD learners are available at their school, more than thirty percent (31%) said that their schools did not have such procedures in place. Harassment may include a refusal to admit a ADHD learner in a public school, or to provide appropriate educational support services to such a learner.

Forms of harassment, according to Kapp (2002:404), include learners with ADHD who have to face beatings from educators, teasing from fellow-learners or anger from parents. The community labels these children as retarded or naughty when they may in fact be dyslexic or hyperactive, or have an attention deficit disorder. ADHD learners who either fail repeatedly or are passed without merit are what one educator called "just passengers in class." A policy to address harassment of ADHD learners in any form should be part of the school's mission statement (cf. 2.6.8).

Psychological services (3.11): Nearly three quarters of the respondents (74%) agreed that there is a need for constant intervention from psychological services for support, guidance and assistance in the successful implementation of inclusive education. Continued collaboration and cooperative relationships with psychological services are critical elements for responding effectively to the learning support challenges that come with the implementation of inclusive education (Engelbracht & Green, 2001:22). The

psychological services primary function will be to evaluate programmmes, diagnose their effectiveness and suggest modifications.

Mainstream educators had reluctance in teaching learners with disabilities and learners with diverse needs as they felt that special schools were in place for specific categories of disabilities and catered for relatively homogeneous groups of learners (Du Toit, 1996:7). Educators are know faced with the challenge of teaching ADHD learners and other disabilities, thus relying and depending on psychological intervention.

4.3 SUMMARY

In this chapter the researcher's aim was to give order to the range of information provided by the respondents (educators) in their responses to the statements (questions) in the questionnaires. Some of the data collected were of a demographic nature which enabled the researcher to construct a broad profile of the sample selected for the investigation. Data collected regarding the challenges facing educators in the inclusion of ADHD learners in the mainstream classroom and the successful inclusion of ADHD learners were organized in frequency tables to simplify statistical analysis. Findings from the organized data were analyzed by means of descriptive statistics.

The final chapter of this study will focus on a summary and findings from the literature and empirical investigation followed by recommendations.

CHAPTER 5

SUMMARY, FINDINGS AND RECOMMENDATIONS

5.1 INTRODUCTION

The fundamental aim of this study was to investigate the challenges facing educators in the inclusion of ADHD learners in the mainstream classroom. In the last chapter of the study a summary of the previous chapter was given and the findings that derived from the literature review and empirical survey would be discussed. This will be followed by recommendations, limitations of the study and a final remark.

5.2 **SUMMARY**

5.2.1 Statement of the problem

In this study an enquiry was made into challenges facing educators' in the inclusion of ADHD learners in the mainstream classroom. In the literature study and through empirical investigation, it was found that educators are faced with many challenges concerning the successful inclusion of ADHD learners in the mainstream classroom, and hence inclusive education. Educators feel they have to change their tried and tested teaching methods in order to cope with more diversity in their classrooms. Furthermore, most educators feel inadequately prepared and equipped for inclusive education and therefore are unable to cope with "ADHD learners" in their classrooms. The assistance educators' need concerning the successful inclusion of ADHD learners in the mainstream classroom or in inclusive education is adequate

human and material resources, decreased class sizes and relevant training, guidance and support.

5.2.2 Literature review

The term ADHD refers to Attention Deficit Hyperactivity Disorder which is characterized by hyperactivity, inattention and impulsiveness. This condition is more prevalent in boys than girls. ADHD makes a child easily distracted thus limiting his concentration hence, resulting in learning difficulties.

The educator is placed in a position of doing the initial identification of the learner with ADHD as he notices all learning and behaviour problems. The educator also looks at numerous factors that may contribute to ADHD and ways in which to deal with ADHD.

The success of inclusive education is a challenge to educators who teach in mainstream schools. Many educators have difficulty in identifying and coping with ADHD learners. They need special support and guidance in dealing with ADHD learners. They also lack the necessary training and expertise in characterizing ADHD learners. The challenges educators' are facing in inclusive education are influenced by their level of competency and effectiveness.

The success of inclusive education in South Africa depends on how school principals manage change, motivate their staff, learners and other stakeholders in education and establish a relationship with the community it serves.

5.2.3 Planning of the research

This study utilized a questionnaire, constructed by the researcher as data base. The questionnaire was aimed at primary school educators in north KwaZulu Natal. The information sought for this investigation was not readily available from any other source and had to be acquired directly from the respondents. The aim of the questionnaires was to determine the challenges educators are facing in the inclusion of ADHD learners in the mainstream classroom/ South African classrooms, and to establish performance criteria with which to measure the effectiveness of educators in implementing inclusive education successfully, as well as to determine any possible areas of development in its implementation.

The composition, administration and data analyses of the questionnaire were also dealt with. The principle of a pilot study was addressed, as well as the limitations of the research.

5.2.4 Presentation and analysis of the research data

The purpose of this chapter was to statistically discuss data collected from the questionnaires completed by 110 educators, which included school principals, deputy principals, heads of departments and educators. Comments were offered and interpretations were made of the findings. At the outset an explanation and description was provided as to the methods employed in the categorization of the responses and the analysis of the data. This was followed by the presentation and discussions of the responses to the questions in the questionnaire.

5.2.5 Aims of the study

The researcher formulated specific aims (cf. 1.5) to determine the course of the study. These aims were realized through the literature study, which was made from various sources available nationally and internationally. An empirical survey consisting of a structured questionnaire as basis was used together with the literature study, to determine the challenges facing educators' in inclusive education and to determine performance criteria with which to measure the effectiveness of educators in implementing the successful inclusion of ADHD learners, in terms of inclusive education. On the basis of the findings of this study certain recommendations are offered.

5.3 FINDINGS

5.3.1 Findings from the literature study

From the literature study it was found that the challenges facing educators' in the inclusion of ADHD learners in the mainstream classroom, is due to the following challenges:

- ➤ Identification of ADHD learners educators are in a good position to make the initial identification of ADHD learners, however they find themselves in a difficult situation to identify all or most of the symptoms associated with ADHD, as they are not familiar with all of its characteristics (cf. 2.6.1).
- ➤ Training and competency educators felt that they were not adequately trained to cope with the diversity of learners entering

mainstream classes. Hence educators needed to attend in-service courses and workshops to uplift their knowledge and understanding of ADHD learners (cf. 2.6.2).

- ➤ Experience with ADHD learners educators lack the necessary knowledge and experience in appropriately accommodating ADHD learners in their mainstream classroom (cf. 2.6.3).
- ➤ Acceptance of ADHD learners mainstream educators lack patience and tolerance in accepting ADHD learners in their classrooms (cf. 2.6.4).
- ➤ Disposition an educator's personality can hinder a child's progress if he precludes a willingness to accept the child with problems unconditionally. Also, this can impact negatively on the educators' performance in class, if he does not foster a good teaching-learning relationship (cf. 2.6.5).
- ➤ Changes in teaching methods educators had to accommodate ADHD learners in their mainstream classroom by adjusting/changing their curriculum/teaching methods so that ADHD learners could progress at their own pace. Educators found themselves in a very challenging position as they had other 'normal' learners that they felt they 'neglected' during class lessons (cf. 2.6.6).
- ➤ Time allocation educators felt that too much of time was taken to teach and accommodate ADHD learners in mainstream classes. Educators were concerned that they have a syllabus to complete by a

specified time and that they will not be able to do so, thus neglecting/holding back the 'normal' learners in class (cf. 2.6.7).

Classroom:

- Size the large number of learners in mainstream classrooms were too much for educators to handle, let aside accommodating ADHD learners who need 'individual' attention (cf. 2.6.8).
- Diversity the Department of Education (DoE, 2002:10) demanded that all learners, irrespective of age, gender, race, disability, etc. has a right to mainstream education where possible. However, provisions were not made for such transformation in mainstream schools, therefore educators are battling to cope and handle such diversity (cf. 2.6.8).
- Discipline discipline in the mainstream classroom is quite problematic and having ADHD learners can become twice as problematic. Educators try many strategies to maintain discipline but eventually become very tired and frustrated and are unable to cope with the school/class programmes (cf. 2.6.8).
- ➤ Parent involvement parents are not keen in communicating with teachers or attend any school meetings, let aside assist their children with homework, therefore, such learners school performance and attendance deteriorates, leaving the educator in a very difficult

position. A good teacher-parent relationship fosters good learner performance (cf. 2.6.9).

➤ Adequate funding – educators lack the necessary funding for human resources to educate ADHD learners appropriately (cf. 2.6.10).

5.3.2 Findings from empirical research

From the empirical study it was found that the challenges facing educators in the inclusion of ADHD learners in the mainstream classroom, is due to the following factors:

- ➤ The majority of the respondents (92%) agreed that mainstream educators should foster acceptance, tolerance and caring to all learners irrespective of their race, gender or disability. Mainstream educators don't have enough time and patience to deal with learners with learning and behavioural problems, namely ADHD.
- ➤ Eighty four percent (84%) of the respondents agreed that educators need more training to educate ADHD learners. They are not in a position to teach such learners, as the Department of Education has not provided adequate in-service education and training to gain the necessary knowledge, skills and values to cope with ADHD learners.
- ➤ The larger percentage (53%) of the respondents agreed that they experienced difficulties identifying ADHD learners. Identification refers to the establishment on the determination of the nature of a problem on the basis of certain perceivable behavior manifestations or symptoms

that require further explanation. The teacher is in a position of noticing behaviour and learning problems if he/she is professionally trained. When one understands ADHD then he/she can identify, cope and understand the condition.

- ➤ Seventy one percent (71%) of the respondents were in agreement that educators need more relevant knowledge to better understand ADHD learners.
- ➤ In most mainstream schools there is a significant percentage of learners with learning problems. These learners require specialized assistance to ensure that their learning potential has been realized. Hence, the majority of the respondents (72%) were in agreement that the assistance of remedial educators is needed to better understand and educate ADHD learners.
- ➤ The majority of the respondents (68%) agreed that parental involvement is important. Parents should be actively involved in their children's education as this will motivate the learner to have a willingness to learn.
- ➤ More than half (53%) of the respondents that partook in the research said that their schools lacked the necessary funds for resources to implement successful inclusion of ADHD learners in the mainstream class.
- ➤ The larger percentage (47%) of the respondents acknowledged that they don't have adequate opportunities for networking with special

schools where they would be able to gain more knowledge and understanding of the special educational needs of ADHD learners.

- ➤ More than half (51%) of the respondents said that school governing bodies do not support inclusive education. For successful inclusion of ADHD learners, parents need to become more involved in the education of their children as governing body represents parents.
- ➤ More than forty percent (42%) indicated that life-skills programmes for the integration of ADHD learners is lacking in their schools.
- ➤ More than thirty percent (31%) said that their schools did not have procedures in place to address possible harassment of ADHD learners. Harassment may include a refusal to admit a ADHD learner in a public school, or to provide appropriate educational support services to such a learner.
- ➤ Nearly three quarters of the respondents (74%) agreed that there is a need for constant intervention from psychological services to provide support, guidance and assistance in the successful implementation of inclusive education. Mainstream educators had reluctance in teaching learners with learning difficulties, namely ADHD, as they felt that special schools were in place for such learners, however, there was a need to admit ADHD learners in mainstream schools, thus teachers then relied on psychological services for assistance and support.

5.4 RECOMMENDATIONS

5.4.1 The curriculum, institutional development and assessment

(1) Motivation

In a developing country like South Africa where many ADHD learners with barriers to learning and development must be assisted in the most economical yet effective way, inclusion is not only a viable solution but the best way of transforming educational policy to address the imbalances and neglect of the past and bring the country in line with international standards of recognition of human rights. Inclusion is also the best way of expressing that educators really care for everyone, including those who were previously excluded. For the implementation of inclusive education classrooms to be effective, changes need to be made to the curriculum, institutions and methods of assessment (cf. 2.7.1/6).

(2) Recommendations

The recommendations are that, in order for inclusive education to be implemented successfully in South Africa, the Department of Education must:

- Develop an integrated system of education where the separate systems of "special" and "mainstream" education are integrated into one system responsive to the diverse needs of the learner population.
- Provide barrier free access to the built environment.

➤ Ensure that all centers of learning reflect an inclusive ethos and engage in whole school and center development to address the diverse needs of all learners including the ADHD learners.

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- Facilitate ongoing campaigns to raise public awareness and address discriminatory attitudes within and outside the education system.
- Provide a holistic approach to institutional development to facilitate a positive culture of teaching and learning; all aspects of learning have to be developed including strategic planning and evaluation, organizational leadership and management, staff development and other related mechanisms.
- Develop health promoting centers of learning for the implementation of inclusive education.
- ➤ Establish a center based learning support team that would ensure that support is accessible to educators, learners, parents and communities.
- ➤ Put in place centers of learning with ongoing anti-discrimination and human right programmes.
- ➤ Ensure that teaching and learning materials accommodate the diverse needs of the learner population.
- Provide a flexible curriculum which is responsive to differences in the learner population and ensures that all learners can participate effectively in the process.

Establish a center for early identification of learners at risk, continuous assessment, timeous intervention, and parent and learner involvement in the curriculum.

5.4.2 Utilization and development of human resources

(1) Motivation

Successful implementation of inclusive education will depend upon South Africa's utilization and development of its human resources. In South Africa there has been a history of inadequate and ongoing teacher development. This has led to insecurity, low-esteem, and a lack of innovative practices in the classroom to meet the needs of a diverse learner population.

The policy of inclusion, however, makes it necessary for teacher training institutions to re-assess the basic training given to prospective educators. Subjects such as ortho-pedagogics must be a compulsory subject in the basic training programmes, for all educators. This will enable educators of the future to be ready for the demands that the South African school population will make on them (cf. 2.6.10).

(2) Recommendations

The recommendations are that the Department of Education must:

> Develop a flexible and integrated system of education and training.

- Appoint remedial educators and educators with training in specialized education who have already undergone training and who can provide a valuable service in mainstream schools where trained experts fulfill a supportive role.
- Provide training in special educational needs in a structural manner to ensure that all educators receive equal training.
- ➤ Ensure that all human resources in our institutions and communities are used optimally and in a structured manner.
- ➤ Facilitate involvement of experts from educational practice, representing the various population groups, in the training of educators. Such experts could act as guest lecturers, offering lecturs at various training institutions and could include a specific cultural group. In this way educators would receive first-hand knowledge from educational practitioners.
- ➤ Facilitate ongoing in-service and pre-service training courses on ADHD at all training institutions, thus enabling educators to deal with problems in the classroom.
- ➤ Facilitate the training of the Centre-Based Learning Support Team (CBLT) as well as coordinators and intersectoral partnerships; rationalization of current educational support personnel for new roles; education management development; NGO involvement and parent empowerment and development.

5.4.3. Governance and funding

(1) Motivation

Despite the introduction of compulsory education in South Africa many learners continue to remain outside the formal education system, many being those with disabilities who have been prevented from entering mainstream schools.

Research carried out by the National Commission on Special Needs Education and the National Committee on Education Support Services showed a very low enrolment of learners with special needs, including ADHD learners in mainstream schools, and the existence of only a few community projects offering limited provision.

Inclusion seems to promise that it will enhance not only the attainments of learners with disabilities but, by drawing the attention of schools to individual differences, the attainment of all learners will be enhanced thereby developing the country's economy by providing a workforce with appropriate skills.

(2) Recommendations

The recommendations are that the Department of Education must:

➤ Ensure an inclusive system which will require a funding strategy that is operational through a funding model that is directed towards the development and maintenance of an effective support system at all levels of the learning system.

- ➤ Develop the active participation and commitment of all stakeholders in governance structures, the infused capacity of all sections in provincial and national education departments to meet the diverse range of learners and system needs.
- Develop a funding partnership between state and external funding sources, conditional funding, earmarked funding and funding accountability.
- ➤ Ensure that a funding framework for general, further and higher education and training will have to cater for expansion of provision to ADHD learners and other target groups who experience severe learning difficulties and who have been excluded from learning.
- ➤ Ensure that funding policies should provide for the creation of partnership with parents that enable them to participate in the planning and implementation of institution-based inclusion activities.
- Develop funding policies which would also have to cater for new modes of learning, barrier-free access, learner support, curriculum and assessment development, as well as capacity personnel and education managers in special schools and settings and mainstream schools. These funding policies should:
 - provide for research and the development into the applicability and roles of the proposed teaching assistants.

- provide for research on and the development of a list of essential learning-related assistive devices for learning sites.
- Provide accessible transport which is necessary for the full inclusion into society of people with disabilities and learning difficulties, such as ADHD. There is a need to develop an accessible, affordable, multi-model public transport system that will meet the needs of the largest numbers of people at the lowest cost while at the same time planning for those high cost features which are essential to disabled people with greater mobility needs.

5.4.4. Intervention and guidelines for ADHD

(1) Motivation

Teaching ADHD learners can be quite a challenging task for educators, however it requires a certain degree of support, guidance and assistance from stakeholders within the school and the broader community. It becomes imperative that parents get involved in their child's welfare and schooling (cf. 2.7).

Educators also need to become tolerant and patient towards ADHD learners and perhaps attend in-service training, workshops and courses that will enhance their knowledge and level of understanding and hence enable them to cope better in their classrooms (cf. 4.2.10).

(2) Recommendations

The recommendations are:

Intervention

The treatment of learners suffering from ADHD requires a team approach. This approach is between the educator, parent and learner. The first step is to interview the parents, because they are often confused, despondent and discouraged by their inability to solve their child's problems. A neurological examination could then be done and the results discussed with the parents in order to help them put together a plan of action. There are multiple treatment options for learners with ADHD:

- Medical treatment is often tried, with amphetamine Methylphenidate (Ritalin), one of the well-known and much prescribed drugs.
- Dietary control focuses on careful planning of the learner's diet to avoid worsening the hyperactivity.
- Psychological treatment includes play therapy and individual counseling, as well as family therapy.
- ➤ In behaviour therapy, appropriate behaviour is reinforced and a behavior modification programme is followed.
- Psycho-educational treatment includes creating realistic and learner appropriate scholastic demands, structuring the educational situation through consistent disciplinary measures.

- Some of the psycho-educational techniques are cognitive selfinstruction, progressive relaxation, and teaching which focuses on learning support.
- ➤ Early intervention might help the learner to be more in control of him/herself. It also helps parents structure their family life and be actively involved in the treatment of their child through parent guidance programmes.

Guidelines for educators

The educator could use some of the following guidelines to help the learner overcome ADHD:

- > Seat the learner close to you or next to a learner who has good working habits.
- > Demonstrate activities rather than explaining it.
- Verbal instructions must be brief, simple and should not be repeated; the learner must learn to listen and do what is expected of him/her.
- ➤ Eye contact with the learner is very important enables you to see whether he/she is listening and paying attention
- Written instructions should be on strips of paper, and only one is handed to the learner at a time. The next strip is given as soon as the learner has completed the first one.

- ➤ Control the noise levels of the class, because it may encourage poor attention and hyperactivity. Explain to the class that the noise is disturbing everyone.
- ➤ Reward all positive behavior in an acceptable manner according to your principles and the learners needs.
- ➤ Have very specific class rules, but refrain from implementing a behavior management system that focuses on the use of negative reinforces, e.g. threats.
- ➤ Use specific signs to make the learner aware of unacceptable behaviour, e.g. snapping your fingers to remind him to continue his work.
- > Set specific problem- solving goals for each day, e.g. today you are not going to shout the answer.
- ➤ Teach the learner self-monitoring, self-elevation, self-reinforcement and self-instruction behaviour, e.g. write the following words on a card and allow him to stick tyo his desk.
- ➤ Make a video recording of the learner's behaviour and discuss it with him/her while playing it back.
- ➤ Make the learner aware of the time factor by using a watch to time his/her positive behaviour.

5.5 FURTHER RESEARCH

As South Africa begins to implement inclusive education in mainstream classrooms, challenges facing educators', as collaboration between educators, parents and learners have been recognized as critical features in the effective implementation of inclusive education. The power of collaborative teams lies in their capacity to merge the unique skills of special school educators with the unique skills of mainstream educators and parents.

5.5.1 Recommendations

The recommendation is that further research of a quantitative and qualitative nature must be undertaken with the aim of developing well-planned strategies to be implemented in order to provide mainstream educators with the necessary skills to effectively manage inclusive schools, including effective staff development strategies.

5.6 CRITICISM

Criticism that emanates from this study includes the following:

➤ It can be presumed that many of the school educators who completed the questionnaires drew their challenges towards inclusive education from the media and relevant policy documents. The probability therefore exists that a number of educators indicated what is theoretical to their challenges of inclusive education and not what is practical.

- ➤ The research sample comprised only educators from junior and senior primary schools. Dissimilar responses might have been elicited from educators of secondary schools.
- ➤ The research only focused on previous model C schools and public schools.

5.7 FINAL REMARK

The aim of this study was to come to a better understanding of the challenges facing educators in the inclusion of ADHD learners in a mainstream classroom. It is hoped that the stakeholders in education will acknowledge the need to ensure that strategies and structures are put in place to assist educators in the successful implementation of inclusive education.

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Dear Educator

QUESTIONNAIRE: CHALLENGES FACING EDUCATORS IN THE INCLUSION OF ADHD LEARNERS IN THE MAINSTREAM CLASSROOM

At present I am engaged in a research project towards my Med (Masters in Education) degree at the University of Zululand under the guidance of Prof M S Vos. The research is concerned with *Challenges facing educators in the inclusion of ADHD learners in the mainstream classroom.*

I have taken the liberty of writing to you, as one of the selected respondents, in order to seek your assistance in acquiring information about your experiences relating to the research.

CONFIDENTIALITY

All information will be regarded as **CONFIDENTIAL**, and no personal details of any educator/respondent will be mentioned In the findings, nor any of the results be related to any particular educator or school.

| ve deeply appreciate your co-operation. |
|---|
| ours sincerely |
| Mrs S D Hariparsad |
| Oate |

INSTRUCTIONS TO THE RESPONDENT

- 1. Please read through each statement carefully **before** giving your opinion.
- 2. Please make sure that you do not omit a question or skip any page.
- 3. Please be totally **frank** when giving your opinion.
- 4. Please do not discuss statements with anyone.
- 5. Please **return** the questionnaire after completion.

Kindly answer **all the questions** by supplying the requested information in writing, or by making a cross (**X**) in the appropriate block.

SECTION ONE: BIOGRAPHICAL INFORMATION

1.1. My gender is?

| | Code |
|--------|------|
| Male | 1 |
| Female | 2 |

1.2. My age in completed years as at 2009 - 12 - 31:

| Age group | Code |
|---------------------|------|
| 20 – 25 years | 1 |
| 26 – 30 years | 2 |
| 31 – 35 years | 3 |
| 36 – 40 years | 4 |
| 41 – 45 years | 5 |
| 46 – 50 years | 6 |
| 51 – 55 years | 7 |
| 56 – 60 years | 8 |
| 61 – 65 years | 9 |
| Older than 65 years | 10 |

1.3. My qualifications are:

Academic qualification(s) only (eg. BA, Med,etc) Professional qualification(s) only (eg. HDE, FDE,etc.) Academic & Professional qualification(s)(eg.BA,HDE)

| Code |
|------|
| 1 |
| 2 |
| 3 |

1.4. Total number of completed years in the teaching profession as at 2009 – 12 – 31:

| Number of years | Code |
|--------------------|------|
| 0 – 5 years | 1 |
| 6 – 10 years | 2 |
| 11 – 15 years | 3 |
| 16 – 20 years | 4 |
| 21 – 25 years | 5 |
| 26 – 30 years | 6 |
| More than 30 years | 7 |

1.5. My post level is:

| | Code | | Code |
|------------------|------|------------------------|------|
| Principal | 1 | HOD | 3 |
| Deputy Principal | 2 | Educator(Post level 1) | 4 |

1.6. Type of post held by me:

| | Code |
|----------------|------|
| Permanent | 1 |
| Temporary | 2 |
| Governing Body | 3 |

1.7. My school is situated in :

| | Code |
|-------------------|------|
| An urban area | 1 |
| A semi-urban area | 2 |
| A rural area | 3 |

1.8. My school is classified as:

| | Code |
|-----------------------|------|
| Junior primary school | 1 |
| Senior primary school | 2 |
| Combined school | 3 |

| Other (| please | specify) | ') | (4) |
|---------|--------|----------|----|-----|
|---------|--------|----------|----|-----|

1.9. Number of ADHD learners in my class.....

SECTION TWO: CHALLENGES FACING EDUCATORS IN THE INCLUSION OF ADHD LEARNERS

| | | Agree | Disagree | Uncertain |
|------|--|-------|----------|-----------|
| | In the mainstream class with ADHD learners: | J | 3 3 3 | |
| 2.1 | I must set an example in accepting ADHD learners | | | |
| 2.2 | It is necessary to change my teaching methods | | | |
| 2.3 | I need more time to meet the needs of ADHD learners | | | |
| 2.4 | I have to suppress negative feelings towards ADHD learners | | | |
| 2.5 | The diversity of learners demands more effort of me | | | |
| 2.6 | Networking with educators in similar circumstances is essential | | | |
| 2.7 | Large number of learners in class makes individual attention difficult | | | |
| 2.8 | I need more (special) training to assist ADHD learners | | | |
| 2.9 | I am unable to identify an ADHD learner | | | |
| 2.10 | I must be careful not to discriminate against ADHD learners | | | |
| 2.11 | I must avoid treating ADHD children sympathetically | | | |
| 2.12 | All learners must be disciplined in the same manner | | | |
| 2.13 | More relevant knowledge is required to better understand ADHD learners | | | |
| 2.14 | Teaching ADHD learners requires more patience and tolerance | | | |
| 2.15 | The assistance of remedial educators are necessary | | | |
| 2.16 | Accountable parental involvement is required | | | |
| 2.17 | There should be an adapted curriculum for ADHD learners | | | |
| 2.18 | More effort is required to better understand ADHD learners | | | |

| 2.19 | More time needs to be allocated for | | |
|------|-------------------------------------|--|--|
| | ADHD learners to complete | | |
| | tasks/tests | | |

SECTION THREE: SUCCESSFUL INCLUSION OF ADHD LEARNERS

| | | Agree | Disagree | Uncertain |
|------|--|-------|----------|-----------|
| | The following facilities and/or | | | |
| | strategies for the successful | | | |
| | inclusion of ADHD learners are | | | |
| | available at my school | | | |
| 3.1 | A school-based support team to | | | |
| | assist educators with ADHD learners | | | |
| 3.2 | In-service training opportunities for | | | |
| | mainstream educators to meet | | | |
| 2.0 | special educational needs | | | |
| 3.3 | Sufficient funds to obtain special | | | |
| 2.4 | equipment | | | |
| 3.4. | Opportunities for networking between | | | |
| | special education and mainstream educators | | | |
| 3.5 | Educational support services for | | | |
| 0.0 | parents of ADHD learners | | | |
| 3.6 | A school governing body that | | | |
| 0.0 | effectively supports inclusive | | | |
| | education | | | |
| 3.7 | A management team that has the | | | |
| | knowledge to implement inclusive | | | |
| | education | | | |
| 3.8 | Special life skills programmes for the | | | |
| | integration of ADHD learners | | | |
| 3.9 | Policy to eliminate discriminating | | | |
| | attitudes towards ADHD | | | |
| 310 | Procedures to deal with harassment | | | |
| | of ADHD learners | | | |
| 3.11 | Intervention of Psychological services | | | |
| | to provide support and guidance to | | | |
| | educators in handling ADHD learners | | | |

'THANK YOU FOR COMPLETING THIS QUESTIONNAIRE'

STRICTLY CONFIDENTIAL

QUESTIONNAIRE

Challenges facing educators' in the inclusion of ADHD learners in the mainstream classroom

Mrs S D Hariparsad May 2010



Box 2; Mt. Edgecombe; 4300 - 1 Spire Street; Stonebridge; 4068 -Tel: 031 502 6325; Fax: 031 502 6324; Email: chettysa@ymail.com

Enquiries: Mr S A Chetty Imibuzo: 0837891649 Navrae: Reference: RESEARCH BY EDUCATOR - MRS S.D. HARIPARSAD 2010

Date: 7 JUNE

Inkomba: Verwysing:

Usuku: Datum:

For Attention: Principals/Acting Principals

Re: Authorization to conduct research.

Please be informed that the Department of Education has granted permission for Mrs S.D. Hariparsad to conduct her research at designated schools. Attention needs to be drawn to the fact that this work will be conducted outside normal contact time. The said educator is currently conducting her research towards a Masters in Educational Psychology.

Yours in Quality Public Education

Mr SACHETTY - SEM

DEPARTMENT OF EDUCATION - KZN
COASTAL CLUSTER - PINETOWN DISTRICT
MAFUKUZELA GANDHI CIRCUIT
SUPERINTENDENT OF EDUCATION - WARD 143

MR. S.A. CHETTY DATE

"AFRICAN COLICATION OUR TIME HAS COME"

119 Himalaya Drive Everest Heights Verulam 4340

14 May 2010

Mr S A Chetty
Manager: Mafukuzela Gandhi Circuit
1 Spire Road
Stonebridge
Phoenix
4068

Dear Mr Chetty

RE: PERMISSION TO CONDUCT RESEARCH

At present I am engaged in a research project towards my M.Ed (Masters in Education) degree at the University of Zululand under the guidance of Prof M S Vos. The research is concerned with *Challenges facing educators'* in the inclusion of ADHD learners in the mainstream classroom.

For the purpose of the research a questionnaire was developed which I need to administer to educators in mainstream schools. A copy of the questionnaire is enclosed for your perusal and approval. The questionnaire should not take more than 30 minutes to be completed by the educators. All the information obtained from the questionnaires would be dealt with in the strictest confidence and anonymity is assured.

I humbly request your written permission to administer the questionnaire to schools in the Mafukuzela Gandhi District.

Yours sincerely

Mrs S D Hariparsad
083 462 1338