Implementation of Inclusive Practices in Children with ASD in Mainstream Kindergartens: Teachers' perceptions

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ABSTRACT

The present research refers to the views of kindergarten teachers on the implementation of integration practices in children with ASD (Autism Spectrum Disorder). We begin with the introduction of the topic later with the literature review on our topic, the methodology to be used, the ethical issues that must exist and be respected through research. In addition, the analysis of the findings that will emerge through the application of SPSS, and then the discussion of the topic that took place. The aim of the survey is to investigate the views that kindergarten teachers have on inclusion but also on the knowledge they themselves have about autism and its disorders, as well as on what they consider to be the most common behaviors observed in children with ASD.

Keywords: Autism Spectrum Disorder, Inclusive Education, Inclusion, Teachers, Early Childhood

INTRODUCTION

The purpose of this research is to investigate the views of kindergarten teachers on the implementation of inclusive practices in children with ASD. The importance of integrating children with ASD into mainstream school in order to accept and provide education to all children without discrimination will be mentioned. In addition, reference will be made to inclusive education of children, through which, teachers must include through teaching, all pupils with special educational needs in mainstream school, not to be inclusive, but also to take into account all children's needs (Grigoropoulos and Provata, 2021).

Autism spectrum disorder (ASD) is a lifelong neurodevelopmental disorder that has largely unknown causes. According to the World Health Organization (WHO), ASD occurs in 1/160 people (Noesi, 2014). However, the frequency of diagnosis has been increasing in recent years and consequently the indicators of the disorder are increasing. In addition, the incidence of ASD in the US is 1 case per 88 people. Autism is more common in boys than in girls at a ratio of about 4-1, not related to the socio-economic level, race or ethnicity of the child. It is also estimated that about 80% of children with autistic disorder have additional developmental conditions. disorders (e.g. cognitive, linguistic, learning and motor), while it may be accompanied by mental disability and present other concomitant diseases such as epilepsy and depression (Seretopoulos et al, 2019).

Inclusive Education

Inclusive education is considered to be the educational process, where all students, regardless of disability or special educational needs, jointly accept education, within the framework of the curriculum implemented in general education schools, which is appropriate for their age (Polyzopoulou, 2019).

The inclusion of children with special educational needs is an important part and determinant of educational practice. And that's because children with physical disabilities or mental difficulties attend general education schools more and more often (Charitaki et al., 2021; Koutsouki, 2011). Inclusive education presupposes a transition from a model of social welfare to a model of equal opportunities and rights, the removal of prejudices, the acceptance of diversity, the reconsideration of the values and objectives of education, through the design of new curricula and the continuous education of pedagogies (Vogiatzi et al. 2021, 2022; Grigoropoulos and Provata, 2021).

Therefore, children are involved in groups that include students with diverse needs and characteristics to promote cooperation so that students with special needs work together with the most capable students, so that there is mutual help from all. Moreover, the contribution of higher achievers is important to promote the participation and engagement of their peers (Sorkos, Chatzisotiriou, 2021). Continuing a key term related to inclusive education is inclusion, and refers to the process by which all children with special educational needs can receive equal education within regular classes. These children can participate in classroom work to the extent that their abilities allow them and will be assisted with individualized work by the special education teacher (Koutsouki, 2011). Therefore, through inclusion, children learn to coexist with each other, to help each other and to develop in the best possible way, realizing that they

must behave in society with empathy, support and care for each other (Penna, 2008).

In particular, the term inclusive education refers to the placement of disadvantaged pupils in general education settings, with the aim of ensuring the same opportunities and providing the least restrictive environment. This is selective placement, but not in all cases. The standards of co-education include the minimum, if any, support of the child with disabilities. The reason given for the adoption of equal support shall be deemed to be the acceptance of the concept of equal opportunities as a basic and guiding principle. According to the philosophy of this approach, even positive discrimination creates segregation and hurts the persons to whom it is addressed. In order to benefit from the national curriculum, individuals must not only have the necessary knowledge, skills, but also the ability to "exploit" the small changes that institutions can offer (e.g. tutoring, minor modifications and adaptations to programs and materials), so that they can join a co-education institution and be able to make progress (Charoupas, 2003).

Characteristics of Autism Spectrum Disorder (ASD)

The symptoms of autism can vary in intensity and manifestation, but also in the behavior that people with autism have, that is, they vary from few to many characteristics they have. Factors affected are cognitive potential and language level, decisively affect the form, intensity and frequency of symptoms, but also the deficits that are distinguished are often qualitative and not quantitative (Gena, 2002). In addition, autistic traits are not stable over time, but evolve due to the development of the individual and their neurological maturation, as well as the environmental influences, social experiences and education that the individual receives (Galanis, 2020).

ASD is a pervasive disorder in the sense that it affects to a greater or lesser extent most areas of development. However, there is a great deal of heterogeneity in the number and severity of its symptoms. Children with ASD lack interest in other people do not seek and even avoid interaction with adults as well as with peers. Social interaction is lower than expected for their age, while there is a marked absence or the low frequency of taking initiatives (Galanis, 2020). Interaction is a significant parameter directly linked to the educational orientation that is adapted (Bania et al. 2019, 2020).

In addition, these children have difficulties in understanding social conditions in harmonizing their behavior, while there are deficits in nonverbal communication, since they do not express themselves easily, do not make or maintain eye contact, do not use gestures. They have difficulty summarizing friendly relationships but also in recognizing and expressing their feelings, since there are deficits in the development of oral speech. In addition, there are deficits in imitation, attention skills. In addition, there are limited and repetitive patterns of behavior and interests (Gatzoya, 2018). The causes of this disorder relate to biological factors. Specifically, it is due to damage to a specific area or system of the brain that may be associated with defective genes, chromosomal abnormalities, medical conditions, prenatal complications, etc. The critical period for the development of the disorder is placed during pregnancy, without the exact timing being clear yet (Frith, 1994).

Assessment and Diagnosis of Autism

Autism is a neuro-biological disorder, but because no specific biological abnormality has been identified, the diagnosis is made by observing and describing the child's behavior patterns rather than medical tests. The diagnosis of ASD can be safely established at the age of 2 to 3 years according to the diagnostic criteria of the American Psychiatric Association (DSM-V) (APA, 2013). It is now possible for serious developmental disorders to be detected early at the age of 18-24 months. Possible deficits in skills, such as interest in other children, primary suggestion, imitation, response to name, common focus of attention (Galanis, 2015).

The psychological and clinical evaluation of the child with autism is essential to obtain a complete picture of the child's strengths and weaknesses. Clinical evaluation begins with parents taking their medical history, with the aim of collecting information about the child's progress in developmental stages, focusing on the first signs of concern and the course of the disorder. Information is obtained about the marital status, medical and educational history of the child (Galanis, 2015).

Types of Autism

According to the DSM-V, autism spectrum disorder is divided into levels based on its severity and need for child support. First, there is low-functioning autism, which involves children who have not developed speech and do not express any social emotion. Continuing there is medium-functioning autism, where children have speech, usually well structured, but which comes from imitations of adult expressions. It does not have logical continuity and therefore these children are unable to communicate. Their speech is most often characterized by automatic phrases, voices without any meaning content, repetitive syllables stereotypically. Finally, there is high-functioning autism, where these children show weakness in social interaction and emotion. Children with Asperger's or mild symptoms are characterized as high-functioning (Gatzoya, 2018). However, there are different ASD, childhood disruptive disorder and pervasive developmental disorder, unspecified, autism and schizophrenia. The approaches to treating children are

psychoanalytical, cognitive, developmental and psychopathology (Seretopoulos et al, 2019).

Teachers' Perceptions about Inclusive Education

A relevant research on children with ASD is by Grigoropoulos and Provatas (2021). It examined the knowledge of preschool teachers on the subject of autism and tried to explore views on whether inclusive education of these children in the general classroom is an effective way. A total of 91 participants participated in this survey, 81 preschool teachers and 10 special education teachers. For this survey, the questionnaire was used and was carried out in schools in Western Macedonia.

The results showed that most teachers have enough knowledge about children on the autism spectrum, while they are quite familiar with the characteristics of this disorder and the possible behaviors that these children may exhibit. Teachers responded positively to the importance of inclusion, however the survey showed that most kindergarten teachers needed additional training on inclusive education. But they also needed training in proper programs and equipment to help children more. In addition, research has shown that often disruptive behaviors in the classroom and interruption of the lesson, can disrupt the classroom climate and at the same time frustrate the teacher as to the effectiveness of his work (Grigoropoulos and Provata, 2021). Generally, speaking the effect of years of teaching experience, educational work level of teachers, and the highest degree completed by teachers on teachers' attitudes towards inclusion (Charitaki et al., 2022, 2023).

Then importance was given to how important the help of the special educator in the classroom is to encourage students with autism to interact with peers of typical development. In addition, what was mentioned is the importance of good cooperation of all teachers dealing with students with ASD for their more effective integration and consequently the help of parents (Grigoropoulos and Provatas, 2021).

Another study looked at teachers' perceptions of the inclusion of children with autism spectrum disorder in early childhood. 81 respondents were asked to answer a questionnaire through the quantitative collection on inclusion and autism, the survey was conducted in the Middle West. The results of the analysis showed that most participants knew what ASD was, while they seemed to believe that effective behavioral therapy is an effective intervention that can help children (D'Agostino and Douglas, 2021).

The attitudes of these teachers towards the inclusion of children with ASD were positive, since it was mentioned that children with or without disabilities can benefit from it, in an inclusive environment because through it typically developing children can learn and vice versa, there can be skills that can occur among children. Also, respondents agreed that children with ASD should receive special education services at school, consider it important that children with ASD do not isolate themselves and also should spend more time in inclusive environments (D'Agostino and Douglas, 2021).

Finally, research by D'Agostino and Douglas (2021) examined teachers' knowledge of the effectiveness of different classroom practices related to ASD. The survey showed that most were aware of the effectiveness of these practices and suggested suggestions for improving the curriculum and preparing teachers for the inclusion of children with ASD. Finally, important was the view of how helpful cooperation and communication between teachers, family and services is (D'Agostino and Douglas, 2021).

Moving on to another survey, teachers' views on children with ASD and their inclusion in the general classroom were examined. This study involved 15 preschool teachers and used the questionnaire as a research tool and the survey was conducted in Southeast America. The results of the research on knowledge about ASD showed that teachers had a misconception about ASD, they did not know that it is a developmental disorder, some knew the contribution of the genetic disorder, others realized that children with ASD can overcome the condition (Barnedetal, 2011).

Moreover, the same research showed that teachers had wrong perceptions about the age of onset of ASD as well as the importance of early intervention. The largest percentage of participants showed from their answers that medication does not relieve the main symptoms of ASD. It should also be mentioned that all teachers knew that the main deficits are language difficulties, social understanding, and sensory disorders (Barnedetal, 2011).

Teachers' attitudes towards children's co-education were opposite. Some teachers believe that children with ASD should be integrated into the general classroom and others disagreed and believe that it would be better for children to go to a special school. They also agreed that children with or without disabilities can benefit from the effect with children with disabilities. When asked who should teach children with ASD, teachers replied that special educators are the ones who should teach children with special education as well as children with ASD. In addition, there were opposing opinions; some argued that even a good general education teacher can help a student with ASD (Barnedetal, 2011).

What was also asked is what the characteristics of children with ASD are and whether they are linked to the successful integration of children. Respondents noted the child's academic ability, severity of disability, and personality. Furthermore, for interventions, they believe that there should be individual contribution, pharmaceutical and drug therapy and interaction with peers. The results obtained through the research are that preschool teachers about ASD had more misconceptions that outweighed the correct answers (Barnedetal, 2011). In addition, what should be mentioned is that teachers believed on the one hand that there could be inclusion for children with ASD, but on the other hand they believed that it might not be suitable for all children. And that through special schools they may have had a less restrictive environment, but still consider that there are benefits from inclusion by children with and without disabilities, there were reservations about the ability to help children and they believe that special education teachers would perform better in this role (Barnedetal, 2011).

Respectively in the research Johnson and colleagues (2012). The results showed that knowledge about autism in children was limited and related to the age of the teachers, their experience and the number of resources teachers had available to learn information about autism. In addition, Sanz-Cervera et al. (2017). They used questionnaires to compare knowledge between general preschool educators and preschool educators. This study showed that there were misconceptions and gaps regarding autism. This was more prevalent among general educators. It also had to do with the experience they had. According to the systematic research of Gómez-Marí et al. (2021). The educators' knowledge of autism was investigated and it appeared that their knowledge was quite lacking in general. This is also the obstacle to providing the right training conditions, including those on the spectrum. That is why steps must be taken towards the education of educators.

In addition, according to Costa Couto et al. (2019) who investigated teachers' experiences with children on the autism spectrum, they were initially found to have trouble communicating. That is, they had no eye contact, they were isolated and they were too quiet. Difficulty in verbal and non-verbal communication was also observed, i.e. there were delays in expressive use of language. It was also observed that they did not adapt easily and that they did not change their schedule and routine. The knowledge and handling of educators in children on the autism spectrum facilitates or hinders the integration of children into the classroom.

Method

The process of collecting the data will be done as follows. Sixty (60) preschool teachers will participate. Initially, the researcher will approach participants through the Facebook page in specific groups of early childhood teachers (e.g. United Kindergarten Teachers, Kindergarten Teachers, Teachers and Kindergarten Teachers). Then, the information letter and the consent form will be sent so that interested parties can be informed about this research and give their written consent. The duration of completing the questionnaire will be (15-20 minutes). The researcher will ask for their personal information (telephone, email address) and the researcher herself will send her personal phone number in case any participants have questions about the survey. The process will begin after the participants give their consent to participate in the survey and will end with the submission of the completed questionnaire by the participants to the researcher. Data collection will be done through the questionnaire. The questionnaire to be used has been drawn from the bibliography (Skipitari, 2016). In order to ensure its reliability and validity. The main part of the questionnaire consists of 52 questions and is divided into 3 parts. There are also a number of demographic questions.

The questions of the questionnaire are linked to the research questions which are:

- 1. What is the knowledge of kindergarten teachers about autism spectrum disorder? (From question 14 to table 29 A are the questions about what kindergarten teachers' knowledge of autism spectrum disorder is)
- 2. What are teachers' views on the inclusive education of infants with ASD? (And the questions have to do with knowledge about autism spectrum disorders, views on inclusive education, and classroom behaviors; in Table B from 30 to 46.)
- 3. What are the most common behaviors observed in children with ASD that make it difficult to implement integration practices? (Table C from 47 to 65 indicates what are the most common behaviors observed in children with ASD that make it difficult to implement integration practices)

Quantitative methodology will be used in this research. It is based on statistics that have to do with comparing the objects or cases that researchers are examining. What emerges through quantitative analysis is how it can reveal the causes and changes of social phenomena through objective measurement and numerical analysis (Pediaditis, 2009; Promponas, 2015; Galanis, 2017). Most of the time it seems that quantitative research is used because there is already an existing research. In addition, the analysis aims to confirm a hypothesis through numerical data (Mantzoukas, 2007). According to the theory in which empirical research means the application of the criterion of scientific logic, for example empirical research refers to the application of the criterion of scientific logic (Mantzoukas, 2007).

Quantitative research is based on numerical data or case or subject characteristics that show the connection between

social reality and theory. Also, what needs to be determined is that the researcher cannot ensure his own personal objectivity because the choice of the topic to be investigated and there will be relevant research questions, in addition, and these elements should be provable so that they can be proven by others but also be controlled and not irrelevant evidence. In addition, quantitative analysis is used in the private and scientific field, such as in companies, companies and public knowledge polls in order to describe and analyze and explain phenomena (Papageorgiou, 2014; Pappas, 2016).

In the survey that will be carried out, the sample survey will be used. The data will be collected through closed questions. It is important to mention the features of the quantitative methods of research. Through quantitative research there is a stable and rigid form, the connection of two or more characteristics is made for a large number of cases, general trends emerge. Through quantitative research, a larger sample of the population is possible. Moreover, theoretical guesses are subjected to stricter and more valid testing using a larger sample. Traits are correlated in order to identify general trends, verify theoretical assumptions or questions (Papageorgiou, 2014; Pappas, 2016).

The method for collecting the data that will be carried out in this survey is the questionnaire. A questionnaire is a form that includes questions that are structured in order one below the other, to which these questions respondents are asked to answer in writing and in a specific order. Through the questionnaire, data are collected and respondents are asked to answer the same set of questions (Lagoumintzis, 2016).

The questionnaire is typically used as part of a research strategy to collect descriptive and explanatory opinions and data, behaviors, attitudes and characteristics. The advantages of the questionnaire are the following, the researcher can send them to a large number of people, it is easier to use them and create them. In addition, through the questionnaire the respondents can express themselves more freely without the lack of immediacy, moreover, the ways of analyzing the material are standardized, through the questionnaire the researcher cannot direct the answers of the respondents and this method through the questionnaire is less time consuming (Lagoumintzis, 2016).

The questionnaire that will be used in this survey will have closed-ended questions, through closed-ended questions respondents should choose only one answer to the question posed, the questions asked are clearer and for this reason processing is much easier (Lagoumintzis, 2016). Feasibility sampling is that which refers to the selection of the sample of certain population groups or cases that satisfy certain hypotheses (Chalkias et al, 2015).

Validity and reliability: validity is used for an accurate measurement to match the concept it attempts to measure (Kapachtsi and Kakanas, 2013). For example, there must be agreement between the concept and the accepted in order for the receivers to correspond to the conceptual definition of phenomena, thus examining the actual relationship between the concept and the receivers (Papageorgiou, 2014, Ouzouni and Nakakis, 2011). Validity in quantitative research using statistics. From some points the degree of validity is decided, which must be carefully examined, in the social sciences we do not have absolute agreement with the response of the index, because the quantities are not absolute but with approximate quantities, and the closer the similarities the closer the relationship. Also, when examining the quantitative statistical validity of a relationship, there are some ways that can be used to evaluate the validity of a particular measurement (Ouzouni and Nakakis, 2011).

In addition, reliability is associated with the consistency or iteration of the measurement tool. There are many measuring tools and many kinds and different types, such as for example thermometer, ruler remarks questions, some measurement tools are very accurate. Reliability and quantitative research, all measurement tools are not unreliable in social research, for this reason researchers must first construct a tool that should avoid containing personal or evaluative questions at different times and therefore can better confirm the reliability of the question (Ouzouni and Nakakis, 2011).

The stages of analysis of quantitative research are as follows. The first stage, which is used for quantitative research, is to have collected the data for analysis. At this stage, the numerical values must be assigned to the data, the types of values used must be evaluated, the selection of a statistical program must be carried out, but also the data must be entered into it and then the data basically checked for the unacceptable values. Also, the second stage has to do with starting an analysis. As mentioned most often, descriptive analysis of central variation and trend measurement data is used. A more detailed inductive analysis is then performed to test the hypothesis and to examine confidence intervals and magnitudes of effects. Then the next step is to report the results found through tables, figures and to have a discussion on the most important of them. In the end, the results will be interpreted through the analysis of the data, this includes the summary of the results, the comparison (Tzorbatzoudis, 2016).

Ethical Issues

The basic principles that are governed through ethics research are that participants are treated as persons in their entirety and mental phenomena are not examined as distinct, or detached variables (Hassandra and Goudas, 2003).

Also, participants are not perceived as subjects or objects from which we collect useful data with the appropriate techniques. Informed consent to research is one of the most important ethical principles and refers to the obligation of the researcher to be able to make all information related to the research project available to its participants (President et al, 2012; Koutsambassis, 2015; Versylopoulos et al., 2023).

Essentially on this is based the recognition of the primary right of the individual to decide freely and autonomously about his own life. Furthermore, the contribution of individuals to research should be non-aligned and voluntary and not involve coercion and deception (Demertzis, 2019). What should be mentioned is that the content of the information depends on the nature and purpose of the research. The researcher must inform the participants and candidates both in writing and orally why the specific research is being conducted, what it aims at and what procedures they will follow. What should be emphasized by the researcher to the participants is that they have the right to withdraw from the whole research process at any stage they want but also to withdraw the data collected from them at no cost. In addition, information about the research to be carried out must be made in a language that must be understandable and simple by the participant. The researcher should make sure that all participants have a full understanding of what was said to clarify any misinterpretations. It is very important to mention that incentives in the form of payment should be avoided because they may undermine the individual's uncommitted and deliberate contribution to research. In addition, if the consent of third parties should be required for the participation of certain persons in the survey. These individuals often have an authority that can be used in research conducted in institutions, organizations as well as vulnerable populations. Etc. (Isari and Pourkos, 2015).

Anonymity and confidentiality In research, the researcher must respect the participants and their rights not to disclose personal information and identifying information. And for this reason, the researcher should take every measure, use different aliases or hide from elements that can lead to the identification of the respondents, such as whether accommodation, work context, etc. prevail. In order to preserve the pronoun and protect their identity (Isari and Pourkos, 2015; Galanis, 2017).

What should be mentioned is that the personal data of the participants need to be kept anonymous not only during the execution of the research but also after the analysis of the findings, their publication and their reliability in general. The data collected belongs to the legislation on the protection of personal data. For this reason, great attention should be paid to their storage security but also to their gold, either in electronic form or in manuscript (Isari and Pourkos, 2015).

In this survey, which will be carried out initially, the researcher will attract participants in order to inform them about the proposed research (Appendix 1) and obtain their consent (Appendix 2). In no part of the survey will personal information of participants be disclosed and scientific confidentiality and anonymity will be respected. They will be informed that the participation of respondents is voluntary and that they will be free to leave at any time they wish. Finally, the researcher will provide her own data to provide further clarification regarding the proposed research. There is no information that the researcher needs to hide from participants. They will be given all the information regarding the survey from the beginning. More specifically, participants will be given information about the title, purpose of the survey, but also rights that participants have during the research process. Finally, they will be informed that all information will be encoded, stored and used only by the researcher.

The researcher from the beginning through the information letter she will send to the participants will inform them of their right to leave the research at any time they wish. Even after their participation in the proposed research has been completed. Finally, they will be informed that in case of their departure there will be no sanction. The survey data will be stored on the computer which will be locked with a password and to which only the researcher will have access. In addition, there will be no identification data of the participants in the electronic file.

RESULTS

Demographics

As can be seen from the following (Annex 1), the largest percentage (100%) answered that they were women and only (0%) men. In addition, the largest percentage (43.5%) were aged 20-30 years, (29%) were 40-50, (15.9%) were only 30-40 years old and (11.6%) were aged 50 or over. The General Education teacher of Primary Education in general class answered 51 kindergarten teachers in (73.9%), 6 kindergarten teachers (8.7%) answered Special Education and Primary Education in Parallel Support, only 1 ie (1.4%) answered Special Education and Primary Education in an Integration Department, while 11 (15.9) answered something else.

In addition, 31 teachers (44.9%) replied that they hold a degree from a pedagogical academy, 26 teachers, i.e. (37.7%) answered that they hold a postgraduate degree, another 6 (8.7%) answered a doctoral degree, 1 teacher (1.4%) holds a postgraduate qualification (Didaskaleio), while 5 (7.2%) answered something else. The years of total service that teachers have had are. Only 23 (33.3%) answered under 5 years old, 18 i.e. (26.1%) answered from 5-10 years old,

another 7 teachers, ie (10.1%), the remaining 21 teachers (30.4%) answered from 15-20 years and only 0% (0%) were from 20 and over. The next demographic question was whether teachers have education in special education, i.e. 38 (55.1%) answered that they have received education, the rest (44.9%) i.e. 31 teachers answered that they have not. In addition, teachers were asked if they have students with an individualized educational program in their class, 38 teachers (55.1%) answered yes and the other 31 teachers answered (44.9%) no. Teachers were asked if they had received special education or training to support students with autism spectrum disorder (ASD). One (1.4%) teacher answered yes, 28 teachers (40.6%) answered no, only 4 i.e. (5.8%) answered that they have undergraduate education, 8 answered postgraduate education i.e. (11.6%), further education (Didaskaleio) and Idtoriki education answered (0%), Seminar of school advisors answered 6 teachers ie (8.7%) as for seminars of private bodies, and only (23.2%) ie 16 teachers answered seminars of academic institutions.

Also, the next question was whether the teacher has any specific experience working or educating students with autism spectrum disorder (ASD). 6 teachers, i.e. (8.7%) answered yes, 11 i.e. (15.9%) answered no, (49.3%) i.e. 34 answered in general school, classroom teachers, only 8 teachers (11.6%) are in general school, parallel support, Only 4, i.e. (5.8%) said in KEDDY, and in an integration department, in a special school and in something else, they answered separately from 2 teachers, i.e. only (2.9%). In addition, the total time of experience with a student with ASD was the teacher, 0 years answered (21.7%) a total of 15 teachers, from 1-3 years answered (49.3%) a total of 34 answers, from 4-6 years answered (17.4%) ie 12 teachers, only 2 ie (2.9%) had experience 7-10 years and 6 answers were 11 years or more ie (8.7%).

Main Analysis

Question 14 concerned whether the diagnostic criteria for Asperger syndrome are the same as for high-functioning autism. The results showed that (60.9%) answered that it is correct, (14.5%) that it is wrong and (24.6%) that they do not know. Question 15 concerned whether ASD are developmental disorders. (89.9%) answered correct, (4.3%) answered do not know and (5.8%) that it is wrong. Question 16 concerned whether Genetic factors play an important role in the causes of ASD. (73.9%) answered correct, (18.8%) do not know and (7.2%) wrong. Question 17 concerned whether ASD exists only in childhood. (95.7%) answered wrong, (2.9%) do not know and only (1.4%) that it is correct. Question 18 was about whether behavioral therapy is an intervention that can be effective for children with ASD.

(85.5%) answered that it is right, (8.7%) that they do not know and the other (5.8%) that it is wrong. Question 19 concerned whether children with ASD resembled each other. The results showed that (92.8%) answered incorrectly, (4.3%) correct, and specifically (2.9%) did not know. Question 20 referred to whether early intervention does not bring additional benefit to a child with ASD. The results showed that (91.3%) answered incorrectly, (4.3%) said they did not know and that it was correct. Question 21 states that if an intervention works for one child with ASD, then it will certainly work for another child with ASD. The results showed that (95.7%) answered incorrectly, (2.9%) answered correctly and specifically (1.4%) that they do not know.

Continuing question 22 concerns medication and this can mitigate the main symptoms of ASD. The results showed that (37.7%) answered correctly, while (31.9%) wrong (30.4%) did not know. Question 23 states whether many students with ASD have cognitive abilities in the range of intellectual disability. Specifically, (60.9%) answered correctly, the (24.6%) mistake and the rest (14.5%) that they do not know. Question 24 refers to whether many students with ASD display talents or special abilities. Specifically, (82.6%) showed that they agreed, (14.5%) that they are wrong and the rest (2.9%) that they do not know.

Question 25 refers to whether in many cases the cause of ASD is unknown. Specifically, (81.2%) answered that it is correct, (14.5%) that they do not know and the rest (4.3%) wrong. Question 26 states that the main deficits in ASD are poor social comprehension, language problems and impaired sensory function. (92.8%) answered correctly, (5.8%) do not know and only (1.4%) that they are wrong. Question 27 states whether traumatic experiences in a child's early years can cause ASD. Specifically, (62.3%) answered incorrectly, (21.7%) do not know and the rest (15.9%) do not know correctly. Question 28 concerned whether with appropriate intervention many students with ASD will eventually overcome the disorder. Specifically, (82.6%) answered wrongly, (10.1%) that they do not know and the rest (7.2%) correctly.

Question 29 states that in order to be diagnosed with ASD, a child must have difficulties in social interaction, communication, and stereotypical and repetitive behaviors and activities. The (76.8%) specifically answered correctly, the (13.0%) wrong and the other (10.1%) that you do not know. Question 30 concerns whether children with ASD should be included in the educational environment of general education? Specifically, (15.9%) showed that they strongly agree (46.4%) that they agree, (10.1%) that they agree a little, others (20.3%) that they neither agree nor disagree, (2.9%) disagree a little, (4.3%) disagree and only (0%) answered that they strongly disagree.

Question 31 concerned whether help from a professional teaching assistant (or teacher assistant) is an important factor



in the successful inclusion of a student with ASD? Specifically, (72.5%) answered that they strongly agree, (20.3%) answered agree, (4.3%) answered agree a little, (2.9%) neither agree nor disagree, no one answered that disagreed a little, disagreed, and that strongly disagreed. Question 32 concerned whether the student's academic ability is an important factor in the successful inclusion of a student with ASD? Specifically, (7.2%) strongly agreed, (36.2%) agreed, (10.1%) answered that they agree a little, (20.3%) neither agreed nor disagreed, (17.4%) disagreed a little and (8.7%) strongly disagreed.

Question 33 concerned whether the severity of disability is an important factor for the successful inclusion of a student with ASD? Specifically, the survey showed that (20.3%) strongly agree, (44.9%) agree, (10.1%) agree a little, others (13.0%) neither agree nor disagree, (2.9%) disagree a little, (7.2%) disagree and specifically only (1.4%) strongly disagree. Question 34 concerns whether the personality of the student is an important factor for the successful inclusion of a student with ASD? Specifically, (18.8%) answered that they strongly agree, (36.2%) agree, (13.0%) agree a little, (8.7%) neither agree nor disagree, (4.3%) disagree a little, (10.1%) disagree and only (8.7%) strongly disagree.

Question 35 concerned whether All students with ASD should be included in the educational environment of general education? Specifically, (21.7) strongly agree, (4.3%) agree, (20.3%) agree a little, (26.1%) neither agree nor disagree, (5.8%) answered that they disagree a little, (13.0%) disagree, and (8.7) strongly disagree. Question 36 concerned whether one-to-one intervention is an important factor in the successful inclusion of a student with ASD? Specifically, (24.6%) answered that they strongly agree, (52.2%) that they agree, (7.2%) that they agree a little (15.9%) neither agree nor disagree, 0 answered disagree a little, disagree and strongly disagree.

Question 37 concerned whether Is encouraging students with ASD to interact with peers of typical development an important factor in the successful inclusion of a student with ASD? Specifically, (24.6%) answered that they strongly agree, (53.6%) agree, (8.7%) agree a little, (10.1%) neither agree nor disagree, (2.9%) disagree a little, 0 answered that they disagree and strongly disagree. Question 38 concerns whether the use of reinforcement programs is an important factor for the successful inclusion of a student with ASD? Specifically, (34.8%) strongly agree, (52.2%) agree, (4.3%) agree a little, (5.8%) neither agree nor disagree, (1.4%) answered that disagreed a little and that disagreed, and just none that strongly disagreed.

Question 39 concerns whether medication and pharmacotherapy are an important factor in the successful inclusion of a student with ASD? Specifically, (2.9%) strongly agree, (7.2%) agree, (8.7%) agree a little, (69.6%) neither agree nor disagree, (7.2%) answered that disagreed a little, disagreed (2.9%) and only (1.4%) strongly disagreed. Question 40 concerned whether the attitude of school staff is an important factor in the successful inclusion of a pupil with special educational needs? Specifically, (60.9%) answered that they strongly agree, (27.5%) that they agree, (4.3%) agree a little, (5.8%) neither agree nor disagree, 0 that they disagree a little and that they strongly disagree and only (1.4%) that they disagree.

Question 41 concerned whether only teachers with extensive experience in special education can be expected to deal with students with ASD in a school setting? (4.3%) strongly agree, (7.2%) agree, (4.3%) agree a little, (40.6%) neither agree nor disagree, (13.0%) disagree a little, (29.0%) disagree and just (1.4%) strongly disagree. Question 42 concerns whether inclusive education enhances the learning opportunities of students with ASD? Specifically, (29.0%) strongly agree, (50.7%) agree, (8.7%) agree a little, others (8.7%) neither agree nor disagree, 0 disagree a little and strongly disagree and only (2.9%) disagree.

Question 43 concerns whether pupils with classical autism face enough difficulties to benefit from mainstream school activities? Specifically, (8.7%) strongly agree, (17.4%) agree, (7.2%) agree a little, (31.9%) stated that they neither disagree nor agree, (7.2%) disagree a little, (26.1%) disagree and only (1.4%) strongly disagree. Question 44 is about whether a good general education teacher can do a lot to help a student with ASD? Specifically, (18.8%) strongly agree, (46.4%) agree, (8.7%) agree a little, (15.9%) neither agree nor disagree, (8.7%) disagree a little, (1.4%) disagree and (0%) strongly disagree. Question 45 concerned whether students without disabilities can benefit from contact with students with ASD? Specifically, (21.7%) answered that they strongly agree, (55.1%) agree, (8.7%) answered that they agree a little, also others (8.7%) that they neither disagree nor agree, (4.3%) disagree a little, (1.4%) disagree and only 0 that strongly disagree.

Question 46 concerned whether it is important for students with ASD to receive special education services at school? Specifically, (56.5%) strongly agreed, (36.2%) agreed, 0 that they agree at all, (5.8%) neither agree nor disagree, 0 disagree a little, (1.4%) that disagree, and none that strongly disagree. Question 47 states whether the appearance of aggressive behavior of children with ASD towards peers or adults in the classroom can be: specifically (60.9%) answered very disruptive, (23.2%) disruptive, (11.6%) partially disruptive and the rest (4.3%) slightly disruptive.

Question 48 states that the occurrence of difficulty in mutual conversation of children with ASD with peers or adults in the classroom can be: Specifically, (29.0%) answered Disruptive, (24.6%) slightly disruptive, (23.2%) partially disruptive, (14.5%) not at all disruptive and just (8.7%) very disruptive. Question 49 states that avoiding eye contact of children with ASD with peers or adults It can be: Specifically, (36.2%) responded partially disruptive, (30.4%) slightly disruptive, (21.7%) not at all disruptive, (8.7%) disruptive and (2.9%) very disruptive.

Question 50 mentions the The appearance of the sense of fear of harmless objects of children with ASD with peers or adults in the classroom can be: specifically (59.4%) answered partially disruptive, (15.9%) disruptive, (13.0%) answered Slightly Disturbing, (7.2%) very disruptive, and the rest (4.3%) not at all disruptive. Question 51 related to the high levels of activity of children with ASD in the classroom can be: The results showed that (43.3%) answered very disruptive, (24.6%) partially disruptive, (20.3%) disruptive, (8.7%) slightly disruptive, while (2.9%) not at all disruptive. Question 52 concerned the inappropriate feelings (inappropriate anxiety or laughter) of children with ASD in the classroom can be: The results showed that (39.1%) answered that it is disruptive, (34.8%) partially disruptive, (15.9%) very disruptive, (8.7%) slightly disruptive and the rest (1.4%) not at all disruptive.

Question 53 concerned that the absence of a relationship with peers of children with ASD can be: Specifically, the results showed that (39.1%) answered disruptive, (23.2%) a little disruptive, (20.3%) partially disruptive, (11.6%) not at all disruptive and only (5.8%) very disruptive. Question 54 concerned non-compliance with the teacher's instructions in the classroom can be: Specifically, (42.0%) responded disruptive, (37.7%) very disruptive, (15.9%) partially disruptive and only (4.3%) slightly disruptive. Question 55 concerned whether the requirement of off-project behaviour (e.g. talking with classmates) of children with ASD in the classroom could be: (42.0%) answered partially disruptive, (31.9%) disruptive, (17.4%) very disruptive, the rest (7.2%) a little disruptive and the other (1.4%) not at all disruptive.

Question 56 concerned whether poor relationships with classmates of children with ASD in the classroom could be: the results showed that (33.3%) answered partially disruptive, (27.5%) slightly disruptive, (20.3%) disruptive, (11.6%) not at all disruptive and only (7.2%) very disruptive. Question 57 concerned whether the obsession with a specific object or game of children with ASD in the classroom can be: specifically, the results showed that (42.0%) answered partially disruptive, (17.4%) disruptive, (15.9%) very disruptive, (14.5%) a little disruptive, and the other (10.1%) not at all disruptive. Question 58 concerned whether the obsession of children with ASD with touching, smelling or trying objects or people could be: the results showed that (40.6%) answered disruptive, (23.2%) partially disruptive, (15.5%) answered slightly disruptive, while (14.5%) very disruptive, and only (5.8%) not at all disruptive.

Question 59 concerned whether the problems with non-verbal communication-behavior (e.g. use of strange gestures) of children with ASD in the classroom can be: specifically (50.7%) answered partially disruptive, (18.8%) disruptive, (17.4%) slightly disruptive, (8.7%) very disruptive and the rest (4.3%) not at all disruptive. Question 60 concerns whether the repetitive, strange or sonorous speech of children with ASD in the classroom can be: specifically (34.8%) answered disruptive, (31.9%) very disruptive, (21.7%) partially disruptive, the other (10.1%) slightly disturbing, and the rest (1.4%) not at all disturbing.

Question 61 concerned whether the resistance and negative reaction to changes in the program of children with ASD can be: specifically, (47.8%) answered disruptive, (26.1%) partially disruptive, (18.8%) very disruptive, and (5.8%) slightly disruptive, while (1.4%) answered not at all disruptive. Question 62 concerns whether rudeness in submitting a request by children with ASD in the classroom can be: Specifically, (43.5%) answered disruptive, (20.3%) answered partially disruptive and very disruptive, while (13.0%) answered slightly disturbing and only (2.9%) not at all disturbing. Question 63 concerned whether screaming, crying, The outbursts of anger of children with ASD in the classroom can be: specifically (60.9%) answered very disruptive, (26.1%) disruptive, the other (8.7%) partially disruptive, (4.3%) a little disruptive, and only (0.0%) answered not at all disruptive.

Question 64 concerned whether the sensitivity that children with ASD may show to sounds in the classroom can be: specifically, (44.9%) answered partially disruptive, (31.9%) disruptive, (14.5%) very disruptive, (7.2%) answered slightly disruptive and (1.4%) answered not at all disruptive. Question 65, concerned whether strange or unusual physical movements (e.g. finger tapping, spinning or moving back and forth) of children with ASD in the classroom can be: specifically (46.4%) answered partially disruptive, (20.3%) answered very disruptive, (15.9%) disruptive, (13.0%) answered slightly disruptive and only (4.3%) not at all disruptive.

DISCUSSION

Based on the analysis, it seems that the questions of the questionnaire through the surveys are required. Such as the research of Grigoropoulos and Provatas (2021) and D' Agostino and Douglas (2021). From the results it seems that teachers have knowledge about ASD, they know what ASD is and what is included in it, they knew if it is influenced

by genetic factors or not, whether ASD is present only in childhood or not. Etc. The teachers answered the questions correctly. Similarly, in the survey carried out, teachers had sufficient knowledge about ASD. On the contrary, he seems to disagree with the research of Barned et al. (2011). Where teachers did not have enough knowledge about ASD and had some incorrect knowledge about it.

In addition, what was shown through the survey that was done, teachers agreed with the inclusion of children in the general education system and consider that the contribution of a professional teacher is very important. In the following research, Grigoropoulos and Provata (2021). It seems that teachers agree with the inclusion of children and the presence of a special educator and help from parents (D'Agostino and Douglas, 2021). Teachers also had positive attitudes towards children's integration (Barnedetal, 2011). Some of the teachers in the study did not agree with the inclusion of children with ASD in mainstream school but argued that they should go to a special school with the help of special educators and generally all educators agreed that these children need help from a special educator.

In addition, based on research and research, it seems that some behaviors of children with ASD are quite disruptive for teachers and for all other children in the class. What appear to be the most disruptive behaviors in the classroom of children with ASD are screaming, crying, outbursts of anger and aggression. Also, some find that avoiding eye contact is less annoying than compliance, sonar speech, etc. Also, the research conducted showed that in addition to the above, children exhibit aggressive behavior, high activity, rudeness, obsessions with objects or persons (Grigoropoulos and Provata; D'Agostino and Douglas, 2021)

The similarities and differences in research are that there are also different perspectives regarding teachers' knowledge about ASD, but also the views they have on the integration of children with ASD into mainstream school. From the results, some teachers have knowledge about ASD and others have less. In addition, some teachers find integration difficult, and some believe that children should be integrated into mainstream school, with the help of a tutor and help through the child's environment. Moreover, where there was similarity is in the teachers' opinions that screaming, crying, etc. are very disturbing for themselves and the whole.

CONCLUSION

The present survey, which was conducted, has to do with the search for the views that kindergarten teachers have on the implementation of integration practices in children with ASD. In addition, in the survey the information of the questions was collected through the questionnaire. For the conduct of the survey and the questionnaire, the data of the participants are anonymous. The quantitative methodology was used, References were made to inclusion, inclusion and inclusive education. In addition, reference was made to what autism spectrum disorder (ASD) is. The symptoms that a child may have. Also the causes of ASD. The questions asked in connection with the survey are as follows: (From question 14 to 29) Table A are the questions about what kindergarten teachers' knowledge of autism spectrum disorder is). The majority of participants appeared to have sufficient knowledge about ASD in this study. The second category has to do with what teachers' views are on the inclusive education of infants with ASD (And the questions have to do with knowledge about autism spectrum disorders, views on inclusive education and classroom behaviors. In (Table B from 30 to 46). The majority of kindergarten teachers were positive about their inclusion in the general school class. In fact, it appeared that the most important views on Inclusion is the positive attitude of the staff, the severity of the disability and one-to-one intervention, the help of a special educator, the parallel support and finally the encouragement for interaction with peers. In addition, the last and third categories have to do with what are the most common behaviors observed in children with ASD that make it difficult to implement integration practices? (Table C from 47 to 65) indicates which are the most common behaviors observed in children with ASD that make it difficult to implement integration practices. The most prevalent opinions about the behaviors observed are high levels of activity of children, aggressive behavior, inappropriate emotions (screams, etc.), inappropriate physical movements (finger taps, etc.), non-compliance with the teacher/chastity, and obsession with opposite persons.

The limitations that existed in the survey have to do with the collection of survey data, it was quite difficult to collect the questionnaire took some time. Another limitation is that because the questionnaire was in electronic form, participants did not have the opportunity to ask the researcher for any questions they wanted, or any clarification they needed. In addition, something that is important to mention is that in the Greek sector it is quite difficult to find research on autism spectrum disorder and information on this subject.

One suggestion that could be made for future research is the psychological state of parents whose children face autism and difficulties. Also, the limitations that children with autism may face in their lives, or in the school environment. Conclusively, teachers' perceptions are of major importance since they are related to their active efforts to implement inclusive practices (Antoniou, Geralexis et al. 2017; Antoniou, Pavlidou et al. 2022; Antoniou, Charitaki et al. 2023)

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