AUTISM STUDENTS IN FORMAL SCHOOL

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Abstract: Autism has become the fastest growing category of special education since it was added to the Individuals with Education Act (IDEA) in 1990. The numbers of Autism have continued to grow almost exponentially. The increase in the number of children ASD and the range of abilities among those children has brought a question and concerns on how to provide an appropriate public education in the least restrictive environment to the children on the spectrum. The increasing of ASD children were not followed by the numbers of special schools that far from formal schools. This condition triggering the ASD parents and formal school to start sending and excepting the ASD children in formal schools. With the limited understanding about inclusive education, the formal schools tend to claim full inclusion program in their school only from the present of the ASD students in their formal classes. The formal schools only adapt the condition with the general education system without obtaining the inclusion program. The system from general education may not appropriate with the condition for ASD students. After years the result from the ASD children become variety that lead to improvement or degradation. With uncertainly result school need to look back their condition to give better future for the ASD students.

Keywords: Autism spectrum disorders, formal school, full inclusion

Autism Spectrum Disorders A Brief Explanation

"Autism" comes from the Greek word "autos" meaning "self" and refers to an extreme social withdraw signifying an isolated self. According to Hoffman (2009), ASD can be defined as a neurodevelopmental disorder "characterized by dysfunction in three core areas of early childhood development, namely social interaction; communication and language skills; and behavior' usually evident before age of three. Autism affects various aspects of child's cognitive and social development, and individuals with ASD often have atypical ways of thinking, learning, paying attention, and reacting to sensations.

Children with autism who are educated in fully inclusive classrooms may require both social interaction interventions and behavioral interventions in order to effectively learn and relate to their classmates. Unlike other diseases, which can be diagnosed by their physiological symptoms and medical testing, autism is determined by how closely the child's condition fits certain criteria. Children classified with ASD vary significantly, and each case is markedly unique. Symptoms, age of onset, areas of need, and treatment options are differ when considering ASD.

The Diagnostic and Statistical Manual of Mental Disorder (DSM-IV-TR) defines a person with autism as having:

- I. A total of six (or more) characteristics from (1), (2), and (3), with at least two characteristics from (1), and one from both (2) and (3):
 - (1) Qualitative impairment in social interaction, as manifested by at least two of the following:
 - i. Marked impairment in the use of multiple nonverbal behaviors, such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction.
 - Failure to develop peer relationships appropriate to developmental level.
 - iii. A lack of spontaneous seeking to share enjoyment, interest, or achievement with other people.
 - iv. Lack of social or emotional reciprocity.
 - (2) Qualitative impairment in communication as manifested by at least one of the following:
 - Delay in, or total lack of, the development of spoken language (not accompanied

- by an attempt to compensate through alternative modes of communication such as gesture or mime).
- In individuals with adequate speech, marked impairment in the ability to initiate or sustain a conversation with others.
- iii. Stereotyped and repetitive use of language or idiosyncratic language.
- iv. Lack of varied, spontaneous, make believe play or social imitative play appropriate to developmental level.
- (3) Restricted, repetitive, and stereotyped pattern of behavior, interests and activities as manifested by at least one of the following:
 - i. Encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or focus
 - ii. Apparently inflexible adherence to specific, nonfictional routines or rituals.
 - iii. Stereotyped and repetitive motor mannerism (e.g. hand or finger flapping or twisting, or complex whole-body movements).
- II. Delay or abnormal functioning in at least one of the following areas, with onset prior to age three years:
 - (1) Social Interaction
 - (2) Language as used in social communication, or
- (3) Symbolic or imaginative play.

 III. The disturbance is not better accounted for by Rett's Disorder or Childhood Disintegrative Disorder. (American Psychiatric Association [DSM-IV-TR], 2009,299.0)

Because ASD is such a subjective and varying disorder, identification is difficult. Certain characteristics, however are observed in children which indicate a developmental delay. According to Church (2009), parents should contact medical personnel for further testing if a child:

- Does not smile or use other warm, joyful expression by 6 months.
- Does not engage in a back and forth sharing sound, smile or other facial expression by age 9 months.
- Does not babble, point or make meaningful gestures (such as waving or reaching) by age 1.

- Does not speak 1 word by age 16 months.
- Does not combine 2 words by age 2 years.
- Loses previously gained language or social skills.
- Has poor eye contact.
- Does not seem to understand how to play with toys, is attached to 1 specific toy or object, excessively lines up toys or other objects or a combination of these.
- Seems to be hearing impaired (e.g. a child may not respond to his name but may instead overreact to small inconsequential sound).

SELCTION OF STUDENTS FOR INCLUSION PROGRAM IN SCHOOLS

Educators generally say that some students with special needs are not good candidates for inclusion. Many schools expect a fully included student to be working at or near grade level, but more fundamental requirements exist:

- First, being included requires that the student is able to attend school. Students that are entirely excluded from school (for example, due to long-term hospitalization), or who are educated outside of schools (for example, due to enrollment in a distance education program) cannot attempt inclusion.
- Second, some students with special needs are poor candidates for inclusion because of their effect on other students. For example, students with severe behavioral problems, such that they represent a serious physical danger to others, are poor candidates for inclusion, because the school has a duty to provide a safe environment to all students and staff.
- Finally, some students are not good candidates for inclusion because the normal activities in a general education classroom will prevent them from learning. For example, a student with severe attention difficulties or extreme sensory processing disorders might be highly distracted or distressed by the presence of other students working at their desks. Inclusion needs to be appropriate to the child's unique needs.

The students that are most commonly included are those with physical disabilities that have no or little effect on their academic work (diabetes mellitus, epilepsy, food allergies, paralysis), students with all types of mild disabilities, and students whose disabilities require relatively few specialized services.

A Brief Explanation of Full Inclusion

For a long time, children with disabilities were educated in separated classes or in separate schools. People got used to the idea that special education meant separate education. But we know

that when children educated together, positive academic and social outcomes occur for all the children involved. But, we also know that simply placing children with and without disabilities together does not produce positive outcomes. Inclusive education occurs when there is ongoing advocacy, planning, support and commitment. When teachers, administrators, and paraprofessional are provide with enough time, money, and patience, inclusive classrooms are usually effective for everyone involved. However, these condition may not always available.

There are the principles that guide quality inclusive education:

- All children belong. Inclusive education is based on the simple idea that every children and family is valued equally and deserves the same opportunities and experiences. Inclusive education is about children with disabilities whether the disability is mild or severe, hidden or obvious participating in everyday activities, just like they would if their disability were not present. It is about building friendships, membership and having opportunities just like everyone else.
- All children learn in different ways. Inclusion is about providing the help the children need to learn and participate in meaningful ways. Sometimes, help from friend or teacher works best. Other times, specially designed materials or technology can help. The key is only as much help as needed.
- It is every child's right to be included. Inclusive education is a child's right, not a privilege. The Individuals with Disabilities Education Act clearly state that all children that with disabilities should be educated with non-disabled children their own age and have access to the general education curriculum.

According to Hardman, Drew, and Egan (2008), full inclusion occurs when students with disabilities receive the service and supports appropriate to their individuals needs within the education environment. environment is often viewed as the education approach of choice for individuals with disabilities. Simply put, an inclusive classroom is describe as one hosting both general education students and student with disabilities. Inclusion provides exceptional children with the necessary service and supports within the general education classroom. All approaches to inclusive schooling require administrative and managerial changes to move from the traditional approaches to elementary and high school education.

Students in an inclusive classroom are generally placed with their chronological agemates, regardless of whether the students are working above or below the typical academic level for their age. Also, to encourage a sense of belonging, emphasis is placed on the value of friendships. Teachers often nurture a relationship between a student with special needs and a sameage student without a special educational need. Another common practice is the assignment of a buddy to accompany a student with special needs at all times (for example in the cafeteria, on the playground, on the bus and so on). This is used to show students that a diverse group of people make up a community, that no one type of student is better than another, and to remove any barriers to a friendship that may occur if a student is viewed as "helpless." Such practices reduce the chance for elitism among students in later grades and encourage cooperation among groups.

According to Wikipedia (2017), Full inclusion does not save money, but is more costbeneficial and cost-effective. It is not designed to reduce students' needs, and its first priority may not even be to improve academic outcomes; in most cases, it merely moves the special education professionals (now dual certified for all students in some states) out of "their own special education" classrooms and into a corner of the general classroom or as otherwise designed by the "teacher-in-charge" "administrator-inand charge". Special education is considered a service, not a place and those services are integrated into the daily routines (See, ecological inventories) and classroom structure, environment, curriculum and strategies and brought to the student, instead of removing the student to meet his or her individual needs. However, this approach to full inclusion is somewhat controversial, and it is not widely understood or applied to date.

A Brief Explanation of Formal Education

Formal education occurs in a structured environment whose explicit purpose is teaching students. Usually, formal education takes place in a school environment with classrooms of multiple students learning together with a trained, certified teacher of the subject. Most school systems are designed around a set of values or ideals that govern all educational choices in that system. Such choices include curriculum, organizational models, design of the physical learning spaces (e.g. classrooms), student-teacher interactions, methods of assessment, class size, educational activities, and more (Wikipedia, 20170). One of the characteristic from Formal education is the up system according to students achievement in school evaluation. Every level will bring the formal students to different challenges, situations, conditions, and environments.

Formal education level according Wikipedia (2017) can be divided become:

1. **Preschools** provide education from ages approximately three to seven, depending on the country, when children enter primary education. These are also known as nursery schools and as kindergarten. Kindergarten "provide[s] a child-centered, preschool curriculum for three- to seven-year-old children that aim[s] at unfolding the child's physical, intellectual, and moral nature with balanced emphasis on each of them.



Young children in a kindergarten in Batam

- 2. **Primary** (or elementary) education consists of the first five to seven years of formal, structured education. In general, primary education consists of six to eight years of schooling starting at the age of five or six, although this varies between, and sometimes within, countries. The division between primary and secondary education is somewhat arbitrary, but it generally occurs at about eleven or twelve years of age. Some education systems have separate middle schools, with the transition to the final stage of secondary education taking place at around the age of fourteen. Schools that provide primary education, are mostly referred to as primary schools or elementary schools.
- Secondary In most contemporary educational systems of the world, secondary education comprises the formal education that occurs during adolescence. It is characterized by transition from the typically compulsory, comprehensive primary education for minors, to the optional, selective tertiary, "postsecondary", "higher" education (e.g. university, vocational school) for adults. Depending on the system, schools for this period, or a part of it, may be called secondary or high schools, gymnasiums, lyceums, middle schools, colleges, or vocational schools. The

- exact boundary between primary and secondary education also varies from country to country and even within them, but is generally around the seventh to the tenth year of schooling.
- 4. **Tertiary (higher) education**, also called tertiary, third stage, or postsecondary education, is the non-compulsory educational level that follows the completion of a school such as a high school or secondary school. Tertiary education is normally taken to include undergraduate and postgraduate education, as well as vocational education and training. Colleges and universities mainly provide tertiary education. Collectively, these are sometimes known as tertiary institutions. Individuals who complete tertiary education generally receive certificates, diplomas, or academic degrees.
- 5. Vocational education is a form of education focused on direct and practical training for a specific trade or craft. Vocational education may come in the form of an apprenticeship or internship as well as institutions teaching courses such as carpentry, agriculture, engineering, medicine, architecture and the arts.
- 6. Special education In the past, those who were disabled were often not eligible for public education. Children with disabilities were repeatedly denied an education by physicians or special tutors. They focused on individualized instruction and functional skills. In its early years, special education was only provided to people with severe disabilities, but more recently it has been opened to anyone who has experienced difficulty learning.

Facts from The Field

Every parents that have ASD children gave different treatment to their children based on their mind set. Some of the parents know what they need to do and some don't. Some of the reason is because of the knowledge, culture, social view or even the financial condition from the parents. Here are some reactions that I found from parents that have ASD children:

- Keep their autism child in their house or isolated place.
- Bring their autism child to the psychologist and give special treatment.
- Did not accept the condition of their children and simply put them in formal school.
- Resign from their job and focus on their children treatment.

From the reaction of the parents, the parents that concern for their ASD children development will try to put their children in full

inclusion school. Once the decision for inclusion has been made, a number or issues must be taken into account. Unfortunately, full inclusion was occasionally synonymous with placing an atypically developing student in to a classroom full of typically developing peers without establishing the necessary support for teachers or student. Often when inclusion is unsuccessful, the reason is because proper service have not been developed or enforced.

The sadly fact that happen is the full inclusion was applied to formal schools that most of the schools did not have capability or experience in inclusion education. The schools simply accepted the program, but without any preparation. The autism students joint with the classroom with some exceptions from the school. But the condition, the curriculum, the teacher, and the environment still same with formal classroom.

I interview some regular classroom teachers to tell me about their experiences with inclusion. I expected to hear a lot of complaints about disruptive students, about students who couldn't handle the academic pace, about students who were socially isolated, about typical students who weren't getting the attention they deserved, about the time required to adapt curriculum and deal with assistive devices, about the lack of support, and more. And, truthfully, I did hear a few complaints about all those things. In addition, when special education professionals focus solely on special education students instead of supporting, and interacting with, all students, individual differences are magnified and social isolation is increased. Full Inclusion will works if it's done right.

What happen to the ASD Students? 1st case: Arthur Ichsan



Arthur Ichsan, born on January 10th, 2004 is an ASD student. Starting attend the formal classroom from kindergarten

recommendation from psychologist and therapists . Now he is in 6th grade that in my country education term will graduate and continue to

junior high school. Since 1st grade he did not have any problem in his lesson, even he is in the best 5 of his class. The problem is with his behavior, he can't control his reaction, emotion, cannot except

imperfection (he can't except the score below 100, if happen Arthur will run along school alley and yell "I Failed"), and tend to do violence to his classmate.

The first year, the Teachers and Arthur's classmate struggling with his behavior. For academic are Arthur didn't really have problem. The unprepared Teachers try to adapt all situations and try to find out how to handle Arthur's behavior. After 2 years the teachers managed to teach Arthur how to behave well in the class and control his emotion. Arthur's classmate starting to understand his condition and make social communication with him. It did not happen without cost, in the 1st semester one of his classmate was moved to the other school because the parents can not stand knowing that Arthur often hit their son.

Several months ago I had a chance to observe Arthur's class and find several socking condition. After several years and passing several grade, I found out that Arthur likes to mocking with bad words in English every time he didn't get what he want. Another sad reaction from his friends is now they didn't trust Arthur because he keep cheating by looking his classmate's paper. I realized that his academic decreasing. What happen?

2nd case: Muhammad Ghatfaan



Muhammad Ghatfaan, born on August 20th, 2009. He is an autism that got recommendation too from psychologist. Different from Arthur's condition, Ghatfaan lacks of discipline and tend to seclude with his own world. Ghatfaan can follow some of the lesson although in some class he tend to play

alone and didn't want to joint the class activities. When his teacher try to approach him, he think that they want to play with him and he start running away and waiting to be chase. After the 1st semester in the school, his teachers realized that he didn't show any progress even though the teachers use several approach that they know based on their experience. Almost every day Ghatfaan came late to the school, emotions up and down that mostly show by sleeping on the floor during the lesson. From his reaction Ghatfaan having problem in his academic and social relationship with his friends. Why?

Keysha Arshanda Syaferi Keysha, born on October 16th. Two years ago she ioined the full inclusion school. Started the first vear with sensitive behavior and tend to offended even for simple things.

Did know how to make a friend



because she is self centered. The positive about Keysha is she always focus on tasks that the teachers gave to her and she eager to do every activities that put her in good academic. After two years Keysha already like the other student, playing and have a lot of friends. Why she has significant improvement?

Summary From The Cases

From several cases above, we can concluded that:

- Most of the formal school just accepted the full inclusion program without preparing all the things that needed to support the program and suffering both of the teachers and the students.
- The lack of knowledge about autism and how to handle it made the class full of struggling, both teachers, ASD child and the other children.
- The influence of parents and home education has a great influence to the success of the autism child.
- The changing classes and home teachers for every level that leads new atmosphere, new habits, new styles of teaching that give big influence to the children and sometimes lead to degradation.

If we can conclude the main problem from all the case above is because both of the School and parents did not have consistency for the ASD children. For the school, they didn't consistent for what they decided by having the full inclusion program in the school. We can picture that every level, class and teachers don't have consistent in condition, habit, attitude, discipline or even ground rules that lead the attitude from the ASD children changing by year based on the new grade. For the parents they contribute half from their ASD child improvement. Parents can fastening or slowing even can stop the improvement of their autism child. Every parent must realize that autism child development requires a long relentless efforts. Parents should not be loose though their ASD children have shown significant progress. They need to have consistency in every effort that they make for their autism children best.

From the experience, we may conclude some steps to raised the ASD children. Some suggestions that we may have based on what already happens:

- Both School and parents need to be consistent for every efforts that they will make.
- ii. Schools and parents need to work together and sharing every improvement or degradation.
- iii. The school need to find the curriculum for full inclusion class and supporting by providing the need of the program, not just adapt the program with what school have.
- iv. Every teachers need to have training for full inclusion children. They need to upgrade for the classroom needs.
- v. All the teachers need to sit together, discuss together, share together, work together and have the same mind for their students improvement.
- vi. The school need to cooperate with psychologists and therapists to find better approach for ASD children improvement.
- vii. Every ASD children must have rubric or reports about their condition and improvement. Each of their teacher must have it so they can decide the best way to teach the ASD children and the teachers must add the report and pass it to the next teachers.

The steps above only short way that I can conclude. We need to remember that every ASD children have a lot of possibilities that we can explore. Sometimes we need to be a children to understand them. To close this papers, I will leave with the line that always rang in my head:

" Treat them equals, but serve them with the amazing way"