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INCLUSION: INFLUENCING ATTITUDES THROUGH TRAINING, COLLABORATION, AND SUPPORT

by Donna Groon

A Thesis

Submitted in partial fulfillment of the requirements of the Master of Arts Degree of The Graduate School at

Rowan University April 29, 2009

ABSTRACT

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INCLUSION: INFLUENCING ATTITUDES THROUGH TRAINING,
COLLABORATION, AND SUPPORT
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Dr. Jay Kuder Masters of Arts in Learning Disabilities

The purpose of this study was to examine the current attitudes towards inclusion of kindergarten through 5th grade general education teachers and paraprofessionals in a small New Jersey school district. Participants were surveyed using the MATIES, Multidimensional Attitudes Toward Inclusive Education Scale. An attempt was made to influence the attitudes of those teachers and paraprofessionals through a brief series of interventions that included in-service training, collaboration between the researcher, teachers and paraprofessionals, and the provision of support to teachers in areas where they expressed a specific need. After the intervention, participants were resurveyed to determine if a change in attitudes had taken place. Three subscales were obtained. They measured cognitive, affective, and behavioral attitudes. The full score of the MATIES revealed that attitudes had improved as a result of the intervention, and analysis of the subscales indicated that this improvement had occurred specifically in cognitive and affective attitudes, but not in behavioral attitudes. Possible reasons for this discrepancy are discussed.

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CHAPTER 1

Introduction

"Your child does not belong in this school." When spoken by a classroom teacher or paraprofessional, are there any words more crushing? What is a parent of a classified student to do after hearing such a pronouncement? How can that parent argue with someone who seemingly specializes in knowing children? Any action on the parent's part will be read by the teacher as a challenge to his years of experience. The teacher will say that he knows the student well and is with the student for many hours each day. The teacher will report that she sees the student in social and academic situations, and that with his or her years of experience the teacher knows who belongs in the classroom and who does not. Who is better equipped than the teacher or classroom aide to make the judgment that a child does not belong?

Further, what exactly does it mean to *belong*? Does it mean being able to do the same things academically and at the same time as students in the same grade? Does it mean being accepted socially by a majority of the students in the class? Does it mean having the same values as classmates, the same traditions, the same learning style, the same level of achievement, or the same level of understanding? Or does a child belong simply because a teacher has been given the responsibility for that child's education?

One of the more significant aspects of education reform in the last fifteen years is the movement toward inclusion (McLeskey & Waldron, 2002). Inclusion is "the practice of educating all or most children in the same classroom, including children with physical, mental, and developmental disabilities" (McBrien and Brandt, 1997). An inclusive

education is the education of all students in age appropriate regular classrooms, regardless of the degree or severity of a disability. It involves students accessing the regular curriculum, with the necessary support and within a welcoming social atmosphere (Mahat, 2008).

Teachers must be well-prepared for their new roles in this inclusive environment and for their new responsibilities in order for implementation of inclusion to be successful (McLeskey & Waldron, 2002). Although most teachers feel responsible for student learning (Weiner, 2003), deBettencourt (1999) found that a majority of general education teachers disagreed with the concept of mainstreaming or inclusion. Teachers expressed concerns about the amount of time needed to address the needs of students with disabilities to the detriment of other students. They were also concerned about the quality of work produced by special needs students and with the lack of adequate support services. Additionally, they worried about their own deficiencies in training and in the skills required to support inclusion (Campbell et. al, 2003). Since most teachers want to run a successful classroom their concerns are justified (McLeskey & Waldron, 2002). Burke and Sutherland (2004) found that successful implementation of an inclusion program depends on the positive attitudes of teachers, and although there are mixed attitudes reported on inclusion in the international research literature, most recent research demonstrates that teacher attitude is a critical component in the success of inclusive programs (Romi & Leyser, 2006).

In order to foster ideal inclusion, teachers will need to accept every student and ensure that they are considered full members of the learning community with all their needs met in the classroom (Mahat, 2008). Weiner (2003) suggests that revitalizing

teachers' respect and concern for students may be a prerequisite to building sustainable high quality instruction.

An educational environment needs to be created where it is taken for granted that children belong, and that with adequate supports, children will thrive. Teachers and paraprofessionals need to be convinced that inclusion works because if they do not believe in the concept of inclusion, they will not work to help it succeed; instead, they may directly or indirectly undermine inclusion efforts.

Statement of Problem

This study will examine the current attitudes towards inclusion of general education teachers and paraprofessionals in a small New Jersey school district. An attempt will be made to influence the attitudes of a select group of paraprofessionals and teachers in the district and to document those changes in attitude. It is hypothesized that attitudes will improve as a result of intervention with that select group.

Teacher attitudes have been shown to greatly influence the success of inclusive education. Teachers, however, frequently exhibit negative attitudes towards inclusion due to their feeling that they are not equipped to meet the needs of those students placed in their classrooms. It is expected that the best form of influencing the attitudes of teachers will be a period of training and ongoing support. Teacher attitudes towards inclusion are expected to become more positive with this intervention. The expected positive changes in attitude should also result in better instruction, acceptance of students with special needs, and the improved academic performance of those students.

CHAPTER 2

Literature Review

BACKGROUND

In the early 19th century, public institutions were created to deal with social issues such as crime, mental illness, deafness, blindness and mental retardation. These institutions dealt with these issues by isolating and removing individuals from society. Later in the 19th century, due to the horrid conditions in these institutions, different ways of dealing with juvenile delinquents and children with disabilities were developed. Children were frequently placed with community families, and it was recognized that location and environment were an important part of the process of using education to correct social ills (Dorn, Fuchs, & Fuchs, 1996).

With consideration of location and environment, in the last several decades, there has been a large increase in the number of students with special needs who are included in the general education classroom (Kamens, Loprete & Slostad, 2003). Today, most children with disabilities are living with their families at home and being educated in regular classrooms (Gilmore, Campbell, & Cuskelly, 2003). The Office of Special Education and Rehabilitative Services reported that in 1997, 71% of students with disabilities received their education in the regular classroom for some part of their day (Kamens et. al. 2003), but inclusion is not new. It is a new version of the old idea that quality is inherent to place. Today's advocates of inclusion rely on the beliefs of the mid 19th century when they argue that there are certain qualities inherent to separate and regular classrooms (Dorn et. al. 1996).

Another motivation for inclusion is the recognition that low expectations and distorted goals are often set for students in segregated settings (Sapon-Shevin, 1996).

According to Romi and Leyser (2006) classrooms around the world are becoming more heterogeneous as a result of this movement toward inclusion. It is also interesting to note that the number of students with disabilities is also growing just as many of those students are being educated in these inclusive settings. The school-age population is projected to grow to forty-two million by 2010, and children of immigrants will account for more than half of that population (deBettencourt, 1999).

Because of this increase in numbers, school districts sometimes eliminate costly special education programs by dumping students into inadequately prepared or unsupported classrooms attributing this dumping to inclusion, but this is not the intended purpose of inclusion. Inclusion is not simply the merging of two systems. It is instead, the creation of a new, improved, more inclusive system for all students (Sapon-Shevin, 1996). The environment of an inclusive classroom constantly changes because it is created by the interactions the teacher and the students have as a group or as individuals in that group (Burke & Sutherland, 2004). An inclusive classroom cannot be the rigidly structured, everyone-on-the-same-page, individual-teacher-at-the-front-of-the-room classroom. Existing classrooms and structures must be changed so that all students in the inclusive setting can be served well (Sapon-Shevin, 1996). This restructuring of the mainstream classroom will accommodate every child no matter what the disability (Avramidis, Bayliss & Burden, 2000).

To be successful, inclusion must address the details of day to day classroom instruction. It must be perceived by teachers as being effective for both the general

education student and the student with disabilities, and it must lead to enhancement of the teacher's repertoire of instructional methods (Weiner, 2003). In a study of early childhood special educators, Cross, Traub, Hutter-Pishgahi, and Shelton (2004) found that successful inclusion means many things. It means children make progress on their individual goals, and they make gains in their personal development and in their acquisition of language and skills. It also means that they are welcomed by staff members and peers and accepted as full members of the group. Finally, successful inclusion means that parents are pleased with their child's gains, and that children appear to be comfortable and happy in the regular education group setting.

Successful inclusion is a commitment to educate all children to the best of their abilities and to teach them to be responsible, caring members of society who are aware of their relationship, importance, and responsibility towards one another, and also aware of the needs they have in common with others in the community (Sapon-Shevin, 1996). If a child is rejected by peers or does not receive adequate support from staff, and if staff do not respond to concerns from parents, the child's inclusion is not successful (Cross et. al. 2004).

Inclusion is about improving the education of all students (McLeskey & Waldron, 2002), and the success of inclusion depends on having qualified classroom teachers (Romi & Leyser, 2006). These teachers need to act as coaches, provide scaffolded instruction, encourage student problem solving, arrange student activities, provide resources that guide students to act independently, evaluate students in a continuous learning cycle by using informal assessment to inform their planning and teaching and to monitor student comprehension (Laframboise, Epanchin, & Colucci, 2004). Inclusion

requires changes in curriculum, pedagogy, staff development, school climate and school structures (Sapon-Shevin, 1996). Successful inclusion also depends on human and material resources and on their successful implementation, but the number of resources (more people or more computers) is not as important as how those resources are used (Avramidis et. al. 2000). Studies are also beginning to examine the impact of cooperative teaching between general educators and special educators on successful inclusion (deBettencourt, 1999).

It is obvious that there are many changes needed to be made for successful inclusion of students with disabilities, and in some schools inclusion is frequently the spark for wide-ranging change (Sapon-Shevin, 1996); however, significant obstacles still prevent efficient inclusion (Gilman, 2007). Demands on general education teachers and staff to meet the needs of all students have increased (deBettencourt, 1999). The teacher has the role of nurturer, guide, and facilitator (Gilman, 2007), and class size, inadequate resources, the extent to which all students would benefit from inclusion and lack of adequate teacher preparation have been identified by teachers as factors that affect the success of inclusion (Aramidis et. al. 2000).

With so much depending on the attitudes, knowledge, and competence of all teachers, the 1997 amendments to IDEA mandated states to prepare all teachers to work with student with disabilities (Buell, Hallam, Gamel-McCormick, 1999). Preparation is essential since research has shown that students with disabilities make at least as much developmental progress in inclusive classrooms as they do in non-inclusive classrooms (Cross et. al. 2004), and since every classroom has a differentiated range of abilities, adaptations must take place in order for learning to occur. Teachers must be prepared to

make such adaptations, and those adaptations must occur not only in curriculum and environment, but also in attitudes (McLeskey & Waldron, 2002) since positive attitudes allow for positive change.

REPORTED ATTITUDES TOWARDS INCLUSION

A majority of researchers define attitude as emotion-laden mindsets that are a motivator for behavior and as a prevailing and consistent tendency to behave in a certain way (Rao, 2004). Attitudes motivate and underlie beliefs that are evaluative responses to these attitudes (Wilzinki, 1991). Therefore, attitude causes and precedes behavior and forms our beliefs.

There are three elements of attitude (Rao, 2004). They are cognition, affect and intention/behavior. Cognition is the perception and conceptualization of the attitude subject. Affect is the emotional underpinning of beliefs and the amount of positive or negative feeling toward the attitude object, and behavior is the response or the intention to behave in a particular way towards the attention object (Rao, 2004). When we apply these ideas to inclusion, we can see how our attitudes, those perceptions of inclusion, would cause us to behave in ways that would encourage or diminish its success.

A wide range of attitudes can be observed in our schools. Gilmore, Campbell, and Cuskelly (2003) found that for the majority of teachers, views of inclusion become increasingly less positive with increasing years of classroom experience. One reason for this is that general classroom teachers rated their self-efficacy, ability and understanding to be lower than special education teachers and expressed a need for training, resources and increased support (Campbell et. al. 2003). Also, most teachers will not tolerate

students who are more difficult to teach than those they currently have in their classroom. These teachers will not adopt new teaching methods without more support than school districts can sometimes provide (Dorn et. al. 1996). General education teachers must not only provide instruction to special needs students, but they are also unfamiliar with the rules and regulations of special education (Cahill & Mitra, 2008). Those who teach content area curriculum and are responsible for covering curriculum at a rapid pace may not have positive attitudes toward the student who causes that pace to be interrupted (deBettencourt, 1999), and regular education teachers feel they do not have a clear understanding of how disabilities impact the acquisition of new skills, so they feel unprepared to meet the demands of inclusion (DeSimone & Parmar, 2006).

Burke and Sutherland (2004) found that teachers that felt they did not have enough knowledge had negative attitudes towards inclusion. There is also a strong negative relationship between understanding inclusion and the belief that one cannot counteract home environment (Buell et. al. 1999).

Increasing years of classroom experience had a different affect on attitudes of teachers, when those years included experience in inclusive classrooms. A study completed by Cook, Semmel, and Gerber (1999) found that there was a relationship between involvement in special education and attitudes towards inclusion. Special education teachers directly influence the success of inclusion since they deliver instruction in the inclusive classroom and provide support to others who provide services in the inclusive setting, but according to Cook, Semmel, and Gerber (1999) they are unsupportive, ambivalent or only slightly positive toward inclusion, while principals, who are more removed, tend to hold more positive attitudes. Cook, Semmel, and Gerber

(1999) recommend that steps be taken to acquire the support of special education teachers before implementation of inclusive practices in order to ensure success. Teachers with experience in inclusion favored inclusion (Villa, Thousand & Chapple, 1996), and experience with inclusion appears to result in a positive change in attitudes and an increase in teacher confidence (Avramidis et. al. 2000).

Attitudes of others involved in inclusion have also been reported. Principals had a positive attitude towards inclusion because they were not directly involved in its implementation, while special educators were found to be less supportive because they were directly involved in inclusion (Cook et. al. 1999). Teacher trainees hold generally positive attitudes towards the concept of inclusion, but those attitudes were subject to change during their course of training (Mintz, 2007). Further, student teachers, although predisposed to inclusionary values, may change their attitudes when they are confronted with specific issues in the inclusive classroom. Avramidis, Bayliss and Burden (2000) found that secondary student teachers held positive attitudes, but did not feel confident about their competence with students with severe disabilities and behavior and emotional difficulties. In both cases, this might possibly be linked to a limited bank of knowledge coupled with little or no experience. Finally, preschool teachers were found to have more positive attitudes due to their training, which focused on developmental issues, and the fact that early childhood classrooms are less demanding academically (Gilmore et. al. 2003).

Avramidis, Bayliss and Burden (2000) found that attitudes towards inclusion do change over time as teachers go through the process of implementation. Also, teachers already involved in inclusive programs have more positive attitudes than those who are

not involved in such programs as stated earlier. Their research was conducted in a section of England where progress had already been made in inclusive education.

Avramidis, Bayliss and Burden (2000) surveyed mainstream teachers to collect information on their attitudes toward inclusion, on the effects of training on those attitudes, and on the identification of barriers towards inclusion using a suvey based on the three component model of attitude that is described in more detail later in this report.

In a study of teacher attitudes towards students with Down syndrome, teachers with higher levels of education had more positive views about inclusion, possibly because they had been provided with more knowledge about the disability or they had acquired an increased confidence in their own abilities (Gilmore et. al. 2003). Buell, Hallam, and Gamel-McCormick (1999) found a strong positive relationship between understanding inclusion and the belief that teachers can influence students. They also found that special education teachers report they are more confident and better prepared to meet the needs in the general education classroom.

It has been reported that teachers who are confident about their skills have positive attitudes (Avramidis et. al. 2000). Certified special educators have received specialized training, are advocates for students, and are assumed to have specialized skills. They are dedicated to meeting the needs of students with disabilities. As such, they are in a unique position to shape school attitudes (Cook et. al. 1999).

WHY ATTITUDES ARE IMPORTANT

Teachers must come to understand that much of what they do is based on attitude and belief (Buell et. al. 1999). Seventy-four percent of teachers surveyed by Weiner

(2003) said teacher attitudes towards students were the first or second most important condition needed for successful inclusion. This is because attitudes create positive or negative behaviors and expectations and can ensure or limit successful inclusion (Mahat, 2008). Negative attitudes toward disability lead to low expectations of students with disabilities which may lead to fewer learning opportunities and a cycle of impaired performance and furthered lowered expectations (Campbell et. al. 2003). For example, Sari (2007) found that many educators have negative attitudes toward the inclusion of deaf students which creates expectations of low achievement. Further, he found that positive attitudes encourage development of school policies and allocation of resources to increase the quality of education for the deaf in regular classrooms.

Romi and Leyser (2006) identified variables related to negative attitudes towards inclusion. Teachers who hold these negative attitudes are less accepting of students with severe disabilities, and they reject students with emotional and behavioral disorders. Their sample included 1155 pre-service teacher enrolled in teacher preparation programs in different colleges in Israel. Because the respondents indicated a lack in confidence in the instruction skills of general education inclusion teachers when dealing with students with behavioral and emotional issues, they continued to support special education placements over inclusive placements.

Successful implementation of an inclusion program depends on positive teacher attitudes (Burke & Sutherland, 2004); therefore, success of any inclusive policy depends upon cooperation and commitment of those most directly involved (Mahat, 2008).

Administrators may set the tone for effective implementation of inclusive practices (Cross et. al. 2004), but principals' attitudes are particularly powerful since they are

responsible for implementation, and they control resources and schedules (Cook et. al. 1999).

Pivik, McComas, and LaFlamme (2002) described unintentional attitudinal barriers to inclusion as lack of knowledge, lack of education, lack of understanding, or lack of effort on the part of the educational system or staff. Teachers who hold negative attitudes about what people with disabilities are capable of achieving, may undermine successful inclusion (Gilmore et. al. 2003)(Lee & Rodda, 1994), and some teachers, who define their roles as serving average students, may exclude others from their classroom (Sari, 2007). Some teachers' beliefs regarding inclusive education may also be influenced by distinctions teachers make between students with mild and severe disabilities (Dedrick, Marfo, & Harris, 2007), but when teachers are given appropriate supports and opportunities to learn additional strategies they may become more open to including the child with special needs (Cross et. al. 2004). Sari (2007) found that increasing knowledge levels can lead to positive attitude changes among teachers toward inclusion of students with deafness (Sari, 2007). Such a change in attitude can lead to the vision of a child as competent rather than a needy and this new vision fosters inclusive practice (Gilman, 2007). Teachers will be more effective at providing instruction to all students if they see the child with disabilities as an individual with needs, just as they see the child without disabilities (Kamens et. al. 2003).

A change in attitudes, however, may not result in immediate action (Bull, Overton, & Montgomery, 2000). Attitudes precede behavior (Cook, 2002), and since an attitude is an expression of a positive or negative perspective concerning what happens with a child in an inclusive setting (Cross et. al. 2004), a change in attitude will help

teachers get involved with the "will as well as the skill to be excellent teachers." When teachers believe that students are capable learners, the students know it and learn to believe in themselves (Weiner, 2003). This is a change, and change has a ripple effect. What a teacher does or changes in her classroom affects the teacher who has the student the next year and the following year. A teacher's actions are evaluated and watched by other teachers, parents, principals, the school board and other students (McLeskey & Waldron, 2002), and attitudes that are developed are crucial to the success of inclusion (Mahat, 2008).

MEASUREMENT OF ATTITUDE

Attitudes are formed by experience and knowledge (Burke & Sutherland, 2004). There has been a great deal of research on teachers' attitudes toward inclusion and also on the instruments developed to measure those attitudes (Dedrick et. al. 2007). One scale, the Educational Attitude Survey was developed by Reynolds and Greco (1980) for their study of teachers' attitudes toward the mainstreaming of handicapped children into regular classrooms. It consisted of 16 items. Another scale, the eighteen statement Attitudes Towards Mainstreaming Scale was cross validated by Berryman and Neal (1980) using a sample that included both pre-service students and in-service teachers representing seventeen teaching fields. The Attitudes Toward Inclusive Education Scale, the ATIES, is a measure of positive and negative attitudes toward integrating children with disabilities into regular classes (Wilczenski, 1995). The Teacher Integration Attitude Questionnaire or TIAQ was assigned to assess attitudes and beliefs of teachers regarding the inclusion of students with disabilities in regular education setting. It is a

valid instrument when measuring attitudes of music education and physical education teachers (Sideridis & Chandler, 1997). The Opinions Relative to Integration of Students with Disabilities Relative to Mainstreaming was revised and renamed the Opinions Relative to Integration of Students with Disabilities. This scale was found to be reliable as a tool to help evaluate educators' attitudes toward mainstreaming of the special needs population (Antonak & Larrivee, 1995).

A more recent survey, the Inclusive School Program Survey, is a thirty item survey that addresses major issues from the professional literature related to teacher perspectives of inclusion students with mild learning disability using a five point Liker-type scale (McLeskey, Waldron, So, Swanson & Loveland, 2001). Figure 1 shows the items that are included in that survey.

Figure 1

Inclusive School Program Survey Items

- 1. Students with mild disabilities benefit, in general, from inclusion in the general education classroom.
- 2. The special education teacher only provides assistance to those students labeled with mild disabilities.
- 3. Students with mild disabilities adjust well when placed in general education classrooms.
- 4. Although inclusion of students with mild disabilities is important, there are insufficient resources available for it to succeed.
- 5. General education peers are not accepting of students with mild disabilities in the classroom.
- 6. Special education teachers provide educational support for all students demonstrating difficulty
- 7. General education teachers are comfortable team teaching content areas with special education teachers.
- 8. The study skills of students with mild disabilities are inadequate for success in the general education classroom.
- 9. Students with mild disabilities need more attention and assistance than the general education teacher can provide.
- 10. Students with mild disabilities have more behavior problems than general education students.

- 11. Students with mild disabilities make adequate academic progress when laced in a general education classroom.
- 12. General education teachers have the primary responsibility for the education of students with mild disabilities in their classrooms.
- 13. The redistribution of special education resources into the general education classroom decreases the instructional load of the general education teacher.
- 14. Low achieving students do better academically in inclusive classrooms.
- 15. Although inclusion of students with mild disabilities is a good idea, it will not succeed because there is too much resistance from teachers.
- 16. High achieving students are neglected in inclusive classrooms.
- 17. Bringing special education services into general education classrooms causes serious difficulties in determining "who is in charge".
- 18. The general education teacher receives little assistance from special education teachers in modifying instruction for students with mild disabilities.
- 19. Students with mild disabilities lose the stigma of being "dumb," "different" or "failures" when placed in the general education classroom.
- 20. Parents are supportive of inclusive school programs.
- 21. Students with mild disabilities have significant behavior problems in the general education classroom.
- 22. Students with mild disabilities improve their social skills when placed in a general education classroom.
- 23. The time devoted to state/district curriculum goals decreases when students with mild disabilities are placed in general education classrooms.
- 24. The inclusion of students with mild disabilities negatively affects the academic performance of general education students.
- 25. Special education and general education teachers should collaborate on all students' learning problems in the general education classroom.
- 26. General education teachers prefer sending students with mild disabilities to special education pull-out programs rather than having special education teachers deliver services in the classroom.
- 27. Students with mild disabilities have a basic right to receive their education in the general education classroom.
- 28. This school is not adequately prepared to implement inclusion for students with mild disabilities.
- 29. To a large extent, general education teachers have the instructional skills necessary to teach students with mild disabilities.
- 30. Students with mild disabilities have work habits that are comparable to general education students.

For many of these scales there is a lack of evidence of psychometric adequacy which causes concern about their validity and reliability because they were developed for particular studies and used only once (Mahat, 2008).

Eagly and Chaiken (1993) described a three component model of attitudes. Those components, thinking, feeling and acting, are all critically important and mutually influential to the formation of attitudes. Mahat (2008) referred to these three components as dimensions and called them affective, cognitive, and behavioral. Mahat noted that many of the attitudinal instruments described previously measured only a single dimension of attitude so Mahat developed the MATIES, Multi-dimensional Attitudes

Toward Inclusive Education Scale, a Likert-type scale with eighteen items that is reliable, valid and multi-dimensional. This instrument measures affective, cognitive and behavioral aspects of attitudes pertaining to inclusive education including physical, social, and curricular inclusion. The instrument was designed to be brief, easy, flexible, valid and reliable.

Affective items include statements that deal with feelings about inclusion, while cognitive statements deal with beliefs and include statements beginning with the words, "I believe." Behavioral statements imply intention and begin with the words, "I am willing." (Mahat, 2008) Figure 2 shows the items in the MATIES.

Figure 2

Items in MATIES

Multidimensional Attitudes Toward Inclusive Education Scale

| Vigitidifficisional Attitudes Toward filefusive Education | |
|--|--|
| Cognitive | |
| I believe that an inclusive school is one that permits academic | |
| progression of all students regardless of their ability | |
| I believe that students with a disability should be taught in special | |
| education schools. | |
| I believe that inclusion facilitates socially appropriate behavior among | |
| all students. | |
| I believe that any student can learn in the regular curriculum of the | |
| school if the curriculum is adapted to meet their individual needs. | |
| I believe that students with a disability should be segregated because it | |
| is too expensive to modify the physical environment of the school. | |
| I believe that students with a disability should be in special education | |
| schools so that they do not experience rejection in the regular school. | |
| Affective | |
| I get frustrated when I have difficulty communicating with students | |
| with a disability. | |
| I get upset when students with a disability cannot keep up with the day- | |
| to-day curriculum in my classroom. | |
| I get irritated when I am unable to understand students with a disability. | |
| I am uncomfortable including students with a disability in a regular | |
| classroom with other students without a disability. | |
| I am disconcerted that students with a disability are included in the | |
| regular classroom, regardless of the severity of the disability. | |
| I get frustrated when I have to adapt the curriculum to meet the | |
| individual needs of all students. | |
| Behavioral | |
| I am willing to encourage students with a disability to participate in all | |
| social activities in the regular classroom. | |
| I am willing to adapt the curriculum to meet the individual needs of all | |
| students regardless of their ability. | |
| I am willing to physically include students with a severe disability in | |
| the regular classroom with the necessary support. | |
| I am willing to modify the physical environment to include students | |
| with a disability in the regular classroom. | |
| I am willing to adapt my communication techniques to ensure that all | |
| students with an emotional and behavioral disorder can be successfully | |
| included in the regular classroom. | |
| I am willing to adapt the assessment of individual students in order for | |
| inclusive education place. | |
| | |

Mahat (2008) found a positive correlation between the subscales in that positive cognitive and affective attitudes resulted in positive behavior, and negative cognitive and affective attitudes resulted in negative behavior. The MATIES can also be used to record differences and shifts in attitudes, and Mahat (2008) further noted that at times teachers with positive attitudes may sometimes behave in ways that appear negative due to norms of behavior in their school. In other words, the schools in which they teach do not support an inclusive environment. This scale has been proven to be psychometrically sound.

WHAT DO TEACHERS NEED

Inclusion is stressful for teachers (Avramidis, et. al. 2000). Full inclusion is blamed for overworked teachers, falling academic standards, lack of discipline and poor teacher morale (Willis, 1994). Practicing teachers make daily planning decisions for the education of the child with disabilities and their opinions and experience help identify the elements that contribute to successful inclusion (Kamens et. al. 2003). General education teachers have reported a lack of confidence in adapting materials and curriculum, managing behavior problems, giving individual assistance, and writing behavioral objectives (Buell, et. al. 1999). Burke and Sutherland (2004) report that if teachers feel burdened or frustrated or if they feel a lack of support they develop negative feelings about inclusion. Since teachers want to meet the needs of all students in their classroom (Kamens et. al. 2003), they must believe they can develop and implement programs and instructional practices that will lead to success on high stakes tests (Weiner, 2003). Their typical concerns are:

- What is my role in inclusion?
- What is the impact of inclusion on the academic and social progress of the student with special needs?
 - What is the impact on the student with disabilities?
- Will the student without disabilities have a negative impact on the general education classroom?
 - Will I be given time to plan a successful inclusion program?
 - Will I be given the resources necessary?
- Will I be given the opportunity to develop expertise? (McLeskey & Waldron, 2002)

General education teachers reported that they need both information and administrative support in order to effectively teach the student with special needs. The information they require is classification of the student, any information special to the individual child, and the specific adaptations and accommodations necessary. They want to know more about the developmental history of the child that has been placed in their classroom, which would include academic development, social and emotional growth, medical background, and family history. They also require more information about developmentally appropriate practices for the child with special needs, realistic goals for the child, and methods of delivering curriculum in a way appropriate for that child, as well as information on how to modify curriculum and materials (Kamens et. al. 2003).

Providers must deal with routine as well as unpredictable and unforeseen circumstances with little if any training (Esperat, Moss, Roberts, Kerr, Green, 1999).

They need to know how to provide and encourage students in a way the students will

accept, and the teachers must know how to create a welcoming environment where participation and communication are encouraged (Gilman, 2007). Schools are not always prepared to address highly individualized health and educational needs, and so both the school nurse and the classroom teacher must be trained to meet those needs (Esperat, et. al. 1999).

Inclusion also requires that teachers gain new understanding of teaching and learning as well as the skills needed to implement the changes needed to bring about successful inclusion (McLeskey & Waldron, 2002). Teachers must be trained to find ways to support and connect to the needs of all learners and not just merely cover curriculum (Burke & Sutherland, 2004). They also need to know how to individualize instruction in a large group setting, and they will need a large repertoire of instructional strategies to deal with the needs of students with culturally diverse backgrounds (deBettencourt, 1999). Teacher preparation programs address this need by constantly changing to revamp strategies to prepare educators with the skills they need to meet the needs of students who are increasingly culturally and instructionally diverse (deBettencourt, 1999). Teachers also need to be provided with disability awareness education in order to change attitudes (Pivik et. al. 2002), and with training on managing classroom behavior and meeting the needs of the emotionally disturbed (Avrimidis et. al. 2000).

All educators must learn better skills such as ways to accommodate diverse learners through strategy training, and ways to work together to solve problems. This is best done through collaboration (deBettencourt, 1999).

Teaching can no longer be referred to as the lonely profession because now teaching staff must collaborate in order to meet the needs of all children (Villa et. al. 1996). Teachers must be prepared to work with students and with each other (deBettencourt, 1999). Zigmond and Magiera (2001) identified three goals for collaboration:

- Creating varied instruction materials that meet individual needs
- supporting participation of the special needs student in general education through accommodations, modifications, or change in teacher behavior
- improving the achievement of the student with a disability

Special education teachers can influence student outcomes by providing services in the classroom and by collaborating and consulting with the general education teachers and paraprofessionals (Cook et. al. 1999). Effective teachers reflect on their own practice of teaching, but the presence of colleagues extends their capabilities (Bull et. al. 2000). deBettencourt (1999) found that the attitudes and beliefs of general education teachers were the most important influence in making collaboration work.

Cahill and Mitra (2008) report that although collaboration with special education professionals is helpful, general education teachers sometimes are hesitant because of the lack of special education coursework they have received, and they sometimes feel resentful or anxious when asked to collaborate with special education teachers. Further, collaboration requires a willingness to share power which is difficult to do, but general educators may find that employing "special ed" practices such as a routine review of learned material benefits all students.

Another barrier to collaboration is time. Teachers need scheduled planning time (Cahil & Mitra, 2008). Unfortunately, when deBettencourt (1999) performed his survey, he found that 50% of general education teachers consulted less than one hour per week with special education teachers.

Teachers have also expressed a need for more non-contact time, one hour or more daily for planning (, et. al. 2000). Kamens (2003) reports that teachers need time not just for collaboration, but time to spend with regular education and special education students alike, time to plan for different levels of instruction, and time to access IEPs. Sapon-Shevin (1996) reports that teachers will rise to higher expectations when they are treated as professionals and given adequate thinking and planning time.

Administrators need to understand the needs of students with disabilities, and they need to be informed so they may understand the teachers' needs and provide them more opportunities to obtain information, collaborate, and plan (Kamens et. al. 2003).

Inclusion requires a change in curriculum, a change in teaching practices, paying attention to the social climate of the classroom and the school, and teachers having time for collaboration, planning, and preparation (Sapon-Shevin, 1996). Since teachers derive personal and professional satisfaction from helping every student do well in their classrooms (Weiner, 2003), they need more knowledge about the students they are teaching and more skills training. Attitudes may change as teachers acquire the knowledge and skills they yearn for and require (deBettencourt, 1999).

ELEMENTS OF EFFECTIVE TRAINING

Inclusion means change, and change often causes stress, inefficiencies and difficulty when teachers are not convinced through professional development that initiatives are worth their time and effort (Weiner, 2003). When change occurs it will not be a significant change unless it occurs in five different areas. They are changes in knowledge, attitude, skills, aspirations and behavior (Easton, 2008). The challenge is to develop methods of training and informing teachers and staff so they develop a better understanding of the various types of disabilities. This will enhance their acceptance of, and support for, individuals with disabilities in their classrooms (Gilmore et. al. 2003).

deBettencourt (1999) reports that many general educators are unsure of their knowledge and skills in planning instruction for students with special needs. Due to their frequently isolated teaching experiences, many teachers report that they need training to deal with educating an increasingly heterogeneous student population. It is up to the local school district to deliver a comprehensive inservice training that will prepare staff to respond to unique student needs (Villa et. al. 1996).

In a study of teacher preparation university programs that infused special education content into a series of seminar courses, Cook (2002) found positive attitudes towards the idea of inclusion for students with disabilities but feelings of inadequacy in the experiences and instructional skills related to the implementation of inclusion. So it appears that coursework is not enough to change attitudes.

Henning and Mitchell (2002) studied a pre-service model developed by a special education graduate student and social studies education graduate student to prepare educators for inclusion. This program offered the opportunity to appraise knowledge,

adapt lessons, engage special educators and regular educators in collaborative curriculum meetings, and it resulted in improved attitudes towards inclusion.

What is critically needed are high quality professional development programs (McLeskey & Waldron, 2002), since teachers with substantial training are more positive towards inclusion and their confidence in their ability to meet IEP requirements is also boosted as a result of training (Avramidis et. al. 2000). For example, Sari (2007) found that fear of failure decreased after training, and that teachers working with the deaf had an increased awareness of their own importance in making the inclusion successful.

Substantial training like university based training, which fosters critical thinking, is more likely to result in a critical understanding of inclusion and in the acquisition of generic teaching skills. Training should include special strategies applicable in regular schools (Sari, 2007), University based and long-term courses result in higher confidence in skills than short-term school-based in-service training (Avramidis, et al 2000). There is another advantage of university coursework. Teachers who took special education courses used different types of instructional strategies more frequently, and their use of strategies increased with the number of special education courses taken (deBettencourt, 1999). There is, however, general agreement in a number of studies that university courses increase knowledge but do not change attitudes (Campbell et. al. 2003).

The most effective way of altering attitudes is to combine formal instruction with direct contact with students with disabilities (Campbell et. al. 2003). In a study of preservice and inservice teachers conducted in New York, Burke and Sutherland (2004) found that a relationship exists between experience with students with disabilities and teacher attitudes toward inclusion. Their results indicate a significant relationship

between prior experience and knowledge of students with disability and attitude toward inclusion. Burke and Sutherland (2004) concluded that schools should expose all of their teachers to students with disabilities and also provide sufficient training since positive experiences with the special needs student will have a positive effect on teacher attitudes. Developing confidence in one's abilities to teach special needs learners it is not only important for special educators, but also for general education teachers (Jung, 2007).

In an attempt to address the training needs of regular education teachers in their community and in an effort to retain students, Oklahoma State University established a training program in 1990 to support inclusion. This training consisted of thirty, two-hour training modules that were available on-line. The strategies addressed in the modules included, instruction, student products, psychologically secure environments, motivation, success, student expectations, scaffolding, respect, adaptations to student abilities, pre-requisite skills, group activities, student choice of activities, optimal levels of learning, learning communities, problem solving, questioning and appropriate assessment, all areas of knowledge important to the success of inclusion. Teachers did not need extensive training to implement these strategies, they were able to self-evaluate, and implementation resulted in curriculum modifications and environmental adaptations (Bull et. al. 2000).

deBettencourt (1999) found that the number of instructional strategies general education teachers use increases with the number of courses taken and the number of hours spent collaborating with special educators, and that the success of inclusion depends on supports and training available to general educators.

Currently, teacher preparation programs are divided into distinct programs, special education and general education (Villa et. al. 1996), but those who receive high quality training find inclusion easy to deal with (Avramidis, et. al. 2000). "Sit and get" professional development is no longer effective. Those traditional forms of professional development are inadequate for inclusion. Historically, professional development has relied on an expert, the "sage on the stage," who brings information about what works based on research and has very little impact on what teachers do. We must make huge improvements in the quality and kinds of supports we provide to general education teachers (Sapon-Shevin, 1996), and Villa et. al. (1996) proposes changes in the content and format of in-service programs. The change should be towards ongoing professional development, which is a requirement of a successful inclusion program. (McLeskey & Waldron, 2002).

This ongoing development will include university coursework for students preparing for a career in education that will be followed up with substantive, intensive inservice programs instead of the one-time one day programs of the past. Professional development should include ongoing in-class follow-up support to assist teachers in applying information to specific children (Kamens et. al. 2003).

Educators now need professional learning rather than professional development. They must know enough to be able to change, and they must change in order to get different results. Coaching, mentoring, observing, examining teacher practice, looking at student work, facilitating learning, these are all experiences of professional learning that take place outside of scheduled professional development days

(Easton, 2008), and yet are an important element of the supports necessary for true professional development.

A study of principals and special education teachers recommended that measures be taken to secure the support of special education teachers and all direct service providers to assure the success of inclusion (Cook et. al. 1999). There is a link between schools where teachers assume responsibility for reform and the success of school reform (Schoonmaker, 2006), and without collaboration teachers will never be able to assume that responsibility for reform.

PROFESSIONAL DEVELOPMENT THAT WORKS

Although thoughtful planning will improve the quality of what will happen when a student with disabilities in included in the classroom, it is also true that no teacher, school, or district ever feels truly ready to begin inclusion, and what is most necessary is ongoing support and commitment to the process and those responsible for implementation (Sapon-Shevin, 1996). Professional development must first address the beliefs of teachers and administrators, and their understanding and attitudes regarding inclusion. We must use a school-based, teacher centered approach to staff training.

Although this is not the efficient method of training and although it is time-consuming, it is a much more effective method than the traditional expert models of professional development (McLeskey & Waldron, 2002). Villa et. al. (1996) state that we should avoid "one-shot" training, and use a variety of training formats that include workshops, graduate courses, mentoring, consultation, and team teaching. Regular teachers do

benefit from regular in-service, time, and specialist support to implement and apply what they have learned (Sari, 2007).

Good professional development should also be firmly based in the context of the school and address the concerns of teachers (McLeskey & Waldron, 2002). It should address teachers' expressed needs (Buell, et. al. 1999), and it should begin with teachers making decisions about what teachers need to learn (Easton, 2008). The content and format of effective training should also be determined by teachers since information supplied to teachers who feel they have no need of that information has very little impact on the knowledge, skills and professional practice of those teachers (McLeskey & Waldron, 2002).

Professional development must also focus on the need to educate the diverse group of students that enter our classrooms every day, both regular education students and special education students, if it is to provide the needed support for those classroom teachers who must meet the needs of all students. It must be tailored to individual the individual needs of the school and built into a school-wide plan in order to result in real changes in classroom instruction (McLeskey & Waldron, 2002).

Experienced classroom teachers identify planning and collaboration time, modified curriculum and resources, administrative support, and ongoing emotional support as the types of supports they consider important to successful inclusion (Sapon-Shevin, 1996). Villa et. al. (1996) recommends that staff and administration work together to:

- identify the most meaningful and helpful training content, format and incentives
- develop successful demonstration sites

- provide ongoing training and supervision in real school situations
- conduct research that answers our current questions and helps us discover the
 really important questions to ask next

According to McLeskey and Waldron (2002) effective professional development will be school-based, will use coaching and follow-up procedures, will be collaborative, and will be embedded in the daily lives of teachers to provide continuous growth.

Coaching, mentoring, and observation must take place on school sites for true school-based training (Easton, 2008). Staff development that provides realistic and relevant information when teachers need it helps teachers connect knowledge and skills to everyday practice (Kamens et. al. 2003), and the most beneficial learning activities provided are embedded in the work that professionals do everyday (Easton, 2008).

Collaboration is a huge part of the successful training process. It offers the opportunity to build on existing knowledge and incorporate developmentally appropriate instructional strategies so it is critical that staff be given opportunities to work together to address needs by sharing information on teaching strategies and materials (Cahill & Mitra, 2008).

Professional development should be a process, not an event, that allows teachers to abandon old beliefs and behaviors. It should be personal and practical, and it should provide on-the-job assistance (Weiner, 2003). If skills arise from training and from the opportunity to discuss and plan collaboratively, then attitudes will improve and programs will become more effective (et. al. 2000). Continuous professional development and adaptation of practice includes:

ongoing learning from experience

- reflection
- theorizing about how to best meet the needs of all students individually and collectively; and
- ongoing learning through collaboration with colleagues (Weiner, 2003)

 Inclusion must be viewed as a work in progress. Schools will need a pattern of continuous improvement, the planning time to monitor their programs, a core staff of teacher who work in inclusive classrooms year to year, ongoing professional development for teachers as needs become more apparent after working in inclusive classrooms, and also for new teachers who will need professional development that offers

Professional learning must be evaluated by results at different levels:

new strategies and fosters continued improvement (McLeskey & Waldron 2002).

- How have teachers changed the way they work as a result of learning?
- How has the student's behavior changed?
- Have there been improvements in student growth and achievement? (Easton,
 2008)

The answer to these questions will be proof that professional development has been effective.

Training provides the skills which allow teachers to modify their everyday practice in ways which are ultimately inclusive (Avramidis, et. al. 2000). What educators need to do now is change (Easton, 2008), and they will become committed to changing after implementation of inclusion and after gaining the mastery of the knowledge necessary for successful inclusion (et. al. 2000).

EXPECTED BENEFITS OF A POSITIVE CHANGE IN ATTITUDES

The most positive attitudes towards inclusion are found in teachers who have received the most intensive training for working with students with disabilities (Burke & Sutherland, 2004).

If effective professional development is provided, and if that professional development fosters positive attitudes though collaboration and change, then we can expect positive results in our classrooms. As a result of improved attitudes, inclusion administrators may become involved in assisting general educators in the use of assessment data to develop instructional modifications that benefit every student. Thus, high risk and high achieving students alike may receive more individualized instruction in the inclusive classroom than in the non-inclusive classroom (Weiner, 1003).

"Realities are created and negotiated by those who experience them"

(Schoonmaker, 2006). Building relationships between special educators, general educators and related service providers, gives general educators an understanding of a student's strengths and weaknesses and helps the general educator develop reasonable expectations about the performance of special needs students in their classroom, and when relationships are encouraged between staff members, those individuals feel more supported and are more likely to experiment with new teaching methods (Cahill & Mitra, 2008). Students who receive interventions resulting from collaboration are more likely to be successful in general education classes (Mastropieri, Scruggs, Graetz, Norland, Gardizi, and McDuffie, 2005). Further, with improved attitudes fostered through collaborative efforts school climate improves, student achievement is raised, and teachers describe their buildings as positive and rewarding (Flowers, Mertens & Mulhall, 1999).

Positive attitudes also make it possible for all students to become part of the school community (Burke & Sutherland, 2004), and everyone in the school community benefits.

CHAPTER 3

Methodology

I. Subjects

A total of fifteen participants were asked to complete surveys for this study.

Eleven of those who received surveys (one male, ten female) were Kindergarten through

5th grade general education teachers. The others were classroom instructional aides. Of
the aides, three served as classroom aides in rooms with classified students, and one
served as a 1:1 aide for a classified student.

All of the teachers had more than five years teaching experience, and three of the teachers had more than twenty years teaching experience. One teacher held a Masters in Special Education and was certified as an LDT-C although she had never worked in that capacity. The remaining ten teachers held a Bachelors degree and a certificate in Elementary Education.

Two of the aides were working in their positions for the first time, and the remaining two aides each had over five years of experience as classroom aides. One of the aides had earned an elementary education certificate but had never been employed as an elementary education teacher, and two aides had Bachelors degrees but no teacher certification. The fourth aide had graduated high school but had earned no college credits.

All of the surveyed staff members were Caucasian and between the ages of twenty-three and fifty-eight. The entire staff of general education classroom teachers and support staff in kindergarten through 5th grade were asked to respond to the survey; some did not. This accounted for a total of fifteen people provided with surveys. Of the

eleven teachers who received surveys, nine responded. Of the four instructional aides who received surveys, two responded, for a total of eleven survey participants in the initial survey; however, one of the responding instructional aides left the district in March and was unable to participate in any in-service or the follow-up survey. She voluntarily identified her survey when she announced her plans to leave the district, and that survey was not included in the results. This left ten staff members as participants in the initial survey.

Demographic information was obtained for the group prior to the distribution of the surveys. Due to the voluntary and anonymous nature of the survey, it was not possible to separate demographic information for responders only. Table 1, which follows, shows the demographic information for all those who were provided with surveys including those staff members who chose not to respond.

Table 1

Demographic Information of K-5 Staff Including Survey Non-responders

| | Given Survey | | hest Leve | | | Experience | ee | | Age Ra | ange | | Se | ex |
|---------------|-----------------|----|-----------|----|------|------------|-------|-----|--------|------|-----|------|------|
| | | HS | BA | MA | <1 | >5 | >20 | 21- | 31- | 41- | 51- | Male | Fe- |
| | | | | | year | years | years | 30 | 40 | 50 | 60 | | male |
| Aides | 4 | 1 | 3 | | 2 | 2 | | 2 | | 2 | | | 4 |
| Teach -ers | 11 | | 10 | 1 | | 8 | 3 | | 6 | 3 | 2 | 1 | 10 |
| Total | 15 | 1 | 13 | 1 | 2 | 10 | 3 | 2 | 6 | 5 | 2 | 1 | 14 |

II. Setting

The participants were employed in a small New Jersey school district in a community of about 3200 year round residents. There is one school building which houses grades preschool through eight. Class size is typically between fourteen and twenty-three students. There are two classes at each grade level with the exception of second grade which has twenty-three students in one classroom. The school district is classified District Factor Group B. As defined by the state of New Jersey (http://www.state.nj.us/education/assessment/es/njask2005manual.pdf) District Factor Group is an indicator of the socioeconomic status of a school district in the state of New Jersey. Since District Factor Group A indicates a district of the lowest socioeconomic status, this school district which is classified District Factor Group B, is near the bottom of a scale which contains eight district factor groups. 27.75% of the 281 students receive free or reduced lunch.

III. Method

Instrument/s: The *Multidimensional Attitudes Towards Inclusive Education Scale* or MATIES (Mahat, 2008), a Likert-type scale, was used to survey staff members participating in this project. This same survey was used to collect information on attitudes both before (Appendix A) and after (Appendix C) the in-service training and collaboration with teachers and aides.

The MATIES, Multidimensional Attitudes Toward Inclusive Education Scale, measures three components of attitudes. Those components are Affective, Cognitive and Behavioral. Staff members responded to eighteen items that addressed each of these

components. There were six cognitive items which dealt with beliefs. Those surveyed responded on a Likert-type six point scale where 1=Strongly Agree, 2=Somewhat Agree, 3=Agree, 4=Disagree, 5=Somewhat Disagree, and 6=Strongly Disagree. In the MATIES there are nine statements where agreement would indicate a positive attitude toward inclusion, and there are nine statements where agreement would indicate a negative attitude towards inclusion. In order to score surveys so that a high score would indicate positive attitudes and a low score would indicate negative attitudes, it was necessary to score each type of response differently. For a statement where agreement indicated a positive attitude, six points were awarded for a response of 1-Strongly Agree, five points were awarded for a response of 2-Somewhat Agree, four points were awarded for a response of 3-Agree, three points were awarded for a response of 4-Disagree, two points were awarded for a response of 5-Somewhat Disagree, and one point was awarded for a response of 6-Strongly Disagree. For a statement where agreement indicated a negative attitude, responses were scored in the reverse order. One point was awarded for a response of 1-Strongly Agree, two points were awarded for a response of 2-Somewhat Agree, and so on. With eighteen items, the highest possible score would be 108, indicating the most positive attitude toward inclusion, and the lowest possible score would be 18, indicating the most negative attitude toward inclusion. Each section was also scored individually to examine the relationship between cognitive and affective attitudes and their effect on behavior.

Staff members were also asked to respond to a Professional Development

Questionnaire (Appendix B) attached to the first distribution of the survey in February

which was made up of a series of questions developed by the researcher and meant to elicit additional information for the planning of the in-service training.

Materials: Materials used to provide information and in-service training were obtained through an Educational Information and Resource Center (EIRC) program entitled *An Array of Supports for Including Students with Disabilities in General Education Programs (Grades K-12)*, and through attendance at an EIRC workshop entitled *In-Class Resource Program Instruction: A Training for Trainers (Grades K-12)*. According to the EIRC website, www.eirc.org, EIRC is "a public agency specializing in education-related programs and services for parents, schools, communities, nonprofit organizations and privately held businesses throughout New Jersey."

Procedure: All staff members described above were asked to complete the MATIES and the Professional Development Questionnaire in February of 2009. This was an anonymous survey; however, responders were asked to indicate their position as aide or teacher. Results were tallied and comments were recorded within twenty-four hours of submission of the completed survey.

The information received from surveys was used in combination with information described below to plan appropriate in-service training.

The researcher attended a workshop entitled *In-Class Resource Program Instruction: A Training for Trainers (Grades K-12)* presented by the Learning Resource Center of EIRC. This workshop was designed to be a turnkey program that provided information on "a variety of in-class resource program arrangements; roles and responsibilities of the general and special education teachers; effective techniques that foster general and special educator collaboration; as well as approaches and formats that

facilitate instructional planning" (LRC-S RESOURCE REPORT, 2008 – 2009). The tools and information collected from this workshop and from another EIRC presentation, *An Array of Supports for Including Students with Disabilities in General Education Programs (Grades K-12)*, along with information collected from the previously described questionnaire, were used by the researcher to design an appropriate in-service training for the surveyed staff members.

Prior to presenting the in-service training, the researcher met with the school principal to share staff concerns that had been noted in the Professional Development Questionnaire and to plan appropriate in-service training for the 2009-2010 school year in the areas of parts of an IEP, specific student disabilities, specific student needs, collaborative teaching, and differentiated instruction.

Information collected from the Professional Development Questionnaire attached to the first survey was also used to develop and modify the content of the in-service presentation that was delivered as part of this research project. The in-service training was presented in small groups or individually to all K-5 general education classroom teachers and classroom aides and addressed the following issues:

- Results of the questionnaire regarding teacher concerns
- Plans for next year's in-service training
- Suggestions for addressing poor or inconsistent academic performance
 and disruptive behavior, the two most frequently mentioned concerns
- Clarification of the roles and responsibilities of classroom teachers and instructional aides

- A description of the steps the researcher and the school principal would be taking to address all other areas of concern during the upcoming school year
- Provision of handouts with information on specific student classifications including OHI, SLD, Autism and ASD, and Downs Syndrome

The in-service training was delivered in March to all involved staff over a three day period during their forty-five minute preparation period. Training for aides and teachers was identical in content, and all staff had the opportunity to voice concerns and pose additional questions specific to their students and their areas of concern.

The researcher also met separately with classroom teachers and aides to develop behavior intervention plans for students with whom teachers had expressed concern.

The plans were then implemented with the support of the researcher who was responsible for providing some portion of the positive reinforcement described in the behavior plans.

In April, one week after the in-service training and after the follow-up activities had taken place, all those who were originally asked to participate in the survey, with the exception of the one instructional aide who is no longer in district, were asked to participate again using the same instrument, the MATIES (Appendix C), to determine whether or not attitudes had changed as a result of training, support, and collaboration between teachers, aides, and the researcher. Staff were again asked to indicate their position as either teacher or aide, and they were also asked to check one of three boxes indicating whether they had completed the initial survey, not completed the initial survey or could not remember if they had completed the initial survey. Participation was again voluntary and anonymous. Fifteen surveys were distributed and two classroom aides and

eight classroom teachers responded to the final survey. Of those responding, four teachers and one aide indicated that they had responded to the original survey while one teacher did not remember if he or she had responded. Three teachers and one aide did not indicate in any way whether or not they had responded to the initial survey.

CHAPTER 4

Results

This study was designed to examine the current attitudes of general education teachers and paraprofessionals in Kindergarten to Grade 5 towards inclusion of special education students in the general education classroom. After a survey had been administered, an attempt was made to influence the attitudes of this group through training, collaboration and support. The survey was then re-administered to document whether or not changes in attitude had occurred. It was hypothesized that attitudes would improve as a result of intervention.

The MATIES, Multidimensional Attitudes Toward Inclusive Education Scale, measures three components of attitudes, Affective, Cognitive and Behavioral. With eighteen items on this scale, the highest possible score would be 108, indicating the most positive attitude toward inclusion, and the lowest possible score would be 18, indicating the most negative attitude toward inclusion. Each section was also scored individually to examine the relationship between cognitive and affective attitudes and their effect on behavior.

The results of the first survey showed that the mean score was 77.5 with a range of 64 to 95. Since the lowest possible score or measurement of most negative attitudes towards inclusion is 18, and the highest possible score or measurement of most positive attitude towards inclusion is 108, the median score for the survey would be 63 with overall negative attitude scores falling below the median and overall positive attitude scores falling above the median of 63. Since all scores fell above the median in the first

survey, staff members at the beginning of the study held relatively positive attitudes toward inclusion when looked at as a whole even though some responses to individual statements showed attitudes that were negative rather than positive.

At the end of the study, and after the intervention, the mean score was 79 with a range of scores on the final survey of 67 to 104, indicating an overall improvement in attitudes especially at the upper range of scores.

Pre-Intervention Results

The initial survey measured attitudes of teachers and support staff prior to the provision of the intervention. When the ten initial surveys were scored the range of scores was 64 to 95 with a mean score of 78.8 and a median score of 77.5.

Prior to the intervention, 80% of those surveyed agreed that "an inclusive school is one that permits academic progression of all students regardless of their ability" and that "inclusion facilitates socially appropriate behavior among all students."

Fifty percent believed that "any student can learn in the regular curriculum of the school if the curriculum is adapted to meet their individual needs," and 40% believed that "students with a disability should be taught in special education schools." Finally, none of the surveyed staff on the initial survey believed that a "student with a disability should be segregated because it is too expensive to modify the physical environment of the school," and 30% believed that "students with a disability should be in special education schools so that they do not experience rejection in the regular school." The full results can be found in Table 2.

Table 2

Initial Survey – Responses to Cognitive Statements

| | Ag | gree | ; | Di | sagı | ree |
|---|----|------|---|----|------|-----|
| I believe | 1 | 2 | 3 | 4 | 5 | 6 |
| An inclusive school is one that permits academic progression of all students | 2 | 1 | 5 | 1 | 1 | 0 |
| Students with a disability should be taught in special education schools. | 0 | 4 | 0 | 4 | 2 | 0 |
| Inclusion facilitates socially appropriate behavior among all students. | 0 | 3 | 5 | 0 | 2 | 0 |
| Any student can learn in the regular curriculum of the school if the curriculum is adapted to meet their individual needs. | 1 | 0 | 4 | 1 | 3 | 1 |
| Students with a disability should be segregated because it is too expensive to modify the physical environment of the school. | 0 | 0 | 0 | 6 | 0 | 4 |
| Students with a disability should be in special education schools so that they do not experience rejection in the regular school. | 0 | 3 | 0 | 3 | 2 | 2 |

Also, included in the survey were statements beginning with the words, "I feel..." These statements were affective statements and dealt with the negative emotions. 40% of those surveyed agreed that they "get frustrated" when they have difficult communicating with students with a disability. 10% agreed that they "get upset" when students with a disability cannot keep up with the day-to-day curriculum in the classroom, and 10% agreed that they "get irritated" when they are unable to understand students with a disability.

No staff members agreed with the statement, "I am uncomfortable including students with a disability in a regular classroom with other students without a disability." 30% agreed that they are "disconcerted" that students with a disability are included in the regular classroom, regardless of the severity of the disability, and no one agreed with the statement, "I get frustrated when I have to adapt curriculum to meet the individual needs

of all students." Results of the affective component of this survey are displayed below in Table 3.

Table 3

Initial Survey – Responses to Affective Statements

| | A | gre | e | Di | sagı | ee |
|---|---|-----|---|----|------|----|
| I feel or I get | 1 | 2 | 3 | 4 | 5 | 6 |
| Frustrated when I have difficulty communicating with students with a disability. | 0 | 3 | 1 | 5 | 0 | 1 |
| Upset when students with a disability cannot keep up with the day- to-day curriculum in classroom | 0 | 1 | 0 | 7 | 2 | 0 |
| Irritated when I am unable to understand student with a disability | 0 | 0 | 1 | 4 | 3 | 2 |
| Uncomfortable including students with a disability in a regular classroom with other students without a disability. | 0 | 0 | 0 | 4 | 2 | 4 |
| Disconcerted that students with a disability are included in the regular classroom, regardless of the severity of the disability. | 1 | 0 | 2 | 4 | 0 | 3 |
| Frustrated when I have to adapt the curriculum to meet the individual needs of all students. | 0 | 0 | 0 | 5 | 3 | 2 |

The behavioral component of the MATIES contained statements that began with the words, "I am willing to..." 100% of staff members agreed that they were willing to "encourage students with a disability to participate in all social activities in the regular classroom, to adapt the curriculum to meet the individual needs of all students regardless of their ability, to physically include students with a severe disability in the regular classroom with the necessary support, to modify the physical environment to include students with a disability in the regular classroom, and to adapt' their communication techniques to ensure that all students with an emotional and behavioral disorder can be successfully included in the regular classroom. 90% agreed that they were willing to

"adapt the assessment of individual students in order for inclusive education to take place." These responses are shown in Table 4.

Table 4

Initial Survey – Responses to Behavioral Statements

| | A | gre | e . | Disagr | | ee |
|---|---|-----|-----|--------|---|----|
| I am willing to | 1 | 2 | 3 | 4 | 5 | 6 |
| Encourage students with a disability to participate in all social activities in the regular classroom | 6 | 0 | 4 | 0 | 0 | 0 |
| Adapt the curriculum to meet the individual needs of all students regardless of their ability | 4 | 2 | 4 | 0 | 0 | 0 |
| Physically include students with a severe disability in the regular classroom with the necessary support | 5 | 1 | 4 | 0 | 0 | 0 |
| Modify the physical environment to include students with a disability in the regular classroom. | 6 | 0 | 4 | 0 | 0 | 0 |
| Adapt my communication techniques to ensure that all students with an emotional and behavioral disorder can be successfully included in the regular classroom | 4 | 1 | 5 | 0 | 0 | 0 |
| Adapt the assessment of individual students in order for inclusive education to take place. | 4 | 0 | 5 | 0 | 1 | 0 |

When staff members were asked to respond to a Professional Development

Questionnaire attached to the initial survey, their responses included behavior concerns,
concerns about the inconsistent or poor academic performance of classified students, lack
of time for planning instruction, adapting materials, researching materials, and providing
one-to-one instruction to the classified student as well as their need for more knowledge
in dealing with students with special needs. A listing of the concerns noted in teacher
and classroom aide responses is found in Figure 3 below. Numbers in parentheses
indicate the number of respondents who made the same comment.

Figure 3

Professional Development Responses

- 1. What is the greatest obstacle you face when dealing with special education students in the general education classroom?
- Lack of confidence in my ability to help these students in the BEST way
- Lack of training on new programs/having to learn them on my own/unfair to student and teacher
- Lack of time for research
- Lack of time to make additional worksheets, tests, etc.
- Lack of realization that some students need a life skills curriculum
- Lack of in-class support teacher
- Keeping everyone's attention while keeping the classified student focused
- Keeping pace
- Inability to consistently provided testing modifications such as "read aloud" or "extra time" etc.
- Inability to meet individual needs of each student through adaptations and modifications
- Inability to do everything possible for classified students in general education classroom
- Inability to help classified students feel like other student/don't want them to feel different/they already know they are different
- Expectations by some that special education students should perform like nondisabled students
- The greatest obstacles for classroom aides were reported to be (a) lack of support from administration and (b) the pace of the general education classroom
- **2.** What causes you the greatest frustration when you are attempting to meet the needs of a student with a disability?
- Not having enough time to provide one-to-one instruction to the students who need it (2)
- Not enough time provided for teacher to plan modifications (2)
- Not able to give student enough time because there are so many who need special help
- Not knowing which methods or strategies will work for a particular child; trial and error is defeating
- Not knowing if I am teaching them in a way they can learn and retain
- Inability to reach the student
- Other students notice and ask questions
- When student is unhappy or unsuccessful
- Aides reported frustration when not enough time is spent on one subject
- **3.** What supports should be offered to staff to ensure the success of inclusion of students with disabilities in the general education classroom?
- Training and support(2)

- In-class support (3)
- More support in regular classroom rather than pull-out support
- Pull-out support
- More help in general education classroom, even twenty minutes can help a student; younger students don't need more than that
- Classroom aide/allow teachers to divide and conquer
- Consistent Title I support (Title I teachers often pulled to cover for teacher shortages)
- Common preps
- More preparation time specifically for the purpose of adapting curriculum
- Instructional materials geared to specific needs
- Ongoing communication
- Realistic expectations
- Aides would like support by being given freedom to try new tactics
- **4.** What training must be supplied to general education teachers and teacher aides in order to support inclusion?
- Information on student disabilities (4)
- Behavior modification (3)
- Ways to adapt materials (2)
- Information on specific materials geared to students with disabilities
- Methodology, strategies, and differentiated instruction in all content areas
- Videos similar to Fat City
- Training time to brainstorm what works
- Training on reasonable expectations
- Toileting
- Aides requested training that provided information on individual cases with more information offered on each child
- **5.** Please feel free to make any additional comments or suggestions below or on the back of this page.
- Inclusion is difficult when it impacts the academic success of the class.

Post-Intervention Results

After the in-service training, the MATIES survey was again distributed. The survey was distributed to the same staff members, but at this time fourteen instead of fifteen surveys were distributed due to the departure of one classroom aide. Of the fourteen staff members surveyed, ten responded. Two were classroom aides, one who had responded to the initial survey and one who identified herself as not having

responded to the initial survey, and eight were classroom teachers, four of whom identified themselves as having responded to the initial survey, one who did not remember whether or not he or she had responded, and three who failed to indicate whether or not they had responded to the initial survey. When the ten final surveys were scored this resulted in a range of scores from 67 to 104 with a mean score of 82.2 and a median score of 79.

After the intervention, 60% of those surveyed, or 6 out of 10, agreed that "an inclusive school is one that permits academic progression of all students regardless of their ability" as opposed to 80%, in the first survey. 80% agreed that "inclusion facilitates socially appropriate behavior among all students" the same percentage as in the first survey.

60% believed that "any student can learn in the regular curriculum of the school if the curriculum is adapted to meet their individual needs," after the intervention as opposed to 50% in the first survey. In this second survey, 20% believed that "students with a disability should be taught in special education schools," while in the original survey 40% held that belief.

One of the surveyed staff in this follow-up survey believed that a "student with a disability should be segregated because it is too expensive to modify the physical environment of the school," whereas in the first survey no one agreed with that statement. However, in the first survey 30% believed that "students with a disability should be in special education schools so that they do not experience rejection in the regular school," while in the final survey one in ten respondents or 10% agreed with that statement. The results of this cognitive portion of the final survey are displayed in Table 5 below.

Table 5
Final Survey – Responses to Cognitive Statements

| | Agree | | ; | Di | Disagree | |
|---|-------|---|---|----|----------|---|
| I believe | 1 | 2 | 3 | 4 | 5 | 6 |
| An inclusive school is one that permits academic progression of all students | 1 | 2 | 3 | 1 | 3 | 0 |
| Students with a disability should be taught in special education schools. | 0 | 2 | 0 | 5 | 2 | 1 |
| Inclusion facilitates socially appropriate behavior among all students. | 1 | 3 | 4 | 2 | 0 | 0 |
| Any student can learn in the regular curriculum of the school if the curriculum is adapted to meet their individual needs. | 1 | 3 | 2 | 1 | 2 | 1 |
| Students with a disability should be segregated because it is too expensive to modify the physical environment of the school. | 0 | 0 | 0 | 4 | 1 | 5 |
| Students with a disability should be in special education schools so that they do not experience rejection in the regular school. | 0 | 1 | 0 | 3 | 1 | 5 |

The affective portion of the survey followed the cognitive. In this section of the second survey 40% of those surveyed, agreed that they "get frustrated" when they have difficulty communicating with students with a disability. The same percentage reported getting frustrated by this in the first survey. One respondent in the first survey and one respondent in the final survey agreed that they "get upset" when students with a disability cannot keep up with the day-to-day curriculum in the classroom, and the same number, one, in each survey agreed that they "get irritated" when they are unable to understand students with a disability. No staff members in either survey agreed with the statement, "I am uncomfortable including students with a disability in a regular classroom with other students without a disability." Three of 10 respondents to the original survey, or 30%, reported feeling "disconcerted" that students with a disability are included in the regular classroom regardless of the severity of the disability, while in the final survey

only 1 of 10, or 10% reported feeling this way, and no one in either survey agreed with the statement, "I get frustrated when I have to adapt curriculum to meet the individual needs of all students." Results of the affective component of the final survey are displayed in Table 6.

Table 6
Final Survey – Responses to Affective Statements

| | A | Agre | ee | Di | sagı | ree |
|---|---|------|----|----|------|-----|
| I feel or I get | 1 | 2 | 3 | 4 | 5 | 6 |
| Frustrated when I have difficulty communicating with students with a disability. | 0 | 3 | 1 | 3 | 2 | 1 |
| Upset when students with a disability cannot keep up with the day-to-day curriculum in classroom | 0 | 0 | 1 | 3 | 2 | 4 |
| Irritated when I am unable to understand student with a disability | 0 | 1 | 0 | 6 | 2 | 1 |
| Uncomfortable including students with a disability in a regular classroom with other students without a disability. | 0 | 0 | 0 | 2 | 1 | 7 |
| Disconcerted that students with a disability are included in the regular classroom, regardless of the severity of the disability. | 0 | 1 | 0 | 4 | 1 | 4 |
| Frustrated when I have to adapt the curriculum to meet the individual needs of all students. | 0 | 0 | 0 | 3 | 4 | 3 |

In the behavioral component of the MATIES, 100% of staff members in both surveys agreed that they were willing to "encourage students with a disability to participate in all social activities in the regular classroom." 90% of respondents in the final survey were willing "to adapt the curriculum to meet the individual needs of all students regardless of their ability," while 100% of respondents in the initial survey were willing to adapt the curriculum. 90% of respondents to the final survey were also willing to "physically include students with a severe disability in the regular classroom with the necessary support," while 100% agreed that they were willing to do this in the first

survey. 90% of those responding to the final survey were willing "to modify the physical environment to include students with a disability in the regular classroom," and 100% were willing "to adapt their communication techniques to ensure that all students with an emotional and behavioral disorder can be successfully included in the regular classroom," while 100% of those responding in the first survey were willing to do both of these things. 90% of respondents to both surveys agreed that they were willing to "adapt the assessment of individual students in order for inclusive education to take place." The responses to the behavioral section of the final survey are shown in Table 7.

Table 7
Final Survey – Responses to Behavioral Statements

| | A | gre | e | Di | sagı | ree |
|---|---|-----|---|----|------|-----|
| I am willing to | 1 | 2 | 3 | 4 | 5 | 6 |
| Encourage students with a disability to participate in all social activities in the regular classroom | 5 | 1 | 4 | 0 | 0 | 0 |
| Adapt the curriculum to meet the individual needs of all students regardless of their ability | 3 | 1 | 5 | 1 | 0 | 0 |
| Physically include students with a severe disability in the regular classroom with the necessary support | 4 | 1 | 4 | 1 | 0 | 0 |
| Modify the physical environment to include students with a disability in the regular classroom. | 4 | 0 | 6 | 0 | 0 | 0 |
| Adapt my communication techniques to ensure that all students with an emotional and behavioral disorder can be successfully included in the regular classroom | 2 | 2 | 6 | 0 | 0 | 0 |
| Adapt the assessment of individual students in order for inclusive education to take place. | 2 | 3 | 4 | 1 | 0 | 0 |

Comparison of Pre vs. Post Intervention Results

When the ten initial surveys were scored the range of scores was 64 to 95 with a mean score of 78.8 and a median score of 77.5. When the ten final surveys were scored

this resulted in a range of scores from 67 to 104 with a mean score of 82.2 and a median score of 79.

Scores were also calculated by subscales. The mean cognitive score in the initial survey was 23.5, and in the final survey it rose to 25.7. The range of cognitive scores in the initial survey was 14 to 30, and in the final survey the range was 16 to 35.

The mean affective score in the initial survey was 25.9, and in the final survey it rose to 28.0. The range of affective scores in the initial survey was 21 to 35, and in the final survey the range was 23 to 33.

Mean behavioral score in the initial survey was 29.4; however, in the final survey it dropped to 28.5. The range of behavioral scores in the initial survey was 24 to 36, and in the final survey the range was 23 to 36. The mean scores of the MATIES and its subscales prior to intervention and after intervention are compared on Table 8 below.

Table 8

Comparision of Pre-Intervention and Post-Intervention Mean Scores

| | Initial Survey | Final Survey |
|------------------------|-------------------------|----------------------|
| | (Prior to Intervention) | (After Intervention) |
| Cognitive Mean Score | 23.5 | 25.7 |
| Affective Mean Score | 25.9 | 28.0 |
| Behaviorial Mean Score | 29.4 | 28.5 |
| MATIES Mean Score | 78.8 | 82.2 |

CHAPTER 5

Discussion

This study examined the current attitudes towards inclusion of general education teachers and paraprofessionals in a small school district. An attempt was made to influence the attitudes of a select group of paraprofessionals and teachers in the district and to document those changes in attitude. It was hypothesized that attitudes would improve as a result of intervention with that select group. After providing intervention through a brief series of activities that included in-service training, collaboration between the researcher, teachers and paraprofessionals, and support to teachers in areas where they indicated they needed support, the results of the final survey showed scores that had increased slightly.

In each of the individual sections of the attitude survey, Cognitive, Affective, and Behavioral, the lowest possible score was 6 and the highest possible score was 36 with a median score of 21. In the initial survey, the range of scores in cognitive attitudes was 14 to 30. If the median is 21, then three staff members exhibited mostly negative cognitive attitudes towards inclusion at the beginning of this study and only one staff member exhibited mostly negative cognitive attitudes at the end of the study. Additionally, the median cognitive score increased from 23.5 to 25.7 which also indicated a slight improvement in cognitive attitudes or what staff members' perceptions about inclusion. This change might have been brought about by the in-service that was provided as an intervention. Participants had requested specific supports and information, and the inservice acknowledged their need for support, provided information on plans for meeting

those needs, provided some immediate relief through suggestions for remedies for areas of difficulty, and also provided specific information on student disabilities that could have helped to make staff members feel better informed.

The range of scores in the affective section of the initial survey was 21 to 35. All responders scored at or above the median of 21 at the beginning of this study indicating that they held mostly positive feelings towards inclusion at the beginning of the study. Their affective attitudes improved slightly again with a mean score of 25.9 on the initial survey and a mean score of 28.0 on the final survey with a range of 23 to 33.

According to Mahat (2008), "Teachers who hold positive affective and cognitive attitudes would engage in behaviours that support or enhance inclusive education whilst teachers who hold negative attitudes would engage in behaviours that avoid or hinder inclusive education." It is important to analyze the results of this study in light of the Mahat statement. Did behavior that supports or enhances inclusive education improve in light of the slight improvement in affective and cognitive attitudes?

We can answer this question by looking for a change in behavioral attitudes in this study. At the beginning of this study, responses to the behavioral section of the MATIES ranged from 24 to 36 which again is above the median score of 21 for each section, and therefore, indicates mostly positive behavioral attitudes toward inclusion prior to the intervention. However, in the final survey the range of scores remained virtually the same at 23 to 36, but the mean score of respondents dropped in the final survey to 28.5 from 29.4 in the initial survey. It is therefore, not possible to say that behavioral attitudes improved, although it should be noted that 36 is the highest possible score for each section, and there were four respondents with scores of 30 or above in both

the initial and the final survey. It is possible that these already high scores could not be improved upon with any level of training, in-service or support.

Should we have observed changes in behavioral attitude to go along with the slight changes in affective and cognitive attitudes? "There are times...when people's attitudes are not consistent with their behaviour. For instance, several studies have shown that behavioral intention is closely related to norms of behaviour, i.e. what society thinks one should do (e.g. de Vries, Dijkstra, & Kuhlman, 1988; Nash, Edwards, & Nebauer, 1993; e.g. Triandis, Vassiliou, & Nassiakou, 1968). Hence a teacher, who has favourable attitudes toward inclusive education, may behave in ways that appear negative because the school in which he or she teaches does not support an inclusive philosophy (Mahat, 2008)" It is possible that the experiences of staff members have shown them that although they are being told that special education students belong in their classrooms, they are not being supported with in-class resource room programs, training, opportunities for collaboration, and reasonable preparation times, and therefore they are behaving in ways that are appropriate for the educational climate of their school district.

It is also possible that the timing of the surveys influenced the responses. The initial survey was presented to teachers just after their last school-wide in-service of the school year and within a few weeks of the end of the second marking period. The first half of the school year had ended, and the second half of the school year was in its early stages.

The final survey was completed by staff members at the end of the third marking period. This is a time when staff members are feeling especially pressured to present curriculum at a pace that will ensure that their students are ready to leave for spring

break, and that students have the skills they need by the end of the school year.

deBettencourt (1999) found that those teachers who are responsible for covering curriculum at a rapid pace may not have positive attitudes toward the student who causes that pace to be interrupted. This is the time of year when teachers and staff would feel this pressure, and this anxiety could affect responses to the questionnaire.

At this time of year, staff members are also going through the process of evaluating student progress for the entire school year in light of their readiness for the next grade level and their preparedness for state assessments. They are preparing for parent-teacher conferences, making final child study team referrals, considering retentions and gathering information to support their decisions. By this time of year, if inclusion has not gone well, there is very little reason to believe that it will.

Regular education teachers generally feel unprepared to understand the needs of students with special needs and to meet the demands of inclusion (DeSimone and Parmar,2006). They need to feel that inclusion is effective for both the general education student and the student with disabilities (Weiner, 2003). With the concerns that staff members face at this time of the school year, apprehension or uncertainty about their professional skills or effectiveness might resurface due to lack of time to make changes that will result in visible progress. These circumstances which occur at the end of the 3rd marking period may contribute to less hopeful attitudes. If this study were repeated, it should be timed so that both surveys could be completed during the first half of the school year when staff members are looking forward rather than backward, and there is time for a change in behavior to have a positive outcome or during the last marking period when conditions will be the same for both surveys..

I had expected to find an improvement in attitudes by the end of this study since the most positive attitudes toward inclusion have been found in teachers who have received the most intensive training in working with students with disabilities (Burke & Sutherland, 2004), and these staff members did receive additional training due to their participation in this study.

I did find an improvement that could be documented with numbers; however, there is a question as to whether or not there was actually a change in attitudes. This uncertainty is due to the small sample and the inability to measure the change in attitudes in individual subjects. The anonymity of this survey was a design flaw since it did not permit the tracking of individual improvement over time. Instead, it was only possible to track collective improvement. This study would have been more informative and more convincing if subjects had been systematically identified so that change in attitude in individual responses could have been documented. In that way, even small changes in attitude might have been measured and the correlation between a change in cognitive or affective attitude and behavioral attitude could have been documented.

I was also disappointed with the lack of time available to present in-service training and schedule collaboration time. Ideally, in-service training should have been presented on a normally scheduled in-service day over a period of one or more hours. It should then have been followed up with an additional period of collaboration which would have allowed for brainstorming, problem solving and implementation of new practices. This study would have been more effective had it been conducted over at least a three month period as this would have made it possible to expand the intervention.

deBettencourt (1999) found that a majority of general education teachers disagreed with the concept of mainstreaming or inclusion. A surprising finding of this study was that staff members who responded to the survey held generally positive attitudes towards inclusion at the beginning of the study. I had expected to find more negative than positive attitudes prior to the intervention based on the research of deBettencourt and others, and based on my own personal experience. It is possible that I documented mostly positive attitudes because those who elected to respond to the survey did so because they felt this was an important topic, while those who chose not to participate did so because they held more negative attitudes towards inclusion and did not see any reason to take the time to respond to the survey or did not want their negative attitudes recorded.

It is also possible that when subjects respond to a survey they respond by answering in the way they think they should respond instead of responding with their true feelings as Mahat (2008) suggested when he spoke of teachers with positive attitudes sometimes behaving in ways that appear negative due to the norms of behavior in their schools which do not support an inclusive environment.

The research shows that attitudes precede behavior (Cook, 2002), and yet the surveys in this study showed the highest overall scores at the beginning and the end of the study in behavioral attitudes rather than in cognitive or affective attitudes. Mahat (2008) found a positive correlation between the subscales in that positive cognitive and affective attitudes resulted in positive behavior, and negative cognitive and affective attitudes resulted in negative behavior. This was not clearly obvious in this study since cognitive and affective attitudes appeared to improve, but behavioral attitudes did not improve

although they remained high. Bull, Overton and Montgomery (2000) report that changes in attitude may not result in immediate action, so it is possible that the intervention provided in this study did have the desired effect, and that the improvement in the already high behavioral attitudes will follow with the passage of time and with continued collaboration, training, and support.

Conclusion

This study examined the current attitudes towards inclusion of general education teachers and paraprofessionals in a small school district. An attempt was made to influence the attitudes of a select group of paraprofessionals and teachers in the district through a brief series of activities that included in-service training, collaboration between the researcher, classroom teachers and paraprofessionals, and support. Cognitive and affective attitudes improved as a result of intervention. Behavioral attitudes did not; however, overall the results of the MATIES showed that attitudes had become more positive in this small group.

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APPENDICES

APPENDIX A

Initial Survey

You are being asked to complete the survey below and the attached Professional Development Questionnaire as part of research being conducted by Donna Groon for a master's thesis. Your participation is voluntary. The purpose of this research is to measure the attitudes of educators towards inclusion of students with disabilities in the general education classroom. Your responses will be kept anonymous.

Questions involving this research may be directed to Dr Jay Kuder, Department of Special Educational Services/Instruction, Rowan University (856) 256-4000 or to Donna Groon at 522-1522 ext. 117.

| I am a | classroom teacher | classroom aide |
|---------|-------------------|------------------|
| ı amı a | | CIMBBI COIII WAR |

MATIES Multidimensional Attitudes Toward Inclusive Education Scale

Please circle your response to the statements below. Cognitive I believe that an inclusive school is one that permits academic progression of all students regardless of their ability 5 6 3 Somewhat Disagree Strongly Disagree Disagree Somewhat Agree Agree Strongly Agree I believe that students with a disability should be taught in special education schools. 3 Somewhat Disagree Strongly Disagree Somewhat Agree Agree Disagree Strongly Agree I believe that inclusion facilitates socially appropriate behavior among all students. 3 Somewhat Agree Disagree Somewhat Disagree Strongly Disagree Agree I believe that any student can learn in the regular curriculum of the school if the curriculum is adapted to meet their individual needs. Somewhat Disagree Strongly Disagree Disagree Somewhat Agree Agree Strongly Agree I believe that students with a disability should be segregated because it is too expensive to modify the physical environment of the school. 5 Somewhat Agree Agree Disagree Somewhat Disagree Strongly Disagree Strongly Agree I believe that students with a disability should be in special education schools so that they do not experience rejection in the regular school. 3 Somewhat Disagree Strongly Disagree Disagree Strongly Agree Somewhat Agree Agree

| Affective | | | | | |
|-------------------|-------------------|------------------|-------------------|--------------------|-------------------|
| I get frustrated | when I have diff | iculty commu | nicating with s | tudents with a d | isability. |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree |
| I get upset when | n students with a | ı disability car | mot keep up w | ith the day-to-da | y curriculum |
| in my classroon | n. | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree |
| I get irritated w | hen I am unable | to understand | students with | a disability. | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | | Agree | Disagree | Somewhat Disagree | Strongly Disagree |
| | | tudents with a | disability in a | regular classroo | m with other |
| students withou | t a disability. | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | | | Disagree | | |
| | | | ity are included | l in the regular c | lassroom, |
| regardless of the | e severity of the | disability. | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | |
| _ | when I have to a | dapt the curri | culum to meet | the individual ne | eeds of all |
| students. | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree |
| Behavioral | | | | | |
| _ | _ | nts with a disa | ability to partic | ipate in all socia | l activities in |
| the regular class | sroom. | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree |
| | | ılum to meet t | he individual r | needs of all stude | ents |
| regardless of th | eir ability. | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | Somewhat Disagree | |
| | | | th a severe dis | ability in the reg | ular |
| classroom with | the necessary su | ıpport. | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | |
| - | | sical environm | ent to include | students with a c | lisability in |
| the regular clas | sroom. | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | |
| | | | | re that all studer | |
| emotional and l | behavioral disord | der can be suc | cessfully inclu | ded in the regula | r classroom. |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | |
| | | ment of indivi | dual students i | n order for inclu | sive |
| education to tak | ke place. | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree |

APPENDIX B

Professional Development Questionnaire

Your responses to the following questions will be very helpful in developing specific inservice training. You may use the back of this page to complete your responses if necessary.

| necessary. |
|--|
| 1. What is the greatest obstacle you face when dealing with special education students in |
| the general education classroom? |
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| |
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| |
| |
| |
| 2 What are the most the most of Constantian and an attenuation to most the most of |
| 2. What causes you the greatest frustration when you are attempting to meet the needs of |
| a student with a disability? |
| |
| |
| |
| |
| |
| |
| |
| 3. What supports should be offered to staff to ensure the success of inclusion of students |
| with disabilities in the general education classroom? |
| |
| |
| |
| |
| |
| A TET |
| 4. What training must be supplied to general education teachers and teacher aides in order |
| to support inclusion? |
| |
| |
| |
| |
| |
| |
| |
| 5. Please feel free to make any additional comments or suggestions below or on the back |
| of this page. |
| |
| |
| |
| |
| |
| |

APPENDIX C

Final Survey

You are being asked to complete the survey below and the attached Professional Development Questionnaire as part of research being conducted by Donna Groon for a master's thesis. Your participation is voluntary. The purpose of this research is to measure the attitudes of educators towards inclusion of students with disabilities in the general education classroom. Your responses will be kept anonymous.

Questions involving this research may be directed to Dr Jay Kuder, Department of Special Educational Services/Instruction, Rowan University (856) 256-4000 or to Donna Groon at 522-1522 ext. 117.

| I am a cla | ssroom teacher. | | | |
|------------|---------------------|-------------------|-----------|--|
| I am a cla | ssroom aide. | | | |
| I respond | ed to the first sur | vey. | | |
| | espond to the fir | • | | |
| | _ | onded to the firs | t survey. | |

MATIES Multidimensional Attitudes Toward Inclusive Education Scale

Please circle your response to the statements below.

Cognitive

I believe that an inclusive school is one that permits academic progression of all students regardless of their ability

1 2 3 4 5 6

Strongly Agree Somewhat Agree Agree Disagree Somewhat Disagree Strongly Disagree

I believe that students with a disability should be taught in special education schools.

1 2 3 4 5 6

Strongly AgreeSomewhat AgreeAgreeDisagreeSomewhat DisagreeStrongly DisagreeI believe that inclusion facilitates socially appropriate behavior among all students.123456Strongly AgreeSomewhat AgreeAgreeDisagreeSomewhat DisagreeStrongly DisagreeI believe that any student can learn in the regular curriculum of the school if the

I believe that any student can learn in the regular curriculum of the school if the curriculum is adapted to meet their individual needs.

1 2 3 4 5

Strongly Agree Somewhat Agree Agree Disagree Somewhat Disagree Strongly Disagree

I believe that students with a disability should be segregated because it is too expensive

| to modify the | physical environn | nent of the sch | ool. | | | | | |
|---|---------------------|-----------------------------|-----------------|--------------------|------------------------|--|--|--|
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| Strongly Agree Somewhat Agree Agree Disagree Somewhat Disagree Strongly Disagree I believe that students with a disability should be in special education schools so that they | | | | | | | | |
| do not experience rejection in the regular school. | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| Affective | | | | | | | | |
| I get frustrated when I have difficulty communicating with students with a disability. | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| Strongly Agree Somewhat Agree Agree Disagree Somewhat Disagree Strongly Disagree I get upset when students with a disability cannot keep up with the day-to-day curriculum | | | | | | | | |
| in my classroom. | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| Strongly Agree Somewhat Agree Agree Disagree Somewhat Disagree Strongly Disagree I get irritated when I am unable to understand students with a disability. | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| I am uncomfor | table including s | tudents with a | disability in a | regular classroo | m with other | | | |
| students witho | ut a disability. | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| I am disconcer | ted that students | with a disabili | ty are included | d in the regular o | lassroom, | | | |
| | he severity of the | | • | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| Strongly Agree Somewhat Agree Agree Disagree Somewhat Disagree Strongly Disagree I get frustrated when I have to adapt the curriculum to meet the individual needs of all | | | | | | | | |
| students. | | • | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| Behavioral | | | | | | | | |
| I am willing to encourage students with a disability to participate in all social activities in | | | | | | | | |
| the regular classroom. | | | | | | | | |
| 1 | 7 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | Somewhat Agree | | Disagree | Somewhat Disagree | Strongly Disagree | | | |
| Strongly Agree Somewhat Agree Agree Disagree Somewhat Disagree Strongly Disagree I am willing to adapt the curriculum to meet the individual needs of all students | | | | | | | | |
| regardless of their ability. | | | | | | | | |
| 1 | 7 | 3 | 4 | 5 | 6 | | | |
| Strongly Agree | 2 Somewhat Agree | S Agree | Disagree | Somewhat Disagree | • | | | |
| | | | | | | | | |
| I am willing to physically include students with a severe disability in the regular classroom with the necessary support. | | | | | | | | |
| 1 1 | n the necessary s | аррог с. 2 | 4 | 5 | 6 | | | |
| Strongly Agree | L Somewhat Agree | S Agree | 4 Disagree | Somewhat Disagree | • | | | |
| | modify the nhy | | | | | | | |
| I am willing to modify the physical environment to include students with a disability in the regular classroom. | | | | | | | | |
| une regular cla | 3 | 3 | 4 | 5 | 6 | | | |
| I Strongly Agree | L Somewhat Agree | 3 Agree | 4 Disagree | Somewhat Disagree | U Strongly Disagree | | | |
| I am willing to | adant my comm | | | | | | | |
| I am willing to adapt my communication techniques to ensure that all students with an emotional and behavioral disorder can be successfully included in the regular classroom. | | | | | | | | |
| emononai and | . Deliavioral disor | | | | | | | |
| 1 | L | 3 | 4 | 5 | 6 | | | |

| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | | |
|--|----------------|-------|----------|-------------------|-------------------|--|--|--|--|
| I am willing to adapt the assessment of individual students in order for inclusive | | | | | | | | | |
| education to take place. | | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | | | | |
| Strongly Agree | Somewhat Agree | Agree | Disagree | Somewhat Disagree | Strongly Disagree | | | | |