



Multi-Factored Effectiveness of Inclusion Program for Children with Mild to Moderate Autism Spectrum Disorder

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CHAPTER I

THE PROBLEM AND ITS BACKGROUND

Introduction

Teaching is imparting knowledge to all types of learners. Under the Education for All program (EFA), schools both private and public are encouraged to provide quality education to all types of learners. Learners with special needs must not be left out of the classroom because of their uniqueness.

Engelbrecht (2013) posits that school educators play an important role in the success of inclusive education. As they do in any educational reform movement: educators who have positive attitudes towards inclusion, who have high levels of teaching efficacy (Sharma & Nuttal, 2016), and those who receive sufficient support from their leaders and colleagues tend to be more successful at including learners with diverse abilities compared to those educators who have negative attitudes, have lower levels of inclusive teaching efficacy, and who teach in non-supportive schools (Sharma, 2018).

In a special education class, teachers are expected to provide equal opportunities for learners to learn. However, there are cases where learners who are placed in a regular class are after all not regular students. This happened because in public-schools appropriate diagnostics for possible special needs of the learners are limited. In this case, the learners who are assumed to have special needs such as learners who are with spectrum autism disorders are placed in an inclusion program that most challenged the teaching competencies and capabilities of the teachers.

Several researchers have looked at teaching strategies that are effective in inclusive classrooms. Some of the common practices used by educators to include learners with diverse abilities include the use of differentiated teaching practices, the use of adapted curriculum material, peer and group teaching methods, and the use of assistive technology (UNESCO, 2020). Some other strategies that frequently appear in the literature include cooperative learning and peer tutoring, differentiated instruction, and co-teaching (UNESCO, 2020). Some authors have also reported that inclusive educators not only teach learners using a variety of teaching strategies, but they also work in close partnership with family members (Powell et al, 2018). Teachers also need to know how to work effectively with other adults such as paraprofessionals, parents, and other educators (Giangreco, 2017).

Researchers have also found that teachers need to be confident in using universal design for learning (Hehir & Katzman, 2017). Interestingly, most of the research on teaching practices in inclusive classrooms has originated in Western countries. It is yet not clear if the strategies that work in Western classrooms would be equally effective in classrooms in developing countries, where classroom dynamics and demographics are significantly different from the classrooms of the West.

Meanwhile, part of the challenging roles of teachers in teaching in an inclusive program is to handle learners who are considered with Autism spectrum disorder (ASD), which is a neurodevelopmental disorder. The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) defines ASD as “persistent deficits in social communication and social interaction across multiple contexts” (American Psychiatric Association [APA], 2013). Symptoms are typically visible around age two but could be seen earlier. The symptoms are broken into three main categories: communication, emotional and social difficulties. To be diagnosed the symptoms need to cause major disruption to daily functioning. They should also be persistent through weeks as well as locations (APA, 2013); this means that the symptoms observed will last for multiple weeks and be present in multiple locations.

Each person diagnosed with autism is also given a severity level. The levels help indicate what kind of assistance the individual may need. For example, a level one diagnosis means the patient needs the least amount of support. Their communication is described in the DSM-5 as “difficulty initiating social interactions” as well as “unsuccessful responses to social overtures of others” (APA, 2013). People with ASD may also express less interest in social interactions (APA, 2013). They also present with difficulty switching activities and staying organized. A patient with a level two diagnosis needs substantial support. They have “deficits in verbal and nonverbal social communication skills” as well as deficits in social skills even with support (APA, 2013). Level two ASD patients present difficulty with change and have restricted or repetitive behaviors that may interfere with functioning.

Autism spectrum disorders (ASDs) describe a group of neurodevelopmental conditions in which individuals face challenges with social engagement and age-appropriate play and fail to develop appropriate peer relationships according to their developmental level [American Psychological Association (APA), *Diagnostic and Statistical Manual of Mental, cited in Memeri et al, 2015*]. Although young people are frequently recommended to participate in leisure activities including play, sports, hobbies, and social activities, children with ASD tend to spend time in passive play and maladaptive behaviors and they are less likely to spontaneously participate in organized leisure activities such as sports.

Usually, children with moderate autism may or may not interact with peers. They generally struggle to make eye contact, interpret body language and emotions, and understand figures of speech, and they may simply walk away from conversations that do not involve their favorite topics or interests.

The scale for mild to moderate autism. A score of <70 indicates no autism, 70-106 (mild autism), 107-153 (moderate autism), and >153 (severe autism). Mild autism is an unofficial term commonly used to refer to a diagnosis of autism spectrum disorder level 1. Mildly autistic people require the least amount of support and are often able to hide their symptoms. However, they may struggle with social interactions, reading social cues, understanding body language, and deciphering facial expressions.

Because these symptoms can be subtle, mild autism is often missed during early intervention screenings in childhood. As a result, people with the condition tend to be diagnosed at an older age, possibly in adulthood. The term "mild autism" can be confusing unless you know that autism is a spectrum disorder with symptoms ranging from least to most severe. People with mild symptoms of autism, those with severe challenges, and those in between are all diagnosed with ASD. However, their diagnoses are further classified by level. There are three, each of which is defined by the amount of support a person may need.

Level 1 autism describes people who need the least support to function in their daily lives. This is what some call mild autism. In general, people with ASD have challenges with social communication, usually resist changes in their routine, and can be hypersensitive to noise, smell, touch, and other sensory experiences. People with mild autism may have advanced academic abilities, but struggle with social skills, sensory challenges, or organization. Children and adults can exhibit different signs.

Meanwhile, inclusive education (IE) for children with ASD is an organizational and instructional practice in which children with ASD are in the same classrooms as others without disabilities. Inclusive education is considered the highest goal to facilitate access, success, and participation for children with ASD and the most preeminent educational setting for the development of the majority of children with ASD. The number of students with ASD detected in mainstream schools is increasing (Humphrey, 2014).

Across the world, studies of IE for children with ASD focus on (a) the effects of subjective and objective factors on the ability to learn inclusively for children with ASD (subjective factors include children's functional level, whether high functioning or low functioning autism, and the developmental history of each child; objective factors include education history, especially whether the child has had early intervention, and forms of IE; Eldar, Talmor, & Wolf-Zukerman, 2010; Zuki & Rahman, 2016); (b) effective IE measures (Davidson, 2015; Denning & Moody, 2013; Gavalda & Qinyi, 2012; Simpson, de Boer- Wilson & Landa, 2019); (c) the effect of IE on the development of the areas of school skills, communication, and social interaction (Lal, 2005; Ncube, 2014; Runcharoen, 2014); (d) comparing the effectiveness of IE to specialized separate education (Waddington & Reed, 2017); and (e) the significance of applying specific methods, such as music, applied behavior analysis (ABA; Lovaas, 1987), or treatment and education of autistic and related communication handicapped children (TEACCH; Schopler, Mesibov, Shigley, & Bashford, 1984) and the effectiveness of IE, which focusing on the long-term effectiveness in the development of children with ASD (Koegel, Matos-Freden, Lang, & Koegel, 2012; Wiseman, 2015; Panerai et al., 2009).

Witoonchart and Huang (2018) identified four barriers to IE for children with ASD: (a) educational historical determinism, which referred to agendas related to educating children with autism but that had not yet been fully implemented; (b) government marginalization of the need of education for children with autism, which referred to unclear legislation on how to make laws related in educating these children plausible; (c) parental and societal lack of understanding of educating children with special needs, which referred to the misconception of these children's learning ability; and (d) unbalanced and unequipped special education professionals and the crucial reality consideration, which referred to the questionable skills of teachers in teaching this specific group of children.

According to Lindsay et al. (2013), teachers also face several challenges in classrooms that include children with ASD, such as understanding and managing behavior, socio-structural barriers (i.e., school policy, lack of training, and resources), and creating an inclusive environment (i.e., lack of understanding from other teachers, students, and parents). Teachers in their study recommended more resources, training, and support were needed to enhance the education and inclusion of children with ASD.

Research on epidemiology, early identification, early intervention, and IE of children with ASD in Vietnam has been conducted. However, the number of studies is still quite small compared to the research conducted in other countries. Before this study, research on the reality of IE for children with ASD in Vietnam had not been conducted.

The research reported in this article can provide a clearer view of the current situation. In one study by Tran et al (2020), the situation was examined from a variety of perspectives: parents, teachers, school administrators, and autism experts in Vietnam. One of the important goals of this study was to explore the status of IE for students with ASD in rural, mountainous areas where there is difficulty in accessing assessments, interventions, and IE. The research findings supported policymakers and stakeholders in planning support for children with ASD and their families. The results of this study provided a road map to better support children with ASD in elementary schools in Vietnam.

Researchers on community perceptions and perspectives on autism have shown stigma and discrimination against children with ASD and their families exist in Vietnamese community settings (Vu et al., 2014). Preschool teachers have serious misconceptions about the cause, diagnosis, and treatment of ASD (Vu & Tran, 2014). Researchers have also focused on community-based behavior interventions (CBI) effective for children with ASD (Tran, 2018), solutions to early intervention issues for children with ASD in the years 2011-2020 (Nguyen, 2014), and models of community-based ASD intervention. This research revealed symptoms and behavioral problems were reduced and some skills changed in communication, expression and text, family and community life, and play (Vu, Tran, & Tran, 2017).

In this regard, in adherence to the Enhanced Basic Education Act of 2013 (Republic Act No. 10533) Section 8, Inclusiveness of Enhanced Basic Education designed to address the physical, intellectual, psychosocial, and cultural needs of learners, the Department of Education (DepEd) adopts the enclosed Child Find Policy for Learners with Disabilities. (DepEd ORDER No. s.2022 CHILD FIND POLICY FOR LEARNERS WITH DISABILITIES TOWARDS INCLUSIVE EDUCATION),

This policy articulates the processes in ensuring that learners with disabilities are identified, located, and evaluated to facilitate their inclusion in the general basic education school system; provides means for the schools to monitor the implementation of the Child Find Process; and promotes cooperative advocacy for children with disability and developmental delays among stakeholders in the communities.

This policy provides guidelines for DepEd personnel, and ALS teachers in the implementation of a comprehensive Child Find. This covers children, above the age of five, diagnosed with disabilities or observed to have developmental delays requiring special education and related services in public and private schools offering basic education, including those in the Alternative Learning System, the Muslim Education Program, Indigenous Peoples Education, community learning centers and Out of School Children/Out of School Youth.

The new DepEd Order (DO) modifies DO 72, s.2009 (Inclusive Education as Strategy/ for Increasing Participation Rate of Children); DO 03, s. 2018 (Basic Education Enrollment Policy); DO 027,2019 (Guidelines on the Yearly Collection of Data/Information Requirements and Validation Processes) and other issuances accordingly. This policy guides each governance level to public school in implementing Child Find to ensure children aged 5 to 18, DepEd Order No. 044 s. 2021, are diagnosed with disabilities or observed to have developmental delays requiring special education and related services and are enrolled for educational programs and services under the K to 12 Basic Education Program. This policy covers raising awareness, locating, screening, and subsequent endorsement of learners diagnosed with disabilities or those with developmental delays for enrollment in public schools.

Parallel with DepEd Order No. 03, s. 2018, the Department of Education reiterates the importance of enrolling Out of School Children (OSC) and Out of School Youth (OSY) especially those who are bounded by disabilities or have developmental delays. As these children require diagnostic assessment which may not be readily available as the basis for enrollment and educational placement for special education programs, DepEd shall provide accommodations in the early registration process of children above the age of 5 who are either diagnosed with a disability or have developmental delays to ensure that "no child is left behind". This policy articulates the processes of ensuring that learners with disabilities are identified, located, and screened to facilitate the provision of educational programs and services for learners with disabilities in the K to 12 Basic Education Program. Furthermore, this policy ensures that learners with disabilities will have access to and full participation in the basic education program.

The Department of Education (DepEd) has issued and implemented several policies such as the DepEd Order No. 03, s. 2018 Basic Education Enrollment Policy to ensure equitable access to education and DepEd Order No. 72, s.2009 Inclusive Education as a Strategy to Increase Participation Rate of Children to reach out and serve all learners assessed and observed with disabilities including those at risk requiring special education services. DepEd Order No. 44 s.2021 outlines the overall direction for Special Education Program to ensure educational services to learners with disabilities in both public and private basic educational institutions.

The policy on Special Education Program outlines referral and placement options for learners with disabilities, challenges in screening and identifying children at risk, and those with disabilities had to be addressed as well. Barriers preventing children and youth from attending school include prejudices and negative social attitudes, stigmatization resulting in parents' refusal to send their children to school, and some disabilities, hidden nature, or lack of diagnosis for proper classification (UNESCO, 2001). The low number of children at risk and those with disabilities enrolled in schools may further be attributed to the lack of available medical diagnostic documentation or referral from a medical or allied health specialist.

To strictly adhere to the provision cited in DepEd Order Ilo. 6, s'2(X)6, Policies and Guidelines for Special Education at the secondary level, (Handbook, p. a, 2006), that learners with special needs may be admitted anytime during the year if circumstances warrant such admission' As stated in the UN Convention on the Rights of Persons with Disabilities (UNCRPD), the Department of Education recognizes that "disability is an evolving concept". Following the UNCRPD to which the Philippines is a signatory, DepEd recognizes that "persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers hinder their full and effective participation in society on an equal basis with others" (UNCRPD, 2006, p' 6)

The National Disability Prevalence Survey estimated those with severe disabilities to be around 12% of the general population (Philippine Statistics Authority, 2019). In the study entitled "Situation of Children in the Philippines," the Department of Social Welfare and Development (DSWD) stated that around 53% of children with disabilities are from poor households and are not attending school. The study underlined that children with disabilities continue to experience barriers to accessing social and educational services (Development Academy of the Philippines, 2019). Given the above statements, there is a need to put into policy the processes of developing partnerships, raising awareness, locating, and screening children with disabilities to increase their participation and ensure access to quality and equitable education. DepEd recognizes the need for family support, access to health care, targeted allied health / rehabilitative services, and social care for Children and Youth with Disabilities (CYWDs) and with developmental delays. To optimize participation in the education of CYWDs and with developmental delays, commitment and active participation of a wide range of sectors shall be engaged. For Child Find, interagency coordination with national, and local government units, communities, and other stakeholders who shared responsibility for the care and support of children and youth with disabilities is integral.

In addition, Republic Act (RA) 11650, or "An Act Instituting a Policy of Inclusion and Services for Learners with Disabilities in Support of Inclusive Education" provides that no learner shall be denied admission based on their disability. In this case, exclusive education shall embrace the philosophy of accepting all children regardless of race, size, shape, color, ability, or disability with support from school staff, students, parents, and the community.

Several studies were conducted across the country to investigate the conditions of learning with autism disorders:

Budiyanto et al (2020) explore Sign Along Indonesia (SI), which is a keyword signing approach, created to support the development of Indonesian inclusive schools. The findings suggest recommendations about SI materials and training and indicate a new research area regarding inclusive pedagogies within different cultures.

Raguindin et al (2020) Philippine, address the chasm by looking more profoundly into the teachers' skills and dispositions about inclusion. Through a cross-sectional survey, this paper examined and compared the Filipino and Thai in-service teachers' efficacy and attitudes about inclusion and its association with their intentions for inclusive practices. Data revealed that Filipino teachers have a generally higher level of positive attitudes, efficacy, and intentions for inclusive practices than their Thai counterparts. Also, there is a significant and positive correlation between the respondents' attitudes, efficacy, and intentions for inclusive practices.

Sagun et al (2020), in their research engages the stakeholders from public schools of Filipino Children with Disabilities (CWD) to describe the outcomes of Early Detection Intervention (EDI). Three focus group discussions participated in by 21 public school teachers and three key informant interviews of four school administrators from three cities in Metro Manila, namely Taguig, Paranaque, and Pateros, were conducted.

Dores & Daci (2019) TimorLeste. The objective of this research is to elaborate on and analyze the work that gives people with disabilities. The theory that fortifies this research: Theory analysis, the quality of attendance, disability, and well-being. There are some positive recommendations and procedures

obtained from this research that has found the good quality of attendance from the technical skills people and therapists to the People with disabilities. And there are some recommendations from the research is to improve human resources such as scholarships for technicians and therapists, and sound facilities to ensure people with disabilities are well equipped in the future.

Sagunongtango et al (2019) Philippine. This study looks into the identification of the outcomes of the program and describes factors affecting its implementation. A total of three regular school teachers and 49 students, aged 9–12 years from three cities in Metro Manila participated in the program for eight weeks.

Ecoben (2019) Philippine was to determine the level of awareness and attitudes of public-school teachers toward the implementation of inclusive education. In particular, it sought to identify the demographic profile of the public-school teachers, their level of readiness in handling inclusive education in terms of awareness, attitude, and skills, and the significant difference in the level of readiness of teachers towards inclusive education when grouped according to profile.

Roxas et al., (2019), focused on the Division of Aurora, Philippines particularly those offerings of special education classes in the Districts of Dipaculao, Maria Aurora, and Baler. The most common problems encountered by the school heads and teachers were the parents in the in-denial stage and the availability of instructional materials.

Sales (2019) Philippine examined the perception of the teachers at Francisco Oringo Sr. Elementary School on the concepts and issues of inclusive education which served as the basis for formulating an intervention plan. It also revealed that there was no significant relationship between each of the six demographic profiles identified and the perception of the respondents on the concepts and issues of inclusive education in teaching. Finally, some challenges in inclusive education were revealed. It includes a lack of special education teachers, facilities for special care, special education classes, and appropriate resources.

Rasmitadila & Tambunan (2018). A preliminary study was conducted to find out the readiness of general elementary schools (GES) to become inclusive elementary schools (IES) based on the criteria for the implementation of government-specified inclusive schools. This research concludes that GES is not yet ready to become an IES. The government has not maximized the implementation of inclusive schools and needs effective programs, such as pioneering prospective schools through continuous assistance of inclusive elementary school candidates.

Adiputra et al (2018) Indonesia. The purpose of this study is to be able to classify parents' perceptions about the application of inclusive education in schools. Researchers interviewed 177 respondents with parents' criteria from elementary school-age children (7-12 years) in six districts in Lampung.

Budiyanto et al (2017) Indonesia. This research is the first to examine these issues in the context of the Indonesian government's intention to develop an inclusive education system. The implications of this research for how the development of inclusive education can be supported within Indonesia are discussed.

Yuwono et al (2017) Indonesia. This study investigated the role and effect of a guidance and counseling program on the learning processes of visually impaired students in an inclusive educational setting. The study also investigated the implementation of the principles and services of the program for such students.

Sheehy et al (2017) Indonesia. This research compared the responses from those working in inclusive, special, and regular schools regarding their epistemological and pedagogical beliefs. The results showed that teachers in inclusive schools expressed stronger social constructivist beliefs than those in other schools.

Adams et al (2016) Malaysia. This article outlines the findings from a contemporary study of teacher-parent collaboration in inclusive education in primary and secondary schools in Malaysia. Recent inclusive education policy developments within Malaysia have increased teachers' accountability to effectively meet the needs of all students.

The intricacies of teaching challenges faced by teachers are further exacerbated due to the presence of learners with spectrum autism disorder in a special education class. Hence, in this study, the main goal of the researcher is to determine the multi-forced effectiveness of the inclusion program for children who are diagnosed with spectrum autism disorder.

Statement of the Problem

This study aimed to describe the multi-factored effectiveness of the inclusion program for Children with Mild to Moderate Autism Spectrum Disorder.

Specifically, it sought answers to the following questions:

1. How may the inclusion program be described in terms of:
 - 1.1 personalized instructional strategies,
 - 1.2 communicative and scaffolding strategies, and
 - 1.3 collaborative and assessment
2. To what extent inclusion program is implemented in private and public schools?
3. What are the benefits of inclusion programs on children with autism?
4. What management implications can be derived from the findings of the study?

Conceptual Framework

Autism spectrum disorder (ASD) is a developmental disability caused by differences in the brain. Some people with ASD have a known difference, such as a genetic condition. Other causes are not yet known. Scientists believe multiple causes of ASD act together to change the most common ways people develop. Ajzen's Theory of Planned Behaviour (Ajzen,2005) guided the conceptual framework of the study. According to Ajzen, a person's actual behavior (for example teacher's interactions in a classroom) can be predicted based on how the person intends to behave in a particular situation (i.e. intention to teach in inclusive classrooms).

Thus, the intention is the most closely related construct to actual behavior. Intention, in turn, is influenced by three closely related constructs of attitude (i.e., whether or not a teacher perceived inclusion positively or negatively), perceived competence (i.e., has the ability and confidence to perform the behavior), and subjective norm (i.e., how others perceive the behavior). If a person has a positive attitude towards a phenomenon, a high level of perceived competence to perform the behavior, and works in a setting where most other significant others also believe in the idea, he or she is most likely to intend to perform the behavior.

In the case of children with spectrum autism, behaviors are not well-planned but can be patterned to what is acceptable. In this view, the theory presupposes the idea that one with a positive attitude towards a certain phenomenon, with a high level of perceived competence to perform the behaviors mostly to intend to do actions (or develop planned behaviors).

Also, this study will be aligned with the concept of multi-factored analysis under DepEd Order No. 29, s. 2018 entitled Policy on the Implementation of Multi-Factored Assessment Tool wherein the intention is to identify the pattern of behaviors that are most effective in identifying learners who may have exhibited developmental advancement or delays or have manifestations of learning disability or with spectrum autism for possible inclusion program.

Figure 1 presents the conceptual model of the study. The IPO model or Input-Process-Output model was utilized in the study.

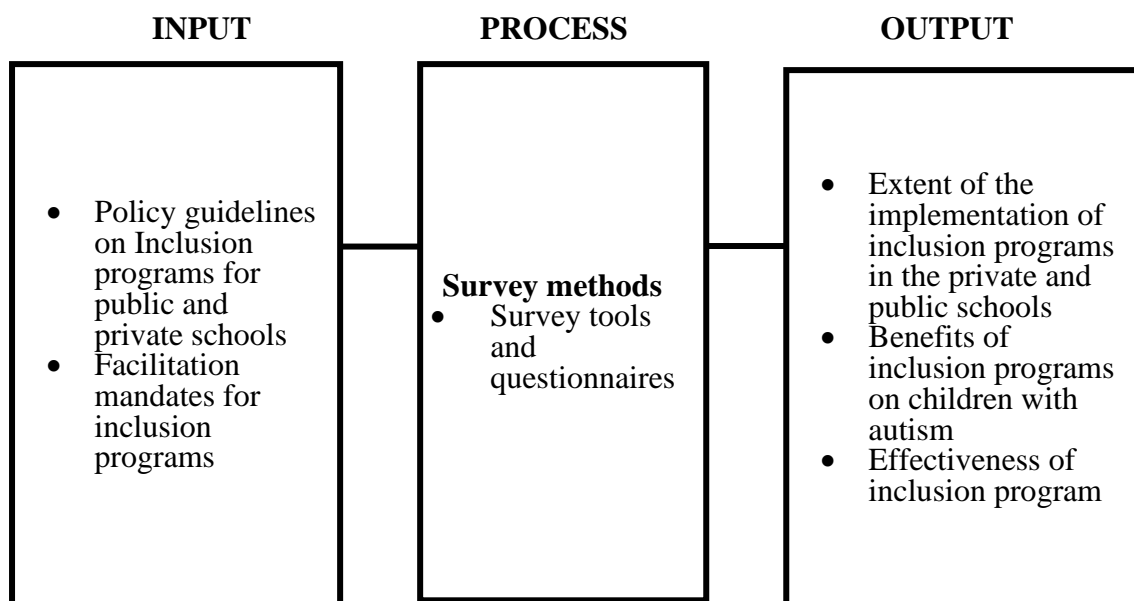


Figure 1. Conceptual Model of the Study

In the study, the IPO model was used. The Input frame presents the policy guidelines in the effective implementation of the inclusion program both for public and private schools for the children with autism disorders. The process frame includes the survey methods, tools, and questionnaires to gather data relevant to the questions raised in the study. And the output frame contains the expected outcomes of the study.

Significance of the Study

The study is deemed beneficial to the following groups:

- **Students diagnosed with spectrum autism.** They would receive the best benefit from the study. As they go around maximizing their skills and talents as a basis for possible inclusion programs.
- **Teachers.** Through the study, they would be guide on how to effectively diagnose learners with spectrum autism disorders. To provide suitable inclusion programs for their special needs.
- **School heads.** The study would be helpful for them to remedy the issues and concerns regarding the proper placement of learners with special needs. The findings from the study would be used to design a program that would provide learners with special needs with an appropriate learning environment.
- **Parents.** The study would be used as the basis for them to realize the needs of their children who are diagnosed with spectrum autism. The findings of the study would be used to encourage parents to be supportive and cooperative to the school programs and projects on enhancing the special education program in the public schools.
- **Future Researchers.** The study would be used to encourage them to develop and write scholarly papers on learners with special needs placed under the mainstream program. The findings can be used as baseline data to further help learners with special needs to provide them equality in terms of quality learning.

Scope and Limitation of the Study

The main concern of the study was to describe the multi-factored effectiveness of the inclusion program for learners with spectrum autism disorders. The study utilized the quantitative descriptive survey research method to determine the multi-factored effectiveness of inclusion programs for learners with special needs in public schools.

The study made use of the diagnostic tools provided for implementation by the Department of Education (DepEd) Central Office issued DepEd Order No. 29, s. 2018 entitled Policy on the Implementation of Multi-Factored Assessment Tool to assess Grade 1 learners enrolled in regular schools, who may have exhibited developmental advancement or delays or have manifestations of learning disability for inclusion program.

The respondents of this study would include learners and teachers from the special education program in the public school. The proposed study covered the current School Year 2022-2023.

Location of the Study

This study was conducted in select special education classes in the Schools Division of Bulacan and Private school. The respondents were learners who are presumed to have special needs. The teachers and parents were also serve as respondents for the proper diagnosis of the learners with assumed special needs.

Definition of Terms

To shed the light on understanding, the following operational definitions are hereby presented.

Learners with Spectrum Autism Disorders. This refers to a developmental disability caused by differences in the brain. Some people with ASD have a known difference, such as a genetic condition. Other causes are not yet known.

Inclusion Program. As to be used in the study, this refers to the DepEd order No. 44 s.2021 outlines the overall direction for Special Education Program to ensure educational services to learners with disabilities in both public and private basic educational institutions.

CHAPTER II

METHODOLOGY

The following is the conduct of the study in terms of methodologies and statistical analytics utilized in the interpretation of collected data. The manner of collection and selection of participants were discussed in this chapter.

Research Design

This study employed the descriptive-survey research method, it is a quantitative research design method intended for use to gather self-reported information/ data coming from respondents who believed as the most appropriate for the study.

Survey tools were the primary data-gathering tools used in the study. While the documentary analysis was utilized to ascertain the authenticity of the data based on the responses of the respondents.

Data Gathering Techniques

In this study, the researchers followed the data gathering procedures chronologically, such as, (1) A letter of consent for the conduct of the study was sent to the office of the Schools Division Superintendent for approval, and (2) Upon receiving the approval of the consent letter. The researcher notified the school's division supervisors of the target research locales for the conduct of the study,

Also, (3) The administration of survey questionnaires was done personally by the researcher, And the survey responses (data) were handled with the utmost confidentiality, (4) No respondents were forced to participate in the study, the parents were given informed consent to participate in the study, and (5) The researcher did the retrieval of data (responses) using google sheets and google docs.

Sampling Procedures

In this study, the respondents were selected using the purposive sampling method. Because the researcher already knew in mind who would best fit for the study. In purposive sampling, you set out to identify members of the population who are likely to possess certain characteristics or experiences (and to be willing to share them with you). In this way, you can select the individuals or cases that fit your study, focusing on a relatively small sample.

Data Analysis Scheme

After collecting all the questionnaires needed for the study, these were organized, tallied, tabulated, and analyzed using some statistical tools.

Descriptive statistics such as frequency, percentages, and weighted method were used to describe the multi-factored effectiveness of the inclusion program as well as the types of learners with mild to moderate spectrum autism disorder. The study served to present the descriptive part of only of the study.

The descriptive statistics were used to present the self-reported data of the respondents. Further, the gathered data were tabulated and presented using tables. The following statistical methods were used.

Frequency counts, percentages and weighted means were used to describe the implementation of the inclusion program, extent of its implementation as well as the benefits derived by the respondents from the being included in the inclusion programs.

Descriptive Rating Scale for Implementation of Inclusion Programs

| Scale | Rating | Interpretation |
|-------|-------------|----------------|
| 5 | 4.50 – 5.00 | Always |
| 4 | 3.50 – 4.49 | Often |
| 3 | 2.50 – 3.49 | Sometimes |
| 2 | 1.50 – 2.49 | Rarely |
| 1 | 1.00 – 1.49 | Never |

Descriptive Rating Scale for Extent of the Implementation of Inclusion Programs

| Scale | Rating | Interpretation |
|-------|-------------|-----------------------------------|
| 5 | 4.50 – 5.00 | Strongly agree/ Very great extent |
| 4 | 3.50 – 4.49 | Agree/ Great extent |
| 3 | 2.50 – 3.49 | Undecided/ Moderate extent |
| 2 | 1.50 – 2.49 | Disagree/ Little extent |
| 1 | 1.00 – 1.49 | Strongly disagree/ No extent |

Descriptive Rating Scale for Benefit of the Inclusion Programs

| Scale | Rating | Interpretation |
|-------|-------------|----------------|
| 5 | 4.50 - 5.00 | Always |
| 4 | 3.50 – 4.49 | Often |
| 3 | 2.50 – 3.49 | Sometimes |
| 2 | 1.50 – 2.49 | Rarely |
| 1 | 1.00 – 1.49 | Never |

CHAPTER III**RESULTS AND DISCUSSIONS**

This chapter presents the results and discussions of the study. The corresponding analysis and interpretation of data are incorporated in this portion of the study.

Inclusion program for Children with Autism

Education for all (EFA) stipulated that education shall be the rights of every Filipino learner. Education is granted to all students and it is the mandates of the Department of Education to ensure that all learners are receiving education regardless of their life conditions and mental capacity. Learners shall receive equal access to education.

In support, Republic Act (RA) 11650, or “An Act Instituting a Policy of Inclusion and Services for Learners with Disabilities in Support of Inclusive Education” provides that no learner shall be denied admission based on their disability. In this case, exclusive education shall embrace the philosophy of accepting all children regardless of race, size, shape, color, ability, or disability with support from school staff, students, parents, and the community.

Tables 1-3 present the inclusion program for children with autism in terms of personalized instructional strategies, communicative and scaffolding strategies, and communicative scaffolding strategies. They are often to always observed by the weighted mean value of 4.51. These may include always

observed in terms of communicative and scaffolding strategies (4.80) and communicative scaffolding strategies (4.59). And often observed in terms of personalized instructional strategies (4.15).

Personalized Instructional Strategies. In this study, this is operationally defined as the used of instructional strategies that addressed tailoring instructional materials and strategies to supports learners' interests, strengths, and engagement. It can be gleaned in Table 1 that that inclusion program for children with Autism is often observed which accounted by average of 4.15. These are often observed for planning instruction to address the interests of the learners (4.20) using variety of instructional strategies (4.32), selecting curricular and resources align with set goals (4.4). While personalized instructional strategies that are always include using strategies to motivate students (4.74), and planning instructions to address the strengths of students (4.60). And sometimes designing learning experiences that connect prior knowledge to new learning (2.92).

Table 1

Personalized Instructional Strategies

| Items | WM | Interpretation |
|---|-------------|----------------|
| 1. Modify instruction to meet the diverse learning needs of students. | 3.88 | Often |
| 2. Plan instruction to address the strengths of students. | 4.60 | Always |
| 3. Relate learning activities to students' personal and family experiences. | 3.74 | Often |
| 4. Use a variety of instructional strategies within the learning activity to engage students. | 4.32 | Often |
| 5. Plan instruction to address the interests of students. | 4.20 | Often |
| 6. Adapt materials and resources to meet diverse learning needs. | 4.54 | Always |
| 7. Design learning experiences that connect prior content knowledge to new learning | 2.92 | Sometimes |
| 8. Select curricular materials and resources that align with student learning goals. | 4.40 | Often |
| 9. Use strategies to motivate learners. | 4.74 | Always |
| Average | 4.15 | Often |

The results revealed that the inclusion program in terms of personalized instructional strategies are geared towards providing the individual needs of the learners with autism disorders. Under the inclusion program, the learners are privileged to have the learning environments that fitted to their specific needs.

Communicative Scaffolding Strategies (CSS). This include the strategies related to communication with and between students and creating attainable challenge levels for all learners. Table 2 presents the inclusion program in terms of communicative scaffolding strategies that is always observed by the average of 4.80.

These observations include providing regular opportunities for students to collaborate with others (4.96) reflected with the highest computed average. Followed by providing students with opportunities to interact with peers (4.84), asking effective questions that match instructional goals (4.76).

In addition, communicative strategies can be observed always by means of providing equal opportunities for students to ask questions, responding appropriately to students' questions/comments, and providing frequent and appropriate feedback during class activities which accounted by average of 4.76. And articulating high standards with learners is with the least computed average of 4.74.

The results suggested that inclusion program offers variation of communicative strategies that are supportive of their unique needs as learners. The same reason why one can expect that learners place in an inclusion program would receive tailored-fit approach of teaching and learning. In this regard, education has been extended to promote equal access to education, this view is clearly stipulated in the Department of Education (DepEd), DepEd Order No. 03, s. 2018 Basic Education Enrollment Policy to ensure equitable access to education.

Table 2

Communicative Scaffolding Strategies (CSS)

| Items | WM | Interpretation |
|--|------|----------------|
| 1. Provide equal opportunities for students to ask questions. | 4.76 | Always |
| 2. Provide students with opportunities to interact with peers. | 4.84 | Always |
| 3. Ask effective questions that match instructional goals. | 4.78 | Always |
| 4. Respond appropriately to students' questions/comments. | 4.76 | Always |

| | | |
|---|-------------|---------------|
| 5. Articulate high expectations of students. | 4.74 | Always |
| 6. Provide regular opportunities for students to collaborate with others. | 4.96 | Always |
| 7. Provide frequent and appropriate feedback during class activities. | 4.76 | Always |
| Average | 4.80 | Always |

Collaboration and Assessment Strategies. As used in the study was influenced by items related to working with other members of the inclusive education team including colleagues and parents, as well as using appropriate assessment practices. As described in Table 3 inclusion program in terms of collaboration and assessment strategies are always observed base on the recorded mean score of 4.59.

The learning development of children with autism disorders are assessed using assessment strategies that are suited to their unique learning needs such as in terms of using some strategies to prevent behavioral disruption in class (4.86), by making the test accommodations when necessary (4.80), and by making each learner learn according to his/her ability and potential (4.74), and using a variety of assessment strategies to measure student progress (4.56).

Table 3
Collaboration and Assessment Strategies (CAS)

| Items | WM | Interpretation |
|---|-------------|----------------|
| 1. Create a safe learning environment where students feel encouraged to take risks. | 4.82 | Always |
| 2. Have established standards of conduct and they are clear to students. | 4.24 | Often |
| 3. Make test accommodations when necessary. | 4.80 | Always |
| 4. Collaborate with teammates to support student learning. | 4.76 | Always |
| 5. Regularly share information and/or best practices with colleagues to improve practice. | 4.66 | Always |
| 6. Engage with families to share information and strategies to enhance student learning. | 4.32 | Often |
| 7. Encourage students to reflect on what they have learned. | 4.16 | Often |
| 8. Use a variety of assessment strategies to measure student progress. | 4.56 | Always |
| 9. Use some strategies to prevent behavioral disruption in class. | 4.86 | Always |
| 10. Make each student learn according to his/her ability and potential. | 4.74 | Always |
| Average | 4.59 | Always |

The assessment process of the learning and abilities of the children with autism is done always done collaboratively as evident by collaborating with teammates to support students' learning (4.76) and by regularly sharing information of best practices with colleagues to improve practice (4.76). And this can be all possible by always creating a safe learning environment where learners like them feel encouraged to take risks and be safe (4.82), and by tapping parents and significant families to enhance the learners' learning (4.32). Also, encouraging the learners to reflect on what they have learned (4.16).

Results would suggest that the inclusion program in terms of collaboration and assessment strategies are very helpful to promote equality in education where all types of learners are given the privileged and the rights to receive quality education and to achieve progress in learning. DepEd Order No. 72, s.2009 Inclusive Education as a Strategy to Increase Participation Rate of Children to reach out and serve all learners assessed and observed with disabilities including those at risk requiring special education services.

Further analysis of the results would suggest that the inclusion program in terms of Personalized Instructional Strategies, Communicative Scaffolding Strategies (CSS), and Collaboration and Assessment Strategies (CAS) are making inclusion programs for children with autism disorder very effective.

The effectiveness of the inclusion programs for the children with autism is based on how the instructional strategies are personalized to fit with the unique needs of the learners and these are always done when needed. There are collaboration and assessment tools that monitor the learning progress of the learners and make use of assessment tools best suited for the learners needs. Inclusion in a general classroom is a positive option for children with autism. Most students on the autism spectrum are included within general classrooms, because they have the right to be taught in an inclusive classroom (Andre et al., 2019).

Extent of the Implementation of the Inclusion Program

The need to educate learners with disabilities are one of the challenging tasks of the government. And this shall be done with purpose to ensure that the education for all (EFA) policy is being followed. The need to provide equal access to education is also one of the several reasons why the government opted to provide the inclusion programs both in the private and public schools. DepEd Order No. 72, s.2009 Inclusive Education as a

Strategy to Increase Participation Rate of Children to reach out and serve all learners assessed and observed with disabilities including those at risk requiring special education services serve to support the mandate.

Among the many leading mental or intellectual disabilities of the Filipino learners is the autism spectrum disorder. According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), ASD defines as “persistent deficits in social communication and social interaction across multiple contexts” (American Psychiatric Association [APA], 2013). Symptoms are typically visible around age two but could be seen earlier. The symptoms are broken into three main categories: communication, emotional and social difficulties. To be diagnosed the symptoms need to cause major disruption to daily functioning. They should also be persistent through weeks as well as locations (APA, 2013); this means that the symptoms observed will last for multiple weeks and be present in multiple locations.

The same reasons that the extent of the implementation of the inclusion program differs on the unique understanding of school leaders and managers as well as the parents. In this study, a survey was done to gather data about the views of the educators regarding the extent of the implementation of the inclusion programs in the public and private schools.

Educators’ attitudes in inclusive education. The extent of the implementation of inclusion programs in regular schools are the mandates provided to each of the educators both in the public and private sectors. They are tasked to ensure that all learners will receive quality education and no such learners will not be given a chance for education. Table 3 presents the data gathered for educators’ attitudes regarding extent of the implementation of inclusive education is to a very great extent by the mean score of 4.55.

Table 3
Educators’ Attitudes Regarding Inclusive Education

| Items | WM | Interpretation |
|--|-------------|--------------------------|
| Inclusive education at my school has been a positive experience for students with disabilities. | 4.55 | Very great extent |
| Inclusive education at my school has been is socially advantageous for students with disabilities. | 4.65 | Very great extent |
| Inclusive education at my school is academically advantageous for students with disabilities. | 4.61 | Very great extent |
| General education teachers at my school have been adequately prepared and are provided with enough training, experiences, and supports in order to include students with disabilities in the general education classroom | 4.49 | Great extent |
| Paraprofessionals at my school have been adequately prepared and are provided with enough training, experiences and supports in order to include students with disabilities in the general education classroom. | 4.32 | Great extent |
| Students with disabilities in the general education classroom develop a better self-concept than those in the self-contained special education classroom. | 4.49 | Often |
| Students with disabilities do not monopolize teachers’ time in the general education classroom. | 4.53 | Very great extent |
| Students with disabilities can be best served in the special education classroom | 4.76 | Very great extent |
| Average | 4.55 | Very great extent |

Moreover, these include the educators’ attitude such as having limited positive acceptance that learners with disabilities can best be taught in the special education classroom (4.55). Other observations that inclusive education at my school has been is socially advantageous for students with disabilities (4.65) and is academically advantageous for students with disabilities (4.61). It also provides a positive experience for students with disabilities (4.55). And they believed that the extent of the implementation of the inclusion program serve not limit the extent of the teachers’ time in the general education classroom (4.53).

On the other hand, they believed that inclusion programs are best achieved through teachers that offer their full commitment to General education teaching, and they can fully serve the program because they were prepared and are provided with enough training, experiences, and supports in order to include students with disabilities in the general education classroom (4.49) and same with the Paraprofessionals that have been adequately prepared and are provided with enough training, experiences and supports in order to include students with disabilities in the general education classroom (4.32) often observed.

The results revealed that educators are aware of the importance of recognizing inclusion program as a means of providing equal access to quality education among the mentally challenged Filipino learners. Although, the intention is so noble there are several issues and challenges that still need to be resolved. In agreement, Roxas et al., (2019) posited that the most common problems encountered by the school heads and teachers were the parents in the in-denial stage and the availability of instructional materials.

Benefits of Inclusion Programs on Children with Autism Spectrum Disorder

Inclusion is defined in many ways. Inclusion are said to provide so many benefits for learners with mental challenges. These include positive attitudes toward autism will make inclusion more successful for a child with autism, and inclusion can teach all students how to have positive relationships with one another. Inclusion can be defined in many ways, but the premise behind most definitions remains the same in that inclusion ensures that all students are included in learning (Jung et al., 2019).

Accordingly, inclusion is an educational program practice that integrates all levels of learners in one classroom and is the “process of overcoming the barriers limiting the participation of all learners” (Meindl et al., 2020, p. 1). Children should have access to inclusion, because the practice of inclusion can benefit all learners (Campbell, 2016). There are many different variations of the definition of inclusion, but, inclusion is allowing all students to learn in social environments together.

Benefits of Inclusion Programs. As can be gleaned in Table 4 there are benefits that can be received by learners with autism under the inclusion program that are always observed by the mean value of 4.58. These include benefits such as valuable academic resources and social learning opportunities (4.69), and reduce the stigma due to positive interactions providing in a regular classroom (4.62). Also, having the learning environments that create respect to each other for the learners to learn how to interact and work together (4.58).

Table 4
Benefits of Inclusion Program

| Items | WM | Interpretation |
|--|-------------|----------------|
| Inclusion can teach all students how to have positive relationships with one another. | 4.56 | Always |
| Inclusive classrooms can reduce stigma due to the positive interactions among all students. | 4.62 | Always |
| Students with autism can be taught to their interests and abilities when in an inclusive classroom, because that may create more success for that child. | 4.57 | Always |
| Inclusion is beneficial for all students because classrooms “provide valuable academic resources and social learning opportunities” | 4.69 | Always |
| Students with autism who are in inclusive classrooms demonstrate “better cognitive and adaptive characteristics” | 4.53 | Always |
| Inclusion in classrooms increases overall knowledge of autism. | 4.51 | Always |
| Inclusion can create respectful and positive environments wherein all students learn how to interact and work together. | 4.58 | Always |
| Average | 4.58 | Always |

In addition, through inclusion programs learners with autism are found to demonstrate cognitive and adaptive characteristics (4.53) and increase awareness to autism. Also, they are provided with lessons and activities align with their interests and abilities when in an inclusive classroom, because that may create more success for that child (4.57).

Results would mean that inclusion programs provide the needed benefits of learners with autism disorders. The programs are made possible for their unique developmental learning needs.

Further analysis would suggest that inclusion program is very helpful for these types of learners. The implementation of the inclusion programs serve as the innovative approach of the Department of Education to resolve issues of illiteracy and low performances among learners both in the private and public sectors.

Management Implications Derived from the Study

Based on the findings of the study, the research paper made the following implications:

- The inclusion programs are composed of personalized instructional strategies, communicative and scaffolding strategies and collaborative and assessment tools to offer the best possible learning experiences among children with autism disorders and other learners with learning difficulties. This shall be monitored regularly to ensure that they are provided with instructional approaches very much suited to them. Evidence of learning program is one good measure of how they are taught under inclusion programs.
- The inclusion program both in the public and private schools are operating to the very great extent. This can be attributed to the need to further enhance the learning conditions of learners with autism and other learning difficulties.
- Inclusions programs are said to provide the benefits needed by the learners to have positive learning environment. The positive benefits received as being part of the inclusion program is very helpful to promoted positive learning environment.
- Educators and school leaders are observed to lead the inclusion program, their attitudes and values are very useful for them to appreciate and recognize the importance of inclusive education to provide equal human rights for quality education among learners with various learning

difficulties and challenges. The autism learners are believed to receive much of the benefits from the inclusion programs both in the private and public schools.

CHAPTER IV

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

This chapter presents the summary of the findings based on the data analyzed, in the previous chapter, significant conclusions about the results, and recommendations that are useful to the readers and future researchers.

Summary

The study was conducted to describe inclusion programs in terms of personalized instructional strategies, communicative and scaffolding strategies, and collaborative and assessment for children with autism. The study made use of descriptive-survey method to gather the self-reported data from the respondents useful to facilitate understanding of the study.

Summary of finding

The following findings of the study were based on the data gathered:

1. The inclusion program be described in terms of the following:

- 1.1 personalized instructional strategies,**
- 1.2 communicative and scaffolding strategies, and**
- 1.3 collaborative and assessment**

Based on the findings of the study, the inclusion programs are often to always observed by the weighted mean value of 4.51. These may include always observed in terms of communicative and scaffolding strategies (4.80) and collaborative and assessment strategies (4.59). And often observed in terms of personalized instructional strategies (4.15).

2. Extent inclusion program is implemented in private and public schools.

The extent of the implementation of inclusion programs in regular schools are the mandates provided to each of the educators both in the public and private sectors. And this is observed to the very extent by the weighted mean of 4.55.

3. The benefits of inclusion programs on children with autism

The benefits received by learners with autism under the inclusion program that are always observed by average of 4.58. These include benefits such as valuable academic resources and social learning opportunities (4.69), and reduce the stigma due to positive interactions providing in a regular classroom (4.62). Also, having the learning environments that create respect to each other for the learners to learn how to interact and work together (4.58).

4. What management implications can be derived from the findings of the study?

Based on the findings of the study, the research paper made the following implications:

- The inclusion programs are composed of personalized instructional strategies, communicative and scaffolding strategies and collaborative and assessment tools to offer the best possible learning experiences among children with autism disorders and other learners with learning difficulties. This shall be monitored regularly to ensure that they are provided with instructional approaches very much suited to them. Evidence of learning program is one good measure of how they are taught under inclusion programs.
- The inclusion program both in the public and private schools are operating to the very great extent. This can be attributed to the need to further enhance the learning conditions of learners with autism and other learning difficulties.
- Inclusions programs are said to provide the benefits needed by the learners to have positive learning environment. The positive benefits received as being part of the inclusion program is very helpful to promoted positive learning environment.
- Educators and school leaders are observed to lead the inclusion program, their attitudes and values are very useful for them to appreciate and recognize the importance of inclusive education to provide equal human rights for quality education among learners with various learning difficulties and challenges. The autism learners are believed to receive much of the benefits from the inclusion programs both in the private and public schools.

Conclusions

Based on the findings of the study, the following conclusions were drawn.

1. The inclusion programs are often to always observed by the weighted mean value of 4.51. These may include always observed in terms of

communicative and scaffolding strategies (4.80) and communicative scaffolding strategies (4.59). And often observed in terms of personalized instructional strategies (4.15). This can be concluded that the inclusion programs are operating positively to provide quality learning experiences among learners with autism disorders.

2. The extent of the implementation of inclusion programs in regular schools are the mandates provided to each of the educators both in the public and private sectors.
And this is observed to the very extent. This can be concluded that inclusion programs are operated and managed by educators who values the importance of quality education for children with autism disorder.
3. The benefits received by learners with autism under the inclusion program that are always observed by average of 4.58. These include benefits such as valuable academic resources and social learning opportunities (4.69), and reduce the stigma due to positive interactions providing in a regular classroom (4.62). Also, having the learning environments that create respect to each other for the learners to learn how to interact and work together (4.58). And all these are believed to be helpful to provide the best learning possible tailored-fit to the unique needs of these learners.
4. The school leadership implications derived from the study are found useful to further improve the inclusion programs both in the private and public schools for learners with autism and other forms of learning disabilities, like that of the ID or learners with intellectual difficulty.

Recommendations

Based on the findings and conclusions of the study, the following recommendations are hereby provided.

1. The school officials and educators both in the public and private schools are motivated and encouraged to promote inclusion education and to continuously create assessment tools to monitor learning progress of each of the learner with autism disorders.
2. The program implementation policy and guidelines for inclusion programs must be followed accordingly to ensure that each of the learners with learning disabilities or autism will be given appropriate learning privileges. The right to learn and be educated is the unique right of each learners regardless of their economic status in life as well as their learning conditions.
3. The general education teachers and those who are assigned to teach in an inclusion program should be those who are trained and certified to handle such kind of learners. And they should be given enough training and updating of their teaching skills all year-round.
4. Different government agencies are advised to give assistance and promote collaborative efforts to secure the safety of the learners who are trying to educate themselves. The learners with autism disorders are very sensitive to many things and they should be handled by teachers who have hearts for them to become better.
5. Researchers under the same field of interest can make use of the findings of the study to develop research that will tackle the conditions of the learners under the mainstream classes. The are learners with autism and other learning disabilities place in under the regular classes.

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