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Perspectives on Regular and Support Class Placement and Factors that Contribute to

Success of Inclusion for Children with ASD

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Abstract

For young children with autism spectrum disorder (ASD) in regular schools, ASD specific service delivery options include regular class placement with itinerant consultative support and support class placement. This study provided an examination of levels of parent, teacher and principal satisfaction with both regular class placement (n = 39) and a satellite support class option (n=35), which provides a more gradual transition into regular class. Given that regular class placement was the ultimate goal for children enrolled in the study, factors that either facilitated or acted as barriers to successful inclusion were examined for those children currently in regular classes. There were relatively high levels of parent, teacher and principal satisfaction with both satellite support class and regular class placement for children with ASD, with higher levels of parental satisfaction with satellite support placement. Across all respondents, the most frequently identified facilitating factors were related to teaching practices and skills. In contrast, barriers identified were generally related to child characteristics. A number of suggestions for future research are offered.

The term autism spectrum disorder (ASD) refers to a life-long disability with distinctive and unusual patterns of behavior, with deficits apparent in social communication, and flexibility of behavior and thinking. An Australian report on prevalence indicated that in the 6-12 year age group there is one child with ASD in every 160 children, and a total of over 10,000 children are affected (Williams, MacDermott, Ridley, Glasson, & Wray, 2008). More recent international prevalence data suggests that the figures may well be considerably higher (Centers for Disease Control and Prevention (CDC), 2012; Kim et al., 2011) The present study focuses on children with autistic disorder without an intellectual disability, or with mild intellectual disability, and those with Asperger's disorder. According to data provided by Chakrabarti and Fombonne (2005), these groups constitute around 30% of all children with ASD.

A number of options exist for supporting students with ASD in mainstream school placements. Large school systems may provide generic educational support for children with disabilities, including ASD. For example, in NSW Australia, state schools may access funds through the targeted Disability Funding scheme (NSW Department of Education and Training, n.d.) to provide support, which in practice mainly takes the form of teacher assistant (paraprofessional) assistance. ASD is associated, however, with a well-described pattern of impairments affecting social interaction, communication, and behavioral flexibility (American Psychiatric Association, 2013) and it has been argued that intervention services should provide an autism specific curriculum that addresses these features (National Research Council, 2001; Roberts, 2004). Thus, a second option is to provide autism specific services, where staff have in-depth knowledge and practical experience supporting children with autism.

If ASD specific support services are to be provided, a number of different delivery options exist. One approach is to place children full-time in regular classes from the point of school entry and provide consultative services. Autism SA in South Australia is a non-profit organisation that uses this model and employs a multidisciplinary team to provide support services to education settings, using an outreach model. Various disciplines are represented in the composition of the staffing team that, at various times, combine the expertise of teachers, speech pathologists, occupational therapists, psychologists, developmental educators and school support officers (paraprofessionals). All staff possess specialist skills, knowledge and expertise in relation to education and support practices for students with ASD.

A second option is to place children in a special or support class in a regular school. Support class models can vary in their operation but ideally should offer "a well-graded progression of inclusive experiences matched to individual need and married with training and support for mainstream staff" (Frederickson, Jones, & Lang, 2010, p.64). A variation of this approach, the satellite class model, is offered by Autism Spectrum Australia (Aspect), a national non-profit autism support organization. The satellite class model provides a gradual transition from an ASD-specific specialist class into more inclusive educational placements. Satellite classes are autism-specific specialist classes of five to six students in mainstream "host" schools. These classes are operated and supported in regular schools by one of Aspect's base schools for children with ASD. A satellite support class provides the opportunity to develop programs that incorporate individual education goals within a framework based on the regular school curriculum and a carefully planned schedule of integrated activities. The key elements of the program are (a) the collaboratively planned establishment and operation of small classes with high levels of student

support by Aspect's trained staff; (b) specialized intervention and adaptive teaching approaches; (c) preparation for transition, which involves the regular school curriculum, collaboration with host school staff and planned integrated activities; and (d) carefully planned transitions from satellite classes and follow-up support (Roberts, Keane, & Clark, 2008). The satellite class program comes under the wider overall Aspect educational approach, the Aspect Comprehensive Approach for Education (Autism Spectrum Australia, n.d.). On average, students remain in a satellite class for 22 months prior to transition into regular classes. A key difference from a traditional special or support class is that the satellite class placement is intended as a transitional placement, rather than a potentially permanent placement.

Stakeholder perception of the success of educational placement has a high degree of face validity, and teacher perception of success has been used as an outcome index for mainstream placement (Kemp & Carter, 2006). Although parent satisfaction may not necessarily be a direct reflection of the extent to which student needs are being met (Whitaker, 2007), it is likely to play an important role in decisions to continue or discontinue educational placements. It is of interest to note that there is relatively limited research on satisfaction of parents of children with ASD across different types of educational support placement. In a survey of 818 UK parents of children with ASD aged under 20, Barnard, Prior, and Potter (2000) found that the highest level of parental satisfaction was reported when children were in placements with autism specific supports (i.e., mainstream schools with autism specific units, special schools with such units, or autism specific schools). Autism specific provision was associated with parents being twice as likely to be "very satisfied" compared with mainstream settings without such support units. In contrast, Kasari, Freeman, Bauminger, and Alkin (1999) surveyed US parents of children with

Down syndrome or autism (aged two to 18 years) regarding satisfaction with placement and found that satisfaction with special education settings was lower than for students in general education settings, with no significant differences across diagnostic group. It should be noted, however, that Kasari et al. did not examine whether autism specific services were offered. There appears to be no equivalent research on children with ASD in the Australian context, but Jenkinson (1998) surveyed parents of students with a broad range of disabilities across special and mainstream settings and found that most parents were "satisfied" or "very satisfied" regardless of setting, although there was a trend toward greater satisfaction in mainstream settings.

The satisfaction of parents with the setting where their child is being educated is likely to relate to their perceptions about the quality of the aspects of education or the school environment that parents view as most important in meeting their child's educational needs. Several studies have explored factors related to schooling that are important to parents of children with ASD. The improvement of social skills and the opportunity for interaction and friendships with typical peers are important to parents (Beresford, Tozer, Rabiee, & Sloper, 2006; Spann, Kohler, & Soenksen, 2003; Starr, Foy, Cramer, & Sigh, 2006). Parents of children in segregated settings expressed concern about their limited opportunities for contact with peers (Beresford et al., 2006). Parents of children in inclusive settings see the presence of peers as role models and potential friends as being an advantage (Kasari et al., 1999). Lack of social skills programs and lack of school support for friendship development is seen by parents as problematic (Batten, Corbett, Rosenblatt, Withers, & Yuille, 2006; Whitaker, 2007).

Parents have also indicated that they think teachers should have specialized knowledge and expertise, particularly in relation to ASD (Kasari et al., 1999; Renty & Roeyers, 2006; Starr et al., 2006). Related to the question of teacher expertise is the ability of schools to address children's needs, and Spann et al. (2003) reported that about a third of parents of children aged 6 to 9 years believed their child's current setting adequately met their needs. Parents of children with ASD also expect teachers to have the skills to determine the cause of problem behavior (Starr et al., 2006; Whitaker, 2007). Other aspects of schooling that have been identified as important to parents include effective collaboration (Starr et al., 2006), regular communication with the school and teacher (Whitaker, 2007), the school listening to their advice about their child (Renty & Roeyers, 2006; Whitaker, 2007), stability of school staffing (Renty & Roeyers, 2006), and the ability of teachers to individualize educational programs (Renty & Roeyers, 2006).

The presence or absence of these factors in an educational setting may be seen as supporting or creating barriers for effective inclusion, but none of the studies cited above used this as a framework for exploring parent perceptions. Elkins, van Kraayenoord, and Jobling (2003) surveyed Australian parents of children with a disability, 21.5% of whom were parents of a child with ASD. Parents were asked about school practices that facilitate inclusion, and over three quarters of the sample nominated factors including positive teacher attitudes to collaboration with support staff, principal positive attitude, in-service training for teachers, and time for consultation. Other facilitators of inclusion nominated by over half the sample were the use of parents or assistants to support children, the provision of therapy services, and small class sizes. A majority of parents saw benefits of inclusion for the child with a disability such as promoting the child's independence, providing the

opportunity to make friends, providing models of appropriate behavior, and promoting academic growth. At the same time, many parents saw their child as requiring teachers who were more patient and who had additional training. The parents also perceived their child as requiring modifications to regular classroom procedures.

The present study reports data collected in the first round of a multiyear comparative study examining outcomes of the Autism SA consultative model of service delivery and the Aspect satellite class model. The paper will examine parent satisfaction with placement in relation to satisfaction of teachers and principals, across the two service delivery options. In addition, for students who were placed in regular classes, factors identified by parents, teachers and principals that facilitate and inhibit success will be examined.

Method

The data reported in this paper are drawn from a larger study designed to compare the long-term outcomes of two models for the education of children with ASD in the early years of school. As part of this study, during the first round of data collection, parents, teachers and principals were interviewed about their perspectives on each child's placement and these data are the focus of this paper.

Recruitment

After all relevant ethics approvals were obtained, participants for the study were recruited through Aspect in New South Wales and through Autism SA in South Australia. Parents or guardians of children registered with Aspect or Autism SA were approached by letters distributed through the respective organizations for consent to participate. Families were approached if their child was (a) in a class for students from Kindergarten to Year 3; (b) had a formal diagnosis of autistic disorder or

Asperger's disorder using the DSM-IV criteria, made by a pediatrician or psychologist; and (c) had intellectual functioning within the mild range of intellectual disability or above, based on a formal diagnostic assessment. Of the 294 families invited to participate, 77 gave consent.

Participants

Data were available for parents of 35 children in support classes and 39 children in regular classes. Thirty-seven of the children in regular classes were from South Australia, and the remaining two students were children in New South Wales who had transitioned from a satellite support class into a regular class. Data were available for 20 teachers covering 34 children in support classes and 23 teachers covering 24 children in regular classes. Data were available from 30 principals covering 30 support class students and 23 principals covering 25 children in regular classes.

Prior to commencement of the study, children were assessed on a range of instruments including the Wechsler Intelligence Scale for Children (WISC-IV; Wechsler, 2003), Vineland Adaptive Behavior Scales-II (VABS-II; Sparrow, Cicchetti, & Balla, 2005), Social Skills Instruction System (SSIS; Gresham & Elliott, 2008) and Social Responsiveness Scale (SRS; Constantino, 2005). Pretest data on participating children are presented in Table 1. A series of independent t tests were conducted to determine the extent of pretest equivalence of the groups. Students in support classes scored significantly higher on overall IQ but there were no differences in verbal IQ. There were no significant differences in the VABS-II adaptive behavior composite or SSIS social skills measures. Children in regular classes did score significantly higher on the SISS problem behavior measure but this was not mirrored in the VABS-II maladaptive behavior measure. Finally, children in regular classes did

score higher on the SRS total score, suggesting they had somewhat higher autistic symptomatology.

Procedure

Interviews were completed by trained research assistants. Interviews with parents and principals were primarily carried out by phone and interviews with teachers were generally carried out in person at the school. Responses were transcribed by the research assistants during the interview. For the purposes of this study a subset of the questions relating to satisfaction with the child's placement and responses to open-ended questions about the placement will be considered. Parents, teachers and principals gave an overall rating of the success of the child's educational placement on a five-point Likert-type scale ranging from *Very Unsuccessful* to *Very Successful*. Parents and teachers were also asked to rate their satisfaction with student academic performance, social progress and behavior at school on a five point Likert-type scale ranging from *Very Unsatisfactory* to *Very Satisfactory*. Parents and teachers were also asked to rank the extent of bullying at school on a three-point scale (*Frequently*, *Occasionally*, *Never*).

As the primary long-term focus of the research was student outcome once placed in regular classes, parents, teachers and principals of children who were currently in regular classes were asked open-ended questions about (a) perceived barriers to successful inclusion and (b) factors that facilitated inclusion.

Data Coding

Responses on Likert-type scales were assigned numerical values from 1 (Very Unsatisfactory/Unsuccessful) to 5 (Very Satisfactory/Successful) for the purpose of analysis. Similarly, for perception of bullying, numerical values from 1 (Frequently) to 3 (Never) were assigned to responses.

With regard to children currently in regular classes, the facilitators and barriers to inclusion identified by parents, teachers and principals were coded for themes. The coding system was developed by the second author by reading through the responses and extracting common themes related to barriers and facilitators of inclusion. The themes were reviewed by the first author and it was agreed they reflected the range of content in the comments. Some categories were specific to the group being interviewed (for example, only parents made comments about the responsiveness of teachers and schools to their advice) and some categories applied to the responses of parents, teachers and principals (for example, the category relating to the impact of individual child factors and the category related to support from the autism association). The second author and a research assistant independently coded 20% of the parent, teacher and principal responses by assigning each response to the relevant category or categories of barriers or facilitators. Reliability was estimated by dividing agreements by agreements plus disagreements. Intercoder reliability for the coding of parent responses was 81.5%, for teacher responses it was 88.9% and for principal responses it was 84%.

Results

Mean principal, teacher and parent ratings of the success of placement with one standard deviation error bars are presented in Figure 1. Parents of children in support classes rated placement success significantly higher than those in regular classes ($U = 354.5$, $p < 0.0001$, two-tailed). Principals and teachers contributed ratings for multiple children in satellite support classes so data were not independent, and consequently, inferential testing was not conducted. Although principals and teachers rated support class placements as being more successful than regular class placements, differences were considerably smaller than for parents.

Mean teacher and parent satisfaction with academic, social and behavioral progress is presented in Figure 2, along with one standard deviation error bars. It is evident that teacher rankings were similar across settings but parents rated satisfaction with progress as higher in support classes. A Mann-Whitney U test revealed that parental ratings were significantly higher for support for academic ($U = 438$, $p = 0.004$, two-tailed) and behavior ($U = 501.5$, $p = 0.04$, two-tailed) progress but not for social progress ($U = 569$, $p = 0.18$, two-tailed). Teachers provided data for multiple children in support classes so inferential tests were not conducted.

Data from teachers and parents on their concerns regarding bullying is presented in Figure 3. Higher scores indicate less concern with bullying. Both teachers and parents indicated less concern about bullying in support classes, but differences were larger for parents, where a Mann-Whitney U test revealed a significant difference ($U = 389$, $p = 0.0008$, two-tailed). Again, teacher data were not analyzed inferentially.

Results of the analysis of parent, teacher and principal comments about the barriers and facilitators of inclusion are presented below. Categories are included in the tables if more than one respondent provided comments within a particular category.

Of the 39 parents of children in mainstream classes who were interviewed, all except one responded to the questions about facilitators and/or barriers to inclusion. These data are presented in Table 2. The most common category of facilitator and the second most common category of barrier described was the school/teacher's ability (or inability when presented as a barrier) to understand and meet the child's needs. Level of support from teacher assistants and other support staff and level of support for interaction with peers, friends and buddy systems were two other frequently

mentioned facilitators of inclusion. The type of barrier most frequently mentioned related to the child's characteristics, such as anxiety and poor social skills.

Twenty-three teachers (covering 24 children) in mainstream placements provided comments on facilitators and/or barriers to inclusion. These comments have been tallied separately for each child and data are presented in Table 3. There were only two barriers mentioned by more than one teacher (student factors and lack of teacher assistants and/or support staff). The most commonly mentioned facilitators were the teacher's own practices or skills and availability of support from teacher assistants and support staff.

Of the school principals interviewed, 22 provided comments (covering 24 children) on facilitators or barriers for children currently in regular classes. These comments have been tallied separately for each child and data are presented in Table 4. Principals most frequently mentioned the skills and practices of teachers and the support of parents as facilitators, and the characteristics of the students was the most frequently mentioned barrier.

Discussion

This research addressed the relative satisfaction of parents, teachers and principals of children with ASD enrolled in satellite support classes and in regular classes in the Australian school system. In addition, facilitating factors and barriers to regular class placement were examined.

Across both types of setting, parents, teachers and principals indicated a high level of satisfaction with placement success, with responses generally being in the satisfactory to very satisfactory range. In relation to progress across curriculum areas, again, stakeholders typically indicated a reasonably high level of satisfaction. The current study extended previous research in that it provided comparative data across

principal, teacher and parent perspectives. Principals, teachers and parents all rated overall satisfaction as higher in satellite support class placements, with the largest difference being evident for parents. The finding of higher levels of parental satisfaction with placement in ASD specific support classes is consistent with the findings of Barnard et al. (2000) in the UK but contrasts with the North American research of Kasari et al. (1999). The present research, however, differs from previous studies in a number of important ways. The current study examined a more limited age range, specifically children in their first four years of schooling. Barnard et al. (2000) included children under 20 years of age and Kasari et al. (1999) surveyed families of children aged between two and 18 years. The present study included only children who had mild intellectual disability or above, whereas intellectual ability did not form part of the inclusion criteria in previous research. It is quite possible that parental expectations, and consequent levels of satisfaction, may vary with the nature and severity of disability as well as the age of the child. Thus, further examination of more specific and clearly defined groups of children with ASD would seem appropriate. In addition, it should be noted that the satellite support class model differs from a more traditional special class in that children entering satellite classes do so in the expectation that they will transition into a regular class, rather than the support class being a permanent placement.

With regard to satisfaction with progress across curriculum areas, teachers tended to provide similar ratings across settings but parents of children in support classes indicated greater satisfaction with progress across all areas, with behavior and academic progress reaching statistical significance. Similarly, there was a greater difference in parental perception of bullying across types of placement than for principals and teachers. In regard to the differences between perceptions of parents

and school staff, it is possible that parents may have less access to information regarding progress and performance and bullying, perhaps indicating a problem with communication, or that parents may have different expectations to school executive and teaching staff. The present research does not provide any clear insight into these issues and this would appear to be a possible area for future research.

Noting that there was a greater level of parental satisfaction with support class placement, it was of interest to examine factors identified by stakeholders that both facilitated and acted as barriers to successful regular class placement, which was the ultimate goal for all children enrolled in the study. There was some commonality among the barriers and facilitators identified by parents, teachers and principals for children who were currently in regular class placements. For parents, the most commonly identified facilitator for inclusion (mentioned by 53% of parents) was that the school and/or teacher understood the child's needs. For teachers (50%), the most commonly mentioned facilitator was their ability to use appropriate practices, while for principals the most commonly mentioned facilitator (67%) was skilled teachers. One feature of the placements in regular classes in this study was the autism specific support offered by the autism associations. These findings may be viewed as concordant with recommendations that the educational curriculum should be adjusted to meet the needs of children with autism (National Research Council, 2001; Roberts, 2004).

A total of, 21% of teachers and 33% of principals saw the support offered as a facilitator of inclusion and only one teacher and none of the principals saw the lack of support as a barrier. Many parents and teachers also saw support from teacher assistants as a facilitator, and this was also mentioned by 21% of principals. Although the practical support of a teaching assistant can undoubtedly be of great value, there is

evidence suggesting that overuse of assistants can be problematic for children with disabilities generally (Giangreco, 2010; Giangreco, Suter, & Doyle, 2010) and specifically for children with ASD (Symes & Humphrey, 2011, 2012). The other facilitator frequently mentioned by parents (32%) was the provision of support for social interaction and friendship, and this was also seen as a facilitator by 25% of teachers and 21% of principals. This was unsurprising given the social deficits that are characteristic of ASD. Parents in other studies have commented on the importance of schools and teachers supporting social interaction and friendship development (Batten et al., 2006; Kasari et al., 1999; Starr et al., 2006; Whitaker, 2007). A number of teachers (29%) and principals (46%) mentioned supportive parents as a facilitator of inclusion.

The barrier most frequently mentioned by parents (40%), teachers (21%) and principals (38%) was related to student characteristics, with specific factors such as anxiety and poor social skills mentioned as hindering inclusion. Child related factors, such as anxiety or ability to adjust to change, tended to rank highly in terms of factors that acted as both facilitators and barriers to inclusion. Kasari et al. (1999) found, from an analysis of additional comments on their survey, that the child's level of functioning or specific needs tended to most frequently be related to the perceived suitability of an inclusive placement. As in the current study, some attributes of children were seen as advantages in an inclusive setting, while other attributes were disadvantages. Parsons, Lewis, and Ellins (2009) reported that parents did not attribute the cause of their child's difficulties in education to external factors, but to the fact that it is "just the way s/he is" (p. 49). No other barrier was mentioned by five or more teachers or principals, but 34% of parents mentioned school or teacher failure

to understand children's needs as a barrier and 16% mentioned poor handling of behavior problems.

Limitations

A number of limitations of the current study need to be acknowledged. The data collection was opportunistic and part of a longer-term comparative study. It should be noted that most of the children supported in regular classes were in South Australia and those in support classes were in New South Wales. In addition, there were some differences in the two groups at pre-test. Data were relatively complete for parents in both groups and teachers in support classes, but data were less complete for principals and teachers in regular class placement due to the difficulty in obtaining research consents. Thus, these factors need to be considered in interpretation of the results.

Conclusion

The current study provides evidence of relatively high levels of parent, teacher and principal satisfaction with both satellite support class and regular class placement for children with ASD. Nevertheless, there appeared to be higher levels of parental satisfaction with support class than regular class placement. Given that regular class placement was the ultimate goal for children enrolled in the study, factors that facilitated or acted as barriers to successful regular class placement were of interest for those children currently in regular classes. Across all respondents, facilitating factors most commonly related to teaching practices and skills and, in contrast, barriers tended to relate to child characteristics. A number of suggestions for future research are offered.

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Table 1
Pretest Assessments of Children in Regular and Support Classes

	Support Class		Regular Class		df	t	p
	M	*SD*	*M*	*SD*			
Full Scale IQ	80.7	15.9	89.3	14.9	72	2.41	0.02*
Verbal IQ	88.1	18.5	85.4	16	74	0.71	0.48
VABS ABC	78.6	8.1	81.1	10.9	75	1.14	0.26
SSIS Social Skills	80.8	14.8	77.5	10.7	75	1.1	0.29
SSIS Problem Behavior	121.4	16.2	130.2	14.9	75	2.48	0.02*
VABS-II Maladaptive	20.3	1.7	20.9	2.0	75	1.38	0.17
SRS Total	78.6	12.8	84.9	11.8	75	2.23	0.03*

Table 2

Number (%) of Parents Identifying Factors Acting as Facilitators and Barriers to Inclusion

Factor	Facilitator	Barrier
School/teacher understanding of needs, realistic expectations, uses of appropriate strategies	20 (53%)	13 (34%)
Characteristics of the child (e.g., anxiety, social skills)	3 (8%)	15 (40%)
Level of support from teacher assistants and other support staff	12 (32%)	3 (8%)
Level of support for interaction with peers, for friendships and buddy systems	12 (32%)	1 (3%)
Degree of effectiveness of handling of problems, including behavior problems	4 (11%)	6 (16%)
Teacher receptiveness of input from parents and other advisors	3 (8%)	3 (8%)
Support for transitions into school/between classes	2 (5%)	2 (5%)
Size of class or school	3 (8%)	1 (3%)
Home-school communication and level of family support	2 (5%)	1 (3%)
Effectiveness of dealing with bullying	1 (3%)	2 (5%)
Level of principal and/or school executive support	1 (3%)	2 (5%)
Extent of child inclusion in extracurricular activities	1 (3%)	1 (3%)

Table 3

Number (%) of Teachers Identifying Factors Acting as Facilitators and Barriers to Inclusion

Factor	Facilitator	Barrier
Teacher practices or skills (e.g., consistency, routines, use of visual supports, reward systems)	12 (50%)	
Support from teacher assistants and support staff	8 (33%)	2 (8%)
Characteristics of the child (e.g., anxiety, social skills)	4 (17%)	5 (21%)
Parents are supportive of school/work well with school	7 (29%)	
Support provided by autism association	5 (21%)	1 (4%)
Consistency - of staffing (teacher and/or teacher assistants) and/or peer group	6 (25%)	
Teacher has strategies to manage problem behavior/specific programs to support students to handle emotions	5 (21%)	
Support for interaction with peers, for friendships and buddy systems	6 (25%)	
Other students/school community are supportive	4 (17%)	
Additional support to teacher from special educator/special education programs	3 (13%)	
Additional support from other professionals or programs (e.g., for speech and language, sensory issues)	3 (13%)	
Individual planning specific to child or a modified program	3 (13%)	
Support from friends of child with ASD	2 (8%)	

Table 4

Number (%) of Principals Identifying Factors Acting as Facilitators and Barriers to Inclusion

| Factor	Facilitator	Barrier
Extent to which teachers have the necessary skills and practices (e.g., differentiating curriculum, training in autism)	16 (67%)	1 (4%)
Characteristics of the child (e.g., anxiety, social skills)	5 (21%)	9 (38%)
Parent level of support for or collaboration with school	11 (46%)	1 (4%)
Extent to which teachers/staff are dedicated, supportive, understanding	9 (38%)	
Support provided by autism association	8 (33%)	
Level of support from teacher assistants and support staff	5 (21%)	3 (13%)
How effectively teachers handle behavior problems and specific programs to support children to handle emotions	6 (25%)	
Programs to support social interaction and friendships/buddy systems	5 (21%)	
Effectiveness of transition into school/between classes	4 (17%)	
Support from school system	3 (13%)	
Level of attendance		2 (8%)
Degree of appropriate allocation and predictability of resourcing		2 (8%)
Staff formally mentor students	2 (8%)	
Other students/school community are supportive	2 (8%)	
Ongoing monitoring of student	2 (8%)	
Principal and teachers are open and accessible	2 (8%)	
Class size	1 (4%)	1 (4%)
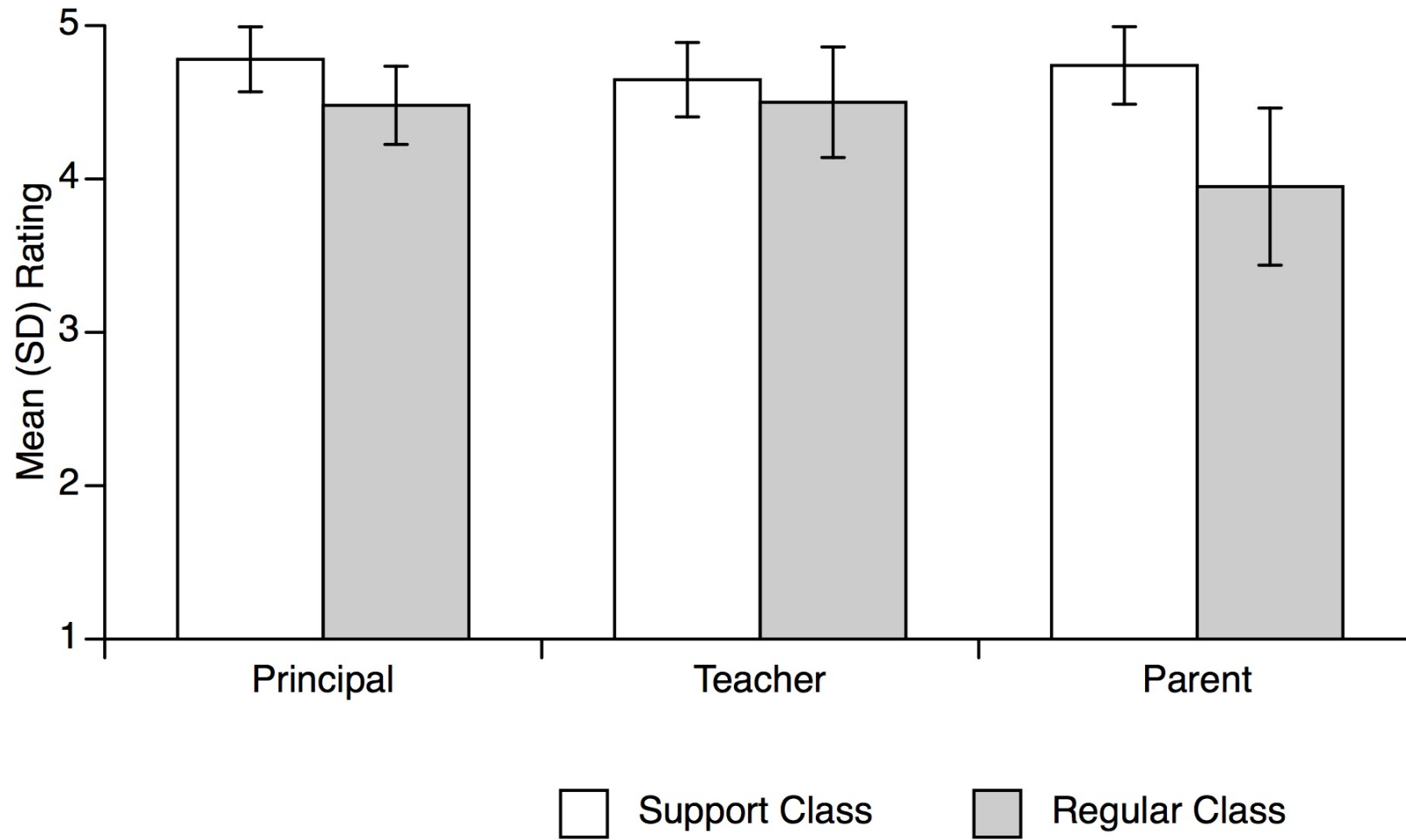
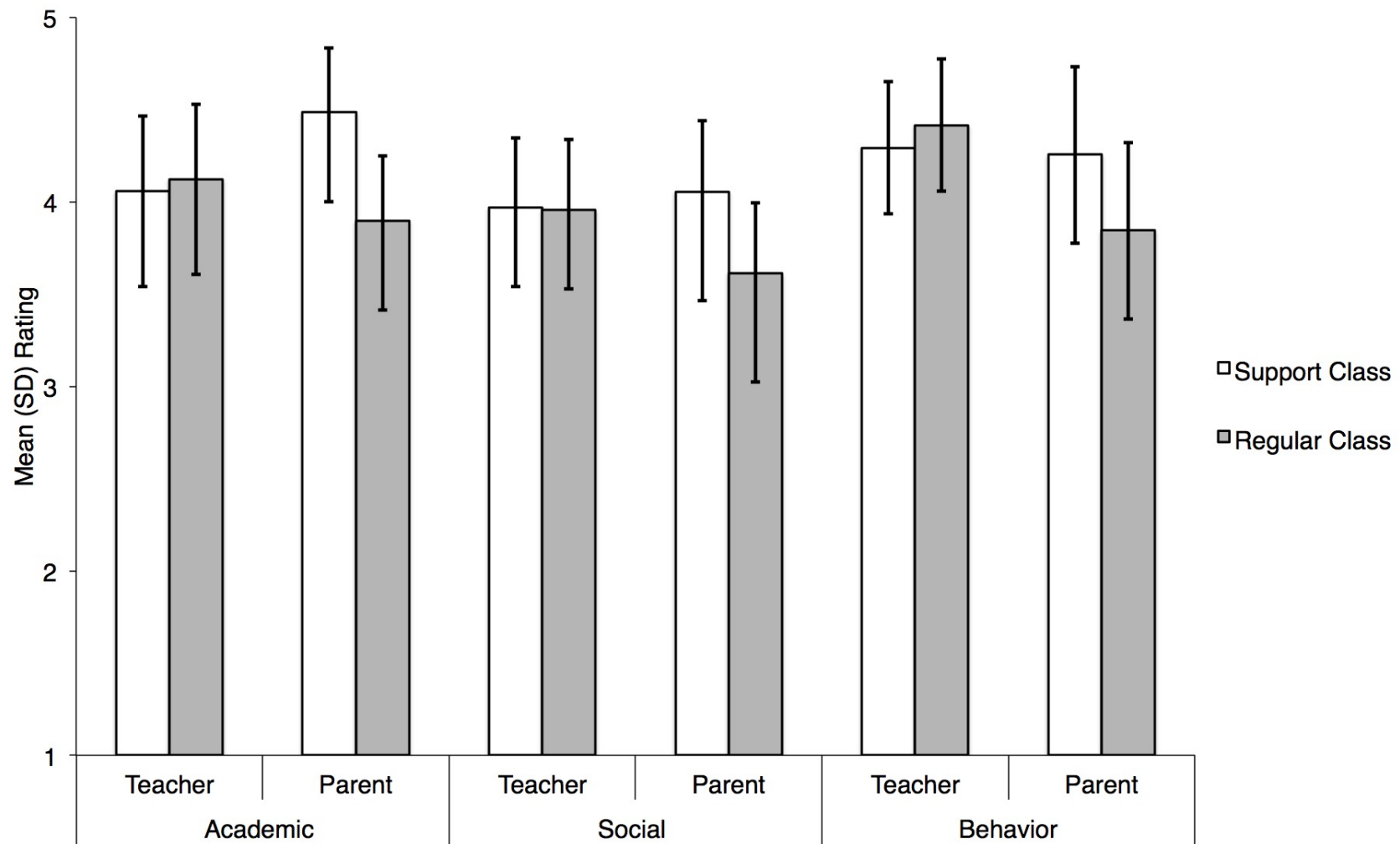*Figure 1.* Principal, teacher and parent ratings for success of placement

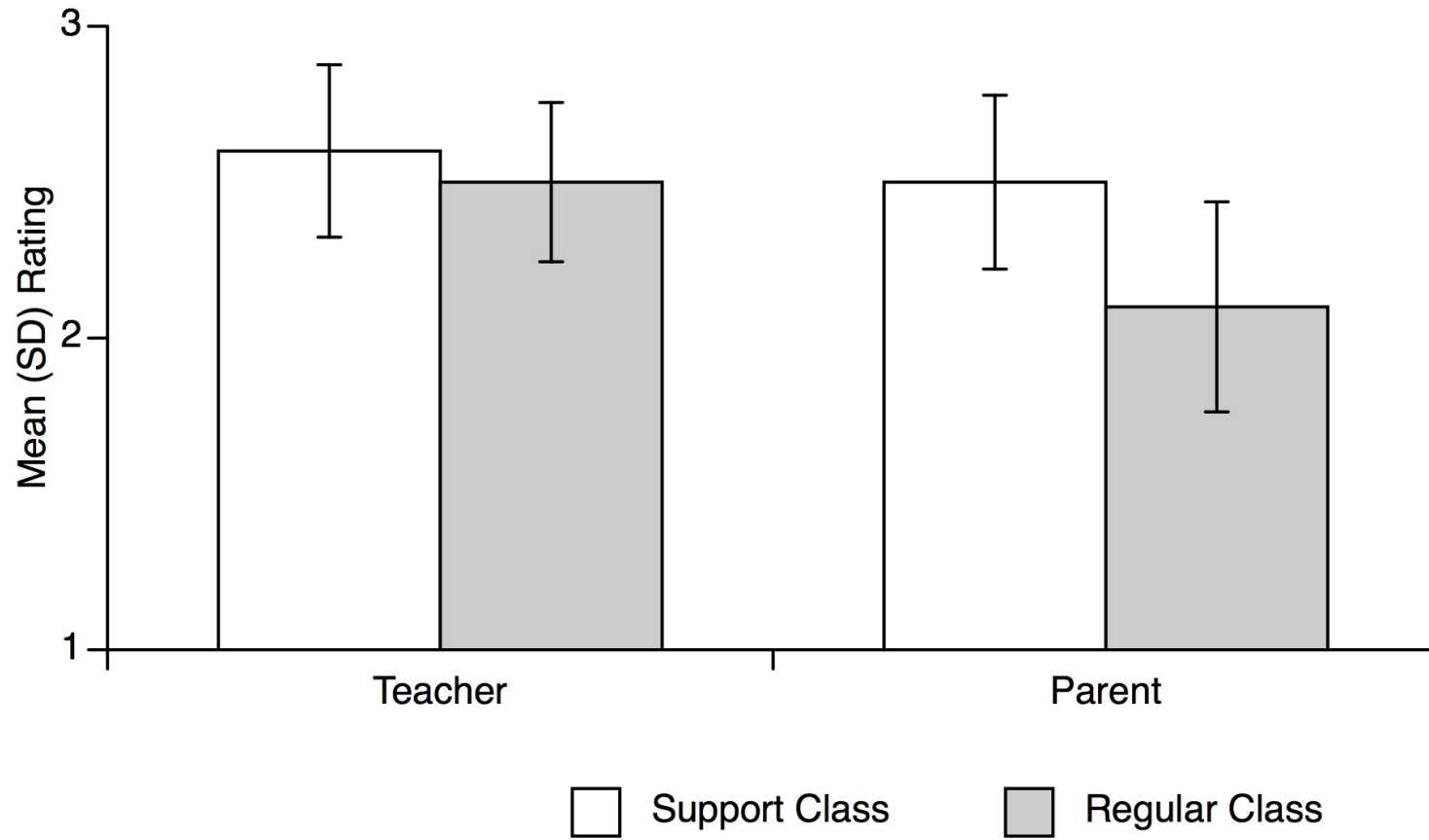*Figure 2.* Teacher and parent ratings for satisfaction with progress across curriculum areas

Figure 3. Teacher and parent rating of concern regarding bullying