

# The Inclusion of Learners with Moderate General Learning Disabilities and Challenging Behaviours in School and Class Activities in Special Schools

Challenging behaviours (CB) are common among learners with special educational needs and can impact on inclusive practices in educational settings. The current study highlights some factors that support staff in the inclusion of learners with Moderate General Learning Disabilities (ModGLD) and CB in school and during class activities. The research focus is on the perspectives of teachers and principals in six midland and west of Ireland special schools for learners with ModGLD. The research question is “What are the factors that facilitate the inclusion of pupils with ModGLD exhibiting CB in school and during class activities in special schools?”. Findings suggest that while some barriers exist such as training, other factors such as school setting, leadership, teacher confidence and competence, collaboration and the support of Special Needs Assistants (SNA) serve to facilitate the inclusion of this cohort of learners.

**Keywords:** *inclusion, special schools, moderate general learning disability, challenging behaviours, barriers to inclusion*

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## INTRODUCTION

Challenging behaviour (CB) is defined as “culturally abnormal behaviour(s) of such intensity, frequency or duration that the physical safety of the person or others is likely to be placed in serious jeopardy, or behaviour which is likely to seriously limit the use of, or result in the person being denied access to, ordinary community facilities” (Emerson, 2001, p.3). CB encompasses a broad spectrum of behaviours including self-injury, aggressive behaviour, non-compliance, disruptive behaviour, socially inappropriate behaviour, ritualistic / stereotypical

behaviour, inappropriate sexual behaviour, destruction of property, absconding, psychological disturbance, substance and alcohol abuse, temper tantrums and passive challenging behaviour (Nicholls, Hastings and Grindle, 2020; Benson and Brooks, 2008; Grey and Hastings, 2005, Kelly, Carey and Mc Carty, 2004). CB is common amid learners with special educational needs (SEN) (Nicholls et al 2020; Hastings, Allen, Baker, Gore, Hughes, McGill, Noone and Toogood, 2013). Within education settings, the threat of social exclusion for learners with SEN is a reality because of CB (Nicholls et al, 2020; Emerson, Kiernan, Alborz, Reeves, Mason, and Swarbrick, 2001), therefore placement in special schools can be the optimal choice (Colum and Mc Intyre, 2019; Mc Conkey, Kelly, Craig and Shevlin, 2016; Inclusion Ireland, 2009). There are 134 special schools in the Republic of Ireland of various categorisations with 46 designated as schools for Moderate General Learning Disabilities (ModGLD) (Department of Education and Skills, (DES), 2020).

A cognitive functioning range from a 35 to 49 Intelligence Quotient (IQ) indicates the presence of ModGLD (World Health Organization International Classification of Diseases, 10<sup>th</sup> revision (ICD-10) (2020). Learners with ModGLD may exhibit significant delays in reaching developmental milestones and impairment in language, communication, literacy, numeracy, social and personal development, motor co-ordination, mobility and leisure activities (National Council for Special Education (NCSE), 2014).

## **LITERATURE REVIEW**

There is a high frequency of CB among individuals with SEN with research suggesting a prevalence ranging from 10% to 60% (Rauf, 2012), in Sweden, for example, 18.7% of the population of adults with SEN exhibit CB (Lundqvist, 2013). From a UK perspective, Emerson et al (2001) reported that 10 to 15% of individuals with SEN known to local education, social and health care services displayed CB. In South Wales, Deb, Thomas and Bright (2001) found that 60.4% of adults with SEN between 16 – 64 years of age presented with CB. Jones, Cooper, Smiley, Allan, Williamson and Morrison (2008) indicated that 22.5% of adults, out of a population of 1,023, with SEN also presented with CB.

The most recent studies in relation to CB and special school settings in Ireland is from Kelly *et al.* (2004, 2007) who noted that “One in three pupils presented with challenging behaviour” (2004, p.53) in the school year 2004 and out of 66 special schools, more than half (56%, n=37) observed an increase in CB (p.55).

Managing CB can impact negatively on the learning environment (Nicholls *et al*, 2020), taking up a disproportionate amount of time (Sugai, Sprague, Horner and Walker, 2000) as well as being a cause of anxiety for teachers (Male, 2003). A Finnish study by Hameenaho (2016) reported that CB was a concern for teachers, they felt frustrated at the level of support available. Other scholars capture how staff absence rates is higher in SEN settings than in mainstream (Ervasti, Kivimaki, Pentti, Suominen, Vahtera and Virtanen, 2011) and Nicholls *et al* (2020) suggest that CB may be the cause as CB is associated with work-related stress. In Ireland, staff burnout is impacted by consistent CB (Kelly, Carey, Mc Carty and Coyle 2007). Considering these factors, the current study sought to elucidate what might aid staff in special schools to effectively include learners in school and class activities. The definition of inclusion underpinning the current study seeks to capture this perspective:

“Inclusion is seen as a process of: Addressing and responding to the diversity of needs of learners through enabling participation in learning, cultures, and communities and removing barriers within and from education through the accommodation and provision of appropriate structures and arrangements to enable each learner to achieve the maximum benefit from his/her attendance at school” (NCSE, 2011, p. 13-14)

This view of inclusion as a *process* recognises that inclusion should not be viewed as simply a question of location, placement or integration. Therefore, in the context of this article inclusion is considered in terms of engagement, participation and learning in whole school and classroom activities. This is a key concern of *all* education staff in all schools whether mainstream or special as CB poses a particular challenge in both settings (Nicholls et al, 2020).

Despite a commitment to inclusion, research found that exclusion is often considered a ‘necessary’ response to CB (Orsati and Causton-Theoharis, 2013; Kerr and Nelson 2009). Male (1996) (cited in Kelly et al, 2004, p.23) reported that approximately 72.5% of schools for ModGLD had “at some time excluded pupils permanently or temporarily because of challenging behaviour”. Typical consequences for pupils with ModGLD exhibiting CB in special schools comprise being put out of the classroom or being sent to another classroom (Orsati and Causton-Theoharis, 2013), isolation from peers within school, suspension or a reduced school day, loss of privileges or one to one time with a special needs assistant (Kelly *et al*, 2004). While Kelly *et al* (2004) also note that special schools may respond by involving parents or guardians, or engaging in consultation

among staff and/or with other professionals, nevertheless many of the typical and immediate responses seem likely to impact negatively on the process of inclusion. According to Mand (2007, p.7) “the rejection of pupils with behaviour problems is a serious problem for inclusive education in schools”.

More than a decade and a half after Kelly et. al’s (2004) seminal study, this article considers the perspectives of staff on support for the inclusion of learners with ModGLD and CB in a sample of special schools.

## **METHODOLOGY**

The primary research question is “What are the factors that facilitate the inclusion of pupils with ModGLD exhibiting CB in school and during class activities in special schools”. Six special schools were identified in the midlands and west region of Ireland (DES, 2016). The schools chosen had a ‘specific designation of ModGLD, ease of access and proximity to the researcher’ (Colum, 2016, p.32).

A qualitative and quantitative approach to gather views in multiple ways to obtain a more complex impression of the subject investigated was employed (Denscombe, 2008; Robson, 2002). ‘Mixed methods research addresses both the ‘what’ (numerical and quantitative data) and ‘how or why’ (qualitative data) types of research questions’ (Cohen, Manion, and Morrison 2013, p.25).

Self-completion questionnaires were sent to the teaching staff in the six special schools, followed by semi-structured interviews with two Principals to get the voice and insights of leadership. Due to time and word count limitations, the researcher chose two Principals for this purpose. Questions were reviewed based on feedback from the pilot. Out of 43 questionnaires sent, there were 30 respondents. The questionnaire had five sections. Section One garnered personal details such as age, gender and educational profile, one of the aims here was to ease the participants into the questionnaire process (Cohen et al, 2013). Section Two asked participants to describe the school and class activities that are common to the school day in their setting (for responses see Table 1).

**Table 1: School and class activities**

Class / Group teaching	<ul style="list-style-type: none"> <li>• Curriculum delivery</li> <li>• Practical tasks (woodwork / art / cooking)</li> <li>• Pair work</li> <li>• Buddy system</li> <li>• Individual work</li> </ul>
Whole school activities	<ul style="list-style-type: none"> <li>• Assembly</li> <li>• Band / music</li> <li>• Tours</li> <li>• Visitors to the school</li> <li>• School plays / concerts</li> </ul>
Community Access	<ul style="list-style-type: none"> <li>• Park</li> <li>• work experience</li> <li>• field trips</li> </ul>
Community facilities	<ul style="list-style-type: none"> <li>• Swimming</li> <li>• Café / restaurant</li> <li>• Church</li> </ul>
Dinner time / feeding	No further detail offered
Playground / yard activities	No further detail offered
Transport	No further detail offered

Section Three focused on types of CB and their prevalence. A list of types of CB was delineated, as per literature, and participants were asked to determine if any type of CB was evident among learners in their class. Section Four focused on the factors for inclusion with a Likert scale measuring awareness in all activities. This 26-item scale included items such as:

- *I am supported by the leadership (Principal, Deputy Principal, in school management team) of the school to ensure inclusion of the learner with CB in my class*

- *I collaborate with other teachers for inclusion of learners with CB*
- *I have adequate SNA support to assist with inclusion of learners with CB*

For the Likert scales participants were required to indicate the extent of their agreement by selecting either Strongly Disagree (1), Disagree (2), Undecided (3), Agree (4) and Strongly Agree (5). A composite score was calculated for each section.

The final section comprised some open-ended questions focusing on the views of participants in relation to improving the experience of including learners with CB in all school activities and any potential challenges / barriers. Examples include:

- *What supports would you like to see in place in order to enhance inclusion for learners with CB?*
- *Do you feel that you would benefit from in service training/courses/professional development in relation to CB? How? (If already completed, please give details).*
- *What are the main challenges in relation to including learners with CB in all school activities?*

The Principal's interviews focused on the identification, prevalence and inclusion of learners with CB, if they felt they had adequate supports and resources, and as school leaders, what challenges they faced for inclusion of learners with CB in their school.

Ethical approval was sought and received from the Research and Ethics Committee of the third-level institution involved. Each participant was made aware of the purpose and objectives of the study and were assured of the right to anonymity, non-traceability and confidentiality and the right to withdraw at any stage.

Limitations such as the restriction of the sample to a specific geographical area may impact on the generalisability of the findings to other regions. In summary, the study is small scale and concerned with the opinions of teachers (n=30) and principals (n=2). The views of other school personnel are not included, therefore not reflecting a wider stakeholder opinion.

Data from the questionnaires was analysed through using the statistical software package SPSS (IBM SPSS Statistics 21). Qualitative data from the interviews and some of the open-ended questions in the questionnaires were thematically

categorised, and these formed the basis of a coding scheme for analysis (Rose, Spinks, and Canhoto 2015).

## **FINDINGS AND DISCUSSION**

Teacher participants in this research study were aged between 20 and 50 years of age and were 90% female and 10% male. The pupils involved were aged between 4 and 19 years and were 34% (n=27) female and 66% (n=53) male.

### **Prevalence of Students Presenting with ModGLD and CB**

The questionnaire specifically asked teachers to identify learners in their class who were formally assessed and / or receiving behaviour support regarding CB. In response to this, participants indicated that out of 151 pupils presenting with MoDGLD across the six schools, 80 were assessed and receiving behaviour support for CB (53%, n=80). Other studies concerned with prevalence of CB were in contexts that differ from the current study; they also used different research methodologies, so comparison is difficult. The literature highlighted that over a period of 25 years, findings in terms of prevalence in studies vacillated from 12% (Harris, 1995), to 82% (Murphy, Healy, and Leader 2009) to 53% (Nicholls et al, 2020). From an Irish perspective, Kelly et al (2004) reported 31% of pupils in the 70 participating schools from September 2002 to June 2003 in their study presented with CB. Nicholls *et al* (2020) found that the incidence of Autism Spectrum Disorder and lower adaptive skills increased the presence of CB, in line with previous CB research (Bowring, Totsika, Hastings, Toogood and Griffith, 2017; McClintock, Hall, and Oliver 2003; Felce and Kerr 2013).

In the schools sampled in the current study, CB appears more common in boys (59%, n=62), than girls (32%, n=18) mirroring previous studies (Kelly *et al.*, 2004; Emerson, Robertson, Gregory, Hatton, Kessissoglou, Hallam and Hillery, 2000; Kiernan and Kiernan, 1994; Male, 1996) who found that there was a preponderance of males presenting with CB.

### **Types of CB**

Participants were asked to identify types of CB encountered in the school and reported that learners could exhibit more than one of the CBs listed; some learners presented with three or four types of CB. Disruptive behaviour was common in 71 out of the 80 students exhibiting it. One principal noted that '*disruptive behaviour can come in many forms, it can be aggressive or it can be non-compliance and this can impact negatively on classwork as well as community activities*' (Principal 2).

Sixty-three students were described as exhibiting self-injurious behaviour (SIB) and this is in line with a study by Nicholls *et al* (2020) who found that SIB was a common form of CB for learners with SEN. In their study, they stated that 95% of participants exhibited SIB. High rates of stereotypical behaviour (STB) was recounted in the study (n=60, 75%) and some studies indicate a link between SIB and STB (Barnard-Brak, Rojahn, Richman, Chesnut, and Wei, 2015). Potentially this is an area for further research (Nicholls *et al*, 2020).

Across the six schools, the number of students presenting with socially a) inappropriate behaviour, b) ritualistic/temper tantrums, c) destruction of property, and d) passive challenging behaviour were 51, 47, 23 and 17 respectively. While a comparison to other studies can be difficult, as they all use different variables, these figures resemble a study by Karasu, Sert, Demirtas, Atbasi and Aykut (2019) who carried out an investigation to ascertain CB across primary and post primary settings in Japan. Their investigation found that 30 out of 54 of the participants presented with inappropriate and destructive behaviours that disturb the school order.

### **Factors for Facilitating Inclusion in Special Schools**

Key factors identified by school staff as facilitating the inclusion of students with ModGLD and CB in school and class activities included the nature of the special school setting, leadership, teacher training and confidence, collaboration and SNA support.

#### ***1. Special school setting***

All teachers surveyed (100%, n=30) indicated that the schools were accessible for all pupils, that they had a policy on inclusion and that school policy was an important factor for driving inclusive practice for pupils with ModGLD and CB in the school and during class activities. Twenty-seven participants (90%) felt that special schools have suitable layouts and proper lighting. In relation to acoustic levels, 21 participants (70%) strongly agreed or agreed that their special schools were suitably laid out for students. Both Principals stated that the physical structure of their special schools was adequate to include pupils with ModGLD and CB in school activities such as music, school plays and concerts. One Principal referred to the fact that the main hall had five different exits so if a student felt overwhelmed, they could step out. This contrasts with literature that found physical limitations of schools are barriers to inclusion (Drudy and Kinsella, 2009; O'Connor, 2007; Avramidis, 2000). Again, comparison may be skewed as these studies consider mainstream settings and not special schools as is the case in this study.



## **2. Leadership**

All participants (100% n=30) strongly agreed with the statement that they had effective support from school leadership. This is in keeping with literature that calls on school leaders to ‘create a collaborative positive context within which leadership functions can be spread throughout the staff group and inclusive practices can be developed’ (Angelides et al 2010, p.332). This ideology was acknowledged very positively in the study and suggests that leaders of special schools felt confident in their leadership. This is reflected in other studies, namely, O’Mahony (2011) who explored the leadership of special schools in Ireland and found that leaders perceived themselves as facilitating ‘quality learning for both students and staff within their schools’ (p.118).

## **3. Teacher Education and Confidence**

Teachers were asked to indicate if they felt that some type of specialised training is essential when including learners with ModGLD and CB and all (100%, n=30) strongly agreed.

In response to the open-ended question, ‘Do you feel that you would benefit from in service training/courses/professional development in relation to CB?’ comments included:

*‘Yes, if you have training in SEN or challenging behaviours you know how to help the children be part of all school activities, you know how to include the child in the class or help them access community activities’.* Teacher 13

Twenty-five participants (83%) either strongly agreed or agreed that they had adequate specialised training and skills to teach pupils with ModGLD and CB with only three participants (10%) disagreeing and the remaining two teachers strongly disagreeing (7%).

*“Doing the post graduate diploma in SEN has definitely helped me in this job. I know that in my class teaching, I find it easier to include the children in my class and have strategies ready for when we go swimming or to the coffee shop. I have my social stories and behaviour cards in my pocket at all times”* Teacher 7.

In relation to confidence, the same 25 participants (83%) strongly agreed and agreed that they felt confident that they had sufficient skills to address CB in the classroom, could design an individual education plan (IEP) and could differentiate adequately for learners with ModGLD exhibiting CB.

Both school Principals identified various differentiated approaches to support learners with CB. These comprised shorter and achievable tasks, reward systems, movement breaks, buddy systems, timetabling and use of individual and pair work. It appears that there is a strong link between training and confidence, and this is echoed in literature explicitly O’Gorman, Hastings and Grindle, (2009). Likewise, one principal detailed:

*‘Many of our teachers have completed post graduate diplomas and masters in the area of SEN and these are confident teachers who assist colleagues in the area of CB’.*

#### **4. Collaboration**

All teachers (100%, n=30) strongly agreed on the importance of collaboration when engaging in school and class activities. Staff specified that they *‘felt prepared for inclusion’* (T21) when they planned together. Principals commented:

*“... the parents are the experts, we rely so much on parents to inform our planning, organisation and how to include the children in all activities.”*  
(Principal 1)

*“Collaboration is vital– with colleagues, the school and wider community”*  
(Principal 2)

*“We work fully with multidisciplinary teams to ensure best practice for our children”* (Principal 2)

The value of collaboration with support services, colleagues and parents as a facilitating factor for inclusive practice is evident in a wide body of literature (Travers, Balfe, Day, Dupont, Mc Daid, O’Donnell, Butler and Prunty, 2010; Ware, Balfe, Butler, Day, Dupont, Harten, Farrell, McDaid, O’Riordan, Prunty, Travers, 2009; Lindsay, 2007; Smith and Leonard 2005). The DES (2017) Guidelines also call on schools to ensure collaborative practice with external agencies for effective inclusive practice.

#### **5. SNA support**

A significant number of teachers (67%, n=20) agreed and 10 teachers (33%) strongly agreed that they had adequate SNA support in their classrooms to ensure learners with ModGLD and CB were included in school and class activities. In response to the open-ended question ‘What supports would you like to see in place in order to improve inclusion for learners with CB?’ teachers commented:

*'SNA support is the most important. They help include the children in activities such as band, school tours or dinner time'* Teacher 7

*'I think all schools should have more SNAs. The girls in my room help the children in the class by having their timetables ready and then off for a movement break. Also, when we go to the park or on field trips, the SNA is the one who supports inclusion.'* Teacher 24

While some literature notes how the SNA scheme was '*... resource sensitive at multiple levels*' (Flatman-Watson 2009, p.278), there has been an increase of over fifteen thousand SNAs in the school system with figures increasing from 100 SNA posts in 1993 to 15,950 posts in 2019 (NCSE, 2020). The sample of schools surveyed identified adequate SNA support for the inclusion of learners in all activities. Principals commented that SNA support:

*"..... concentrates on feeding, mobility, administration of medication to name but a few and these factors ensure the child has support and can be included in activities that may otherwise exclude them. By this I mean, for example, a child with CB can join the school tour as the SNA can administer the medication."* (Principal 1)

### **Barriers to Inclusion**

School staff identified several barriers to the inclusion of learners with ModGLD and CB including insufficient time to plan and collaborate with colleagues, gaps in access to multidisciplinary support services, and there was mention again by some of the lack of specialist training in CB. All participants (100%, n=30) strongly agreed that inadequate time to plan and collaborate with colleagues is a barrier. One Principal concurred with these findings:

*"Time to meet and plan is a challenge in this school. To ensure pupils are included in all activities, lessons need to be differentiated appropriately and pupils need to be supported through a range of specialised, well thought out and planned resources".* (Principal 2)

Twenty-seven participants (90%) strongly agreed that inadequate access to services such as occupational therapy, speech and language therapy, physiotherapy and behaviour specialists pose a challenge to effective inclusion.

Nine teachers (30%) commented on the lack of training opportunities specifically in CB:

*“There is not much opportunity for training in challenging behaviour”.*  
(Teacher 6)

*“I definitely think a barrier to inclusion is the lack of specific training courses in CB. We don’t know how to include the children with CB properly or even if we are doing it the right way. A simple trip to the shop can be stressful for the child unless we know how to manage certain situations”.* (Teacher 17)

Travers et al, (2010) suggest that barriers to inclusion can be overcome at school level, teacher / class level and family / community level by a range of interventions and approaches including robust leadership, effective planning and collaboration, adequate time and specialised resourcing. These must be taken into consideration to ensure effective inclusive practice.

## **CONCLUSION**

Challenging behaviour is common among learners with SEN in both mainstream and special school settings and impacts on the teaching and learning experiences of the students. This study explored factors that facilitate the inclusion of learners with ModGLD and CB in school and class activities in six special schools for ModGLD. The data suggests that these special schools have adequate resources and relevant support to enable learners with ModGLD and CB to participate with their peers in school and class activities. While some barriers exist, in particular the need for more focused training in CB and support from outside agencies, factors such as a well-organised special school setting, professional leadership of the school, targeted teacher training and confidence, efficient collaboration and SNA support all contribute to effective inclusive practice in school and class activities for learners with ModGLD and CB.

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