PARENTS’ PERSPECTIVES ON INCLUSIVE SCHOOLS FOR STUDENTS WITH DISABILITIES IN SAUDI ARABIA

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PARENTS’ PERSPECTIVES ON INCLUSIVE SCHOOLS FOR STUDENTS WITH DISABILITIES IN SAUDI ARABIA

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DISSERTATION
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A dissertation submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy in the College of Education at the University of Kentucky

By
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Lexington, Kentucky

Director: Dr. Melinda Ault, Professor of Early Childhood, Special Education and Rehabilitation Counseling
Lexington, Kentucky
2018

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ABSTRACT OF DISSERTATION

PARENTS’ PERSPECTIVES ON INCLUSIVE SCHOOLS FOR STUDENTS WITH DISABILITIES IN SAUDI ARABIA

In recent decades, inclusion has gained increasing international currency. In the Gulf region, Saudi Arabia in particular has made a sustained commitment to leadership in the humane, equitable inclusion of individuals with disabilities in its communities and the provision of appropriate, free public education for students with disabilities. Despite these achievements, students with disabilities remain segregated from general education students in separate classrooms, regardless of degree of disability. This study examined the perspectives of parents of students with and without disabilities in Saudi Arabia on placing their children in general education classrooms that are comprised of children with and without disabilities. Prior to this study, there were no quantitative data to indicate to what extent parents of children with and without disabilities in Saudi Arabia are receptive to inclusion. In order to address the gap in the quantitative data, this study used a quantitative, cross-sectional survey designed to examine the perspectives of parents. Knowing parents’ perspectives about inclusive education provides vital information to the public, researchers, and key decision-makers that could lead to advances in inclusive education.

The study used a quantitative, cross-sectional survey to examine parents’ perspectives regarding inclusion in general and across four specific dimensions of inclusive practice, including impact on students with disabilities, impact on students without disabilities, impact on parents and families of students with disabilities, and impact on parents and families of students without disabilities. The study sought to answer questions about differences in parents’ perspectives based on five variables: whether the parent is the parent of a student with disabilities or the parent of a student without disabilities; severity of students’ disabilities; type of students’ disabilities; gender of the child; and academic level of the child. Additionally, the study sought to answer questions about differences in the respective impact of these variables and to determine which variables have the most significant role in shaping perspective toward inclusion. Although the methods of the study were quantitative, it also at times drew upon limited
qualitative analysis of a single open-ended questionnaire item to supplement and explain aspects of the quantitative data.

The findings of the study show that parents in Saudi Arabia hold generally positive perspectives regarding inclusion, but that these perspectives are often dependent on the severity and type of disability, as well as the training and staffing of qualified teachers and accessible school environments. In general, perspectives among both parents of students with and without disabilities were supportive of inclusion, indicating broad support in terms of global perspective, perspective of potential positive impact on students with disabilities, perspective on potential positive impact on students without disabilities, perspective on potential positive impact on families of students with disabilities, and perspective on potential positive impact on families of students without disabilities. Although both parents with and without indicated generally supportive global views towards inclusion, parents of students with disabilities tended to agree more strongly with statements supportive of inclusion than parents of students without disabilities. Parents of students with severe disabilities expressed the least agreement with statements supportive of inclusion. Both parents with and without expressed concerns regarding the preparation and provisioning of qualified teachers and paraprofessionals as a key factor in the success of inclusion. Respondents had concerns about the preparedness of teachers to instruct students with disabilities and students without disabilities in an inclusive general education classroom. Perspectives of the current study, however, placed greater and more strenuous emphasis upon concerns related to teacher preparedness, classroom accessibility, and classroom staffing.

According to parents’ perspectives and comments in this study, the Saudi Arabia Ministry of Education must ensure that inclusive classrooms are staffed with qualified paraprofessionals, teaching assistants, and special education teachers for inclusion to be successful. Additionally, the successful implementation of inclusion would require adequate professional development and pedagogical training for classroom teachers, as well as adequate resources and support staff. Given the results of this survey, perhaps the first step in moving educational practices forward in Saudi Arabia will involve an open conversation between the Ministry of Education and parents of students with and without disabilities regarding what they want for their children. Educational policy and curriculum in Saudi Arabia are currently designed from a top-down model. The results of this study, however, show that there are grounds for a partnership between parents and the Ministry that advances educational goals for all students. In addition to continuing to expand opportunities for integration in public schools, experimental inclusive classrooms could be trialed in key regions to gather data and insights into what policies, teaching and instructional models, and models of parent-school collaboration and partnership could best advance classrooms and schools that effectively and humanely include all their members in the academic and social life of Saudi Arabia schools.

KEYWORDS: Inclusion, Integration, Mainstreaming, Special Education, Saudi Arabia
PARENTS’ PERSPECTIVES ON INCLUSIVE SCHOOLS FOR STUDENTS WITH DISABILITIES IN SAUDI ARABIA

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To my beautiful wife and daughters, who shared their support with me during my studies in the USA as an international student, and to the professors and friends who provide support and encouragement while completing my Ph.D.
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CHAPTER 1. INTRODUCTION

The last several decades have seen a movement toward progressively inclusive schooling for students with disabilities (SWDs) in developed countries around the world. In 2001, the Kingdom of Saudi Arabia (KSA) passed the Regulations of Special Education Programs and Institutes (RSEPI, 2001), a broad legislative reform modeled after the United States’ (U.S.) Individuals with Disabilities Education Act (Alquraini, 2010; IDEA, 1997). IDEA reflects expansions of the special education laws that first guaranteed the right of SWDs in the U.S. to a “free and appropriate public education” and codified as law the least restrictive environment mandate. The original legislation first specified that SWDs be included “to the maximum extent possible” (a) alongside their typical peers; and (b) in the general education environment (EHA, 1975, §300.114(a)).

The concept of inclusion has grown together with the evolving policy frameworks and practical implementations of IDEA. At one extreme, full inclusion defines a situation in which SWDs receive access to the general education curriculum in the general education classroom for 100% of the school day, regardless of degree of disability (Fuchs & Fuchs, 1994). Most definitions of inclusion, however, strike a balance between classroom access and evidence-based accommodations, emphasizing placement in the general education classroom as the rule, not the exception, in keeping with the language of IDEA (Ryndak & Alper, 2003). The concept of inclusion in schools allows all SWDs to participate in a general education curriculum and provides services to meet their needs in the general classroom (Osgood, 2005; Theoharis & Causton, 2014; Westling & Fox, 2004).
In recent decades, inclusion has gained increasing international currency. In the Gulf region, KSA in particular has made a sustained commitment to leadership in the humane, equitable inclusion of individuals with disabilities in its communities and the provision of appropriate, free public education of SWDs (Al-Mousa, 2010). In 2001, as the last in a series of educational reforms designed to modernize the rights, services, and education available to individuals with disabilities, RSEPI modeled its provisions after the 1975 Education for All Handicapped Children Act (EHA) and its later reauthorization in 1997 as IDEA (Elsheikh & Alqurashi, 2013). Like IDEA, RSEPI framed the legal definitions and mandates standards for the concept of disability, highly qualified special education teachers, transition services, and individualized education programs (IEPs). Article 13 of the legislation specifies that for SWDs, placement in the general education environment with their typical peers is the “natural environment” (RSEPI, 2001). The regulation’s language seemed to envision a new phase of inclusive schooling in KSA that would follow a path at least somewhat similar to IDEA’s movement towards inclusion. It was a moment of promise when reforms envisioned the full inclusion of individuals with disabilities in KSA communities and schools.

Almost two decades later there remains “a gap between the framework of these laws [RSEPI] and the provision of services” (Alquraini, 2011, p. 151). As Alquraini describes it:

these policies [contained in RESPI] support the equal rights of individuals with disabilities in obtaining free and appropriate education. However, …they are not practiced in the real world with students with disabilities. In fact, the lack of the
effective implementation has created in a gap between the framework of these laws and the provision of services… (2011, p. 141).

To note the gap in implementation of RSEPI is not to diminish its achievements. From a system of special education that might be loosely compared to the U.S. prior to the initial 1975 passage of IDEA (Alquairini, 2013), RSEPI achieved tremendous success by moving thousands of SWDs out of institutions, providing access to appropriate education and accommodations in less restrictive environments, and elevating the rights of SWDs (Al-Mousa, 2010). Despite these achievements, the distance between the practices envisioned by RSEPI and the current state of special education in KSA affects many areas. Although students with mild disabilities are largely educated in integrated schools, students with certain types and severities of disability, for example, continue to be educated in institutions. A large proportion of students with intellectual disability (ID) and students with multiple disabilities receive their education in segregated institutions.

The most glaring inconsistency between the inclusive schools envisioned by RSEPI and the reality of special education in KSA is the continued segregation of SWDs from the general education classroom. The momentum towards inclusion has brought many SWDs into the general education school, yet these SWDs remain segregated in separate classrooms, regardless of degree of disability. Among all SWDs, the only students included in the general education classroom are students with specific learning disabilities (LDs). If students with specific LDs require accommodations to the general curriculum, those are not made in the general education classroom. A student with a specific LD in math, for example, would be included in the general education classroom for other subjects, but excluded for math. In other words, no special education services or
accommodations for any student occur in the general education classroom (Alnahdi, 2014).

Despite the ambitious policy reforms of RSEPI, the general education classroom remains out of reach for most SWDs. A body of literature exists addressing the factors involved in the gap between policy and practice in KSA in the areas of legislation; infrastructure; and the perspectives of teachers, administrators, and students. What remains poorly understood is the role and perspectives of parents of students with and without disabilities regarding inclusive education. Parents played a critical role in the U.S. in the successful implementation of inclusion, both historically as an issue of civic and community advocacy and contemporaneously as an issue in successful outcomes for SWDs (Giangreco, Cloninger, Mueller, Yuan, & Ashworth, 1991; Lipsky & Gartner, 1997; Nietupski, Hamre-Nietupski, Curtin, & Shrikanth, 1997). Growing alongside and out of the civil rights movements of the 1960s and 70s, parental advocacy sustained special education reform from the beginning. The advocacy battle took place on both grassroots and organizational levels, with individual parents and often parent-led groups such as the American Association of Mental Deficiency (AAMD), now the American Association on Intellectual and Developmental Disabilities (AAIDD), and the Association for Retarded Citizens (ARC), now named The Arc (Winzer, 2009). The role of parental advocacy holds true at the level of national policy as well as in the ongoing adoption, implementation, and success of inclusion at the local level. Soodak (2004) wrote about the importance of parental advocacy in the U.S., stating that, “parental advocacy has been responsible for the move toward inclusive education in many schools throughout the country” (p. 114). Researchers have demonstrated that parental
involvement affects the success of inclusion and does so in proportion to their involvement in the decision-making process (Kozub & Lienert, 2003; Lewis, Chard, & Scott, 1994). On the other hand, lack of parental involvement or the existence of ineffective family-school collaborations can be a main factor impairing the inclusion process (Avramidis & Norwich, 2002).

1.1 The Problem

Almost two decades after the ambitious policy reforms of RSEPI, the general education classroom remains out of reach for SWDs in KSA. On the whole, there is little research describing the perspectives of KSA parents and families with and without children with disabilities on inclusive education, and none that quantifies the perspectives of parents regarding the inclusion of SWDs in the general education classroom. The purpose of this dissertation was to examine the perspectives of parents (those with and without a child with disabilities) on placing their children in general education classrooms that are comprised of children with and without disabilities. In order to address the gap in the quantitative data, the study used a quantitative, cross-sectional survey designed to examine the perspectives of parents towards inclusive schooling for children with disabilities in KSA. Knowing parents’ perspectives about inclusive education provides vital information to the public, researchers, and key decision-makers that could lead to advances in inclusive education. This dissertation includes a literature review of inclusion scholarship, including a full discussion of the definition, benefits, and challenges of inclusion, as well as a brief history of the evolution of inclusionary services in the U.S.
CHAPTER 2. LITERATURE REVIEW

Originally named the Education for All Handicapped Children Act (EHA, 1975), IDEA has passed through continuous phases of strengthening and expanding the least restrictive environment and free and appropriate public education mandates for SWDs. The history of implementing and strengthening IDEA reflects both the interpretive flexibility and ambitious scope of EHA’s original mandates. Prior to the passage of EHA, almost 200,000 individuals with disabilities were housed in state institutions, and U.S. public schools educated only one out of every five children with disabilities (Duncan & Posny, 2010). Signing the bill into law, President Ford characterized the span between the law and the perceived ability to implement it: “this bill [EHA] promises more than the Federal Government can deliver” (cited in Moody, 2012). Nonetheless, the initial achievement of EHA was a largescale movement to deinstitutionalize and integrate millions of SWDs. Changing interpretations and amendments have since expanded the range, scope, and implementation of the renamed EHA legislation (IDEA), but many of the law’s most ambitious provisions occurred in its earliest form: (a) a free and appropriate public education, along with the supports and services to access it, and (b) services occurring “to the maximum extent appropriate” in the least restrictive environment with removal from general education environments occurring only if “education in regular classes… cannot be achieved satisfactorily” (EHA, 1975, §300.114(a)). While the extent to which the original EHA legislation envisioned the least restrictive environment mandate as inclusion in the general education classroom for some or all SWDs is open to reasonable debate, the law’s practical effect was to begin (a)
integrating formerly excluded SWDs into the public education system, and (b) deinstitutionalizing formerly segregated SWDs.

In its amended and expanded iterations of IDEA, the policy framework has continued to strengthen the interpretative emphasis of least restrictive environment on the general education classroom and to narrow the distance between promise and delivery. The adoption of the inclusion model (IDEA, 1997) committed to “the final goal [of] full reintegration for these disabled students back into the student population” (Ary, 2017, p. 16) and, “a growing emphasis on the need to educate students with disabilities for increasing proportions of the school day in general education classrooms” (McLeskey, Landers, Williamson, & Hoppey, 2012, p. 2). While neither EHA nor IDEA mandates full inclusion, but rather the development of placement of SWDs on the basis of their individual needs, continuing revisions to policy and advances in research and practice have nonetheless led to progressive increases in the number of SWDs included in the general education classroom and the proportion of time spent there. Recent data suggests 57% of SWDs in the U.S. spend a majority of their school day (i.e., 80% or more) in the general education classroom (Duncan & Posny, 2010), showing that both the interpretation and the implementation of least restrictive environment have progressively shifted to include more SWDs.

2.1 Definition, Benefits, and Challenges of Inclusion

2.1.1 Definitions.

Throughout the dissertation, I use the terms inclusion, integration, and mainstreaming to distinguish “levels” of educational access. In its broadest sense, inclusion, “involves the processes of increasing the participation of students in, and
reducing their exclusion from, mainstream curricula, cultures, and communities” (Booth & Ainscow, 1998, p. 2). Inclusion also has come to have a range of specific meanings with regards to curricular access and classroom placement of SWDs. The broadest sense of inclusion as a culture of participation can encompass all the stages in the development of inclusive education, in the U.S. and internationally, so long as they meaningfully reduce exclusion and increase participation of SWDs in mainstream communities. The narrower definitions of inclusion correspond to the most recent stages in the implementation of IDEA, in which the general education classroom has been successfully prioritized as the natural place of instruction. Unless otherwise noted, I use the term inclusion in this sense. Integration can be loosely identified with what in the U.S. were the first achievements of EHA and the more recent achievements of RSEPI in KSA. I consistently use integration to refer to the movement away from special schools, in which SWDs receive their education in a segregated building or institution, and towards expanded access to education for previously excluded students. Mainstreaming is “the selective placement of special education students in one or more regular education classes” (Huston, 2007), and corresponds to what was in the U.S. an intermediate stage between integration and inclusion. Mainstreaming places SWDs in the general education classroom; unlike inclusion, the special education classroom tends to be the defining environment. In mainstreaming, SWDs receive the majority of their education in self-contained special education classrooms or pull-out programs, where they participate in the general education classroom for certain subjects or periods of time.
2.1.2 Benefits

A relatively well-established body of research supports the benefits of inclusion for SWDs (Katz, Mirenda, & Auerbach, 2002), including improved academic, communication, and social skills. For students with severe disabilities, Fisher and Meyer (2002) found that those with access to general education classrooms demonstrated significantly higher gains in adaptive behavior and social competence than students with severe disabilities in self-contained settings. Kleinert et al. (2015) found that students with significant ID with access to general education classrooms demonstrated better receptive and expressive language compared with those in special education classrooms. For students with ID, Wehmeyer, Lattin, Lapp-Rinker and Agran (2003) found those with access to general education classrooms demonstrated improvements on standardized tests in reading and math compared with students with ID in more restrictive settings. SWDs in American schools often show more progress on IEP goals when they are included in general education classrooms, as compared to students in self-contained settings (Cole, Waldron, & Majd, 2004). Downing and Peckham-Hardin (2007) also have shown that parents, teachers, and para-educators perceive the inclusion of students with moderate and severe disabilities in the general education classroom to benefit students without disabilities.

2.1.3 Challenges

Although research has shown the many potential benefits of inclusion, it also has shown that key elements need to be in place to achieve them (Leyser & Kirk, 2011). The success of inclusion depends on providing enough training for teachers, adapting educational curriculum, and creating a pleasant inclusion environment for SWDs and
students without disabilities (by allocating enough time for smooth, integrated transitions between general and special educational services; Heiman, 2004). Voltz, Brazil, and Ford (2001), for example, describe in detail what makes inclusion beneficial for SWDs. The authors emphasized that well-trained teachers are one of the most important elements for the success of inclusion. Specifically, they noted the importance of teachers’ ability to use a range of instructional strategies, because SWDs may not benefit from a single instructional approach. Moreover, adapting the educational curriculum is significant in inclusive settings. Since the goal of inclusion is to increase the student’s academic and social outcomes, relying on evidence-based practices allows teachers to locate strategies that can be implemented as effective instructional approaches (Farley, Torres, Wailehua, & Cook, 2012). Finally, creating a pleasant inclusion environment for all students is a matter in which the school should move beyond the physical placement of SWDs to considering the quantity and quality of interactions between all students and teachers in the inclusive setting. This occurs through the active, meaningful participation of SWDs in the everyday functioning of the classroom (Voltz et al., 2001). McLeskey and Waldron (2007), for example, describe how an ineffective inclusion environment can result from disruptive transitions in educational settings when SWDs are pulled from the general education classroom during instructional time. First, moving to the special classroom interrupts the student’s routine as well as the general education classroom routine. SWDs often leave the general education classroom, only to return in the middle of activities, having missed critical context or important academic tasks.
2.2 Parental Advocacy

In the U.S., parental advocacy played an enormous role in the Education for All Handicapped Children Act of 1975, which first established the right of SWDs to receive their education alongside their typical peers (Winzer, 2009). This role of family-school collaborations has been progressively reflected in the IDEA legislative framework, as well (Hess, Molina, & Kozleski, 2006). When parents fight for their children’s rights, change is possible. Therefore, the perspectives and beliefs of parents regarding inclusion are central to including SWDs in the general education classroom (Soodak, 2004). In addition to the crucial role that parents played historically as advocates for the inclusion of their SWDs in the U. S., studies indicate the centrality of parents to the ongoing success of inclusion. The impact of parental involvement and family-school collaborations can offer tremendous benefits, both generally and in the specific context of inclusive schooling.

Definitions and models of parental involvement vary, but with few provisos, empirical studies have overwhelmingly supported the common-sense notion that parental involvement positively impacts student outcomes. As a general factor in educational outcomes for learners without disabilities, positive family-school collaborations have the potential to impact grades and test scores, attitudes and behavior, and the success of programs and schools (Christenson & Sheridan, 2001; Henderson, 1987; Henley, Ramsey, & Algozzine, 2002; Sheldon & Epstein, 2002). Empirical studies have demonstrated that the potential value of parental involvement for students’ academic success holds true in international contexts, as well (Desforges & Abouchaar, 2003; Fan & Chen, 2001; Henderson & Mapp, 2002; Puura et al., 2005). Wilder (2014) conducted a
meta-synthesis of nine meta-analyses of the effect of parental involvement on academic achievement. Although the synthesis notes variances in strength, it finds a consistently positive relationship between parental involvement and academic achievement across the differing definitions of parental involvement, measurements of achievement, and subject populations encompassed.

The question of parental involvement might be particularly crucial in the context of inclusion. Positive school-family collaborations and parental involvement have been shown to benefit academic outcomes and the success of inclusion. Parental involvement in early intervention for their preschool and kindergarten children is positively associated with higher reading achievement and reduced grade retention well into their middle school years (Miedel & Reynolds, 1999). Beckman, Hanson, and Horn (2002) identified parent-provider relationships as one of four critical elements in the successful inclusion of young children with significant disability. The positive effect of parental involvement and inclusion works both ways. For example, Martinez, Conroy, and Cerreto (2012) found that inclusion positively affected parents’ post-secondary education goals for their children with ID. On the other hand, studies have consistently demonstrated that the negative perspectives and experiences of parents with special education is one of the primary motivations for advocacy and involvement (Bennett, Deluca, & Bruns, 1997; Kratochwill, Sladeczek, & Plunge, 1995). In the U.S., studies have found that parents of children with disabilities tend to overwhelmingly favor inclusion, and parents of children without disabilities to have more mixed but generally positive perspectives. In segregated preschool environments in the U.S., such as currently exist in KSA, studies found that
parents of children with and without disabilities have positive perspectives regarding inclusion (Diamond & LeFurgy, 1994; Guralnick, 1994; Miller et al., 1992).

2.3 History of Special Education in KSA

Booth and Ainscow (1998) note that one common “pitfall” of comparative studies in inclusive education is “the notion that practice can be generalized across countries without attention to local contexts and meanings” (p. 4). Understanding the barriers to inclusive education in KSA, therefore, requires attention to the ways in which special education has developed in the country. This section offers a brief explanation of the history and current data regarding special education in KSA schools and examines how placement for SWDs has changed over the past 15 years for students with various disabilities (e.g., autism spectrum disorder, ID, deafness, LDs). This section provides an overview of special education services in KSA from their beginnings to the present, and examines data gathered from the Ministry of Education in KSA and placement trends for school-aged SWDs between 1994 and 2011.

The history of special education in KSA moves through three broad phases, beginning with the first services offered to a limited number of students with blindness in 1958. In the next phase, segregated services gradually expanded until 1987, when educational services were mandated for all students regardless of disability. Finally, this culminated in broad legislative reforms enacting de-institutionalization, integration, and the first movements towards mainstreaming services in 2000. In many respects, the general education system of KSA resembles similar public education systems in other nations. According to Ministry of Education data (2016), there were over 25,000 schools
in the entire county serving exclusively general education students in pre-schools, elementary schools, and high schools. The curriculum provided in those schools was a combination of Islamic religious education and academic subjects in different fields, more or less equivalent to academic curriculum of schools in the U.S. and United Kingdom (Alquraini, 2010). Students’ schedules throughout the school day are divided into different subjects (e.g., art, sport, languages, math, science, religious studies), with 9 to 10 months of schooling and a 2 month break during the summer (Alquraini, 2011).

Educational services are provided as a public good for students with and without disabilities. It is also the Ministry of Education’s responsibility to set curricular benchmarks, design the curriculum, make decisions about required texts that are used by all schools (regular and special) and make modifications as needed, build new schools and maintain old schools, and establish new programs for SWDs within regular education schools (Ministry of Education, 2008).

2.3.1 The Beginnings of Special Education in KSA.

Special education programs for SWDs did not become a priority in KSA until 1958, when it began establishing services for students with blindness (Al-Mousa, 2010). Although these changes began specifically for students with blindness, they sprang from changing attitudes about the meaning of disability and the role of individuals with disabilities in society. Before this, SWDs received their education and supports from parents at home or by attending boarding schools in countries that provided special education services for SWDs (e.g., Egypt, Jordan). This option required the child to stay in a residential setting in the special school in a different county for most of the school year (Al-Ajmi, 2006; Alquraini, 2011). However, when KSA started to offer services for
SWDs in 1958, these services were available only for male students with blindness and at special facilities called scientific institutions. These institutions were supported by the Ministry of Education with skilled special education teachers and a Braille curriculum (Alquraini, 2011). The institutions provided education for male students with blindness in elementary, middle, and high school. They used the same academic curriculum as general education schools, with some modifications and accommodations to meet the needs of students with visual impairments (Aldabas, 2015). Following this initiative, in 1962 the Ministry of Education established the Department of Special Education to facilitate learning and rehabilitation services for students with three different categories of disabilities: blindness, deafness, and ID (Afeafe, 2000). This movement led to an increased number of institutions serving SWDs in three different cities: Mecca, Aneaza, and Alhofouf (Al-Mousa, 2010). In these cities, the population was concentrated enough and enough government infrastructure existed to make the expansion of education for SWDs possible for the first time. But this movement was limited to specific types of disabilities, excluding other types.

2.3.2 Gradual Growth, Beginnings to 1987

Between 1960 and 1971, special education services underwent a gradual process of expansion in number and scope, while keeping to the segregated, institutional model. In 1960 and 1971, the Ministry of Education expanded special education programs for all different types of disabilities. The expansion included opening institutions for female students with deafness and blindness and increasing school days in which SWDs received full-time services (Aldabas, 2015). With respect to students with ID, in 1971 the Ministry of Education opened the first institution for students with ID (Al-Ajmi, 2006). This
institution provided educational, training, and residential services as after-school programs for students with severe disabilities (Al Wabli, 1996). The services concentrated on the development of social, communication, and life skills to increase students’ independence (Alruwaili, 2016). By 1987, the Ministry of Education had increased the number of special education schools and institutions to educate students with deafness, blindness, and ID to 27 throughout the country (Al-Kheraidi, 1989). Thus, numbers of schools and institutions for SWDs had gradually increased, from one school that educated only students with blindness in 1960 to 27 schools that educated students with different types of disabilities. These incremental changes led to systemic policy reforms in 1987, when KSA passed the first legislation for people with disabilities: the “Legislation of Disabilities”. The legislation mandated that people with disabilities have the right to be treated equally to other people in the community. Another component of this legislation was defining disabilities and describing programs for interventions, assessment procedures, and diagnoses to determine eligibility for special education services. Although still under the banner of segregated classrooms, the effect of this law was to vastly increase the scope of available special education services to SWDs (RSEPI, 2001).

2.3.3 Accelerating Change and Reforms, 1987 to the Present

Between 1987 and 2000, reforms continued to accelerate, shifting special education to a new phase and culminating in a movement towards deinstitutionalization and integration in KSA. Due in part to the high numbers of students applying to schools and institutions across the country, the Ministry of Education made it policy to begin providing services for students with LDs in regular schools through resource classroom
(Al-Mousa, 2010). Moreover, the government’s establishment of Legislation on Disabilities initiated rehabilitation services and training programs provided by public organizations to people with disabilities (Alquraini, 2010). In effect, the Legislation of Disabilities established social services inclusive of but not limited to education for individuals with disabilities. One of the turning points in the history of special education in KSA occurred in 2000, when the Ministry of Education changed their vision regarding special education schools and institutions. After establishing laws regarding the right of SWDs to receive better special education services, the Ministry of Education declared education accommodations to be mandatory to obtain high quality educational services for SWDs (Alnahdi, 2014). Another legislation, established in 2000, was the “Disability Law”. This law determined that people with disabilities could receive free medical treatment, as well as psychological, educational, and rehabilitation services in all public organizations (Alquraini, 2010; King Salman Center for Disability Research, 2004). Finally, in 2001, KSA passed the RSEPI. This law established the policies that ensure the right of SWDs to access special education programs in public schools and make it the Ministry of Education’s responsibility to assess SWDs and ensure they receive special education services in general schools (RSEPI, 2001). Since this movement, special education classrooms for students with mild ID, LD, autism spectrum disorder (ASD), and Hearing Impairment (HI), while special schools (institutions) have decreased. The new vision of special education services was implemented by designing new classrooms in regular schools to be used to educate SWDs. Thus, the trend was offering educational access to previously excluded students and moving the educational placement of SWDs
from segregated schools and institutions to public schools (Alnahdi, 2014). The new vision was moving forward with integrating SWDs.

2.4 Current State of Special Education in KSA

Having examined key moments in the history of special education in KSA, it is important to assess the current situation of SWDs and speculate on the future of inclusion in KSA. This section explores the data regarding changing placements of SWDs, trending towards more integrated schools. It first presents data on the effects of current reform policy and special education placements, highlighting positive trends and progress. The second sub-section examines similar data for insights into current deficits and shortcomings.

2.4.1 Quantitative Analysis of Recent Positive Trends for SWDs in KSA.

The Ministry of Education presented data from 2014-2015 that showed the total numbers of special educations programs, classrooms, and institutions serving all SWDs without identifying the specific numbers of special education programs and classrooms (in which the students receive their education in public schools) and institutions (in which the students receive their education in special schools). The Ministry of Education provides data that 28,371 SWDs studied in special education programs, classrooms, and institutions in 2014-2015. Moreover, numbers of special education programs, classrooms and institutions was 7491 (Ministry of Education, 2016). Although this most recent data gives a general sense of the current situation for SWDs, it does not allow comparisons across years to make claims about progress, or to make distinctions between special education classrooms in public schools and segregated institutions. Another limitation of the data includes the classification of students by type of disability. For example, the data
group students with deafness and students who are hard of hearing together under the category of Hearing Impaired (HI) without distinguishing between type of disability. Nonetheless, the data are instructive and do allow broad insights and reasonable hypotheses with significance for students with deafness and students with hardness of hearing. For example, although the numbers do not allow distinctions between students with deafness and hardness of hearing in the HI category, it is likely that the bulk of new integrated programs serves students with hardness of hearing. Deafness is automatically considered a severe disability, while hardness of hearing generally qualifies the SWD for integration in the general education school as a mild disability. This means that a majority of institutions most likely remain reserved for students with deafness.

More comprehensive data are available from 2006-2007. These data on the state of special education services in KSA allows chronological analysis of growth between 1994 and 2007 and shows remarkable strides for SWDs. For example, as shown in Figure 2.1 (Al-Mousa, 2010), special education programs and institutions for male and female students increased from 66 programs and institutions serving 7725 students in 1994-1995 to 3239 programs and institutions serving 61,986 students in 2006-2007. Although we might best describe these programs as integrated (with services provided in public schools alongside the general students, but rarely in the general education classroom) rather than inclusive, this increase nonetheless represents enormous progress for SWDs. This impressive change overlaps roughly with the legislative reforms discussed in the last section and seems their direct result.
Figure 2.1 Number of Institutions and Programs
Quantitative data of the increased number of special education programs and institutions in KSA during the time from 1994-1995 to 2006-2007 (Al-Mousa, 2010).

Likewise, the most recent quantitative data offered by the Ministry of Education (see Table 2.1 below) demonstrate increased numbers of special education classrooms in public schools for five types of disabilities, including Visual Impairment, Hearing Impairment, ID, ASD, and multiple disabilities.
Table 2.1 Number of Institutions and Integrated Special Education Programs in KSA in 2011 (Ministry of Education, 2016).

<table>
<thead>
<tr>
<th>Gender</th>
<th>VI</th>
<th>HI</th>
<th>ID</th>
<th>ASD</th>
<th>MD</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>5</td>
<td>341</td>
<td>704</td>
<td>40</td>
<td>46</td>
<td>1136</td>
</tr>
<tr>
<td>Female</td>
<td>71</td>
<td>171</td>
<td>386</td>
<td>19</td>
<td>20</td>
<td>567</td>
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<tr>
<td>Integrated special</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>education programs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>54</td>
<td>963</td>
<td>2311</td>
<td>135</td>
<td>92</td>
<td>3555</td>
</tr>
<tr>
<td>Female</td>
<td>181</td>
<td>497</td>
<td>999</td>
<td>61</td>
<td>58</td>
<td>1796</td>
</tr>
</tbody>
</table>

Note.  VI = visual impairment; HI = hearing impairment; ID = intellectual disability; ASD = autism spectrum disorder; MD = multiple disabilities

According to data in Table 2.1, the trend toward special education programs in public schools has continued to increase at a similar rate since 2005-2006 (Figure 2.1). Comparing the data from Table 2.1 with the data in Figure 2.1, between 2005-2006 and 2011, special education programs in public schools for males increased from 2237 to 3555, or by a total of 1318 programs, and numbers of special education programs for females in public schools increased from 954 to 1796, or by a total of 842 programs. Combined, this is a total increase of 2160 programs over a 5-year period, an average of over 400 programs per year. Similarly, the numbers show a massive trend towards integration for students with HI, with 1460 combined male and female integrated programs for these students compared to only 512 institutions.

At the same time, Table 2.1 shows significant patterns of institutional versus integrated placement based on type of disability. Specific data on placement by severity of disability are limited. However, insights into this question can be gained from current data. While students with LD are not included in Table 2.1, it is clear that, since the Table accounts for total number of institutions currently serving SWDs in KSA, students with
LD do not receive their education in institutions. Likewise, students with some types of disability seem disproportionately placed in institutions. This is especially true for students with ID. The 1090 combined male and female institutional settings for students with ID represent a whopping 64% of total institutions (combined male and female 1703). Institutions for students with ID make up by far the largest proportion of total institutions. After students with ID, the number of institutions for hearing impaired students makes up the majority of the remaining institutions, with 512 combined male and female institutions. This represents roughly 30% of the total of number of institutions in KSA. This means that there are almost seven times as many segregated institutions for students with deafness or hardness of hearing as for students with Visual Impairment and almost nine times as many as for students with ASD. These numbers are particularly striking when one takes into account that institutionalized students with deafness and hardness of hearing are often intellectually typical and might otherwise be able to fully participate in the academic and social life of the general education school and classroom. These students are clearly being placed in institutional, non-integrated settings in higher numbers than students with other types of disability, excluding ID. Although comparative data on placement by severity of disability are hard to come by, the Ministry of Education indicated 96% of moderate and severe disabilities receive their education in an institutional setting. According to Alnahdi (2007), 73% of special education programs and institutions make placement decisions for students with ID based solely or largely on intelligence tests. Researchers have called into question the suitability of these methods in a KSA context (Al Wabli, 2006; Alnahdi, 2007).
Another pattern of institutional versus integrated placement by type of disability involves students with deafness. Table 2.1 shows that students with deafness and hardness of hearing as a group have experienced dramatic gains in response to special education reforms, experiencing roughly the same proportion of reductions in institutions and expansion of special education programs as other disability types. On the one hand, this shows tremendous progress towards the integration of students with hardness of hearing. On the other hand, and although the data do not allow specific discriminations between students with deafness and hardness of hearing within the HI category, it is reasonable to believe that the majority of special schools for hearing impaired students are devoted to students with deafness, and that the majority of integrated special education programs are devoted to students with hardness of hearing. This means that the population of students with deafness, a significant proportion of whom are intellectually and mentally typical and might otherwise be expected to perform and access a general education curriculum, are often being relegated to special schools where they are segregated at rates similar to that for students with severe ID.

2.4.2 Current Deficits in Special Education Services for SWDs in KSA.

Special education services in KSA have changed during the last few years, and number of programs that deliver care for SWDs has increased. For example, in 2006, 80% of all students with mild disabilities received their education in integrated schools in KSA (Alnahdi, 2013). The provision of related services and accommodations for various disabilities (e.g., LDs, deafness, ASD) has substantially improved, and students with mild disabilities often receive the same curriculum as their typical peers, with modifications.
Clearly, KSA’s significant increase in programs and services for SWDs represents a sustained change in educational policy and practice. Despite this effort, there is still more to do to improve the educational placement for students with specific types of disabilities. Perhaps most alarmingly, current data show the progress SWDs have experienced has benefited certain types of disability more than others, and that students with ID and students with deafness continue to be disproportionately educated in institutions. While the current, rapid expansion in special education classrooms in public schools is certainly a dramatic gain for SWDs, these classrooms cannot be defined as inclusion classrooms. We might describe them as integrated classrooms with limited opportunities for mainstreaming, in which SWDs receive educational services alongside the general student body, but rarely in the general education classroom. SWDs in special education programs receive their education in public schools, but in separated classrooms where their only opportunities to interact with typical peers are non-academic. These programs do offer opportunities for social interaction with typical peers, such as interacting during non-curricular activities at lunch time. However, these opportunities are limited and do not include opportunities for academic inclusion. Thus, integrated SWDs receive inadequate benefit from reforms, even though they were the majority of students who were integrated into public schools (Al-Ajmi, 2006; Alnahdi, 2014).

The data presented in this section reveal that significant changes have occurred in placement practices for SWDs between 1994 and 2011. Those changes resulted in many SWDs being educated in special education classrooms in public schools. This includes a significant increase in placement is general education schools and a decrease in placement in institutions. Perhaps the most significant change in placement practices was
the increased number of students placed in public schools for most of the school day, but in separate classrooms. A large portion of this change can likely be explained by growth and expansion of legislation supporting the right of SWDs to receive the same quality education as their typical peers. That being said, special education schools still exist for students with certain types and severities of disability. A large proportion of students with ID, students with deafness, and students with moderate and severe disability receive their education in segregated environments. These students have largely been left out of the integration movement. Even students who benefitted most from RSEPI reforms remain segregated in separate classroom and have not received the benefits of inclusion.

2.5 Factors Affecting Special Education Reform in KSA

A body of literature exists examining the factors involved in the gap between special education policy and practice in KSA. RSEPI, while it began after the model of IDEA in the U.S., falls short in specific areas, including: (a) lack of specific provisions in the language of the legislation itself; (b) mandates that exceed the ability of the existing infrastructure to implement, such as teacher training programs and access to assistive technology; and (c) establishment of an inclusive environment that addresses whole school culture, as reflected in the attitudes and perspectives of teachers, administrators, and parents, and encourages family-school collaboration.

2.5.1 RSEPI Legislation.

In a comparison of RSEPI to IDEA, Alqraini (2013) notes several areas in which RSEPI mandates standards for the provisions of services without defining the specific means to attain those standards. Like IDEA, RSEPI mandates the provision of early intervention services, but unlike IDEA, RSEPI does not clarify the procedures for early
intervention. Alotaibi and Almalki (2016) conducted a study that surveyed the perspectives of 80 KSA parents of children with ASD between 2 and 6 years. The study found that parents perceived the available early intervention services as helpful for their children, but generally perceived a need for greater availability of services, centers, and specialists. Similarly, RSEPI mandates the role of interdisciplinary teams and highly qualified special education teachers in the provision of services, but it does not fully define the requirements and credentials that make a given special education teacher “highly qualified.” RSEPI defines fewer categories of disability than does IDEA (10 compared to 14), does not fully consider the integration of assistive technology or the procedures and standards for its integration, and offers no procedural appeals safeguards to parents and guardians.

2.5.2 Infrastructure, Training Programs, Assistive Technology.

An additional factor in the gap between special education policy and the actual practice and provision of special education services in KSA is insufficient infrastructure, such as teacher training programs. Administrators and teachers in KSA might not possess the required education, training, and skills that would allow them to be effective instructional leaders and inclusion advocates for SWDs. There are few special education training programs in the country, and many general education teaching and administration training programs require minimal special education training courses (Khalil & Karim, 2016). Until 2003, the only requirement to become a teacher in KSA was two years of post-secondary education (Al Darwish, Al Amari, & Sadiq, 2003). An additional area that requires improvement in KSA is the use of technology in the special education classroom. According to Quinn et al. (2009), assistive technology provides
SWDs with “greater access to curricula, instruction, materials, and environments” (p. 1). It does so in many ways, from independence in the environment (Bottos, Feliciangeli, Sciuto, Gericke, & Vianello, 2001) to interventions that allow access to specific areas of the curriculum, such as technology-based interventions in math (Myers, Wang, Brownell, & Gagnon, 2015) and writing (Sitko, Laine, & Sitko, 2005). Despite the fact that KSA has made a substantial investment in information technology in special education in recent years, technology is poorly implemented in KSA special education classrooms (Rana, Fakrudeen, Miraz, Yousef, & Torqi, 2011).

2.5.3 Teachers, Administrators, and Interdisciplinary Teams.

Increasingly, there is a growing awareness of holistic, whole school approaches to inclusive education. Programs and initiatives to establish sustainable inclusive practices are most successful when they first address the cultural context—beliefs, mindsets, attitudes, and perspectives—that might support or undermine them (Mcmaster, 2013). In this regard, some attention has been given to the perspectives of KSA teachers and administrators regarding inclusive education. There is some research on the perspectives on inclusion of teachers and administrators in KSA. A study conducted by Al-Abduljabber (1994) examined teachers’ and administrators’ perspectives on inclusive education for SWDs in KSA schools. The researcher examined their perspectives based on gender, age, type of degree, years of experience, job position, and school level. The study found administrators who had more experience had more positive perspectives regarding inclusive education for SWDs. The opinions and perspectives about inclusion of teachers and administrators could play a key role in either helping or hindering the development of inclusive education in KSA. Alqahtani (2017) examined KSA teachers’
perspectives towards inclusion of students with LDs with their typical peers in the same classroom. The study indicated that male teachers had more positive perspectives regarding inclusion than female teachers and that teachers with more teaching experience had less positive perspectives, compared with those who had less teaching experience. Additionally, administrators are key players in creating a successful inclusive environment for SWDs through collaboration with other staff members in the schools. Therefore, inclusive services require additional support from administrators.

2.5.4 The Role and Perspectives of Parents.

Although the perspectives of teachers and administrators is a critical element in the success of inclusion, the perspectives of parents cannot be overlooked. One feature of IDEA has been the progressive emphasis on the role of family and parental involvement in the process of inclusive education (Hess et al., 2006). There is some research that indicates parents in KSA might not participate fully in their children’s education. Al-Herz (2008), for example, found that parents of SWDs in KSA often do not effectively participate in IEPs designed by the school to determine their children’s needs. The slight body of research that exists suggests the need for fuller understanding of parental involvement and effective family-school partnerships in KSA as a potential factor in the gap between special education policy and its implementation. Only one study addressing the perspectives of KSA parents regarding inclusive education was located. Alanazi (2012) conducted a qualitative study examining the perspectives of parents, teachers, and administrators. The researcher gathered interview and observation data at five girls’ primary schools. Although it found that parent perspectives regarding inclusion were on the whole positive, it also noted that “expressed attitudes [did] not necessarily translate
into manifest actions and that barriers to inclusion may lie in practicalities as well as attitudes.”

2.6 Study Significance

Almost two decades after the ambitious policy reforms of RSEPI, the general education classroom remains out of reach of SWDs. The body of literature addressing the current state of special education in KSA has interpreted it in several ways. Some have emphasized the successes of reform and underemphasized the gap between policy and implementation. While this perspective represents one reasonable evaluation of current data, some articles that embrace it have demonstrated a troubling tendency to blur the distinction between mainstreaming or integration and inclusion, or to describe integration into the general education school as inclusion without discussion of the critical differences in these terms as they apply to KSA schools (Al-Mousa, 2010). Others have sometimes emphasized the gap between policy and implementation in ways that fail to recognize KSA’s remarkable achievements in integrating and expanding special education. The reforms and plans for reform of the last decades have emerged rapidly, so that “many changes are being compressed into a relatively short timescale” in “a situation where new policies are being rolled out before the last ones are fully implemented (or evaluated)” (Alanazi, 2012, p. 10). RSEPI outlines ambitious reforms modeled after policies (IDEA) that required decades of sustained development, advocacy, and legislative action to arrive at their current state. If measured by the same timescale as RSEPI, IDEA also would have to be described as falling well short of its aspirations. Still others have seen current special education in KSA by analogy to the U.S., as the early stages in an ongoing development of educational services and conditions for SWDs
similar to the early stages of EHA in the U.S. (Alanazi, 2012; Alquraini, 2013). This last perspective goes furthest towards capturing the “in-process” status of special education policy and its implementation in KSA, provided it attends to the complexities of national context. KSA is not the U.S.: even if one asserted an exact parallel between “stages” of comparative development, the unique influences of national context, political structure, religious identity, pedagogical traditions, and culture might still direct the future of special education to unique ends.

The present study examined the perspectives of parents towards inclusive schooling for children with disabilities in KSA. Knowing parents’ perspectives about inclusive education will provide vital information to the public, researchers, and key decision-makers that could lead to advances in inclusive education. A body of literature exists addressing the factors involved in the gap between policy and practice in the areas of legislation, infrastructure, and the perspectives of teachers, administrators, and students. What remains poorly understood is the role and perspectives of KSA parents of students with and without disabilities regarding inclusive education. On the whole, there is little research describing the roles and aspirations of parents and families with and without children with disabilities on inclusive education. Research data do not exist on their level of involvement in their child’s education, understanding of their role as advocates, satisfaction or dissatisfaction with the current placement and services for their children, or perspectives of the means available to them to appeal decisions and advocate for their children. Prior to this study, there also were no quantitative data to indicate to what extent parents of children with and without disabilities are receptive to inclusion. And yet this area of research is as urgent as it is neglected. The opinions and perspectives
towards inclusion of parents could play a key role in either helping or hindering the development of inclusive education in the KSA.

2.7 Research Questions

The following research questions were designed to guide the study to gather valid information:

RQ1: What are parents’ perspectives regarding inclusive education of students with disabilities in KSA?

RQ2: Are there significant differences in parents’ perspectives towards inclusive education between parents of students with disabilities and parents of students without disabilities in KSA?

RQ3: Are there significant differences in parents’ perspectives towards inclusive education based on the severity of their child’s disability in KSA?

RQ4: Are there significant differences in parents’ perspectives towards inclusive education based on the type of their child’s disability in KSA?

RQ5: Are there significant differences in parents’ perspectives towards inclusive education based on the gender of their child in KSA?

RQ6: Are there significant differences in parents’ perspectives towards inclusive education based on the academic level of their child in KSA?
3.1 Description of the Study

The purpose of this study was to examine the perspectives of KSA parents (those with and without a child with disabilities) on placing their children in general education classrooms that are comprised of children with and without disabilities. The study used a quantitative, cross-sectional survey to examine parents’ perspectives on inclusion and look for statistical relationships between independent variables (i.e., child with or without disability, severity of disability, type of disability, child gender, and child academic level) and the dependent variable (i.e., attitude toward inclusive education) as it was an appropriate means for testing statistical significance and making cross-group comparisons (Cohen, Manion, & Morrison, 2013). The cross-sectional survey design was appropriate because the researcher sought to investigate statistical relationships between variables that are quantifiable. This design allowed the researcher to gather data about parental perspectives on many topics efficiently and quickly so that conclusions could be drawn about parental perspectives on inclusive schooling, consistent with the objectives of this analysis (Creswell, 2013). This design was used to answer the six research questions guiding the study. The researcher relied on qualitative categorical analysis to analyze the questionnaire’s single open-ended question. Categorical analysis is the process of identifying categories of response within qualitative data. This method was appropriate because the study deals with a limited number of open-ended, narrative responses that are not quantifiable.

Table 3.1 displays each research question guiding the study, its hypothesis and null hypothesis. Demographic information of parents and their child was collected.
<table>
<thead>
<tr>
<th>Research Question</th>
<th>Hypothesis</th>
<th>Null Hypothesis</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. What are parents’ perspectives regarding inclusive education of students with disabilities in KSA?</td>
<td>There are significant differences in parents’ perspectives towards inclusive education between parents of students with disabilities and parents of students without disabilities in KSA.</td>
<td>There are no significant differences in parents’ perspectives towards inclusive education between parents of students with disabilities and parents of students without disabilities in KSA.</td>
</tr>
<tr>
<td>2. Are there significant differences in parents’ perspectives towards inclusive education between parents of students with disabilities and parents of students without disabilities in KSA?</td>
<td>There are significant differences in parents’ perspectives towards inclusive education based on the severity of their child’s disability in KSA.</td>
<td>There are no significant differences in parents’ perspectives towards inclusive education based on the severity of their child’s disability in KSA.</td>
</tr>
<tr>
<td>3. Are there significant differences in parents’ perspectives towards inclusive education based on the severity of their child’s disability in KSA?</td>
<td>There are significant differences in parents’ perspectives towards inclusive education based on the type of their child’s disability in KSA.</td>
<td>There are no significant differences in parents’ perspectives towards inclusive education based on the type of their child’s disability in KSA.</td>
</tr>
<tr>
<td>4. Are there significant differences in parents’ perspectives towards inclusive education based on the type of their child’s disability in KSA?</td>
<td>There are significant differences in parents’ perspectives towards inclusive education based on the type of their child’s disability in KSA.</td>
<td>There are no significant differences in parents’ perspectives towards inclusive education based on the type of their child’s disability in KSA.</td>
</tr>
</tbody>
</table>
Table 3.1 (continued)

5. Are there significant differences in parents’ perspectives towards inclusive education based on the gender of their child?

There are significant differences in parents’ perspectives towards inclusive education based on the gender of their child.

There are no significant differences in parents’ perspectives towards inclusive education based on the gender of their child.

6. Are there significant differences in parents’ perspectives towards inclusive education based on the academic level of their child in KSA?

There are significant differences in parents’ perspectives towards inclusive education based on the academic level of their child in KSA.

There are no significant differences in parents’ perspectives towards inclusive education based on the academic level of their child in KSA.

Demographics information was divided into parent characteristics (e.g., gender, educational level) and child characteristics (e.g., disability status, type of disability, severity of disability). This section covers the present study’s research methodology, research questions, sampling procedure, target population, and data analysis procedures. Moreover, it outlines the instrumentation, including the survey instrument, validity and reliability, and the major data collection and analytical procedures that the study used.

3.2 Sample Procedures and Target Population

The study developed its sampling frame using a stratified sample of parents of students attending distinct types of schools (public integrated and non-integrated primary and secondary schools and institutions) in KSA. This method is appropriate because the researcher was gathering information from several distinct types of schools and wished to ensure numerous responses from each stratum (Kothari, 2004). The researcher developed the sampling frame in several steps. First, the researcher contacted the Ministry of
Education and formally sought permission to access the Ministry’s databases. The Ministry of Education in KSA maintains a comprehensive database of student and parent information, which it permitted the researcher to access, making this sampling method feasible for the study. The researcher submitted the questionnaire to the Ministry of Education for review and waited to receive permission. Upon receipt, the researcher was provided with an access code and accessed the database remotely. The target population in this study included parents of students attending schools in the cities of Al-Bahah, Jeddah, Mecca, and Sharqiyah. Van Voorhis and Morgan (2009) suggested that for comparing group differences (e.g., using ANOVA) the sample size in each group is ideally at least 30 to achieve a high level of power (80%). The targeted sample size was between 200 and 300 participants. The targeted cities are populous urban centers spread across KSA. In these cities, many SWDs (relative to the rest of the nation) receive their education in integrated schools (Ministry of Education, 2016). Next, the researcher searched for schools in these regions and listed them in a spreadsheet, sorting by type of school (public integrated and non-integrated primary and secondary schools and institutions). The researcher used a random number table to select a portion of schools from each school-type category to ensure sufficient responses from each type of school. Once schools were selected, the researcher returned to the Ministry database and populated a spreadsheet with relevant information about administrators at the chosen schools, who were contacted and asked for assistance distributing the anonymous survey link to parents of children attending their schools. In order to ensure the participants’ protection, all information was treated anonymously and confidentially and was only used for the purpose of this research.
3.3 Instrumentation

3.3.1 Survey Design

This study included a questionnaire to determine parents’ perspectives on inclusive education practices. Permission was received to use the Parents’ Attitudes Toward Inclusion/Integration (PATI; see Appendix 1). The survey instrument, PATI, was designed by Rafferty and Griffin (2005). It was created to investigate parents’ perspectives about the benefits and risks of inclusion for students with and without disabilities. In addition, the survey aimed to provide information about important issues that parents think about when considering an inclusive setting for their child. The instrument was chosen for this particular study for three reasons. First, the Ministry of Education of KSA has implemented educational models for students with disabilities that are comparable to other industrialized nations (e.g., the U. S.). Second, the survey length and questions were appropriate for the current study’s purpose, and third, this survey has strong validity and reliability, as established in previous studies (Rafferty, Boettcher, & Griffin, 2001; Rafferty & Griffin, 2005).

Slight modifications were made to the PATI survey in the process of adapting it for the current study. First, when the researcher contacted the survey author to request permission for its use, the author herself suggested small changes to the semantics of the original survey, which the researcher incorporated. For example, the survey author recommended changing the term “disabled children” to “children with disabilities”, which the researcher adopted. Also, an additional open-ended question was included to obtain information pertaining to the research questions. The most significant change to
the evaluation tool was its translation into Arabic. This process took place in several stages. First, the researcher produced an Arabic translation of the English survey instrument and evaluation tool, followed by an external review during the process of institutional approval of the pilot study by the University of Kentucky Institutional Review Board (IRB). As part of seeking approval of the pilot study and instrument for human subjects (See Appendix 2), the IRB assisted with the accuracy and clarity of the translations by providing an external reviewer. The reviewer offered feedback and suggestions for the Arabic translation. These minor changes relating to phrasing of the Arabic were adopted by the researcher, and IRB approval was received for the pilot study. The final, modified English version of the evaluation tool is included in Appendix 3, and the final, modified Arabic version of the evaluation tool is included in Appendix 4.

The PATI survey encompasses 51 items separated into five factors, which were used to measure the dependent variable (i.e., perspective toward inclusive education). The first factor measured parents’ perspectives on inclusion and consists of 9 items. The second factor measured parents’ perspectives on the impact of inclusion on SWDs and consists of 14 items. The third factor measured parents’ perspectives on the impact of inclusion on students without disabilities and consists of 10 items. The fourth factor measured parents’ perspectives on the impact of inclusion on parents of SWDs and consists of 5 items. Finally, the fifth factor measured parents’ perspectives on the impact of inclusion on parents of students without disabilities and consists of 4 items. The measures used a Likert scale to assess parents’ perspectives, viewpoints, and feelings towards inclusive education, with response options including Strongly Disagree, Disagree, Neutral, Agree, and Strongly Agree (Rafferty & Griffin, 2005). The survey also
collected demographic variables, such as whether the person is a parent with or without a child with disabilities, the severity of their child’s disability, child’s disability type, and education level of the parent.

3.3.2 Validity and Reliability

The PATI survey consists of two scales assessing perceived benefits and risks of inclusion and one scale assessing global attitudes toward inclusion. Rafferty et al. (2001) originally developed the Perceived Benefits and Perceived Risks scales from items in several published measures, including the Benefits and Drawbacks of Mainstreaming Scale (Bailey & Winton, 1987) and the Parental Attitudes Toward Mainstreaming Scale (Green & Stoneman, 1989). Rafferty et al. modified items to measure perspectives on inclusion, rather than on mainstreaming or integration, and independently established the reliability and consistency of the scales through a number of methods. According to Rafferty et al. (2001), Cronbach’s alpha coefficients established high internal consistency of the Perceived Benefits and Perceived Risks subscales. Cronbach’s alpha coefficient measures the average correlation between constructs (perceived risks vs. perceived benefits, in this case) and the survey items designed to assess them. A Cronbach’s alpha coefficient of .70 or higher generally suggests internal consistency of an instrument and strong intercorrelation among test items. The study reported the Cronbach’s alpha coefficients for each subscale as follows: Parents’ attitudes towards inclusion/integration (alpha = .94), Perceived benefits for students with disabilities (alpha = .90), Perceived risks for students with disabilities (alpha = .87), Perceived benefits for students without disabilities (alpha = .83), and Perceived risks for students without disabilities (alpha = .88). Moreover, Rafferty and Griffin (2005) also reported a high internal consistency of
Cronbach’s alpha coefficients. This study reported the Cronbach’s alpha coefficients as follows: Parents’ attitudes toward inclusion/integration (alpha = .93), Perceived benefits for students with disabilities (alpha = .87), Perceived risks for students with disabilities (alpha = .84), Perceived benefits for students without disabilities was (alpha = .86), and Perceived risks for students without disabilities (alpha = .79). Additionally, the researchers conducted confirmatory factor analyses to test a hypothesized two-factor structure of risks and benefits. They confirmed strong covariation between the Perceived Benefits and Perceived Risks subscales (-.48), meaning that higher measures within one factor generally covaried with lower measures in the other.

3.4 Pilot Study

The researcher first piloted the survey to assess (a) adequacy of the survey instrument and (b) adequacy of data collection methods (Prescott & Soeken, 1989). The purpose of the pilot study was to identify questions on the survey that were not clearly written, find the number of respondents who completed the entire survey or partial survey once beginning the survey, determine the amount of time respondents took to complete the survey, and obtain suggestions about questions that should be added or removed from the survey. The researcher developed a supplementary evaluation tool to answer these questions and recruited a small sample of 12 KSA parents of students with and without disabilities to participate in the study. The web-based tool Qualtrics was used to deliver the survey and evaluation tool, and the researcher analyzed participant responses and made modifications to the survey instrument as a result. The researcher developed the sampling frame for the pilot study using a convenience sample. The external pilot study
was administered to a small group of participants who were not be included in the final survey. To locate participants, the researcher contacted a colleague teaching at a public elementary school in KSA, who assisted in identifying 12 volunteers. Although the sampling frame was developed to ensure some number of volunteer participants from each stratum of the final study sampling frame (integrated public schools and non-integrated institutions), distinctions were not made between parents of children with different types of disabilities, and the main factor for inclusion in the pilot study was willingness to participate and provide feedback on the survey instrument. To avoid contamination of the final study, pilot study participants were flagged in the database and excluded from participation in the final study. An additional layer of control was added in regional selection, as pilot study participants lived in a nearby region outside the range of the final study. Pilot study results were cleared from Qualtrics before delivery of the final survey.

3.4.1 Pilot Study Results.

Most respondents suggested no or minor changes to the survey. All respondents indicated that they felt the purpose of the survey was clear. No respondents indicated that they felt the wording of the survey promoted inclusion, integration, or separate schools. All respondents reported the time taken to complete the survey as between 10 and 15 min, which was in line with anticipated completion time. As such, the results of the pilot did not require the research to make modifications to address completion time issues. All respondents who began the survey completed the entire survey.

Several respondents did suggest minor changes for wording or clarity, which were incorporated. One substantive change made to the survey due to pilot responses related to
the terminology of inclusion and integration. The researcher sought to gather data about the perspectives of parents regarding the inclusion of students with disabilities in the general education classroom alongside their typical peers, not currently an adopted practice of the KSA educational system. However, the term “inclusion” in KSA has a specific meaning distinct from the question the researcher wished to answer. Currently, the Ministry of Education officially defines “inclusion” as integration, or the incorporation of special education classrooms in the same building as general education public schools, but not in the general education classroom. Therefore, the researcher made additional modifications to the wording and terminology of the Arabic version of the survey instrument to reflect this distinction. Where the researcher wished to gather data about “integration,” he adopted the official terminology, calling it “inclusion,” and where the researcher wished to gather data about “inclusion” specifically as inclusion in the general education classroom, he replaced instances of “inclusion” with “including students with disabilities in the general education classroom alongside their typical peers.” For example, the wording of question 13, which originally read as, “Inclusion of students with disabilities will promote their social independence” has been modified to read as, “Including students with disabilities in the general education classroom alongside their typical peers will promote their social independence.” One respondent flagged an oversight in question six of the demographics section that did not offer an option for parents of a child or children without disabilities attending a non-integrated school. This was a critical oversight that would have significantly affected the outcome of the final study. The questionnaire was revised to include this option and reviewed for consistency throughout. Another respondent suggested breaking the Qualtrics presentation of the
survey into several sections for ease of navigation. Originally, after the short
demographics section, the majority of survey questions about the perspectives of parents
towards inclusion and integration was presented to participants in a single section. The
researcher adopted this suggestion and separated the section into four subsections
presented on separate pages in Qualtrics. The subsection organization follows the four
question-type subheadings already present in the original survey. Beyond the discussed
changes, the results of the pilot indicated no further modifications to the final survey
instrument.

3.5 Survey Distribution

The researcher used the web-based tool Qualtrics to build and distribute the
survey and evaluation tool, send participants the link to information about the study, and
provide confidentiality information to the target participants. Participants were e-mailed a
link to the Qualtrics survey, along with a cover letter and confidentiality information (See
Appendix 5). Participants were informed their information would be kept confidential
and used only for the purpose of the study. Upon following the link, participants were
again presented with the cover letter describing the pilot study, confidentiality
information, and instructions for completing the survey. At the bottom of this page,
participants were offered the option to click either, “I consent to participate in the survey”
or “I do not consent to participate in the survey” and proceeded to the survey only if they
clicked, “I consent to participate in the survey.” In the survey itself, questions were
divided into four sections. The first three sections consisted of the final survey, including
sections on demographic information, Likert scale questions about parents’ perspectives
towards inclusion, and an open-ended question about parents’ perspectives towards inclusion and integration. Participants were given 20 days to complete the survey. To get the best response rate, a reminder e-mail was sent by Qualtrics to non-responders (See Appendix 6) after 5 days of the original e-mail. A final reminder e-mail was sent on day 10, followed by thank you e-mails to all respondents at the close of the survey.

3.6 Data Analysis

3.6.1 Data Management

The researcher used Microsoft Excel to collect and organize data. After the survey closed, the researcher exported results to an Excel spreadsheet using a secure, password-protected computer and a secure internet connection. The researcher clearly defined and tagged each variable in the spreadsheet, then exported it to the statistical software suite Statistical Package for the Social Sciences (SPSS) for quantitative analysis.

3.6.2 Data Cleaning.

The data were cleaned to ensure accuracy and relevance (Fowler, 2013). First, the researcher located and deleted duplicate surveys based on their Qualtrics identification code. Next, empty surveys (those with no data) were located and deleted. Finally, surveys that were less than 50% completed were located and deleted. The researcher employed descriptive statistics to define frequency, range, standard deviations, and outliers as an aid in screening for errors in the data. The results of the cleaning process, including number of duplicates, empty surveys, incomplete surveys, and non-respondents, were recorded and presented in Table 4.1 in the body of the results chapter of the dissertation.
3.6.3 Quantitative Data Analysis

SPSS vs. 24.0 was used to conduct the statistical analysis of the quantitative data collected in the survey, using the protocols described by Field (2013). The levels, functional, and operational definitions of the variables used in the statistical analysis are summarized in Table 3.2 (independent variables) and Table 3.3 (dependent variables).

Table 3.2 Definitions of Independent Variables Used in the Statistical Analysis

<table>
<thead>
<tr>
<th>Independent variable</th>
<th>Level</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relation of respondent to child</td>
<td>Nominal</td>
<td>Mother; Father; Other</td>
</tr>
<tr>
<td>Level of education of the respondent</td>
<td>Ordinal</td>
<td>Some high school, High school diploma/GED, Some college, Bachelor’s Degree, Master’s Degree, Doctoral Degree, Other</td>
</tr>
<tr>
<td>Age of the respondent (Years)</td>
<td>Ordinal</td>
<td>18-24; 25-34; 35-44; 45-54; 55-64</td>
</tr>
<tr>
<td>Parent of child with disabilities</td>
<td>Nominal</td>
<td>Yes; No</td>
</tr>
<tr>
<td>Type of school the child is attending</td>
<td>Nominal</td>
<td>Special education, Integrated, Non-inclusive education, Other school</td>
</tr>
<tr>
<td>Current academic level of the child</td>
<td>Ordinal</td>
<td>Elementary School, Middle School, High School</td>
</tr>
<tr>
<td>Gender of the child</td>
<td>Nominal</td>
<td>Male; Female</td>
</tr>
<tr>
<td>Severity of child’s disability</td>
<td>Ordinal</td>
<td>No disability, Mild disability, Moderate disability, Severe disability</td>
</tr>
<tr>
<td>Type of child’s disability</td>
<td>Nominal</td>
<td>Autism Spectrum Disorder, Learning Disability, Intellectual Disability, Hearing Impairment, Deafness, Visual Impairment, Other</td>
</tr>
</tbody>
</table>
Table 3.3 Definitions of Dependent Variables Used in the Statistical Analysis

<table>
<thead>
<tr>
<th>Dependent variables</th>
<th>Level</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>DV1 Global Attitudes Scale</td>
<td>Scale</td>
<td>Average score for 22 items measured with 5-point scale (1 = Strongly Agree to 5 = Strongly Disagree)</td>
</tr>
<tr>
<td>DV2 Impact on students with disabilities</td>
<td>Scale</td>
<td>Average score for 15 items measured with 5-point scale (1 = Strongly Agree to 5 = Strongly Disagree)</td>
</tr>
<tr>
<td>DV3 Impact on students without disabilities</td>
<td>Scale</td>
<td>Average score for 11 items measured with 5-point scale (1 = Strongly Agree to 5 = Strongly Disagree)</td>
</tr>
<tr>
<td>DV4 Impact on parents of students with disabilities</td>
<td>Scale</td>
<td>Average score for 5 items measured with 5-point scale (1 = Strongly Agree to 5 = Strongly Disagree)</td>
</tr>
<tr>
<td>DV5 Impact on parents of students without disabilities</td>
<td>Scale</td>
<td>Average score for 4 items measured with 5-point scale (1 = Strongly Agree to 5 = Strongly Disagree)</td>
</tr>
</tbody>
</table>

Table 3.2 and Table 3.3 distinguish between the nine independent variables, representing the demographic categories of the respondents, and the five dependent variables, measured with 5-point Likert scales, collected with the Parents’ Attitudes Toward Inclusion/Integration (PATI) survey. The level refers to the measurement level applied by the SPSS data editor to distinguish between the three measurement levels of the variables (nominal, ordinal, or scale). The operational definition outlines how each variable was measured. Because Arabic is read from right to left (rather than from left to right, as used in English) the Likert scales were answered in reverse (i.e., 1 = Strongly Agree; 2 = Somewhat Agree; 3 = Neither Disagree nor Agree; 4 = Somewhat Disagree; 5
= Strongly Disagree) compared to how they are conventionally answered in English (i.e.,
1 = Strongly Disagree; 2 =Somewhat Disagree; 3 = Neither Disagree nor Agree; 4 =
Somewhat Agree; 5 = Strongly Agree). Therefore, a lower score (< 3) implied
agreement, whereas a higher score (> 3) implied disagreement.

The first research question (What are respondents’ perspectives regarding
inclusive education of students with disabilities?) was answered by use of descriptive
statistics. The mean ($M$) and standard deviation ($SD$) was computed for the five
dependent variables listed in Table 3.2 as well as their constituent item scores. Research
questions number two, three, four, five, and six were addressed using Analysis of
Variance (ANOVA).

To address RQ2: (Are there significant differences in parents’ perspectives
towards inclusive education between parents of students with disabilities and parents of
students without disabilities?), the mean differences in the five dependent variables with
respect to two groups of respondents (one group had children with disabilities, and the
other group had children without disabilities) was examined.

To address RQ3: (Are there significant differences in parents’ perspectives
towards the impact of inclusion on students with disabilities based on the severity of the
disability?), the mean differences in the five dependent variables between four groups of
parents, classified by the severity of their child’s disability (No disability, Mild disability,
Moderate disability, or Severe disability) was examined.

To address RQ4: (Are there significant differences in parents’ perspectives
towards the impact of inclusion on students with disabilities based on the type of
disability?), the mean differences in the five dependent variables between seven groups
with respect to the type of student disability (Autism Spectrum Disorder, Learning Disability, Intellectual Disability, Hearing Impairment, Deafness, Visual Impairment or Other) was examined.

To address RQ5: (Are there significant differences in parents’ perspectives towards the impact of inclusion on students with disabilities based on the gender of the child?), the mean differences in the five dependent variables with respect to two groups of respondents, classified by the gender of child (male or female) was examined.

To address RQ6: (Are there significant differences in parents’ perspectives towards the impact of inclusion on students with disabilities based on the level of education of the child?), the mean differences in the five dependent variables with respect to the child’s level of education, classified into three groups (Elementary School, Middle School, or High School) was examined.

The theoretical assumptions of ANOVA (Rutherford, 2001) were tested prior to the analysis. First, ANOVA is a parametric test, meaning that the dependent variable and the residuals (the differences between the observed scores and the mean scores) should theoretically be normally distributed (i.e., the frequency distribution should approximate a symmetrical bell-shaped curve). However, many studies have shown that deviation of the dependent variable from normality does not invalidate the results of ANOVA, assuming the sample size in each group is large enough to provide adequate power to detect significant differences between the mean values (Glass, Peckham, & Sanders, 1972; Schneider, Ziegler, Danay, Beyer, & Bühner, 2010). Furthermore, if a dependent variable is operationalized by averaging a large number of item scores, then the central limit applies, meaning that the average of the item scores tends toward a normal
distribution, even though the constituent item scores may themselves deviate from normality (Allen & Yen, 2001).

The most important assumption of ANOVA (and all inferential statistical tests) concerns the sample size. If the sample size is too small, then there is not enough statistical power to detect a significant difference between the groups and a Type II error may occur, meaning that the null hypothesis is falsely not rejected, when, in fact, the null hypothesis should really be rejected. Van Voorhis and Morgan (2009) suggested that for comparing group differences (e.g., using ANOVA) the sample size in each group should ideally be at least 30 to achieve high level of power (80%). The group size when using ANOVA should not be lower than seven (however, lower group size reduces the statistical power; and a Type II error may still occur).

The null hypothesis of ANOVA (i.e., that there was no significant difference between the mean scores with respect to each group of respondents) was rejected if \( p < .05 \) for the \( F \)-test statistic, which measured the ratio between the variance in the dependent variable explained by the groups vs. the unexplained (error) variance. If \( p > .05 \) then the null hypothesis was retained.

3.6.4 Qualitative Data Analysis

The last question in the survey was an open-ended question that elicited narrative answers “As a parent, are there any suggestions or feedback that you would like to put forward with regards to the education of students with disabilities in public schools, whether in the same classroom or a separate one?”. Categorical analysis, which is a widely used method for processing qualitative data collected in educational research (Maguire & Delahunt, 2017) was conducted to interpret the responses. A category is
defined as a unit of meaning identifying a specific issue, concept, perception or lived experience (Guest, Queen, & Namey, 2012). The categorical analysis was conducted in MS Excel as described by Meyer and Avery (2009). The researcher repeatedly read through the responses, making notes about significant and frequent categories of response as the occurred while reading. On each subsequent pass through the responses, the researcher revised and adjusted the categories in conversation with the responses themselves and the relative “fit” of categories to the whole body of responses. Ultimately, the responses were reviewed and each significant statement (i.e., a response that was relevant with respect to answering the research questions) was classified into one of five primary categories. The sort function of Excel was used to aggregate the statements within each category, and to provide tables of results.

3.7 Summary

This chapter provides a summary of the methodology that was used in the dissertation. The primary methodology and procedure used was a quantitative, cross-sectional approach addressing the present study’s research questions and hypothesis. The chapter also outlines the sampling procedure, target audience, sample size that were targeted, survey instrumentation, and data management procedures, including data collection and cleaning. The reliability and validity of the data used in the study are also provided in this chapter, and the data analysis (descriptive statistics, frequency, and percentages) methods that were employed are reported.
CHAPTER 4. RESULTS

4.1 Introduction

The purpose of this study was to examine the perspectives of the respondents (i.e., KSA parents and primary caretakers with and without children with disabilities) on placing their children in general education classrooms. This chapter presents a descriptive and inferential statistical analysis of the responses to the Parents’ Attitudes Toward Inclusion/Integration (PATI) survey designed by Rafferty and Griffin (2005). The chapter is organized into nine sections as follows: Screening and Cleaning of Response Data, Demographic Characteristics of Respondents, Respondents’ Perspectives, Respondents’ Perspectives by Disability (With vs. Without), Respondents Perspectives by Severity of Disability, Respondents Perspectives’ by Type of Disability, Respondents’ Perspectives by Gender, Respondents’ Perspectives by Level of Education, and Summary.

4.2 Quantitative Analysis

4.2.1 Screening and Cleaning of Response Data

Table 4.1 presents the results of the screening and cleaning of the response data. A total of 489 surveys were opened from the anonymous distribution link, of which 478, 97.8% included the respondents’ consent to participate (i.e., they answered “Yes” to “I consent to participate in the survey”). The 11 respondents who did not consent to participate were redirected to a Thank You page and did not see the questionnaire. The sampling procedure of the study did not allow calculation of absolute response rates, in that it relied on school administrators to distribute links to the survey, and therefore does not have data about the number of parents who actually received the link. Table 4.1
shows, that among the 478 respondents who consented to participate, there were no duplicate cases (i.e., none of the respondents’ Qualtrics identification codes were the same). The proportion of empty surveys (i.e., with none of the 66 items answered) was 175, 36.6%. The total number of incomplete surveys was 261, including 78 (16.3% of the respondents who answered 1% to 49% of the items and 183 (38.3% of the respondents who answered 50% to 99% of the items). Only 42, 8.8% of the respondents answered the complete set of 66 questions. All surveys that were less than 50% completed were excluded. The total number of surveys included in the statistical analysis to address the research questions was 225 (i.e., all respondents who completed 50% or more of the items) representing 47.1% of the total number of respondents who originally consented to participate. The total number of missing values provided by 225 respondents (not including responses to items that some respondents were not required to answer (e.g., the type and severity of the disability of a non-disabled child) was 885, representing 5.96% of the answers (out of a maximum possible total of 66 x 225 = 14850 answers).

In order to operationalize the dependent variables by averaging of the 5-point Likert scales (which could not be done if the missing values were retained) the missing values within each item were replaced by the serial mean score for the item, using the “Transform...Replace Missing Values” procedure in SPSS. Although this very commonly used method of missing value replacement does not change the mean score for the item, it may influence the results of statistical analysis, by slightly reducing the variance (Enders, 2002).
Table 4.1 Screening of Duplicate Cases, Empty Surveys, and Incomplete Surveys (N = 478)

<table>
<thead>
<tr>
<th>Group</th>
<th>Number</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duplicate cases (by Response ID)</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Primary cases (no duplicates)</td>
<td>478</td>
<td>100.0%</td>
</tr>
<tr>
<td>Empty surveys</td>
<td>175</td>
<td>36.6%</td>
</tr>
<tr>
<td>Incomplete surveys (1% to 49% completed)</td>
<td>78</td>
<td>16.3%</td>
</tr>
<tr>
<td>Incomplete surveys (50% to 99% completed)</td>
<td>183</td>
<td>38.3%</td>
</tr>
<tr>
<td>Complete surveys (100% completed)</td>
<td>42</td>
<td>8.8%</td>
</tr>
<tr>
<td>Surveys included in the statistical analysis</td>
<td>225</td>
<td>47.1%</td>
</tr>
</tbody>
</table>

4.2.2 Demographic Characteristics of Respondents

Table 4.2 summarizes the demographic characteristics (numbers and percentages in each specified group) reported by the sample of 225 respondents who answered more than 50% of the questions. Table 4.3 summarizes the types of disability (numbers and percentages of each specified type) reported by the 68 respondents who reported that they had a child with disability.

Table 4.2 Responses to Questions About the Demographic Characteristics of the Respondents (N = 225)

<table>
<thead>
<tr>
<th>Question</th>
<th>Group</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relation to child of the person completing the questionnaire?</td>
<td>Mother</td>
<td>83</td>
<td>36.9%</td>
</tr>
<tr>
<td></td>
<td>Father</td>
<td>83</td>
<td>36.9%</td>
</tr>
<tr>
<td></td>
<td>Primary caretaker</td>
<td>56</td>
<td>24.9%</td>
</tr>
<tr>
<td></td>
<td>No response</td>
<td>3</td>
<td>1.3%</td>
</tr>
<tr>
<td>Level of education of person completing the questionnaire?</td>
<td>Some high school</td>
<td>11</td>
<td>4.9%</td>
</tr>
<tr>
<td></td>
<td>High school diploma/GED</td>
<td>27</td>
<td>12.0%</td>
</tr>
<tr>
<td></td>
<td>Some college</td>
<td>16</td>
<td>7.1%</td>
</tr>
<tr>
<td></td>
<td>Bachelor’s Degree</td>
<td>115</td>
<td>51.1%</td>
</tr>
<tr>
<td></td>
<td>Master’s Degree</td>
<td>34</td>
<td>15.1%</td>
</tr>
<tr>
<td></td>
<td>Doctoral Degree</td>
<td>11</td>
<td>4.9%</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>6</td>
<td>2.7%</td>
</tr>
<tr>
<td></td>
<td>No response</td>
<td>5</td>
<td>2.2%</td>
</tr>
</tbody>
</table>
Table 4.2 (continued)

<table>
<thead>
<tr>
<th>Age of person completing the questionnaire?</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 to 24 years old</td>
<td>24</td>
<td>10.7%</td>
</tr>
<tr>
<td>25 to 34 years old</td>
<td>76</td>
<td>33.8%</td>
</tr>
<tr>
<td>35 to 44 years old</td>
<td>73</td>
<td>32.4%</td>
</tr>
<tr>
<td>45 to 54 years old</td>
<td>42</td>
<td>18.7%</td>
</tr>
<tr>
<td>55 to 64 years old</td>
<td>6</td>
<td>2.7%</td>
</tr>
<tr>
<td>No response</td>
<td>4</td>
<td>1.8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Please specify the current academic level of the child?</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elementary School</td>
<td>146</td>
<td>64.9%</td>
</tr>
<tr>
<td>Middle School</td>
<td>25</td>
<td>11.1%</td>
</tr>
<tr>
<td>High School</td>
<td>36</td>
<td>16.0%</td>
</tr>
<tr>
<td>No response</td>
<td>18</td>
<td>8.0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sex of the child?</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>145</td>
<td>64.4%</td>
</tr>
<tr>
<td>Female</td>
<td>68</td>
<td>30.2%</td>
</tr>
<tr>
<td>No response</td>
<td>12</td>
<td>5.3%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What kind of school does the child currently attend?</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special education</td>
<td>26</td>
<td>11.6%</td>
</tr>
<tr>
<td>Integrated</td>
<td>63</td>
<td>28.0%</td>
</tr>
<tr>
<td>Non-inclusive education</td>
<td>106</td>
<td>47.1%</td>
</tr>
<tr>
<td>Other school</td>
<td>17</td>
<td>7.6%</td>
</tr>
<tr>
<td>No response</td>
<td>13</td>
<td>5.8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Are you the parent or primary caretaker of a student with disabilities?</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>68</td>
<td>30.2%</td>
</tr>
<tr>
<td>No</td>
<td>154</td>
<td>68.4%</td>
</tr>
<tr>
<td>No response</td>
<td>3</td>
<td>1.3%</td>
</tr>
</tbody>
</table>

Table 4.3 Types and Severities of Disability (N = 68)

<table>
<thead>
<tr>
<th>Question</th>
<th>Type of Disability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please describe the child’s disability</td>
<td>Autism Spectrum Disorder</td>
<td>19</td>
<td>27.9%</td>
</tr>
<tr>
<td></td>
<td>Learning Disability</td>
<td>8</td>
<td>11.8%</td>
</tr>
<tr>
<td></td>
<td>Intellectual Disability</td>
<td>20</td>
<td>29.4%</td>
</tr>
<tr>
<td></td>
<td>Hearing Impairment</td>
<td>7</td>
<td>10.3%</td>
</tr>
<tr>
<td></td>
<td>Deafness</td>
<td>6</td>
<td>8.8%</td>
</tr>
<tr>
<td></td>
<td>Visual Impairment</td>
<td>2</td>
<td>2.9%</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>6</td>
<td>8.8%</td>
</tr>
<tr>
<td>Based on your own experience and professional reports, is your child’s disability:</td>
<td>Mild</td>
<td>20</td>
<td>29.4%</td>
</tr>
<tr>
<td></td>
<td>Moderate</td>
<td>38</td>
<td>55.9%</td>
</tr>
<tr>
<td></td>
<td>Severe</td>
<td>9</td>
<td>13.2%</td>
</tr>
<tr>
<td></td>
<td>No response</td>
<td>1</td>
<td>1.5%</td>
</tr>
</tbody>
</table>

The proportion of mothers and fathers in the sample were equal (36.9%) with a lower proportion of other caretakers (24.9%). The highest educational level of over half
of the respondents (51.1%) was a Bachelor’s degree. The most frequent age groups of the respondents were 25 to 34 years old (33.8%) and 35 to 44 years old (32.4%). The current academic level of most of the children (64.9%) was Elementary School, and the majority of the children (64.4%) were male. Most of the children attended schools with non-inclusive education (47.1%) or integrated education (28.0%). In response to the question “Are you the parent or primary caretaker of a student with disabilities? 68 (30.2%) of the respondents replied “Yes” while 154 (68.4%) replied “No”. Among the 68 children with disabilities, a variety of disabilities were reported, of which the most frequent were Autism Spectrum Disorder (27.9%); Intellectual Disability (29.4%) and Learning Disability (11.8%). Most of these 68 children (55.9%) were described as having a moderate severity of disability.

4.2.3 Respondents’ Perspectives

This section presents the statistics to addresses the first research question: What are respondents’ perspectives regarding inclusive education of students with disabilities in KSA? Table 4.4 presents the reliability and descriptive statistics for the five dependent variables that were operationalized by averaging multiple item scores. All of the dependent variables were reliability measured (Cronbach’s alpha = .767 to .894).

<table>
<thead>
<tr>
<th>Dependent variable</th>
<th>Number of Items</th>
<th>Cronbach’s alpha</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>DV1 Global Attitudes</td>
<td>22</td>
<td>.894</td>
<td>2.20</td>
<td>0.62</td>
</tr>
<tr>
<td>DV2 Impact on students with disabilities</td>
<td>15</td>
<td>.747</td>
<td>2.18</td>
<td>0.43</td>
</tr>
<tr>
<td>DV3 Impact on students without disabilities</td>
<td>11</td>
<td>.844</td>
<td>2.49</td>
<td>0.63</td>
</tr>
<tr>
<td>DV4 Impact on parents of students with disabilities</td>
<td>5</td>
<td>.791</td>
<td>2.41</td>
<td>0.60</td>
</tr>
<tr>
<td>DV5 Impact on parents of student without disabilities</td>
<td>4</td>
<td>.767</td>
<td>2.32</td>
<td>0.57</td>
</tr>
</tbody>
</table>
The majority of the respondents endorsed the lower ends of the 5-point Likert scales. Again, the convention within Arabic survey instruments is to move from right to left, such that lower numbers indicate stronger agreement and higher number indicate stronger disagreement. The mean scores \( M = 2.18 \) to 2.49 were consistently < 3.0, indicating that, on average, the respondents tended to agree with the multiple items that constituted each variable.

Table 4.5 presents the descriptive statistics for nine of the items used to measure Attitudes, sorted into order of mean scores. Table 4.6 presents the descriptive statistics for 14 items that were also used to measure perspectives, in response to the question “Some children may benefit more from being included in the general education classroom alongside their typical peers than others. Please indicate how much you disagree/agree with including children with the following characteristics in the general education classroom: BASED ON TYPE OF DISABILITY”.
Table 4.5 Descriptive Statistics for Nine Items Used to Measure Attitudes (N = 225)

<table>
<thead>
<tr>
<th>Item</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students with disabilities should have the right to go on a school field trip with their typical peers.</td>
<td>1.61</td>
<td>0.81</td>
</tr>
<tr>
<td>Students with disabilities should share one or more classes, such as art or physical education, with their typical peers.</td>
<td>1.61</td>
<td>0.79</td>
</tr>
<tr>
<td>All children should be educated with typical peers who are at the same developmental level.</td>
<td>1.81</td>
<td>0.97</td>
</tr>
<tr>
<td>I would be satisfied with my child being educated in a general education classroom that includes both students with and students without disabilities.</td>
<td>1.82</td>
<td>0.95</td>
</tr>
<tr>
<td>Students with disabilities should eat lunch in the school cafeteria with their typical peers at the same time.</td>
<td>1.88</td>
<td>1.09</td>
</tr>
<tr>
<td>Students with disabilities should eat lunch in the school cafeteria with their typical peers at the same table.</td>
<td>1.89</td>
<td>1.01</td>
</tr>
<tr>
<td>Classrooms for students with disabilities should be located in the general school building with their typical peers.</td>
<td>1.93</td>
<td>1.09</td>
</tr>
<tr>
<td>Separating students with disabilities from the general education classroom violates their rights.</td>
<td>2.11</td>
<td>1.16</td>
</tr>
<tr>
<td>Students with disabilities should participate in the same school job responsibilities as their typical peers.</td>
<td>2.65</td>
<td>1.22</td>
</tr>
</tbody>
</table>

Table 4.6 Descriptive Statistics for 14 items Used to Measure Global Attitudes based on Type of Disability (N = 225)

<table>
<thead>
<tr>
<th>Type of Disability</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild Disability</td>
<td>1.51</td>
<td>0.69</td>
</tr>
<tr>
<td>High school students</td>
<td>1.87</td>
<td>1.00</td>
</tr>
<tr>
<td>Elementary school students</td>
<td>1.89</td>
<td>0.87</td>
</tr>
<tr>
<td>Learning Disability</td>
<td>1.90</td>
<td>0.95</td>
</tr>
<tr>
<td>Middle school students</td>
<td>1.91</td>
<td>0.92</td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td>1.98</td>
<td>0.95</td>
</tr>
<tr>
<td>Preschool age children</td>
<td>2.05</td>
<td>0.97</td>
</tr>
<tr>
<td>Moderate Disability</td>
<td>2.16</td>
<td>0.94</td>
</tr>
<tr>
<td>Visual Impairment</td>
<td>2.21</td>
<td>1.06</td>
</tr>
<tr>
<td>Deafness</td>
<td>2.40</td>
<td>1.03</td>
</tr>
<tr>
<td>Autism Spectrum Disorder</td>
<td>2.47</td>
<td>1.10</td>
</tr>
<tr>
<td>Intellectual Disability</td>
<td>2.96</td>
<td>1.11</td>
</tr>
<tr>
<td>Severe Disability</td>
<td>3.30</td>
<td>1.14</td>
</tr>
</tbody>
</table>
The three items in Table 4.5 with the lowest scores (with which the respondents agreed most strongly) were “Students with disabilities should have the right to go on a school field trip with their typical peers” \((M = 1.61)\); Students with disabilities should share one or more classes, such as art or physical education, with their typical peers” \((M = 1.61)\); and “All children should be educated with typical peers who are at the same developmental level \((M = 1.81)\). The three items with the highest scores in Table 4.5 (with which the respondents agreed least strongly) were “Classrooms for students with disabilities should be located in the general school building with their typical peers \((M = 1.93)\); “Separating students with disabilities from the general education classroom violates their rights \((M = 2.11)\); and “Students with disabilities should participate in the same school job responsibilities as their typical peers \((M = 2.65)\). The three items in Table 4.6 with the lowest scores (with which the respondents agreed most strongly) were “Mild Disability” \((M = 1.51)\); “High school students “\((M = 1.87)\); and “Elementary school students” \((M = 1.89)\). The items with the highest scores in Table 4.6 (with which the respondents agreed least strongly) were “Autism Spectrum Disorder” \((M = 2.47)\); “Intellectual Disability” \((M = 2.96)\); and “Severe Disability” \((M = 3.30)\).

Table 4.7 presents the descriptive statistics for the 15 items used to measure the impact of inclusive education on students with disabilities. The majority of the respondents tended to agree with all of the items, reflected by mean scores < 3.0.
Table 4.7 Descriptive Statistics for 15 items Used to Measure Impact on Students with Disabilities (N = 225)

<table>
<thead>
<tr>
<th>Item</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>The social skills of students with disabilities would be improved due to educating them in the general education classroom alongside typical peers.</td>
<td>1.64</td>
<td>0.72</td>
</tr>
<tr>
<td>Inclusion of students with disabilities in the general education classroom would be likely to enhance their acceptance by the community in general.</td>
<td>1.70</td>
<td>0.77</td>
</tr>
<tr>
<td>Educating students with disabilities in the general education classroom alongside typical peers would allow them to develop their academic skills.</td>
<td>1.72</td>
<td>0.82</td>
</tr>
<tr>
<td>Including students with disabilities in the general education classroom would be likely to have a positive impact on how they feel about themselves.</td>
<td>1.73</td>
<td>0.81</td>
</tr>
<tr>
<td>Inclusion of students with disabilities in the general education classroom would provide more opportunities to participate in a variety of school activities.</td>
<td>1.92</td>
<td>0.85</td>
</tr>
<tr>
<td>Students with disabilities would have the opportunity to learn more in a classroom including both students with and students without disabilities than in a classroom including only students with disabilities.</td>
<td>1.94</td>
<td>0.95</td>
</tr>
<tr>
<td>Including students with disabilities in the general education classroom would be likely to help them achieve their desired outcomes.</td>
<td>1.94</td>
<td>0.90</td>
</tr>
<tr>
<td>Including students with disabilities in the general education classroom would likely reduce the amount of specialized support students with disabilities receive from teachers.</td>
<td>2.41</td>
<td>1.04</td>
</tr>
<tr>
<td>Students with disabilities would be more likely to be rejected by typical peers in classrooms that included both students with and students without disabilities.</td>
<td>2.69</td>
<td>1.11</td>
</tr>
<tr>
<td>Including students with disabilities in the general education classroom would provide diverse interactions that would lead to greater understanding and acceptance of differences.</td>
<td>2.70</td>
<td>0.75</td>
</tr>
<tr>
<td>Inclusion of students with disabilities in the general education classroom would be likely to have a negative effect on their emotional development.</td>
<td>2.71</td>
<td>1.09</td>
</tr>
<tr>
<td>Inclusion of students with disabilities in the general education classroom would be likely to have a negative impact on how they view themselves in relation to other children.</td>
<td>2.73</td>
<td>1.11</td>
</tr>
<tr>
<td>Including students with disabilities in the general education classroom would promote their social independence.</td>
<td>2.76</td>
<td>0.79</td>
</tr>
</tbody>
</table>
The three items in Table 4.7 with the lowest scores (with which the respondents agreed most strongly) were “The social skills of students with disabilities would be improved due to educating them in the general education classroom alongside typical peers “(M = 1.64); “Inclusion of students with disabilities in the general education classroom would be likely to enhance their acceptance by the community in general” (M = 1.70); and “Educating students with disabilities in the general education classroom alongside typical peers would allow them to develop their academic skills (M = 1.72).

The three items with the highest scores in Table 4.7 (with which the respondents agreed least strongly) were “Inclusion of students with disabilities in the general education classroom would be likely to have a negative effect on their emotional development” (M = 2.71); “Inclusion of students with disabilities in the general education classroom would be likely to have a negative impact on how they view themselves in relation to other children (M = 2.73); and “Including students with disabilities in the general education classroom would promote their social independence” (M = 2.76)

Table 4.8 presents the descriptive statistics for the 11 items used to measure the impact of inclusive education on students without disabilities. The respondents tended to agree with 10 of the items, reflected by mean scores < 3.0. The three items in Table 4.8 with the lowest scores (with which the respondents agreed most strongly) were “Including students with disabilities in the general education classroom would have a positive impact on the understanding and acceptance of differences of students without disabilities”; (M =1.70); Having regular contact with students with disabilities would be likely to help students without disabilities develop sensitivity to others (M = 1.75); and
“Students without disabilities are likely to benefit from including students with disabilities in the general education classroom” ($M = 2.00$).

Table 4.8 Descriptive Statistics for 11 items Used to Measure Impact on Students without Disabilities (N = 225)

<table>
<thead>
<tr>
<th>Item</th>
<th>$M$</th>
<th>$SD$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Including students with disabilities in the general education classroom would have a positive impact on the understanding and acceptance of differences of students without disabilities.</td>
<td>1.70</td>
<td>0.73</td>
</tr>
<tr>
<td>Having regular contact with students with disabilities would be likely to help students without disabilities develop sensitivity to others.</td>
<td>1.75</td>
<td>0.76</td>
</tr>
<tr>
<td>Students without disabilities are likely to benefit from including students with disabilities in the general education classroom.</td>
<td>2.00</td>
<td>0.96</td>
</tr>
<tr>
<td>If included in the general education classroom, the challenging behaviors of some students with disabilities might cause students without disabilities to be afraid.</td>
<td>2.56</td>
<td>1.07</td>
</tr>
<tr>
<td>In classrooms that included both students with and students without disabilities, students with disabilities would take up too much of the teacher's time and students without disabilities would not receive enough attention.</td>
<td>2.60</td>
<td>1.07</td>
</tr>
<tr>
<td>In classrooms that included both students with and students without disabilities, students without disabilities would not receive enough attention from the teachers because they would spend most of their time focusing on students with disabilities</td>
<td>2.64</td>
<td>1.07</td>
</tr>
<tr>
<td>In classrooms that included both students with and students without disabilities, students without disabilities might be overlooked because students with disabilities require more skills and effort.</td>
<td>2.64</td>
<td>1.05</td>
</tr>
<tr>
<td>If included in the general education classroom, students with disabilities might do things that caused injuries to students without disabilities.</td>
<td>2.72</td>
<td>1.07</td>
</tr>
<tr>
<td>In classrooms that included both students with and students without disabilities, the needs of students with disabilities for special materials and equipment would be so great that the students without disabilities would not get their fair share</td>
<td>2.74</td>
<td>1.09</td>
</tr>
<tr>
<td>In classrooms that included both students with and students without disabilities, students without disabilities would copy students with disabilities and learn negative behaviors from them.</td>
<td>2.80</td>
<td>1.08</td>
</tr>
<tr>
<td>Including students with disabilities in the general education classroom could slow down learning for students without disabilities.</td>
<td>3.25</td>
<td>1.08</td>
</tr>
</tbody>
</table>
The three items with the highest scores in Table 4.8 (with which the respondents agreed least strongly) were “In classrooms that included both students with and students without disabilities, the needs of students with disabilities for special materials and equipment would be so great that the students without disabilities would not get their fair share” ($M = 2.74$); “In classrooms that included both students with and students without disabilities, students without disabilities would copy students with disabilities and learn negative behaviors from them ($M = 2.80$); and “Including students with disabilities in the general education classroom could slow down learning for students without disabilities ($M = 3.25$).

Table 4.9 presents the descriptive statistics for five items used to measure the impact of inclusive education on parents of students with disabilities. Table 4.10 presents the descriptive statistics for four items used to measure impact on parents of students without disabilities. The respondents consistently agreed with all of the items ($M < 3.0$).

Table 4.9 Descriptive Statistics for Five Items Used to Measure Impact on Parents of Students with Disabilities (N = 225)

<table>
<thead>
<tr>
<th>Item</th>
<th>$M$</th>
<th>$SD$</th>
</tr>
</thead>
<tbody>
<tr>
<td>If students with disabilities were included in the general education classroom, their families would have to adapt more than the families of students without disabilities.</td>
<td>1.93</td>
<td>0.73</td>
</tr>
<tr>
<td>Including students with disabilities in the general education classroom would help families of students with disabilities learn more about normal child development.</td>
<td>1.96</td>
<td>0.82</td>
</tr>
<tr>
<td>If students with disabilities were included in the general education classroom, families of students with disabilities would feel misunderstanding or lack of concern from families of students without disabilities.</td>
<td>2.66</td>
<td>0.92</td>
</tr>
</tbody>
</table>
Table 4.9 (continued)

If students with disabilities were included in the general education classroom, families of students with disabilities would be more likely to notice and be upset by differences between their child and typically developing children.  

<table>
<thead>
<tr>
<th>Item</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>If students with disabilities were included in the general education classroom, the families of students without disabilities would create feelings of exclusion towards their families.</td>
<td>2.77</td>
<td>1.02</td>
</tr>
</tbody>
</table>

Table 4.10 Descriptive Statistics for 4 items Used to Measure Impact on Parents of Students without Disabilities (N = 225)

<table>
<thead>
<tr>
<th>Item</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families of students without disabilities in classrooms that included both students with and students without disabilities would be more likely to understand what it is like for families of students with disabilities.</td>
<td>1.84</td>
<td>0.75</td>
</tr>
<tr>
<td>Families of students without disabilities in classrooms that included both students with and students without disabilities would be more likely to understand children with disabilities.</td>
<td>1.86</td>
<td>0.74</td>
</tr>
<tr>
<td>There would be increased levels of discomfort experienced by families of students without disabilities in classrooms that included both students with and students without disabilities.</td>
<td>2.71</td>
<td>1.02</td>
</tr>
<tr>
<td>Families of students without disabilities in classrooms that included both students with and students without disabilities would feel uncomfortable being around families of student with disabilities.</td>
<td>2.88</td>
<td>1.01</td>
</tr>
</tbody>
</table>

The item in Table 4.9 with the lowest score (with which the respondents agreed most strongly) was “If students with disabilities were included in the general education classroom, their families would have to adapt more than the families of students without disabilities” (M = 1.93). The item in Table 4.9 with the highest score (with which the respondents agreed least strongly) was “If students with disabilities were included in the general education classroom, the families of students without disabilities would create feelings of exclusion towards their families” (M = 2.77).
The item in Table 4.10 with the lowest score (with which the respondents agreed most strongly) was “Families of students without disabilities in classrooms that included both students with and students without disabilities would be more likely to understand what it is like for families of students “($M = 1.84$). The item in Table 4.10 with the highest score (with which the respondents agreed least strongly) was “Families of students without disabilities in classrooms that included both students with and students without disabilities would feel uncomfortable being around families of student with disabilities ($M = 2.88$).

4.2.4 Comparison of Respondents’ Perspectives by Disability of Child

This section presents the results of ANOVA to address RQ2: Are there significant differences in the respondents’ perspectives towards inclusive education between parents of students with disabilities and parents of students without disabilities? Table 4.11 summarizes the descriptive statistics, $F$ test statistics, and $p$ values. Levene’s tests indicated that the data did not violate the assumption of equality of variance ($p > .05$).

<table>
<thead>
<tr>
<th>Group</th>
<th>Statistics</th>
<th>DV1</th>
<th>DV2</th>
<th>DV3</th>
<th>DV4</th>
<th>DV5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child with disability</td>
<td>$M$</td>
<td>2.03</td>
<td>2.18</td>
<td>2.65</td>
<td>2.49</td>
<td>2.39</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.67</td>
<td>0.43</td>
<td>0.57</td>
<td>0.58</td>
<td>0.58</td>
</tr>
<tr>
<td>Child without disability</td>
<td>$M$</td>
<td>2.27</td>
<td>2.19</td>
<td>2.42</td>
<td>2.37</td>
<td>2.29</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.58</td>
<td>0.44</td>
<td>0.65</td>
<td>0.60</td>
<td>0.56</td>
</tr>
<tr>
<td>ANOVA</td>
<td>$F (1, 221)$</td>
<td>7.80</td>
<td>0.01</td>
<td>6.43</td>
<td>2.03</td>
<td>1.51</td>
</tr>
<tr>
<td></td>
<td>$p$</td>
<td>0.006*</td>
<td>0.943</td>
<td>0.012*</td>
<td>0.156</td>
<td>0.220</td>
</tr>
<tr>
<td>Levene’s Test</td>
<td>$p$</td>
<td>.315</td>
<td>.727</td>
<td>.130</td>
<td>.421</td>
<td>.652</td>
</tr>
</tbody>
</table>

Note * Significant difference between groups ($p < 05$). DV1 Attitudes; DV2 Impact on students with disabilities; DV3 Impact on students without disabilities; DV4 Impact on
parents of students with disabilities; DV5 Impact on parents of student without disabilities

The mean scores for Attitudes (DV1) and Impact on students without disabilities (DV3) were significantly different ($p < .05$) with respect to the parents of students with disabilities vs. the parents of respondents of students without disabilities. The parents of SWDs tended to agree more to the items measuring Global Attitudes ($M = 2.03$) than the parents of students without ($M = 2.27$). In other words, parents who had children with disabilities tended to agree more that children should be attending classes with students without disabilities in general. However, on the impact measure on students without disabilities, the parents of SWDs also tended to agree less ($M = 2.65$) that inclusion would have a positive impact on students without disabilities than the parents of students without disabilities ($M = 2.42$). In other words, parents of SWDs tended to be more guarded than parents of students without in their perspectives on the positive impact that inclusion might have on typically developing students.

4.2.5 Comparison of Perspectives of Respondents by Severity of Disability

This section presents the results of ANOVA to address RQ3: Are there significant differences in the respondents’ perspectives towards the impact of inclusion on students with disabilities based on the severity of the disability? Table 4.12 summarizes the descriptive statistics, $F$ test statistics, and $p$ values. Levene’s test indicated that the assumption of equality of variance was not violated ($p > 0.01$).
Table 4.12 Comparison of Dependent Variables by Severity of Disability (N = 225)

<table>
<thead>
<tr>
<th>Severity</th>
<th>Statistics</th>
<th>DV1</th>
<th>DV2</th>
<th>DV3</th>
<th>DV4</th>
<th>DV5</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>M</td>
<td>2.28</td>
<td>2.18</td>
<td>2.42</td>
<td>2.36</td>
<td>2.29</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>0.58</td>
<td>0.44</td>
<td>0.64</td>
<td>0.60</td>
<td>0.56</td>
</tr>
<tr>
<td>Mild</td>
<td>M</td>
<td>1.98</td>
<td>2.11</td>
<td>2.74</td>
<td>2.44</td>
<td>2.58</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>0.46</td>
<td>0.47</td>
<td>0.50</td>
<td>0.54</td>
<td>0.35</td>
</tr>
<tr>
<td>Moderate</td>
<td>M</td>
<td>1.95</td>
<td>2.19</td>
<td>2.65</td>
<td>2.50</td>
<td>2.32</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>0.66</td>
<td>0.38</td>
<td>0.60</td>
<td>0.64</td>
<td>0.70</td>
</tr>
<tr>
<td>Severe</td>
<td>M</td>
<td>2.44</td>
<td>2.37</td>
<td>2.55</td>
<td>2.64</td>
<td>2.36</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>1.00</td>
<td>0.52</td>
<td>0.61</td>
<td>0.42</td>
<td>0.31</td>
</tr>
</tbody>
</table>

ANOVA

|          | $F(3,221)$ | 4.27| 0.75| 2.64| 1.06| 1.53|
|          | $p$        | .006*| .525| .050| .367| .208|

Levene’s test

|          | .011| .554| .406| .663| .139|

Note * Significant difference between groups ($p < .05$).

DV1 Attitudes; DV2 Impact on students with disabilities; DV3 Impact on students without disabilities; DV4 Impact on parents of students with disabilities; DV5 Impact on parents of student without disabilities.

The mean score for Attitudes (DV1) was significantly different ($p < .05$) with respect to the severity of the students’ disabilities. The parents of students with severe disabilities tended to agree less strongly to the items ($M = 2.44$) than the parents of students with moderate disabilities ($M = 1.95$) or mild disabilities ($M = 1.98$). In other words, parents of students with severe disabilities tended to be more cautious in their agreement with positive statements about inclusion than parents of students with mild or moderate disabilities.

4.2.6 Comparison of Respondents’ Perspectives by Type of Disability

This section presents the results of ANOVA to address RQ4: Are there significant differences in the respondents’ perspectives towards the impact of inclusion on students with disabilities based on the type of child disability? Table 4.13 summarizes the
descriptive statistics, $F$ test statistics, and $p$ values. Levene’s test indicated that one variable (DV5) violated the assumption of equality of variance ($p < .001$).

Table 4.13 Comparison of Dependent Variables by Type of Disability (N = 225)

<table>
<thead>
<tr>
<th>Disability</th>
<th>Statistics</th>
<th>DV1</th>
<th>DV2</th>
<th>DV3</th>
<th>DV4</th>
<th>DV5</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>$M$</td>
<td>2.28</td>
<td>2.18</td>
<td>2.42</td>
<td>2.37</td>
<td>2.29</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.58</td>
<td>0.44</td>
<td>0.65</td>
<td>0.61</td>
<td>0.56</td>
</tr>
<tr>
<td>Autism Spectrum Disorder</td>
<td>$M$</td>
<td>1.84</td>
<td>2.01</td>
<td>2.70</td>
<td>2.46</td>
<td>2.41</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.52</td>
<td>0.30</td>
<td>0.48</td>
<td>0.54</td>
<td>0.37</td>
</tr>
<tr>
<td>Learning Disability</td>
<td>$M$</td>
<td>2.18</td>
<td>2.01</td>
<td>2.40</td>
<td>2.23</td>
<td>2.31</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.58</td>
<td>0.60</td>
<td>0.45</td>
<td>0.70</td>
<td>0.65</td>
</tr>
<tr>
<td>Intellectual Disability</td>
<td>$M$</td>
<td>2.24</td>
<td>2.37</td>
<td>2.54</td>
<td>2.48</td>
<td>2.24</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.82</td>
<td>0.49</td>
<td>0.46</td>
<td>0.36</td>
<td>0.47</td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td>$M$</td>
<td>2.19</td>
<td>2.39</td>
<td>2.82</td>
<td>2.74</td>
<td>2.68</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.74</td>
<td>0.21</td>
<td>0.46</td>
<td>0.41</td>
<td>0.28</td>
</tr>
<tr>
<td>Deafness</td>
<td>$M$</td>
<td>1.63</td>
<td>2.19</td>
<td>2.94</td>
<td>2.63</td>
<td>2.63</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.57</td>
<td>0.39</td>
<td>1.04</td>
<td>1.22</td>
<td>1.39</td>
</tr>
<tr>
<td>Visual Impairment</td>
<td>$M$</td>
<td>2.27</td>
<td>1.87</td>
<td>1.95</td>
<td>2.00</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.16</td>
<td>0.38</td>
<td>0.45</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Other</td>
<td>$M$</td>
<td>1.83</td>
<td>2.20</td>
<td>2.98</td>
<td>2.73</td>
<td>2.54</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.59</td>
<td>0.23</td>
<td>0.67</td>
<td>0.45</td>
<td>0.33</td>
</tr>
<tr>
<td>ANOVA</td>
<td>$F (7, 217)$</td>
<td>2.45</td>
<td>1.55</td>
<td>2.14</td>
<td>1.10</td>
<td>1.05</td>
</tr>
<tr>
<td></td>
<td>$p$</td>
<td>.020*</td>
<td>.152</td>
<td>.041*</td>
<td>.367</td>
<td>.393</td>
</tr>
<tr>
<td>Levene’s Test</td>
<td>$p$</td>
<td>.369</td>
<td>.180</td>
<td>.344</td>
<td>.030</td>
<td>&lt;.001</td>
</tr>
</tbody>
</table>

Note * Significant difference between groups ($p < .05$). DV1 Attitudes; DV2 Impact on students with disabilities; DV3 Impact on students without disabilities; DV4 Impact on parents of students with disabilities; DV5 Impact on parents of student without disabilities.

The mean scores for Attitudes (DV1) and Impact on students without disabilities (DV3) were significantly different ($p < .05$) with respect to the type of disability. The parents of students without disabilities and Visual Impairment tended to agree least to the items measuring Global Attitudes ($M = 2.28$ and $2.27$, respectively). Parents of children with deafness ($M = 1.63$) and Autism Spectrum Disorder ($M = 1.84$); tended to agree

66
least strongly that inclusion would have a positive impact on students without disabilities.

In other words, parents of children with deafness and Autism Spectrum Disorders held more cautious views about the potential benefits of inclusion for students without disabilities.

4.2.7 Comparison of Respondents’ Perspectives by Gender of Child

This section presents the results of ANOVA to address RQ5: Are there significant differences in the respondents’ perspectives towards the impact of inclusion on students with disabilities based on the gender of the child? Table 4.14 summarizes the descriptive statistics, $F$ test statistics, and $p$ values. Levene’s test indicated that the assumption of equality of variance was not violated ($p > 0.01$).

<table>
<thead>
<tr>
<th>Group</th>
<th>Statistics</th>
<th>DV1</th>
<th>DV2</th>
<th>DV3</th>
<th>DV4</th>
<th>DV5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>$M$</td>
<td>2.23</td>
<td>2.19</td>
<td>2.48</td>
<td>2.42</td>
<td>2.29</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.61</td>
<td>0.42</td>
<td>0.64</td>
<td>0.62</td>
<td>0.59</td>
</tr>
<tr>
<td>Female</td>
<td>$M$</td>
<td>2.17</td>
<td>2.16</td>
<td>2.52</td>
<td>2.43</td>
<td>2.40</td>
</tr>
<tr>
<td></td>
<td>$SD$</td>
<td>0.66</td>
<td>0.48</td>
<td>0.64</td>
<td>0.55</td>
<td>0.46</td>
</tr>
<tr>
<td>ANOVA</td>
<td>$F (1, 212)$</td>
<td>0.46</td>
<td>0.17</td>
<td>0.27</td>
<td>0.01</td>
<td>1.70</td>
</tr>
<tr>
<td></td>
<td>$p$</td>
<td>.495</td>
<td>.682</td>
<td>.604</td>
<td>.910</td>
<td>.193</td>
</tr>
<tr>
<td>Levene’s Test</td>
<td></td>
<td>.519</td>
<td>.263</td>
<td>.899</td>
<td>.494</td>
<td>.037</td>
</tr>
</tbody>
</table>

Note * Significant difference between groups ($p < .05$). DV1 Attitudes; DV2 Impact on students with disabilities; DV3 Impact on students without disabilities; DV4 Impact on parents of students with disabilities; DV5 Impact on parents of student without disabilities

The mean scores for all of the dependent variables (DV1, DV2, DV3, DV4, and DV5) were not significantly different ($p > .05$) with respect to the gender of the child.
Therefore, there respondents’ perspectives did not appear to vary according to whether their child was male or female.

### 4.2.8 Comparison of Respondents’ Perspectives by Level of Education

This section presents the results of ANOVA to address RQ6: Are there significant differences in the respondents’ perspectives towards the impact of inclusion on students with disabilities based on the level of education of the child. Table 4.15 summarizes the descriptive statistics, $F$ test statistics, and $p$ values. Levene’s test indicated that the assumption of equality of variance was not violated ($p > 0.05$).

<table>
<thead>
<tr>
<th>Table 4.15 Comparison of Dependent Variables by Level of Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level</td>
</tr>
<tr>
<td>Elementary school</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Middle school</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>High school</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>ANOVA</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Levene’s test</td>
</tr>
</tbody>
</table>

Note * Significant difference between groups ($p < 0.05$). DV1Attitudes; DV2 Impact on students with disabilities; DV3 Impact on students without disabilities; DV4 Impact on parents of students with disabilities; DV5 Impact on parents of student without disabilities

The mean score for Attitudes (DV1) was significantly different ($p < .05$) with respect to the level of education of the children. The parents of students at middle school tended to agree more strongly to the items ($M = 1.91$) than the parents of students at elementary school ($M = 2.25$) or high school ($M = 2.23$). This means that parents of
middle schoolers held more positive views about potential inclusion than parents of either elementary or high schoolers.

4.3 Qualitative Analysis

The final section presents the results of the categorical analysis of 56 statements extracted from responses to the open-ended question “As a parent, are there any suggestions or feedback that you would like to put forward with regards to the education of students with disabilities in public schools, whether in the same classroom or a separate one?” Five emergent categories were identified as summarized in Table 4.16.

<table>
<thead>
<tr>
<th>Emergent Category</th>
<th>Number of significant statements</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Support for inclusive education</td>
<td>19</td>
<td>33.9%</td>
</tr>
<tr>
<td>2. No support for inclusive education</td>
<td>3</td>
<td>5.4%</td>
</tr>
<tr>
<td>3. Depends on each individual case</td>
<td>15</td>
<td>26.8%</td>
</tr>
<tr>
<td>4. Special education teachers</td>
<td>15</td>
<td>26.8%</td>
</tr>
<tr>
<td>5. Accessible schools</td>
<td>4</td>
<td>7.1%</td>
</tr>
</tbody>
</table>

The first category, support for inclusive education, contained the greatest number of statements, covering 33.9% of the total. This category was classified as “Support for Inclusive Schools” because the 19 respondents all endorsed the positive aspects of inclusive education (corroborating the high level of agreement to the items measured previously using Likert scales). This theme was exemplified by “I am a mother of a child with severe disability and I am a strong advocate for him to be included.” Only three respondents did not support inclusive education for their children, indicated by the statements classified by Category 2: “I do not support inclusive education.” Category 3, with 15 statements, represents 26.8% of the total, classified as “Depends on each case.”
The 15 respondents suggested that each case must be considered individually, for example “If the disability is simple, the student studies with his peers”; “I think it depends on the culture of the teacher and ordinary students and their families on this subject”; “Inclusion is excellent but for simple situations and not all cases”; and “Depends on the type and degree of disability. Some cases cannot be integrated and need [separate] classes”. Category 4, with 15 statements, represents 26.8% of the total, classified as “Special education teacher”. All these respondents suggested the need for special education teachers, exemplified by “The provision of assistant teachers within the classroom (special education specialist)”; “Joining an assistant teacher to the main teacher will help facilitate the task of teachers, and increase the attention for ordinary students and those in need of care”; and “Please assign the task of educating people with disabilities to a specialized teacher”. Category 5, with 4 statements, represents 7.4% of the total, classified as “Accessible Schools”. These respondents suggested the need for schools to be configured specifically for SWDs, with respect to buildings, resources, and infrastructure.

One of the ways the qualitative responses have been used is as a means of supplementing and understanding quantitative data. A fuller discussion of qualitative responses is woven through discussion of quantitative data in the treatment of each research question in the following chapter.
CHAPTER 5. DISCUSSION

The goal of this study was to examine the perspectives of KSA parents of children with and without disabilities toward inclusion of SWDs using quantitative research methods. The study examined parents’ perspectives regarding inclusion in general and across four specific dimensions of inclusive practice, including impact on students without disabilities, impact on students with disabilities, impact on parents of students with disabilities, and impact on parents of students without disabilities. The study sought to answer questions about differences in parents’ perspectives based on five variables: whether the parent is the parent of a student with disabilities or the parent of a student without disabilities; severity of students’ disabilities; type of students’ disabilities; gender of the child; and academic level of the child. Additionally, the study sought to answer questions about differences in the respective impact of these variables and to determine which variables have the most significant role in shaping perspective toward inclusion. Although the methods of the study were quantitative, it also at times has drawn upon limited qualitative analysis of a single open-ended questionnaire item to supplement and explain aspects of the quantitative data. This chapter examines the findings of the study at greater length and in conversation with existing literature, presenting key findings and implications. The chapter discusses limitations of the study and recommendations based on its findings.
5.1 RQ1: What are parents’ perspectives regarding inclusive education of students with disabilities in KSA?

This study sought to understand parents’ relative perspectives on including SWDs in the general education classroom. The first research question was designed to explore the global perspectives towards inclusion of KSA parents of students with and without disabilities. The question sought to examine global perspectives both as valuable data in itself and as a baseline from which to understand divergences between global perspective and perspectives on the impact of inclusion within specific measures.

Previous studies have shown that parents with generally positive perspectives regarding inclusion sometimes demonstrate less support on impact scales measuring perceived benefits for SWDs and typical peers (Sosu & Rydzewska, 2017). In other words, parents with positive perspectives about inclusion in general sometimes became more cautious when asked about the specific benefits or challenges inclusion might present for students with or without disabilities. The current study found similar patterns of difference between stronger global perspectives on inclusion than within specific measures of impact, including impact on students without disabilities, impact on parents of students with disabilities, and impact on parents of students without disabilities. Interestingly, the current study found that on the measure of impact on students with disabilities, respondents were slightly more likely to agree that it would have a positive impact than within the global perspectives measure.

The first findings of the study show that parents hold generally positive perspectives regarding inclusion, but that these perspectives are often dependent on the severity and type of disability, as well as the training and staffing of qualified teachers
and accessible school environments. In general, perspectives among both parents of students with and without disabilities were supportive of inclusion, indicating broad support in terms of global perspective, perspective of potential positive impact on SWDs, perspective on potential positive impact on students without disabilities, perspective on potential positive impact on families of SWDs, and perspective on potential positive impact on families of students without disabilities.

Like previous studies, however, the current study indicates that both parents with and without SWDs expressed concerns regarding the preparation and provisioning of qualified teachers and paraprofessionals as a key factor in the success of inclusion (Stevens & Wurf, 2018). Similarly to published findings of the PATI survey in other settings (Hilbert, 2009; Rafferty et al., 2001), respondents had concerns about the preparedness of teachers to instruct SWDs and students without disabilities in an inclusive general education classroom. Perspectives of the current study, however, placed greater and more strenuous emphasis upon concerns related to teacher preparedness, classroom accessibility, and classroom staffing.

One of the ways in which qualitative responses have been used to extend quantitative data is to understand the process of reasoning behind positions for or against inclusion, and indeed a majority of responses indicated suggestions for factors that would need to be in place for inclusion to be successful. The majority of responses, consistent with quantitative data, reflected attitudes in support of or open to the possibility of inclusion. Among these, however, few reflected unqualified support for inclusion without a discussion of supports needs (for inclusion to be successful) or further qualifications in terms the SWD’s characteristics (such as severity or type of disability). At the same time,
the consistency and strength of concerns related to teacher preparedness and whole school culture must be emphasized. One parent of child with a disability described herself as “a strong advocate for inclusion,” but wrote, “I would not think of entering my son in the integrated schools, at least in our current situation. There need to be standards for the accessibility of integrated buildings and training for principals and teachers.” Another parent, however, noted intensely negative experiences with a special education school (“I have suffered with my child when he was in special centers”) as a way to frame the improvement she has experienced since her child transferred to an integrated school (“I did not see improvements in his social behavior until after he was studying in a normal school”).

5.2 RQ2: Are there significant differences in parents’ perspectives towards inclusive education between parents of students with disabilities and parents of students without disabilities in KSA?

The second research question was designed to explore differences in perspective towards inclusion between parents of SWDs and parents of students without disabilities. The question sought to understand to what degree this factor influenced perspectives, both globally and within specific impact measures. There were significant differences in perspective between parents of students with and without disabilities in terms of global perspective towards inclusion and impact on students without disabilities, with no significant differences in measures of impact on parents and near-equality in terms of impact on SWDs. Stevens and Wurf (2018) demonstrated that parents both with and without SWDs held generally positive global attitudes toward inclusion. The results of
the present study also demonstrated generally positive global attitudes towards inclusion, with stronger views held by parents of SWDs, consistent with previous studies.

Some previous studies have demonstrated that parents of children with disabilities often indicate more mixed attitudes and indecision about whether inclusion is a good option for their child. A literature review by Boer, Pijl, and Minnaert (2010) found that parents of SWDs often held more ambivalent views of inclusion, especially in terms of perspectives regarding impact on SWDs in social dimensions. Although parents of students without disabilities were likely to have positive perspectives regarding potential inclusion and in terms of impact across all dimensions, this study found that they were less likely than parents of SWDs to express strong agreement and more likely to express tentative or partial agreement with survey items across all measures.

In response to the second research question, the current study found statistically significant differences between parents of SWDs and parents of students without on specific measures of perspective. Although both parents with and parents without indicated generally supportive global views towards inclusion, parents of SWDs tended to agree more strongly with statements supportive of inclusion than parents of students without disabilities. Both groups indicated generally positive and roughly equivalent perspectives regarding the impact of inclusion on SWDs. However, interesting exceptions appeared on impact on students without disabilities, where parents of SWDs actually held more guarded views than parents of students without disabilities. Differences in specific items in the measure allow some speculation as to the reasons for this difference. Although items explored parents’ perspectives across social and academic dimensions of impact on students without disabilities, parents of students without disabilities were less
likely than parents of SWDs to agree with statements about the potential negative social impact on students without disabilities and slightly more likely to agree with statements about potential academic impact. In other words, parents of SWDs were more concerned about the negative social impact inclusion might have on typical students. Despite the fact that the measure focuses on the impact on students without disabilities, it is possible to speculate that the concerns of parents of SWDs about the potential negative social impact could be a roundabout or defensive means of expressing concerns about the social acceptance and integration of their own children.

Several of the open-ended responses from parents of SWDs followed this pattern, in which a parent of an SWD presented concerns or reservations about inclusion in terms of its potential impact on students without disabilities. One mother of an SWD wrote, “If they [SWDs] are integrated in the general classroom, the other students [without disabilities] would acquire bad behaviors they didn’t have before.” Ultimately, however, the respondent explains her concern for the “bad behaviors” that would be picked up by students without disabilities in terms of her own experience with her son in an integrated setting, where “he was exposed to hurtful words that made him despise himself.”

Whereas this parent was concerned with the impact of inclusion on students without disabilities at least in part based on the eventual impact it might have in terms of the social rejection of SWDs, several parents of students without disabilities reasoned that students without disabilities would gain something from helping SWDs: “My suggestion is that among the benefits of inclusion would be the education of students who help those with disabilities.”
Relative to the original PATI questionnaire, results of the adapted PATI in this new context bore striking overlaps and similarities with the results of the original, as well as suggestive differences. The original PATI questionnaire targeted 244 parents of students with and without disabilities in a specific inclusive preschool program in the United States. Both samples on average reported positive global perspectives towards inclusion, perceived positive impacts of inclusion on both SWDs and typical students and their families. Additionally, while the original study reported no statistically significant difference between parents of typically developing children and parents of children with disabilities, the present study found consistent and statistically significant differences between the parents of students with and students without disabilities across all measures.

5.3 RQ3: Are there significant differences in parents’ perspectives towards inclusive education based on the severity of their child’s disability in KSA?

The third research question sought to understand the relationship between parents’ perspectives regarding inclusion and the severity of disability. In the measure of global perspectives, parents of students with mild and moderate disabilities held the strongest views in favor of inclusion, while parents of students without disabilities and parents of students with severe disabilities held less strongly positive views. Parents of students with severe disabilities expressed the least agreement with statements supportive of inclusion.

Several previous studies have shown severity of disability to be a significant factor influencing perspectives on inclusion, which guided the current study to quantify whether KSA parents held different perspectives based on severity. Leyser and Kirk
(2004)) found that parents holding generally positive perspectives regarding inclusion held less accepting views of severe and moderate disabilities. Likewise, in a 190-parent attitude survey by Boer and Munde (2015) found that attitudes towards inclusion scaled downward with increasing severity of disability, with the most open and positive views towards mild and the most guarded and negative views towards severe. In a survey of parents of SWDs, Leyser and Kirk (2004) found that parents in non-inclusive environments tended to articulate their concerns about possible inclusion in terms of social isolation, academics and individualized instruction, and stigmatization from teachers or parents of typically developing peers.

Although the number of open-ended responses from parents with different severities of disability is too few to use as an interpretive lens for quantitative responses, these responses are nonetheless striking and instructive. Parents of mild, moderate, and severe disabilities all tended to focus on supports for inclusion in their open-ended responses, and yet the difference in tone when moving from mild to severe is striking. The nine open-ended responses from parents of students with mild disabilities echoed similar supports-focused content as responses from parents of students with moderate and severe disabilities, including instructional methods, school culture, social integration, teacher preparation, and the provision of assistant teachers and paraprofessionals. The tone of these comments was, however, remarkably different. Two parents of children with mild disabilities expressed the desire for inclusion to be expanded in hopeful terms (“I hope to see inclusive schools in every region”; “I hope that disabled people will be integrated with normal children”). Two parents of student with mild disabilities described the positive impact specific supports might have on SWDs (“…appoint a student or
students to help the person with the disability... and he will feel interested and included in the community”; “… joining an assistant teacher to the main teacher will help facilitate the task of teachers and increase attention for both ordinary students and those in need of care”). Another parent described, “including students who are interested in it with ordinary students at times or fun, art, and eating.”

Contrast the focus on the positive possibility of inclusion from these responses with the tone and focus of several comments from parents of students with moderate and severe disabilities. Where the handful of comments from parents of students with mild disabilities tended to be hopeful and possibility-focused, even those open-ended responses from parents with moderate or severe disabilities that expressed qualified support for inclusion were far more likely to do so in terms of concern, caution, or anger. One parent “demand[ed]” that “teachers be trained to understand the differences between slow and learning disabilities.” The mother of a student with a moderate disability described the need “to develop programs suitable for them” after describing how she, “suffered with [her] son and stood up to the teachers.” The parent of a student with a severe disability framed the need for inclusion supports in terms of concern for the safety of SWDs by saying, “they [the schools] need to increase the number of staff at recess and other times to make sure they [SWDs] are safe.” Another parent of a student with a severe disability emphasized the strength of his suggestion with three exclamation points: “Evaluate every situation!!! Is it possible to include or not?”

The results of this study are consistent with the findings of previous studies, which have shown that parents tend to more guarded views of inclusion for severe disabilities and certain types of disability. One possible reason for this is that parents of
students with severe disabilities have legitimate concerns about increased needs to specialized instruction and supports for their child in a general education classroom. They may also have greater concerns about the social acceptance of their children in general education classrooms and fear of stigmatization. In more practical terms, the inclusion of students with severe disabilities, for both parents with and without SWDs, is simply further from the realm of everyday experience than the inclusion of students with mild disabilities. Students with mild and moderate disabilities have begun being integrated in KSA schools. Therefore, the move from integration to inclusion, for these students, is shorter than for students with severe disabilities in the minds and experiences of these parents.

5.4 RQ4: Are there significant differences in parents’ perspectives towards inclusive education based on the type of their child’s disability in KSA?

The fourth research question explored the relationship between parents’ perspectives towards inclusion and type of disability. There were significant differences in parents’ perspectives based on type of disability. Significant differences appeared in the measure of global perspective. The measure of impact on students without disabilities also showed differences by type of disability, with parents of students without disabilities and parents of students with Visual Impairment agreeing least strongly and parents of students with deafness and parents of students with ASD agreeing most strongly that inclusion would have a positive impact on students without disabilities.

These findings revealed an interesting split in perspectives on the basis of whether the variables were conceptualized as pertaining to one’s own child, or the strength of
relationship between the type of disability of a parent’s own child and the parent’s perspectives on inclusion; or conceptualized as pertaining to a hypothetical student of a given type of disability. The findings both reinforce and complicate what has been found in other contexts. For example, while parents of students with deafness and ASD agreed most strongly that inclusion would have a positive impact on students with disabilities, parents in general responded to the measure of attitudes based on type of disability with some of the lowest average agreement that inclusion would benefit students with ASD or deafness. By type of disability, only ID returned a lower average perception of potential benefit than ASD or deafness.

5.5 RQ5: Are there significant differences in parents’ perspectives towards inclusive education based on the gender of their child in KSA?

Research question five asked if gender was a significant factor in parental perspective towards inclusion. The study found no significant relationship between the gender of the child and parent’s perspective on inclusion. This result is more meaningful than it might first appear. The educational system of KSA is, at least at present, gender segregated in all its dimensions. Girls attend all-girl schools and study a gender-specific curriculum under the guidance of female teachers (Alsuwaida, 2016). Therefore, the finding that parents of both boys and girls share similar average perspectives on inclusive education is quite significant, in that it demonstrates common ground that bridges the gender-segregated education gap.
5.6 RQ6: Are there significant differences in parents’ perspectives towards inclusive education based on the academic level of their child in KSA?

The sixth research question examined the relationship of parents’ perspectives towards inclusion and the academic level of their children. It sought to identify if parents held more or less positive perspectives of inclusion at the elementary, middle, or high school levels. Parents of children at different academic levels had different perspectives on inclusion. These differences were statistically significant in terms of their general perspectives, but not in terms of how they viewed the potential impact of inclusion on parents or students with or without disabilities.

Interestingly, parents of children at the middle school level were more likely to have stronger positive global perspectives, while parents of children at both the elementary and high school level shared similar average responses. Previous studies have tended to find stronger positive perspectives of inclusion for parents of younger children at the elementary level (Leyser & Kirk, 2004). On the one hand, the more positive perspectives held by parents of middle school children might be explained by another, overlapping factor, such as school setting or experiences with SWDs.

On the other hand, the open-ended responses contained several rationales for or against inclusion that touched on the question of academic level. The parent of an elementary school SWD specifically reasoned against inclusion at the elementary level for students with deafness, but for it at the middle and high school levels: “What benefit does inclusion offer deaf students at the elementary level? Developing their sign language at the elementary level will allow them to benefit from inclusion at the middle and high school levels.” Another parent of an elementary school child without wrote, “From my
point of view, they [students with disabilities] should be separated in the early stages of their education, because the other children are not aware of their condition. However, the middle stages must be integrated.” These were, in fact, the only two responses that rationalized an approach to inclusion that specifically addressed academic level.

Although these qualitative data are far too few to generalize to an understanding of the quantitative data, nonetheless they are instructive and may allow speculation on why this finding occurred. In the first case, the parent indicates a negative view of inclusion at the elementary school level based on a relatively specific and narrow type of disability. The parent indicates a negative view of inclusion at the elementary level, but in fact has in mind the specific situation of students with deafness. The second response is particularly instructive, as it seems to spring from a highly specific conceptualization of disability. It could be that this parent perceives disability as a medical condition, perhaps believing that “their condition” is a mature or negative topic that perhaps children should not be exposed to or have to deal with at a young age.

5.7 Limitations: Comparison with PATI

The original PATI questionnaire targeted a significantly different sample than that of the adapted questionnaire in this study. Specifically, the original PATI questionnaire targeted 244 parents of students with and without disabilities in a specific inclusive preschool program in the United States. The present study’s sampling method ranged more widely, both in terms of utilizing a random sampling frame rather than relying on participants in a specific program and in terms of breadth of academic level and educational setting. This study developed a sample spanning educational levels (i.e., elementary, middle, and high school) as well as educational settings (i.e., special
education schools, integrated public schools, and non-integrated public schools).

Although the sample size was greater than that of the original PATI survey, the greater breadth means that the data are both more generalizable while also allowing fewer insights into the specifics of perspectives related to specific academic levels or educational settings. Another limitation in relation to the original PATI survey and in general is the inability of this study to calculate response rate. The researcher relied on the nature and structure of Ministry of Education databases to reach the intended number and strata of schools. However, for this reason the researcher had to rely on school administrators and teachers to distribute links to the Qualtrics survey, making it impossible to calculate exact response rates. Perhaps the greatest divergence in application of the PATI survey was the move from quantifying perspectives regarding inclusion in a setting where it had already been introduced, and therefore respondents had some lived experience upon which to base their responses, to quantifying perspectives toward inclusion in non-inclusive settings where respondents were asked about their perspectives regarding a hypothetical inclusive setting.

A limitation in the generalizability of the study’s findings relates to its geographical scope. The sample was drawn from Ministry of Education databases, which provided access to three geographical regions where infrastructure, data, and public schools are most developed. The study cannot speak to the population in general or the perspectives of Saudis in rural or underdeveloped areas. Additionally, the study too-narrowly conceptualized certain aspects of respondent demographics, such as relationship of respondents to the child, in a way that closed off areas of potential significance. For example, the question, “Relation to child of the person completing the questionnaire?”
offered only the options for Mother, Father, Primary caretaker, or no response. This conceptualized gender of respondents too narrowly in terms of mother and father, not allowing it to search for insights into relationship between the gender of respondents and perspectives on inclusion that cut across the category of primary caretaker, as well. The study could not distinguish the gender of the 24.9% of respondents who answered, “Primary caretaker.” Areas for future research include research into rural disability communities, which may not be initially accessible by means of traditional quantitative measures; more research into the distinctions between both rates of occurrence, services for, and perspectives concerning individuals with disabilities in less developed rural versus more developed urban areas within KSA; research into the role of gender on the perspectives of parents of SWDs in KSA; and research into the specifically gender-segregated nature of education in KSA and how this plays out across a multitude of dimensions impacting the perspectives towards and provision of services for SWDs.

5.8 Recommendations for Future Research

One of the important recommendations for future research could be to include parents from other cities in KSA, such as Tabuk, Abha, and Jazain to extend the sample size and compare their perspectives on inclusion for SWDs. Moreover, future research could use different methodologies, such as qualitative or mixed methods, including interviews with parents to gain a deeper understanding of the parents’ perspectives in regard to inclusion for SWDs. Furthermore, future research might look on including administrators' and teachers' perspective and comparing their opinions regarding inclusion for SWDs in general classrooms. Finally, future research could emphasize discovering more details about the parents' perspectives on the impact of inclusion on
students with disabilities based on the gender of the child to expand in more details the results of this study, which showed that the parents’ perspectives did not appear to vary according to whether their child was male or female, and these findings had no practical significance.

5.9 Conclusion

In KSA, there is a need to consider the frameworks of understanding with which parents approach SWDs and their potential. The system of education in KSA has come a long way toward providing the best possible services for SWDs. This not to say that what has been done reaches the level of special education services that exists in some more developed countries around the world, but it does open the door for building on the elements that have begun to improve the educational system. The dissertation will conclude by briefly examining factors that could affect whether or not KSA moves to adopt inclusive schooling, including: differing concepts and frameworks for understanding disability; opinions and perceptions of KSA parents, administrators, and teachers about inclusion; and the factors that would need to be in place in order for inclusive education to be implemented successfully. The opinions and perspectives of parents could play a key role in either helping or hindering the development of inclusive education in KSA. The support of teachers, parents, and administrators is needed to move forward into inclusive education for all SWDs.

If both public opinion and legislative policy supported the move to full inclusion, its successful implementation would still depend on a number of factors. One such factor that is difficult to measure but critical to sustainable inclusive practices is school culture. The whole school environment can be either the greatest obstacle or the greatest support
for the successful implementation of inclusion. There is a growing awareness of the importance of holistic, whole school approaches to organizational change. Research has shown that programs to establish sustainable inclusive practices are most successful when they first address the cultural context – beliefs, mindsets, expressions of community and shared identity – that might support or undermine them (Mcmaster, 2013). Developing inclusive culture might start with opportunities to evaluate and measure school culture, teacher and administrator professional development targeting inclusive values, and opportunities to communally reflect on and shape shared values (Carrington, 1999). What is true of cultural environment is equally true of physical environment: the buildings, facilities, and spaces that grant or deny physical access to shared community. Thus, expanding inclusive settings in KSA would need to first facilitate a school environment in which SWDs are ensured physical access and the opportunity to receive ideal learning and social experiences. Without considering these elements, SWDs will face challenges that prevent them from full participation in inclusive settings (Pivik, McComas, & Laflamme, 2002).

According to parents’ perspectives and comments in this study, the Ministry of Education must ensure that inclusive classrooms are staffed with qualified paraprofessionals, teaching assistants, and special education teachers for inclusion to be successful. Additionally, the successful implementation of inclusion would require adequate professional development and pedagogical training for classroom teachers, as well as adequate resources and support staff. Teachers would need training in evidence-based accommodations and interventions such as systematic instruction, assistive technology, peer-mediated strategies, and video modeling (Wong et al., 2015). These
interventions have been shown to be effective at increasing learning outcomes in inclusive classrooms for SWDs (Jackson, Ryndak, & Billingsley, 2000). Not only would the implementation of full inclusion require additional training for individual teachers, it would also require training and preparation for a greater number of skilled teachers, paraprofessionals, and teaching assistants. Co-teaching, for example, has been shown to be one effective strategy in inclusive classrooms (Solis, Vaughn, Swanson, & Mcculley, 2012). Co-teaching focuses on two teachers of equal parity (one with expertise in general education and one with expertise in special education) working together in the same physical space to meet the needs of all students with and without disabilities in the classroom.

There are many models of co-teaching. One alternative model involves the general education teacher providing instruction for all students in the classroom, while the special education teacher provides more direct assistance to SWDs. Another variation on the co-teaching model has the general education teacher teaching the general lesson and the special education teacher pre-teaching and re-teaching SWDs who need additional support (Obiakor, Harris, Mutua, Rotatori, & Algozzine, 2012). Either of these co-teaching strategies would require the training and preparation of additional qualified teachers. While some of these techniques could be adapted for teaching assistants or paraprofessionals, even this work-around would require significant investment in training and preparation programs. Unfortunately, special education teachers in KSA do not have assistants with them in the classroom. Each special education teacher currently works alone, teaching a least five SWDs (Alquraini, 2010). Implementing full inclusion and more thorough deinstitutionalization would only increase the need for qualified teachers.
and support staff. Providing assistants would be one of the important elements to support SWDs in accessing inclusive environments. The availability and accessibility of such training for educators would require support from the Ministry of Education. Indeed, each of the factors discussed above would require tangible legislative and/or financial support from government bodies and the Ministry of Education.

If the historical trends of special education in KSA continue to reflect the movement towards progressive services and integration of SWDs, full inclusion classrooms could be the next step. The history of special education that has been presented in this dissertation shows an increased number of programs in which students receive their education in integrated settings with typical peers. Although this movement toward integrated schooling has increased for certain types of disabilities, such as visual impairments, autism spectrum disorder, mild intellectual disability, and Hearing Impairment, most of these students are in fact placed in special education classrooms within public schools and have limited access to general education classrooms or interactions with their typical peers. Moreover, there are still institutions or special education schools for various types of disabilities. The last legislation in KSA regarding SWDs passed in 2001, and since that time there have been no updated laws considering new developments in the field of special education. Thus, there is a great need for establishing new laws.

IDEA (1997) in the United States is one example of a policy that strives to accomplish this goal in a different national context. According to this law, SWDs should be educated with students without disabilities in their least restrictive environment. Establishing similar policies in KSA could provide SWDs access to general education
schools, classrooms, and curriculum. This could, in turn, decrease the number of special
education schools and move forward into inclusive schooling. Thus, there are many
possibilities for the future of inclusive education in the KSA and the ability of its schools
to assist SWDs in receiving their education with typical peers in public schools.

Given the results of this survey, perhaps the first step in moving KSA educational
practices forward will involve an open conversation between the Ministry of Education
and parents of students with and without disabilities regarding what they want for their
children. Educational policy and curriculum in KSA are currently designed from a top-
down model. The results of the current survey, however, show that there are grounds for
a partnership between parents and the Ministry advancing educational goals for all
students. In addition to continuing to expand opportunities for integration in KSA public
schools, experimental inclusive classrooms could be trialed in key regions to gather data
and insights into what policies, teaching and instructional models, and models of parent-
school collaboration and partnership could best advance classrooms and schools that
effectively and humanely include all their members in the academic and social life of
KSA communities.
APPENDIX 1. PERMISSION TO USE PATI SURVEY

11/26/2017
University of Kentucky Mail - Survey permission

Alsulami, Bader <bmal224@e.uky.edu>

Survey permission
2 messages

alsulami, bader M <bader.alsulami@uky.edu>  
To: yrafferty@pace.edu

Hello Dr. Rafferty,

This is Bader Alsulami, a doctoral student at University of Kentucky. Actually, I am designing a survey questionnaire for my dissertation and found a good one designed by you for one of your articles named "Benefits and Risks of Reverse Inclusion for Preschoolers with and without Disabilities: Perspectives of Parents and Providers." I am asking for your permission to use the survey that you designed. Please let me know if it will allow me to use it.

Thank you!

--
Bader Alsulami
bader.alsulami@uky.edu

Rafferty, Dr. Yvonne <yrafferty@pace.edu>
To: "alsulami, bader M" <bader.alsulami@uky.edu>

Tue, Jun 27, 2017 at 8:19 PM

Dear Bader -- Sure - I have attached it here. The only change you need to make is to change disabled children to children with disabilities... I cannot locate the final form where this change was made. Be sure to send me a copy of your paper. Best, Yvonne

From: alsulami, bader M <bader.alsulami@uky.edu>
Sent: Tuesday, June 27, 2017 7:37 PM
To: Rafferty, Dr. Yvonne
Subject: Survey permission

[Quoted text hidden]

Rafferty Inclusion Parent Survey-draft.doc
57K
EXEMPTION CERTIFICATION

IRB Number: 46477

TO: Bader Alsalam, MA
PI phone #: 8594209967
PI email: bader.alsalam@uky.edu

FROM: Chairperson/Vice Chairperson
Non Medical Institutional Review Board (IRB)

SUBJECT: Approval for Exemption Certification
DATE: 10/5/2018

On 10/5/2018, it was determined that your project entitled "Parents' Perspectives on Inclusive Schools for Students with Disabilities in Saudi Arabia" meets federal criteria to qualify as an exempt study.

Because the study has been certified as exempt, you will not be required to complete continuation or final review reports. However, it is your responsibility to notify the IRB prior to making any changes to the study. Please note that changes made to an exempt protocol may disqualify it from exempt status and may require an expedited or full review.

The Office of Research Integrity will hold your exemption application for six years. Before the end of the sixth year, you will be notified that your file will be closed and the application destroyed. If your project is still ongoing, you will need to contact the Office of Research Integrity upon receipt of that letter and follow the instructions for completing a new exemption application. It is, therefore, important that you keep your address current with the Office of Research Integrity.

For information describing investigator responsibilities after obtaining IRB approval, download and read the document "PI Guidance to Responsibilities, Qualifications, Records and Documentation of Human Subjects Research" available in the online Office of Research Integrity's IRB Survival Handbook. Additional information regarding IRB review, federal regulations, and institutional policies may be found through OCR's web site. If you have questions, need additional information, or would like a paper copy of the above mentioned document, contact the Office of Research Integrity at 859-257-9428.
APPENDIX 3. MODIFIED PATI SURVEY (ENGLISH VERSION)

Start of Block: Section I: Demographics

Q1 Relation to child of the person completing the questionnaire:

☐ Mother (1)

☐ Father (2)

☐ Other (please explain): (3)

________________________________________________________

________________________________________________________
Q2 Level of education of person completing the questionnaire:

- Some high school (1)
- High school diploma or GED (2)
- Some college (3)
- Bachelor’s Degree (4)
- Master’s Degree (5)
- Doctoral Degree (PhD, EdD) (6)
- Other (please explain): (7)
  
  _______________________________________________________________

______________________________________________________________
Q3 Age of person completing the questionnaire:

- 18-24 years old (1)
- 25-34 years old (3)
- 35-44 years old (4)
- 45-54 years old (5)
- 55-64 years old (6)
- 56-74 years old (7)
- 75 years old or older (8)

Q4 Please specify the current academic level of your child.

- Elementary school (1)
- Middle school (2)
- High school (3)
Q5 Sex of your child:

- Male (1)
- Female (2)

Q6 What kind of school does your child currently attend?

- Special education school (only students with disabilities attend this school) (1)
- Integrated school (both students with and students without disabilities attend the same school) (2)
- Non-inclusive education school (only children without disabilities attend the school) (3)
- Other (please explain): (4)
Q7 Are you the parent or primary caretaker of a student with disabilities?

- Yes (1)
- No (2)

Q8 Based on your own experience and professional reports, is your child’s disability:

- Mild (1)
- Moderate (2)
- Severe (3)
Q9 Please describe your child’s disability (Check all that apply):

- Autistic Spectrum Disorder (1)
- Learning Disability (2)
- Intellectual Disability (3)
- Hearing Impairment (4)
- Deafness (5)
- Visual Impairment (6)
- Other: (please explain) (7)

________________________________________________

End of Block: Section I: Demographics

Start of Block: Section II: Perspectives on Including Students with Disabilities
Q42 Should Students with Disabilities:

<table>
<thead>
<tr>
<th>Strongly agree (1)</th>
<th>Somewhat agree (2)</th>
<th>Neither agree nor disagree (3)</th>
<th>Somewhat disagree (4)</th>
<th>Strongly disagree (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classrooms for students with disabilities should be located in the general school building with their typical peers. (1)</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Students with disabilities should eat lunch in the school cafeteria with their typical</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
</tbody>
</table>
peers at the same time. (2)

Students with disabilities should eat lunch in the school cafeteria with their typical peers at the same table. (3)

Students with disabilities should have the right to go on a school field trip with their typical peers. (4)

Separating students with
disabilities from the general education classroom violates their rights. (5)

All children should be educated with typical peers who are at the same developmental level. (6)

Students with disabilities should share one or more classes, such as art or
physical education, with their typical peers.
(7)

Students with disabilities should participate in the same school job responsibilities as their typical peers. (8)

I would be satisfied with my child being educated in a general education classroom that
includes both students with and students without disabilities. (9)
Q43 Some children may benefit more from being included in the general education classroom alongside their typical peers than others. Please indicate how much you disagree/agree with including children with the following characteristics in the general education classroom:

**BASED ON TYPE OF DISABILITY**

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Strongly agree (1)</th>
<th>Somewhat agree (2)</th>
<th>Neither agree nor disagree (3)</th>
<th>Somewhat disagree (4)</th>
<th>Strongly disagree (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism Spectrum Disorder (1)</td>
<td></td>
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<tr>
<td>Learning Disability (2)</td>
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<td>Hearing Impairment (3)</td>
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<td>Deafness (4)</td>
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105
<table>
<thead>
<tr>
<th>Disability Type</th>
<th>Count</th>
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</thead>
<tbody>
<tr>
<td>Intellectual Disability (5)</td>
<td></td>
</tr>
<tr>
<td>Visual Impairment (6)</td>
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</tr>
</tbody>
</table>
### Q44 BASED ON AGE OF STUDENT

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Strongly agree (1)</th>
<th>Somewhat agree (2)</th>
<th>Neither agree nor disagree (3)</th>
<th>Somewhat disagree (4)</th>
<th>Strongly disagree (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preschool age children (1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elementary school students (2)</td>
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<td>Middle school students (3)</td>
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<tr>
<td>High school students (4)</td>
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</table>
### Q45 BASED ON SEVERITY OF DISABILITY

<table>
<thead>
<tr>
<th></th>
<th>Strongly agree (1)</th>
<th>Somewhat agree (2)</th>
<th>Neither agree nor disagree (3)</th>
<th>Somewhat disagree (4)</th>
<th>Strongly disagree (5)</th>
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<tr>
<td>Mild Disability (1)</td>
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<tr>
<td>Moderate Disability (2)</td>
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<tr>
<td>Severe Disability (3)</td>
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</table>
Q46 (a) **IMPACT ON STUDENTS WITH DISABILITIES**

<table>
<thead>
<tr>
<th>Strongly agree (1)</th>
<th>Somewhat agree (2)</th>
<th>Neither agree nor disagree (3)</th>
<th>Somewhat disagree (4)</th>
<th>Strongly disagree (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educating students with disabilities in the general education classroom alongside typical peers would allow them to develop their academic skills. (1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The social skills of students with disabilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

109
would be improved due to educating them in the general education classroom alongside typical peers.

(2)

Including students with disabilities in the general education classroom would provide diverse interactions that would lead to greater
understanding and acceptance of differences.

(3)

Including students with disabilities in the general education classroom would promote their social independence.

(4)

Including students with disabilities in the general education
classroom would be likely to have a positive impact on how they feel about themselves. (5) Students with disabilities would have the opportunity to learn more in a classroom including both students with and students without disabilities.
than in a classroom including only students with disabilities. (6)

Including students with disabilities in the general education classroom would be likely to help them achieve their desired outcomes. (7)

Inclusion of students with disabilities in
the general education classroom would be likely to have a negative effect on their emotional development.

(8)

In classrooms that included both students with and students without disabilities, students with disabilities would be less likely to receive
enough special help and individualized instruction from their teacher. (9)

Inclusion of students with disabilities in the general education classroom would provide more opportunities to participate in a variety of school activities. (10)
Inclusion of students with disabilities in the general education classroom would be likely to enhance their acceptance by the community in general. (11)

Inclusion of students with disabilities in the general education classroom would be likely to have a negative
impact on how they view themselves in relation to other children. (12)

Inclusion of students with disabilities in the general education classroom would likely reduce the amount of specialized support students with disabilities receive from teachers. (13)
Students with disabilities would be more likely to be rejected by typical peers in classrooms that included both students with and students without disabilities.

(14)

In classrooms that included both students with and students without disabilities, teachers
would not be well-trained or qualified to educate or deal with the needs of students with disabilities.

(15)
Q47 (b) IMPACT ON STUDENTS WITHOUT DISABILITIES

<table>
<thead>
<tr>
<th></th>
<th>Strongly agree (1)</th>
<th>Somewhat agree (2)</th>
<th>Neither agree nor disagree (3)</th>
<th>Somewhat disagree (4)</th>
<th>Strongly disagree (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Including students</td>
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<tr>
<td>with disabilities in</td>
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<tr>
<td>the general education</td>
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<td>classroom</td>
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<td>would have a positive</td>
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<td>impact on the</td>
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<td>understanding and</td>
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<tr>
<td>acceptance of</td>
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<tr>
<td>differences of</td>
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<td>students without</td>
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<tr>
<td>disabilities.</td>
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</tr>
</tbody>
</table>

(1)
Students without disabilities are likely to benefit from including students with disabilities in the general education classroom.

(2)

Having regular contact with students with disabilities would be likely to help students without disabilities.
develop sensitivity to others. (3)

If included in the general education classroom, students with disabilities might do things that caused injuries to students without disabilities. (4)

If included in the general education classroom,
the challenging behaviors of some students with disabilities might cause students without disabilities to be afraid. (5)

Including students with disabilities in the general education classroom could slow down learning for students without
In classrooms that included both students with and students without disabilities, students without disabilities would not receive enough attention from the teachers because they would spend most of their time focusing
on students with disabilities. (7)

In classrooms that included both students with and students without disabilities, students with disabilities would take up too much of the teacher's time and students without disabilities would not
receive
enough
attention. (8)

In classrooms
that included
both students
with and
students
without
disabilities,
students
without
disabilities
might be
overlooked
because
students with
disabilities
require more
skills and
effort. (9)
In classrooms that included both students with and students without disabilities, the needs of students with disabilities for special materials and equipment would be so great that the students without disabilities would not get their fair share of resources.
In classrooms that included both students with and students without disabilities, students without disabilities would copy students with disabilities and learn negative behaviors from them.
<table>
<thead>
<tr>
<th>Q34 (C) IMPACT ON PARENTS OF STUDENTS WITH DISABILITIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Including students with disabilities in the general education classroom would help families of students with disabilities learn more about normal child development. (1)</td>
</tr>
<tr>
<td>If students with disabilities were included in the general education classroom, their</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
families would have to adapt more than the families of students without disabilities. (4)

If students with disabilities were included in the general education classroom, the families of students without disabilities would create feelings of exclusion towards their families. (5)

If students with disabilities were included in the
general education
classroom,
families of
students with
disabilities would
feel
misunderstanding
or lack of
concern from
families of
students without
disabilities. (6)

If students with
disabilities were
included in the
general education
classroom,
families of
students with
disabilities would
be more likely to
notice and be
upset by differences between their child and typically developing children. (7)
Q49 (D)  IMPACT ON PARENTS OF STUDENT WITHOUT DISABILITIES

<table>
<thead>
<tr>
<th>Strongly agree (1)</th>
<th>Somewhat agree (2)</th>
<th>Neither agree nor disagree (3)</th>
<th>Somewhat disagree (4)</th>
<th>Strongly disagree (5)</th>
</tr>
</thead>
</table>

Families of students without disabilities in classrooms that included both students with and students without disabilities would be more likely to understand what it is like for families of students with disabilities.
Families of students without disabilities in classrooms that included both students with and students without disabilities would be more likely to understand children with disabilities.

There would be increased levels of
discomfort experienced by families of students without disabilities in classrooms that included both students with and students without disabilities. (3)

Families of students without disabilities in classrooms that included both students with and

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students without disabilities would feel uncomfortable being around families of student with disabilities. (4)

End of Block: Section IV: IMPACT OF INCLUDING STUDENTS WITH DISABILITIES

Start of Block: Section IV:

Q32 Open-ended question As a parent, are there any suggestions or feedback that you would like to put forward with regards to the education of students with disabilities in public schools, whether in the same classroom or a separate one?

End of Block: Section IV:
عنوان البحث: إراء أولياء الأمور في مفهوم التعليم الشامل للطلاب ذوي الإعاقة في المملكة العربية السعودية

عزيزي ولي الأمر،

استكمالاً لمتطلبات دراسة الدكتوراه في مجال التربية الخاصة اعمل حالياً على دراسة استقصائية لتعرف على وجهة نظر أولياء الأمور في مفهوم "التعليم الشامل" للطلاب ذوي الإعاقة في المملكة العربية السعودية. تقدم الدراسة شديدة الأهمية معلومات قيمة فيما يتعلق برأى أولياء الأمور في مفهوم التعليم الشامل للطلاب ذوي الإعاقة. يمثل أراوكه محوراً مهماً لتصانعي القرار في هذا المجال وأولياء الأمور كذلك. كما ستساعد الدراسة في توضيح معلومات في غاية الأهمية يمكن الاستعانة بها في الجامعات والمدارس ووزارة التعليم لتحسين الوضع التربوي للطلاب ذوي الإعاقة. تم التواصل معك للمشاركة في هذا الاستبان لأنك ولي أمر طالب يدرس في المدارس السعودية. إذا لم تطأي استفسار بشأن البحث ارجو التواصل مع الباحث

bader.alsulami@uky.edu

تستخدم الدراسة مفهوم "التعليم الشامل"، ويقصد به المدارس التي تقدم الخدمات التعليمية للطلاب ذوي الإعاقة مع أقرانهم العاديين تحت سقف واحد.

بالطبع إذن الخيار إذا ما كنت تريد استكمال الاستبيان أو لا. ولكن إذا قررت المشاركة في الاستبيان لديكم الخيار في تخطي أي سؤال أو الخروج من الاستبيان متى شنت.

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أنا تفضلك حسب الموافقة على المشاركة كل ما عليك فعله هو الضغط على موافق في الأسفل ورابط "كولتركس" التالي ..

وتابع الإرشادات للاجابة على أسئلة الاستبيان. سوف يستغرق المشاركة في هذا الاستبيان 10 إلى 20 دقيقة. سيتم الاستعانة بمشاركتك واجاباتك الواردة في هذه الدراسة الاستطلاعية في توضيح معلومات قيمه ومفيده فيما يتعلق بمفهوم التعليم الشامل بالنسبة للطلاب ذوي الإعاقة في المملكة العربية السعودية. وكذلك يمكن الاستعانة بها في الجامعات والمدارس ووزارة التعليم لتحسين الوضع التربوي للطلاب ذوي الإعاقة. إذا استمتع مشاركتك أحد العوامل الهامة لإنجاح هذه الدراسة القيمة

نود أن تلتقي آنتبهاتك إيه على الرغم من استخدام الاستبيان لجمع معلومات هامة عنك مثل الوضع الوظيفي الحالي والخلفية الأكاديمية وخبرتك حول مفهوم التعليم الشامل للطلاب ذوي الإعاقة بالإضافة إلى جنسك فإن إجاباتك سوف تكون بسرية تامة.

واود أن أكتب أنثوابك إن كان هناك حاجة لكتابة اسمك و سيتيم الاحتفاظ بالبيانات للاستفادة منها لأغراض البحث لهذا لا يوجد أي مخاطرة في المشاركة في هذا الاستبيان كما أن الاستبيان لا يربط المشارك بالتعرف على هويته وسوف استخدم البيانات للتعريف على وجهات نظر أولياء الأمور حول مفهوم التعليم الشامل بالنسبة للطلاب ذوي الإعاقة في المملكة العربية السعودية. كما أنه لا يوجد أي شخص لديه الصلاحيات للدخول على بيانات الاستبيان سواء الباحث. سوف يتم الاحتفاظ بالبيانات برمج سري في الكمبيوتر الخاص بالباحث لمدة 6 سنوات وبعد ذلك سوف تمحى كل البيانات المتعلقة بالدراسة. كما أنه لا يتطلب منك كتابة أي تقرير كتبي أو شفهي مما يمكنه التسبب في ربط بالدراسة. خيرا اجاباتك على الاستبيان سوف لن تربط البي بتعريف عليك لذلك لا يوجد أي صلة يمكنها التعرف على هويتك. إذا كان لديك سؤال متعلق بالدراسة ارجو التواصل مع العنوان التالي أو إذا ما كان لديك أي اقتراحات أو شكوى أو سؤال عن حقوقك كمشارك في الاستبيان كمتطوع ارجو التواصل مع جامعة كنتاكي.
End of Block: Consent Form to Participate in Research (English Version)
العلاقة بالطالب Q1

ام (1) 〇

اب (2) 〇

أخرى (3) 〇

(الوضيح)
السماوى التعليمي لولي الأمر

Q2

(1) دراسة جزء من الثانوية العامة

(2) حاصل على شهادة الثانوية

(3) درجة جامعية لكن لم يكملها

(4) درجة البكالوريوس

(5) درجة الماجستير

(6) درجة الدكتوراه

(7) أخرى: يُرجى التوضيح

______________________________
عمرك كم بلغ عمرك؟

(1) 24-28

(3) 34-39

(4) 44-50

(5) 54-59

(6) 64-69

(7) 74-79

(8) أكثر من 85

أرجو تحديد المرحلة الحالية للطالب

(1) مدرسة ابتدائية

(2) مدرسة متوسطة

(3) مدرسة ثانوية
جنس الطالب Q5

ذكر (1) 〇

أنثى (2) 〇

ما هو نوع المدرسة التي يذهب إليها الطالب أو سبق الذهب إليها؟ Q6

معهد للتربية الخاصة (1) 〇

مدرسة تعليم شامل (مدرسة يدرس فيها الطلاب العاديين والطلاب ذوي الاحتياجات الخاصة) (2) 〇

مدرسة عادية (مدرسة يدرس فيها الطلاب العاديين فقط) (3) 〇

آخر (4) برجي : 〇 

التوضيح
هل أنت ولي أمر طالب لديه إعاقة؟

(1) نعم 
(2) لا

بناءً على تجربتك الخاصة والتقارير المهنية، ما هي درجة الإعاقة للطالب؟

(1) بسيطة 
(2) متوسطة 
(3) شديدة

Display This Question:
Are you the parent or primary caretaker of a student with disabilities? = ○ ○ ○ If
Q9: يرجى تحديد نوع الإعاقة للطالب:

1. اضطراب طيف التوحد
2. صعوبات التعلم
3. إعاقة فكرية
4. إعاقة سمعية (ضعف سمع)
5. إعاقة سمعية (صمم)
6. إعاقة بصريّة
7. أخرى (يرجى التوضيح)

End of Block: Section I: Demographics

Start of Block: Section II: Perspectives on Including Students with Disabilities

البيئة المناسبة للطلاب ذوي الإعاقة Q42

لا أوافق بشدة (5)
لا أوافق (4)
محابيد (3)
أوافق بشدة (1)
أوافق (2)
بوجب أن (1) تكون الفصول الدراسية الخاصة بالطلاب ذوي الإعاقة في المبنى الدراسي العام مع أقرانهم العاديين.

بوجب أن (2) يجب أن يتناول الطلاب ذوي الإعاقة وجبة الغداء في كافيتريا المدرسة في نفس الوقت مع أقرانهم العاديين.

بوجب أن (3) يجب أن يتناول الطلاب ذوي الإعاقة وجبة الغداء في كافيتريا المدرسة بصحة أقرانهم العاديين على الطاولة نفسها.

بوجب أن (4) يجب أن يتمتع الطلاب ذوي الإعاقة بالحق في الدخول الى رحلات ميدانية مدرسية مع أقرانهم العاديين.

(4) يُعد عزل الطلاب ذوي الإعاقة من التعليم في الفصول الدراسية العامة (التعليم الشامل) بشكل من أشكال الانتهاك لحقوقهم.
بجِب أن (6) يتمتع جميع الطلاب بالحق في التعليم بصحة أقرانهم العاديين الممثلين لهم في المرحلة العمرية.

بجِب أن (7) يشترك الطلاب ذوي الإعاقة في حصة واحدة أو حصتين مثل الرسم أو التربية البدنية مع أقرانهم العاديين.

بجِب أن (8) يقوم الطلاب ذوي الإعاقة بنفس المهام المدرسية التي يقوم بها أقرانهم العاديين.

سوف أكون (9) راضٍ عن وجود ابني ضمن أحد الفصول الدراسية الشاملة.

قد يستفيد بعض الأطفال من عملية الدمج أكثر من غيرهم. يرجى توضيح مدى قبولك أو رفضك.
لمتطلبات الدمج للأطفال الذين يتمتعون بالخصائص التالية

نوع الإعاقة: Q43

<table>
<thead>
<tr>
<th></th>
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<td>إعاقة فكرية (5)</td>
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أوافق بشدة (1)

طرف التوحد

دمج لعملية
بناءً على المرحلة العمرية بناءً على شهد الإعاقة

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<th>لا اوافق (4)</th>
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<tr>
<td>مرحلة ما (1) قبل المدرسة</td>
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<tr>
<td>طلاب (2) المرحلة الابتدائية</td>
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<tr>
<td>طلاب (3) المرحلة المتوسطة</td>
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<tr>
<td>طلاب (4) المرحلة الثانوية</td>
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</tbody>
</table>

بناءً على شهد الإعاقة

<table>
<thead>
<tr>
<th>لا اوافق بشدة (5)</th>
<th>لا اوافق (4)</th>
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<td>طلاب (2) المرحلة الابتدائية</td>
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<td>طلاب (4) المرحلة الثانوية</td>
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</table>
End of Block: Section III: Perspectives on the Impact of Including Students with Disabilities

Start of Block: Section IV: IMPACT OF INCLUDING STUDENTS WITH DISABILITIES

Q46: أثر الدمج على الطلاب ذوي الإعاقات

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<tr>
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<td>محاید</td>
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<td>(5)</td>
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<td>(1)</td>
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</table>

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سوسف تسمح (1) البيئة الشاملة للطلاب ذوي الإعاقة من تطوير مهاراتهم الأكاديمية.

سيسهم (2) النظام التعليم الشامل في تحسين المهارات الاجتماعية للطلاب ذوي الإعاقة.

سيوفر (3) النظام التعليم الشامل (قدراً كبيراً من التفاعل بين الطلاب، والذي سيزيد من فرص التفاهم وقبول الفروقات.

سيعزز نظام التعليم الشامل (نظام التعليم الشامل) للطلاب ذوي الإعاقة من استقلالهم الاجتماعي.

قد يكون (5) نظام التعليم الشامل (نظام التعليم الشامل) آثراً إيجابياً على طريقة اطلاعهم وانعكاسهم.

ستزداد (6) فرص تعلم الطلاب ذوي الإعاقة عند وضعهم في فصول دراسية شاملة بصحبة أقرانهم العاديين.
من المرجح أن يساهم دمج الطلاب ذوي الإعاقة التعليم الشامل (على تحقيفهم لنتائجهم المرجوة.

قد يكون لعملية الدمج التعليم الشامل (أثر سلبي على التطور الانتقالي للطلاب ذوي الاحتياجات الخاصة.

في الفصول الدراسية الشاملة، تقل احتمالات حصول الطلاب ذوي الإعاقة على القدر الكافي من الرعاية الخاصة والتعميم الفردي من معلميهم.

سيتيح دمج الطلاب ذوي الإعاقة التعليم الشامل (مزيداً من الفرص للمشاركة في مجموعة متنوعة من الأنشطة الدراسية.

من المرجح أن يساهم دمج الطلاب ذوي الإعاقة التعليم الشامل (في تعزيز فرص قبولهم المجتمعي بوجه عام.

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من (12) المرجح أن يكون لدمج الطلاب ذوي الإعاقة التعليم الشامل (أثر سلبي على شعورهم بأنفسهم نتيجة لوجودهم برفقة أطفال آخرين.

من (13) المرجح أن يؤدي دمج الطلاب ذوي الإعاقة التعليم الشامل إلى تقليص حجم الدعم المخصص الذي يتلقونه من المعلمين.

من (14) المرجح أن يؤدي دمج الطلاب ذوي الإعاقة التعليم الشامل إلى رفضهم قبل أقرانهم العاديين في الفصول الشاملة.

لا يتمتع (15) المعلمين في الفصول الشاملة بالتدريب والتأهيل الكافي لتعليم الطلاب ذوي الإعاقة والتعامل مع احتياجاتهم.
<table>
<thead>
<tr>
<th>الرد</th>
<th>الفئة 1</th>
<th>الفئة 2</th>
<th>الفئة 3</th>
<th>الفئة 4</th>
<th>الفئة 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>أوافق بشدة</td>
<td>(1)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>أوافق</td>
<td>(2)</td>
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</tr>
<tr>
<td>محاييد</td>
<td>(3)</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>لا أوافق</td>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>لا أوافق بشدة</td>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

أثر الدمج على الطلاب العاديين (2)
من المرجح (1) أن تسهم مشاركة الطلاب العاديين في الفصول الشاملة في تعزيز تفهمهم وتفهم الطلاب ذوي الإعاقة للاختلافات بين الطلاب.

قد يستفيد (2) الطلاب العاديين من الدمج (التعليم الشامل مع الطلاب ذوي الإعاقة) بالإعاقة.

يساعد (3) التعليم الشامل معرفة الطلاب العاديين بالإعاقة في فهم وتحسين شعورهم بالأخرين.

قد يؤدي (4) الدمج (التعليم الشامل) إلى أن يقوم الطلاب ذوي الإعاقة ببعض التصرفات التي تسبب في حدوث الآداب للاقارنهم بالعاديين.

قد تسبب (5) بعض التصرفات السلوكية الغير مناسبة من بعض الطلاب ذوي الإعاقة في إثارة المخاوف لدى الطلاب الآخرين.
قد يتسبب (6) التعليم الشامل في ضعف المستوى التعليمي للطلاب العاديين.

لن يتمكن (7) معلم الفصول الشاملة من توجيه الاهتمام الكافي بالطلاب العاديين، وذلك لأن اهتمالات في أغلب الأحيان بالتركيز على الطلاب ذوي الإعاقة.

في الفصول (8) الشاملة يستهلك الطلاب ذوي الإعاقة الكثير من وقت المعلم مما يقلل من فرص الطلاب العاديين في الحصول على القدر الكافي من الاهتمام.

في الفصول (9) الشاملة قد يتم إغفال الطلاب العاديين، وذلك لحاجة الطلاب ذوي الإعاقة لمزيد من الجهد والمهارات لتعليمهم.

عند الندم (10) التعليم الشامل ( ) ستكون احتياجات الأطفال ذوي الإعاقة للمواد والأجهزة الخاصة كبيرة.
قد يفتقد بعض الطلاب العاديين بتقلد بعض الطلاب ذوي الإعاقة وتعلم سلوكياتهم الغير مناسبة.

في (11) الفصول الشاملة، قد يقوم بعض الطلاب العاديين بتقلد بعض الطلاب ذوي الإعاقة وتعلم سلوكياتهم الغير مناسبة.
3 (أثر التدريس على أولياء أمور الطلاب ذوي الإعاقة)

<table>
<thead>
<tr>
<th>لا أوافق بشدة (5)</th>
<th>لا أوافق (4)</th>
<th>محايد (3)</th>
<th>أوافق (2)</th>
<th>أوافق بشدة (1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>أثر الصلح على أولياء أمور الطلاب ذوي الإعاقة</td>
<td></td>
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</tr>
</tbody>
</table>
يساعد* (1) التعليم الدمج الشامل (أسر الطلاب ذوي الإعاقة على معرفة المزيد عن نمو الأطفال العاديين.

عند تطبيق (4) التعليم الدمج الشامل (تحتاج أسر الطلاب ذوي الإعاقة للتكيف مع الوضع الجديد بشكل أكبر مقارنة مع أسر الطلاب العاديين.

عند تطبيق (5) التعليم الدمج الشامل (من الممكن أن تتبنى أسر الطلاب العاديين حالة من النفور تجاه أسر الطلاب ذوي الإعاقة.

في البيئات (6) الشاملة يولد لدى أسر الطلاب ذوي الإعاقة شعور بعدم الفهم والقلق من أسر الطلاب العاديين.

في البرامج (7) الشاملة من المرجح أن تضطر بأسر الطلاب ذوي الإعاقة لما تلحظه من اختلاف بين...
أبنائهم وبين الأطفال الذين ينمون بشكل طبيعي.
(أثر الدمج على أولياء أمور الطلاب العاديين)

<table>
<thead>
<tr>
<th>لا اوافق بشدة (5)</th>
<th>لا اوافق (4)</th>
<th>محايد (3)</th>
<th>اوافق بشدة (1)</th>
<th>اوافق (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

في البيئة (1)
الشاملة تزداد فرص تفهم أسر الطلاب العاديين للمشاعر التي تمر بها أسر الطلاب ذوي الإعاقة.

في البيئة (2)
الشاملة تزداد فرص تفهم أسر الطلاب العاديين للطلاب ذوي الإعاقة.

في البرامج (3)
الشاملة تزداد معدلات عدم الارتياح التي تشعر بها أسر الطلاب العاديين عند وجود أبنائهم بين الطلاب ذوي الإعاقة.

في البرامج (4)
الشاملة تشعر أسر الطلاب العاديين بعدم الارتياح لوجودها بين أسر الطلاب ذوي الإعاقة.
End of Block: Section IV: IMPACT OF INCLUDING STUDENTS WITH DISABILITIES

Start of Block: Section IV:

با العبارة أحد أولياء الأمور، هل هناك أية اقتراحات أو تعليقات ترغب في طرحها فيما يتعلق بتعليم الطلاب ذوي الإعاقة في المدارس العامة سواء في نفس الفصل (التعليم الشامل) أو في فصل مستقل؟

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End of Block: Section IV:
APPENDIX 5. CONSENT FORM TO PARTICIPATE IN RESEARCH (ENGLISH VERSION)

Title of the research: Parents’ Perspectives on Inclusive Schools for Students with Disabilities in Saudi Arabia

Dear Parent,

As part of my doctoral dissertation in Special Education at the University of Kentucky, I am conducting a survey to examine the perspective of parents about the integration and inclusion of students with disabilities in general education schools and classrooms. You have been contacted to participate in this survey because you are the parent of a child attending school in Saudi Arabia. If at any time you have questions about your participation, please contact the researcher at bader.alsulami@uky.edu.

Of course, you have a choice about whether or not to complete the survey/questionnaire, but if you do participate, you are free to skip any questions or discontinue at any time. If you agree to participate in this study, you will follow the link below to complete the survey on Qualtrics, then follow the directions to answer survey questions. Trials of the survey indicate that it will take between 10 and 15 minutes to complete. You will be asked to complete questions about your perspectives on the integration/inclusion of students with disabilities. You will also be asked to answer questions regarding vital demographic information, such as your current employment status, academic background, experience with regards to inclusion, and gender. Survey
participation is voluntary. If you choose to participate, you may exit the survey at any
time by closing the browser.

There are no risks associated with participating in the survey. If you decide to
complete the survey, your participation will be completely anonymous. Survey answers
will not be associated with the identities of individual respondents, and data obtained
through the survey will be used in aggregate to gain insights into parent perspectives
about inclusion. No one will have access to the information other than the researcher.
Data will be stored securely on the researcher’s computers and personal Qualtrics account
for six years after the study has been completed, then destroyed. You will not be required
to write your name on the survey. Your responses will be kept anonymous and shall
solely be used for the purpose of this study. No reference will be made in oral or written
reports, which could link you to the study. Your responses will NOT be linked to your IP
address so that no one can match your identity to the answers you provide.

It is expected that the data obtained from the survey will provide considerable
knowledge regarding the perspective of parents in regard to schooling for students with
disabilities. The study also will help uncover important information that will be of
relevance to universities, schools, and the Ministry of Education in understanding and
developing relevant policies regarding the educational placement of students with
disabilities.

The insights obtained from your responses will be of vital importance to decision-
makers and parents. Once again, I thank you for taking out valuable time to contribute to
this cause.
If you have questions about the study, please feel free to ask; my contact information is given below. If you have complaints, suggestions, or questions about your rights as a research volunteer, contact the staff in the University of Kentucky Office of Research Integrity through its contact page at https://www.research.uky.edu/office-research-integrity/contact-us

Sincerely,

Bader Alsulami, MA
PhD Candidate
Department of Early Childhood, Special Education, and Rehabilitation Counseling
University of Kentucky
Bader.alsulami@uky.edu
Title of the research: Parents’ Perspectives on Inclusive Schools for Students with Disabilities in Saudi Arabia

Reminder Email to Non-Respondents

Dear Parent,

_____ days ago, you received a survey on parent perspectives on the integration and inclusion of students with disabilities in general education schools and classrooms. At the time the current email was sent, your response has not yet been received.

Although survey participation is voluntary, your responses are invaluable to the current study, which will help uncover important information that will be of relevance to universities, schools, and the Ministry of Education in understanding and developing relevant policies regarding the educational placement of students with disabilities. If you agree to participate in this study, you will follow the link below to complete the survey on Qualtrics, then follow the directions to answer survey questions. Trials of the survey indicate that it will take between 10 and 15 minutes to complete. You will be asked to complete questions about your perspectives on the integration/inclusion of students with disabilities. You will also be asked to answer questions regarding vital demographic information, such as your current employment status, academic background, experience with regards to inclusion, and gender. Of course, you have a choice about whether or not to complete the survey/questionnaire, but if you do participate, you are free to skip any questions or discontinue at any time.
The survey closes on ___________ (date). Please take a moment to complete the survey.

There are no risks associated with participating in the survey. If you decide to complete the survey, your participation will be completely anonymous. Survey answers will not be associated with the identities of individual respondents, and data obtained through the survey will be used in aggregate to gain insights into parent perspectives about inclusion. No one will have access to the information other than the researcher. Data will be stored securely on the researcher’s computers and personal Qualtrics account for six years after the study has been completed, then destroyed. You will not be required to write your name on the survey. Your responses will be kept anonymous and shall solely be used for the purpose of this study. No reference will be made in oral or written reports, which could link you to the study. Your responses will NOT be linked to your IP address so that no one can match your identity to the answers you provide.

Thank you for taking out valuable time to contribute to this cause.

If you have questions about the study, please feel free to ask; my contact information is given below. If you have complaints, suggestions, or questions about your rights as a research volunteer, contact the staff in the University of Kentucky Office of Research Integrity through its contact page at https://www.research.uky.edu/office-research-integrity/contact-us.

Sincerely,

Bader Alsulami, MA
PhD Candidate
References


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Methods, 21(1), 91-112.


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RSEPI. Regulations of Special Education Programs and Institutes (2001).


VITA

Bader Muteb Alsulami

Education

- University of Akron, Ohio 2014
- King Abdul-Aziz University, Saudi Arabia 2011

Professional Experience

- Majmaah University, Saudi Arabia 2011
  Lecture, instructor
- Saudi Arabia Ministry of education 2010
  Special education Teacher

Honors and Awards

- Awarded a Certificate of Academic Excellence from King Abdul-Aziz University 2008
- Awarded a Full Scholarship from Saudi Arabia Government 2011