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THE OPINIONS OF THE PARENTS OF CHILDREN WITH AUTISM ABOUT THEIR CHILDREN'S INCLUSION IN MAINSTREAM PRESCHOOL AND SCHOOL INSTITUTIONS - OPPORTUNITIES AND CHALLENGES

Abstract

The call for educational inclusiveness is becoming louder, more present and more and more necessary in the social context. In recent decades, education has been increasingly based on the paradigm of inclusion, which reflects its commitment to accepting diversity and meeting the needs of every child and student. Autism is a complex neurodevelopmental disorder that affects individuals during their entire life span. The most common signs by which it can be recognized are short-term and labile attention, motor restlessness characterized by stereotyped movements: yawning, running in circles, repetition of the same words/syllables, absence or poorly developed speech and absence of eye contact. However, each person with this neurodevelopmental disorder is unique, with a wide range of abilities and challenges. Hence, the inclusion of children and youth in regular kindergartens and schools represents a complex process of building and developing a specific policy, culture and practice compatible with the spectrum of diversity embodied in each child/student. The paper presents results, obtained with the help of a semi-structured interview with 9 parents of children with

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autism (aged 4-15 years), regarding their experiences in the process of including children with autism in typical/regular preschools and elementary schools. The goal was to detect the difficulties/barriers they face during the education of their children, as well as to discover possible ways to overcome them. The research is based on the principles of the descriptive-analytical method and has a qualitative character. The obtained results reveal that parents and children have encountered and continue to face challenges stemming from institutional and social policies, physical conditions, inadequate technical and technological resources in kindergartens and schools negative attitudes towards children with autism from teachers, educators, parents of neuro-typical children, peers, and the broader community.

Keywords: inclusive education, barriers, educational institution, children with autism

Introduction

The concept of inclusion, in the context of education, goes beyond traditional understandings of homogeneous classrooms, rigid curricula, and traditional institutional organization. Inclusive education strives to create an environment where every child/student, regardless of their abilities or differences, is not only welcome but also actively engaged and supported in their learning. Despite reforms in educational policies, theory, and practice, it can still unfortunately be said that the situation remains critical and below satisfactory levels. A special challenge for educational practice in Macedonia is the inclusion of children with autism into mainstream educational institutions. Inclusive education should challenge historical norms of segregating children and students on the basis of perceived differences. It should recognize and value diversity, promote a sense of belonging and equity, continuously striving to break down barriers that lead to isolation. Autism spectrum disorder is a lifelong condition that affects individuals at every stage of life. Early intervention and especially the inclusion of these children in regular preschool institutions play a key role in supporting their development, and later, in the inclusive school, these students are enabled to build on their potential and become more acceptable to their peers with typical development. Given that the inclusive education model fosters coexistence within a diverse peer environment that reflects the real-life diversity that children and young people will encounter outside the school walls, it also contributes to the overall development of all children/students, promoting empathy, understanding, and acceptance (Bossaert, Colpin, Pijl & Petry, 2013).

Children with autism

Autism is classified as a pervasive developmental disorder. It is characterized by difficulties in social interaction and communication and by restricted, repetitive,

and stereotyped patterns of behavior. Symptoms (short-term and labile attention, motor restlessness characterized by stereotyped movements: yawning, running in circles, repeating the same words) are usually observable before the third year of life (Brignell A, et al, 2022; Demerdzieva, A. 2015).

Recent studies show that up to 70% of people with autism meet at least one diagnostic criterion for at least one other (mostly unrecognized) psychiatric condition, which can further impair their psychosocial functioning. Intellectual disability, defined as an IQ below 70, is present in approximately 50% of young individuals with autism (NICE clinical guidelines, 2011).

Although autistic behavior typically occurs in early childhood, it may still go unnoticed until a change in the social environment, such as entering kindergarten, primary school, or transferring to high school (NICE clinical guidelines, 2011: 1).

Usually, a health diagnosis is made in the 3rd year of life, although experts suggest that with careful observation, subtle signs may be detectable as early as 6 months. Early intervention can greatly improve outcomes, allowing the child to achieve greater independence. Social integration fosters improved communication and cognitive skills, which in turn helps reduce anxiety and repetitive behaviors. (Demerdzieva, 2015).

Children with autistic spectrum disorders (ASD) often have difficulty concentrating and understanding social rules (Humphrey, 2008). This represents one of the key challenges for their inclusion in regular educational institutions. This raises questions about the underlying reasons for the exclusion of children with autism spectrum disorders. It remains unclear whether the exclusion is driven by the inherent characteristics of children with autism spectrum disorders or by the responses of society, the environment, educators, and peers towards them. (Trajkovski & Stanceska, 2019).

Children with autistic spectrum disorders thrive best when they have a well-structured environment that will offer an appropriate individualized program with the possibility of modification depending on a child's capabilities. It is crucial to provide children with autism the necessary conditions from an early age to enhance their social, cognitive, and speech abilities. Designing an environment tailored to the needs and abilities of children with autism is a complex task since various requirements must be fulfilled, including material, spatial, technical, and staffing needs. In this context, educators should employ differentiated pedagogical strategies providing diverse methods and resources, such as adapted textbooks and worksheets, to present information and assess progress (Herrera, et al.,2008).

Also, individualized education plans serve as indispensable tools for adapting education to the specific needs of children with autism. This, in turn, requires teamwork of experts and parents. For children with autistic spectrum disorders, differentiated instructions may include modifying plans, providing additional support, accommodations, and offering alternative assessments to ensure that each student can access and engage with the curriculum (Ainscow & Messiou, 2018).

Finally, the psychosocial barriers, such as the beliefs, attitudes, and values of everyone (teachers, professional associates, parents of children with typical development, peers with typical development) involved in the realization of the process of inclusion of children with autistic spectrum disorders in regular educational institutions are perhaps the most complex factor. Some studies reveal that psycho-social barriers such as stereotypes, negative attitudes, and prejudice towards children with developmental disabilities are overcome by the inclusive process (Sretenov, D., 2000).

Research methodology

The study investigated the attitudes and opinions of parents regarding the inclusion of their children with autistic spectrum disorders in typical/regular preschools and primary schools in order to detect the barriers they face during their children's education, as well as to reveal possible ways to overcome them. The research is based on the principles of the descriptive-analytical method and has a qualitative character.

The data were collected using semi-structured individual interviews, for which a special interview protocol was prepared. The interview is a research technique that we believe to be the most suitable for achieving the objectives of this research because it can not only provide a rich repertoire of information about the views and opinions of the respondents but also offer an argument for them.

The conversation with the respondents was conducted according to several questions provided in the protocol for the semi-structured interview:

1. Institutional, social and physical difficulties / barriers to your child's inclusion in regular kindergartens / schools (primary education);
2. Psychosocial difficulties / barriers to the inclusion of your child in regular kindergartens / schools (primary education);
3. Your (parents') suggestions for improving the practice of including children with autism in regular kindergartens, schools and society in general.

Although curricular barriers were not the subject of this research, some issues were actualized by parents.

A purposive sample of 9 parents was selected (9 mothers accepted participation in the research) whose children are aged 4-15 years (3 parents of children with autism attending regular preschools/kindergartens, 6 parents whose children are in regular primary school). Children and parents live in urban areas, in the central and eastern part of Macedonia.

Psycho-pedagogical and social profile of children

Before enrolling in preschool institutions, all children had very limited speech development limited to basic words such as *mom*, *dad*, *grandmother*, and *water*, struggled to establish eye contact and lacked interaction with peers and their broader en-

vironment. In addition, they come from families generally with average financial and material resources.

Results and discussion

When we talk about institutional barriers to inclusive education, we first of all think of the policies that are promoted in schools/kindergartens. Practice has shown that management is extremely important for building an inclusive institution (Apriliani, et.al, 2024). In the development plans and the annual work programs of the schools/kindergartens, the support of inclusion as a development goal is often insufficiently elaborated operationally (Petrovska, Runceva i Sivevska, 2022; Petrovska, Runceva i Sivevska, 2019). In this context, the work responsibilities of inclusive teams, psychologists, pedagogists, special educators and rehabilitators (who are often absent in kindergartens), educational and personal assistants (who are often absent in kindergartens) are mostly uncoordinated and unsystematized. It is important to recognize that these barriers often stem from social factors that result from inadequate state educational policies (laws, regulations, guidelines, funding, etc.) or, when well-designed, they are poorly implemented in practice. State educational policies are also reflected in the level of material and technical equipment of educational institutions, which which can either facilitate or hinder the process of inclusion.

In terms of institutional, social, and physical barriers, the parents from our research indicated several issues — insufficiently qualified teachers, educators, and semi-educated caregivers work in kindergartens; due to the rigid time frame of the educational activities in the institutions and the rigid approach to the distribution of work tasks between caregivers and educators, no special play activities are organized that will focus on children with autistic spectrum disorders; a large number of children in the kindergarten groups (1 educator and 1 caregiver work with over 20 children aged 5 to 6 according to the Child Protection Law consolidated text); there is a lack of professional staff (special educators and rehabilitators, educational assistants), and even when they are present, their work is insufficiently coordinated and targeted.

Table 1 presents the experiences of parents regarding the inclusion of their children in regular preschool and primary school education related to institutional and social barriers.

Table 1
Institutional and social barriers

INSTITUTIONAL AND SOCIAL BARRIERS		PARENTS OF CHILDREN WITH AUTISM
INSUFFICIENT QUALIFIED STAFF IN KINDERGARTENS AND SCHOOLS	<ul style="list-style-type: none"> • We were faced with insufficiently qualified and semi-educated staff • There is no trained staff and we do not see a strategy of competent ministries or institutions in terms of drastically changing the situation • Insufficient competence of the educational staff • Staff incompetence 	<ul style="list-style-type: none"> • parent of a 4-year-old girl with autism • parent of a 5-year-old boy with autism • parent of a 7-year-old girl with autism • parent of a 15-year-old boy with autism
LACK OF PROFESSIONALS	<ul style="list-style-type: none"> • There was not enough professional staff (1 special education teacher per 5 kindergartens), the special education teacher barely managed to spend 1 hour a week with the child. • In our city, there are no special education specialists and speech therapists, we were forced to travel for two years three times a week to Skopje for classes with a special education teacher, usually in a private special education center, it cost us about 25,000 denars per month • There was no professional staff in preschool institutions • There is no adequate team to work with • Lack of professionals (speech therapists, special educators and rehabilitators) • Lack of medical staff 	<ul style="list-style-type: none"> • parent of a 7-year-old girl with autism • parent of a 4-year-old girl with autism • parent of a 15-year-old boy with autism • parent of a 12-year-old boy with autism • parent of a 4-year-old girl with autism • parent of a 9-year-old boy with autism

<p>LARGE NUMBER OF CHILDREN IN THE GROUPS IN KINDERGARTENS AND SCHOOLS</p>	<ul style="list-style-type: none"> • Large number of children in the group and he could not sleep in the kindergarten • Large number of students in the groups in the school • large groups of 30 children each, with one teacher working with them 	<ul style="list-style-type: none"> • parent of a 9-year-old boy with autism • parent of a 15-year-old boy with autism • parent of a 7-year-old girl with autism
<p>EDUCATIONAL ASSISTANT</p>	<ul style="list-style-type: none"> • There are no assistants who will work with them • There are not enough assistants to help the child in mastering the lessons. • Lack of assistants • There are not enough educational assistants Many are forced to pay for private educational assistants. • There are no assistants, he cannot master the content in regular classes. • We had a problem getting an educational assistant 	<ul style="list-style-type: none"> • parent of a 15-year-old boy with autism • parent of a 12-year-old boy with autism • parent of a 5-year-old boy with autism • parent of 15 years old boy with autism • parent of a 10-year-old boy with autism • parent of a 9-year-old boy with autism
<p>INSUFFICIENT FINANCIAL SUPPORT</p>	<ul style="list-style-type: none"> • The financial assistance from the state is very small, around 7,000 denars, and for these children, if quality supplementation is used according to certain protocols, it costs more than 300 euros per month. Of course, I will also add costs for treatments, private lessons for a speech therapist and a special education teacher, a special way of eating with healthy food that costs more than 500 denars every day. • lack of finances • Regarding therapy, if the parent has finances, he can afford it 	<ul style="list-style-type: none"> • parent of a 7-year-old girl with autism • parent of a 12-year-old boy with autism • parent of a 4-year-old girl with autism • parent of a 15-year-old boy with autism • parent of a 4-year-old girl with autism

<p>ABSENCE OF PROMOTING AN INCLUSIVE CULTURE</p>	<ul style="list-style-type: none"> • There are no activities at the kindergarten level to highlight the work and progress of children with SEN • We are not sufficiently informed about how our child is treated • There are no educational activities at the kindergarten level for parents • There was no individualized plan • The director did not want to present to us the possibilities of including our child in the preschool system of upbringing and education. There was no plan at all for the inclusion of children with SEN. • There was no proper team to work with, or a special plan and program for inclusion (at least we had no information about that?). • There was no individual work and progress plan, nor specialized work teams 	<ul style="list-style-type: none"> • parent of a 4-year-old girl with autism • parent of a 5-year-old boy with autism • parent of a 12-year-old boy with autism • parent of a 10-year-old boy with autism
<p>SCHOOLS ARE NOT READY FOR INCLUSIVE EDUCATION</p>	<ul style="list-style-type: none"> • By going to school, our child became unhappy • Schools are not sufficiently prepared for inclusive education • Children with disabilities do not have the opportunity to attend full-day classes either in primary school or in the full-day groups that are in kindergartens 	<ul style="list-style-type: none"> • parent of a 15-year-old boy with autism • parent of a 9-year-old boy with autism • parent of a 7-year-old girl with autism

<p>EXAMINATIONS, THERAPIES</p>	<p>We have been purchasing vitamin therapies from abroad for 3 years now. Tests and check-ups are always private healthcare, because there are never any appointments under the state fund, nor are children's doctors available at the clinics. Regarding therapy, if the parent has finances, they can afford it. We have done stem cell therapies which takes a large amount of money. We ordered supplements from Hong Kong, that is, a special drug permit. We have done many types of analysis for trials in other countries. We had an allowance from the state which amounts to seven thousand denars, and the child has that right until he is 26 years old. Regarding treatments, attending classes, purchasing supplements, examinations, it all has to be covered by us.</p>	<ul style="list-style-type: none"> • parent of a 4-year-old girl with autism • parent of a 15-year-old boy with autism • parent of a 7-year-old girl with autism
<p>PARENTS ARE FORCED TO LEAVE THEIR JOBS</p>	<p>Many are also forced to pay for private educational assistants. If they are not able, they are forced to leave their working positions.</p>	<ul style="list-style-type: none"> • parent of a 5-year-old boy with autism

Example of a parent's statement:

Parent 3. There is no trained staff, and we do not see a strategy of competent ministries or institutions in terms of drastically changing the situation. Very little is done and it is quite slow. Imagine where the residents of rural areas take their children with disabilities? (parent of a 5-year-old boy with autism)

The success of inclusive education for children with autism relies on a collaborative effort that extends beyond the classroom. Access to a range of professional services, including pedagogists, psychologists, special educators, and rehabilitators, educational assistants is essential to provide comprehensive support. Peer support plays a crucial role in the success of inclusion— it promotes social integration, enhances learning, builds empathy and understanding, provides emotional support. It can be concluded from the parents' statements that preschool institutions and schools have

a lack of professional collaborators who have a key role in planning, organizing and implementing the inclusive process. Among them are pedagogists. Their expertise in educational theory and practice enables them to work collaboratively with teachers to develop and implement effective teaching strategies. Educators can offer insight into curriculum development, assessment methods, and individualized learning plans, contributing to the overall success of inclusive classrooms (MCGO, 2016)

Psychologists help in understanding the psychological and emotional aspects of children with autistic spectrum disorders. They can conduct assessments to identify specific needs, provide counseling services, and offer guidance on behavior management strategies. Collaboration between psychologists and teachers improves the overall social and emotional well-being of students with autism (MCGO, 2016).

Special educators and rehabilitators are integral members of the inclusive education team. Their specialized training equips them to address the unique learning needs of children with autism. Special educators and rehabilitators collaborate with classroom teachers to implement individualized education plans, adapt instructional materials, and provide targeted support, ensuring students receive the tailored interventions they need (MON, 2018).

Children with autistic spectrum disorders often experience challenges in speech and language development. Speech and language therapists play a vital role in addressing these challenges. They can provide targeted interventions, support the development of communication skills, and collaborate with teachers to create a language-rich environment that benefits all students. Professional therapists contribute to the physical and sensory aspects of inclusive classrooms. For children with autism, occupational therapists can provide interventions to address sensory sensitivities, improve fine and gross motor skills, and improve overall independence. Collaborative planning between occupational therapists and educators provides a supportive environment that responds to diverse sensory needs (MON, 2018).

Kindergartens very rarely organize joint activities to promote the work and progress of children with special needs and activities to sensitize the parents of typical children to the benefits of the inclusive model of education, parents from our sample complained.

Inclusive educational institutions should design programs for the development of social skills that address the specific needs of children with autistic spectrum disorders. These programs, of course, developed in collaboration with psychologists, special educators, and rehabilitators, provide structured opportunities for social interaction, peer support, and the development of social-emotional skills. At the same time, this is a good opportunity for teachers to be involved in activities that will support their professional development (Goldsmith, & LeBlanc, 2004).

Table 2 presents the barriers that we labeled as physical barriers/material and technical equipment of educational institutions that parents faced during the inclusion of their children in regular preschool and school institutions.

Table 2

Physical barriers and technical–technological equipment

PHYSICAL BARRIERS AND TECHNICAL – TECHNOLOGICAL EQUIPMENT		PARENTS OF CHILDREN WITH AUTISTIC SPECTRUM DISORDERS
SENSORY ROOM	<ul style="list-style-type: none"> • There was/is a sensory room only in the main kindergarten. If you are in a different building from the main kindergarten and if you want the child to go to the sensory room, you must bring it by yourself. 	<ul style="list-style-type: none"> • parent of a 7-year-old girl with autism • parent of a 5-year-old boy with autism
THERE IS NO SENSORY SPACE IN THE KINDERGARTEN GROUPS AND CLASSROOMS	<ul style="list-style-type: none"> • a lack of sensory rooms or sensory space in classrooms/kindergarten groups 	All parents
ASSISTIVE TECHNOLOGY	<ul style="list-style-type: none"> • There is a lack of modern applications for the development of communication skills in children with autism 	All parents
WE DID NOT FACE ANY OBSTACLES	<ul style="list-style-type: none"> • Our child was included in kindergarten without a problem. • Our child was accepted by all • There was no individual work plan and monitoring of the child’s involvement and development, but all employees were strongly committed. 	<ul style="list-style-type: none"> • parent of a 15-year-old boy with autistic spectrum disorders

Regarding the physical barriers and the technical-technological situation of the kindergartens and schools, most parents reported that space is seldom made available

for children who occasionally need, because of their emotional restlessness and sensory sensitivities, to be alone for independent play or activities.

The problems pointed out by the parents are completely justified because the sensory rooms, the equipment, and the organization of the space in the classrooms/ kindergarten groups are vital for creating an inclusive environment for children with autistic spectrum disorders. Clear paths, designated work corners and visual organization contribute to a space that is conducive to learning for children with autistic spectrum disorders. Consideration should be given to children's need for a space that minimizes distracting stimuli, providing visual cues and a classroom/playroom layout that accommodates various sensory needs. Sensory spaces enable children with autism to better regulate their sensory experiences (Frauenberger, Good, Alcorn, & Pain, 2012). In particular, visual support is invaluable for the inclusion of children with autistic spectrum disorders in regular classrooms/kindergarten groups. The layout of charts and signs provides a visual structure that aids understanding of what is being taught, reduces anxiety, improves communication, and reinforces routines (Andrunyk, Pasichnyk, Antonyuk, & Shestakevych, 2020). Many children with autistic spectrum disorders face challenges in expressive and receptive communication. In that context, different types of assistive technologies, such as communication devices or applications, can facilitate and improve communication. Of course, educators/teachers should be trained to use this technology, as well as collaborate with speech and language therapists. (Hayes, Hirano, Marcu, Monibi, Nguyen, & Yeganyan, 2010).

Using educational apps and software tailored to the needs of children with autistic spectrum disorders enhances the learning experience. These tools can provide interactive and engaging activities that support academic goals while accommodating different learning styles. Educators and teachers should have access to appropriate technological resources and receive training for their effective integration (Folostina, Dumitru, Iacob, & Syriopoulou-Delli, 2022; Petrovska, Runcheva & Sivevska, 2022).

Inclusive education implies the availability of modified teaching materials. Teachers, in collaboration with special education teachers, can adapt textbooks, worksheets, and other materials to meet the individualized needs of children with autism. Providing materials in a variety of formats, such as visual or tactile, ensures accessibility for all learners (Herrera, Alcantud, Jordan, Blanquer, Labajo, & De Pablo, 2008).

Psychosocial barriers are also a serious obstacle in the process of achieving the inclusion of children in regular preschool institutions (Runceva, Lukic, Mesinkovska Jovanovska and Trajkovska, 2022). First of all, we think of the attitudes of all involved (educators, caregivers, professional associates, parents of typical children, typical children) in the process of inclusion. Bearing in mind that attitudes are acquired tendencies to react (positively or negatively) to people, objects, situations, oneself, or specific ideas and actions, societies and educational institutions should strive to cultivate attitudes that support inclusion and dispel stereotypes and prejudices. Today, there is still a prevalence of negative attitudes towards the inclusion of children with autistic

spectrum disorders in the regular education system. This is confirmed by the findings of this research. The statements of the majority of parents reveal that they and their children faced non-acceptance and rejection by children with typical development, by parents of typical children, by educators, and even by the institution.

Table 3
Psychosocial barriers

PSYCHOSOCIAL BARRIERS (NON-ACCEPTANCE, REJECTION)		PARENTS OF CHILDREN WITH AUTISM
<ul style="list-style-type: none"> • PEER REJECTION 	<p>Children do not include my child into the games, and educators say that they cannot do anything</p>	<p>parent of a 4-year-old girl with autism</p>
<ul style="list-style-type: none"> • NON-ACCEPTANCE BY EMPLOYEES 	<ul style="list-style-type: none"> • The child is not accepted neither by the employees nor by the children • After a short period, the employees told us that our child is not suitable for the kindergarten. 	<p>parent of a 4-year-old girl with autism</p>
<ul style="list-style-type: none"> • NON-ACCEPTANCE BY PARENTS OF CHILDREN WITH TYPICAL DEVELOPMENT 	<ul style="list-style-type: none"> • It was lonely all the time, the staff said they couldn't cope with his behavior. • Complaints from parents because of the presence of our child in the group. 	<p>parent of a 10-year-old boy with autism</p>
<ul style="list-style-type: none"> • NON-ACCEPTANCE BY THE INSTITUTION 	<ul style="list-style-type: none"> • Non-acceptance of the child by a private kindergarten • Politely, but directly "asked" to leave the kindergarten as soon as possible, because we are ruining the reputation of the kindergarten • The educators had a negative attitude towards the child 	<p>parent of a 5-year-old boy with autism</p> <p>parent of a 10-year-old boy with autism</p>

NON-ACCEPTANCE BY PEOPLE	<ul style="list-style-type: none"> • We as a people are not educated enough about children with difficulties and are seen with different eyes and of course ignored and not accepted • Not accepting my child • Complete non-acceptance by parents and children 	<p>parent of a 4-year-old girl with autism</p> <p>parent of a 15-year-old boy with autism</p> <p>parent of a 10-year-old boy with autism</p>
CHILD NEGLECT	The teacher does not pay any attention and does not try to teach literacy	parent of a 15-year-old boy with autism

An example of parents' experience:

Parent 1: „ We were forced to unregister the child from the state kindergarten because she was often neglected by the staff. She often sat alone in the corridor, she was always brought out early to the room from where we had to pick him up, and in the photos that the educators took to document their activities with the children, our child was always standing in the background – she was excluded from almost every activity. “ - (parent of a 4-year-old girl with autism).

Parent 2: „ Our child attended a private preschool. We sincerely hoped that we would find, in addition to good material and technical equipment, and a greater dedication of the educational staff. To our disbelief, after a few days we were directly asked to leave the kindergarten because, according to them this will ruin their reputation.” The parents in this case suggest: „ We think that in the near future, parents should receive paid professional support in terms of achieving equal rights for children in education. We need someone who will represent us before educational institutions whenever children's educational rights are affected or violated. Such cases should be sanctioned and publicly pointed out as a negative practice.”- (parent of a 5-year-old boy with autism).

During the interview with the parents, discussions also covered their ideas for overcoming barriers to their children's inclusion in mainstream educational institutions. All parents (9) agree that it is crucial to increase the number of professional workers in schools and kindergartens. They particularly indicated the need for an educational assistant for every child with autism, as well as to strengthen the competencies of professionals who work with children with ASD. The largest number (7) of parents believe that teamwork in schools and kindergartens should be strengthened, that is, precise time frames for the work of inclusive teams and parents should be established. Six parents recommended frequent meetings between parents of typical children and parents of children with ASD to share experiences and knowledge regarding child care. All (9) parents believe that the state must allocate financial resources for the ma-

terial and technical equipment of schools and kindergartens, as well as funds for the construction of day care centers that will provide additional professional help both for children with ASD and for their families.

Conclusion

Our research in the field of inclusive education in Macedonia began ten years ago. Inclusion is a process that requires various changes and improvements in competencies, which is why our research has been extensive. This decade-long study highlights the evolution of the educational concept in Macedonian preschool and primary school education towards achieving a more inclusive environment. All aspects of the research contribute to a broader understanding, reflecting the perspectives and opinions of all stakeholders involved in the inclusion process in preschool and primary education in Macedonia.

The creation and implementation of inclusive policies in education cannot be successfully realized without being familiar with the conditions and experiences of the directly affected participants (in our case the children with autistic spectrum disorders, that is, their parents). The analysis of the opinions of the parents of children with autistic spectrum disorders about the possibilities and conditions for the inclusion of their children in the educational process showed, on the one hand, the physical inclusion of children in regular groups and classes in preschool and primary school institutions, but on the other hand, a large number of difficulties and obstacles encountered by them and their children in this whole process:

Lack of material-technical and human resources—inclusive education requires adequate resources, including specialized teaching materials, low-cost services for the production of didactic aids, assistive technologies and professional staff to support teachers;

Preparation and training of teachers and other professional staff to work with children with autistic spectrum disorders—teachers and all other professionals seem to be insufficiently trained to work with children with autism, hence the state, in cooperation with higher education institutions, should be involved in creating conditions for the education of specialized staff;

The research revealed that negative attitudes and misconceptions about children with disabilities persist in our society, particularly within the educational context. Social stigma and rejection by peers, and even some teachers, hinder the creation of conditions that ensure every child can have positive educational experiences and emotional well-being.

According to the obtained results it is necessary to provide greater personnel, professional and financial support to parents and children with autism. Here we need to actively involve all the pedagogical faculties, the municipalities and the state. As faculties, we should strengthen the preparation of educational staff in the area of inclusion

and work with children with autism, and municipalities and the state should provide adequate material support for children with autism.

MIŠLJENJA RODITELJA DECE SA AUTIZMOM O UKLJUČIVANJU NJIHOVE DECE U REDOVNE AKTIVNOSTI PREDŠKOLSKIH I ŠKOLSKIH USTANOVA – MOGUĆNOSTI I IZAZOVI

Apstrakt

Poziv na obrazovnu inkluzivnost postaje sve glasniji, prisutniji i sve potrebniji u društvenom kontekstu. Poslednjih decenija obrazovanje se sve više zasniva na paradigmi inkluzije, što odražava njegovu posvećenost prihvatanju različitosti i zadovoljavanju potreba svakog deteta i učenika. Autizam je složen neurorazvojni poremećaj koji pogađa pojedince tokom čitavog njihovog životnog veka. Najčešći znaci po kojima se može prepoznati su kratkotrajna i labilna pažnja, motorički nemir koji karakterišu stereotipni pokreti: zevanje, trčanje u krug, ponavljanje istih reči/slogova, odsustvo ili slabo razvijen govor i odsustvo kontakta očima. Međutim, svaka osoba sa ovim neurorazvojnim poremećajem je jedinstvena, sa širokim spektrom sposobnosti i izazova. Dakle, uključivanje dece i mladih u redovne vrtiće i škole predstavlja složen proces izgradnje i razvoja specifične politike, kulture i prakse kompatibilne sa spektrom različitosti oličenih u svakom detetu/učeniku. U radu su prikazani rezultati dobijeni uz pomoć polustrukturisanog intervjua sa 9 roditelja dece sa autizmom (uzrasta 4-15 godina) u vezi sa njihovim iskustvima u procesu uključivanja dece sa autizmom u tipične/redovne predškolske ustanove i osnovne škole. Cilj je bio da se otkriju teškoće/prepreke sa kojima se suočavaju tokom školovanja svoje dece, kao i da se otkriju mogući načini za njihovo prevazilaženje. Istraživanje se zasniva na principima deskriptivno-analitičke metode i ima kvalitativni karakter. Dobijeni rezultati otkrivaju da su se roditelji i deca susreli i suočavaju sa izazovima koji proizilaze iz institucionalne i socijalne politike, fizičkih uslova, neadekvatnih tehničkih i tehnoloških resursa u vrtićima i školama, negativnim stavovima nastavnika, vaspitača, roditelja neurotipične dece prema deci sa autizmom, vršnjaci i šira zajednica.

Ključne reči: inkluzivno obrazovanje, barijere, obrazovna ustanova, deca sa autizmom

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