



**The Challenges facing Teachers with regard to the Management of learners with
Attention Deficit Hyperactivity Disorder towards their academic achievement in
Schools of Vhembe District, Limpopo Province**

By

SHUMANI SAMUEL TSHUBWANA

(Student No: 8700260)

**A Research Project submitted in the School of Management Sciences of the
University of Venda in partial fulfilment of the requirements for the degree Master
of Public Management**

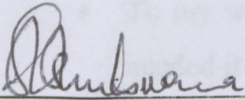
Supervisor: Mr Nekhavhambe MM

Co-Supervisor: Prof. Khwashaba MP

2012

DECLARATION

I, **SHUMANI SAMUEL TSHUBWANA** hereby declare that the dissertation for the degree of Master of Public Management at University of Venda hereby submitted by me, has not been submitted previously for a degree at this university or any other university; that it is my own work in design and execution, and that all reference material contained therein has been duly acknowledged.



Signature

19/09/2012

Date

ACKNOWLEDGMENTS

DEDICATION

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ABSTRACT

The study concludes with a summary and findings from the literature study and

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The basic training of educators must include compulsory courses such as

Research done in Limpopo Province of Vhembe District on challenges faced by educators in inclusive education indicated that educators in mainstream classrooms generally express negative attitudes to mainstreaming policies and thus finds themselves with many challenges. In the new education dispensation educators in mainstream classrooms have to accommodate learners with impairments, such as the ADHD child. Inclusion makes additional demands on educators because of the special educational needs of learners with impairments.

The challenges facing educators in inclusion and their efficacy in meeting the special needs of learners with impairments play a determining role in the successful implementation of an inclusive education policy. For the purpose of the empirical investigation a self-structured questionnaire was utilized. An analysis was done of 50 questionnaires completed by educators from Vhembe District in the Limpopo Province. The data was processed and interpreted by means of descriptive statistics.

Essentially the following were the main findings from the empirical study:

- Educators lack the necessary knowledge, skills, training and experience of learners with special educational needs.
- Educators have difficulty in identifying ADHD learners.

- Educators needed to change their teaching methods to accommodate learners with diverse educational needs.

The study concludes with a summary and findings from the literature study and descriptive statistics. Based on these findings the following recommendations were made:

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The development of curricula, institutions and methods of assessments must include a variety of strategies to accommodate learners with special educational needs, such as ADHD learners. xii

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LIST OF ABBREVIATIONS

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- **DoE** Department of Education
- **NCS** National Curriculum Statement
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Research done in Limpopo Province of Vhembe District on challenges faced by educators in inclusive education indicated that educators in mainstream classrooms generally express negative attitudes to mainstreaming policies and thus finds themselves with many challenges. In the new education dispensation educators in mainstream classrooms have to accommodate learners with impairments, such as the ADHD child. Inclusion makes additional demands on educators because of the special educational needs of learners with impairments.

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- **LD** Learning Difficulties
- **ADD** Attention Deficit Disorder
- **IEPs** Individual Educational Plans
- **HIV** Human Immunodeficiency Virus

CHAPTER 1: ORIENTATION OF THE STUDY

1.1 Introduction

Attention Deficit/Hyperactivity Disorder (ADHD) is a chronic, debilitating disorder which may impact upon many aspects of an individual's life, including academic difficulties (Seidman *et al.*, 2001:9), social skills problems (Bagwell, Molina, Pelham, & Hoza, 2001:43), and strained parent-child relationships (Johnston & Mash, 2001:32). The disorder consists of a persistent pattern of inattention, hyperactivity and impulsiveness that is inconsistent with the child's developmental level (American Psychiatric Association, 2000:9). Whereas it was previously thought that children eventually outgrow ADHD, recent studies suggest that 30-60% of affected individuals continue to show significant symptoms of the disorder into adulthood (Weiss & Hechtman, 1993:32).

Its onset is in early childhood, by definition before the age of 7, nearly always before the age of 5 and frequently before the age of 2 years (Barkley, 2006:43). About half of the children diagnosed as having ADHD grow up to have psychiatric disorders later on in life (American Psychiatric Association, 2000:89). The consequences of the disorder are therefore extremely costly, both to the affected individuals, their families and to the society (Harpin, 2005:43).

Taylor, *et al.*, (2004:45) postulated that Oppositional Defiant Disorder (ODD) and Conduct Disorder (CD) are very common in ADHD. They should be seen, not necessarily as a differential diagnosis but as a complication. It seems to be the main cause of early onset of Conduct Disorder and twin studies suggest that hyperactive behaviour may be the main genetic pathway into the development of Conduct Disorder (Taylor *et al.*, 2004:45). Cantwell (1996:12) maintains that internalizing problems, such as anxiety and mood disorders may be underreported by parents or teachers, because externalizing forms of behaviour are more observable. Children with attention deficits without hyperactivity have higher rates of anxiety disorders than those with hyperactivity.

Therefore, ADHD with comorbid anxiety disorder may imply substantially worse outcomes in children with both disorders (Spencer, Biederman, & Wilens, 1999:12).

ADHD with comorbid affective illness may have a distinct clinical presentation, aetiology, course, and outcome. Therefore, understanding the characteristics associated with comorbidity in children with ADHD is a critical step in designing appropriate diagnostic (Jensen, Martin, & Cantwell, 1997:67), prevention and treatment options (Jensen, et al., 2001:89).

The combination of ADHD and a depressive disorder could represent a subtype of ADHD, with both shared and specific features related to aetiology, outcome, and clinical presentation (Jensen, et al., 2003:78). Angold, Costello and Erkanli, (1999:89) suggest, that the association between depression and ADHD may be epiphenomenal, that is, attributed to the relationship that both disorders have with anxiety or conduct disorders.

1.2 Background of the study

The 1994 elections brought about changes such as democratization, equality, non-discrimination, equity and redress, as well as the Reconstruction and Development Programme (Department of Education, 2001a:10). The new education system stipulates that no unfair discrimination may take place against anyone on the following grounds: age, gender, ethnicity, language, class, disability, HIV or other infectious diseases. All learners, regardless of their impairments, should be accommodated in the mainstream schools.

The South African Schools Act 1996, (Act No. 84 of 1996) categorically states that, “a mainstream school must admit all learners and serve their educational requirements without unfair discrimination in anyway.” This implies that based on the rights of all learners and their parents, no learners may be turned away from any mainstream school if it is at all possible to accommodate the learner.

This further implies that, inclusion of all learners, including ADHD learners in mainstream education will help do away with the labeling of learners with impairments/disabilities in Limpopo Province. Learners with impairments will therefore be able to live with their parents, siblings or relatives and attend a mainstream school (DoE, 2001a:3).

1.3 Problem Statement

The Constitution of the Republic of South Africa, 1996 guarantees the rights of people with ADHD to be treated equally and enjoy the same rights as other citizens. Section 29 of the South African Constitution of 1996 sets out education rights; focusing more on higher education institutions. In accordance with the Constitution, the South African Schools Act (SASA) 84 of 1996, school children who are ADHD shall not be unfairly discriminated. The problem that was investigated in this study pertained to the special needs and problems in Vhembe District, such as uncertainties, teachers were not well trained, difficulties and adjustments that were created for educators, with the inclusion of Attention Deficit Hyperactive Disordered (ADHD) learners in mainstream education in their academic achievement.

Various research studies in South Africa on comprehensive education indicate that an educator in mainstream classrooms generally faces many challenges to mainstreaming policies (Bothma, Gravett & Swart, 2000:34). If educators in the mainstream classroom have a negative attitude to inclusive education, this could become a critical barrier to learning and development and the successful implementation of the policy of inclusive education. There are some concerns about the inclusion of ADHD learners in the mainstream classrooms. In Vhembe district educators are confused and insecure because of a series of radical changes that have transformed their working environment; Educators are not acquainted with the principles of the National Curriculum Statement (NCS); Educators struggle to involve parents and communities in the learning process; Educators feel that they are obliged to implement the inclusion policy about which they were not consulted; The availability and provision of sufficient support and resources;

Educators lack confidence in their own abilities to teach ADHD learners, ADHD learners require individual attention; Educators struggle to get mainstream learners to accept and accommodate ADHD learners in the classroom; Educators sometimes have very little control over the ridicule and labeling of ADHD learners in and out of the classroom and Some schools don't have a school-based support team.

1.4 Research Objectives

1.4.1 General Objective

The overall aim of the study was to investigate the challenges facing teachers with regard to management of the learners with Attention Deficit Hyperactivity Disorder towards their academic achievement in Schools of Vhembe District, Limpopo Province.

1.4.2 Specific Objectives

- To establish a relationship between the symptoms of the various disorders and the symptoms of ADHD in Vhembe district;
- To determine and evaluate cause of the ADHD on the Learners in Vhembe district;
- To investigate and examine the challenges faced by educators in the inclusion of ADHD learners in mainstream education towards their academic achievement; and
- To make certain recommendations in order to provide accountable support for educators to meet the special needs of the Attention Deficit Hyperactivity Disordered (ADHD) learner in mainstream education.
- To evaluate the mechanism to limit the labeling of ADHD learners by other learners

1.5 Research Questions

- What is the relationship between the symptoms of the various disorders and the symptoms of ADHD?
- What are the causes of the ADHD on the Learners?
- What are the challenges faced by educators in the inclusion of ADHD learners in mainstream education.
- How to make recommendations to support educators to meet the special needs of the Attention Deficit Hyperactivity Disorder (ADHD) learner in mainstream education?

1.6 Research Hypothesis

- Lack of individual attention to ADHD result in poor performance by educators and thereof affect the ability to teach ADHD learner
- Ridicule and labeling of ADHD learners by other learners outside the classroom make educators to have little control in their situation
- Lack of acceptance and accommodation of ADHD learners in classroom result in educators struggling to include their mainstream group

1.7 Limitations of the Study

There were certain factors which limited my research project such as:

- Lack of funds for stationary
- Lack of resources in the library
- Lack of cooperation by the respondents
- Lack of funds for petrol
- Lack of funds for proof-reader

1.8 Significance of the Study

ADHD is a common problem in children; it is diagnosed in about 30-50% of patients who are referred to child psychiatric clinics (Biederman, 2005:9). The prevalence of ADHD in the community has been reported to be from 1.7 to 16% (American Psychiatric Association, et al., 2004:78). More than 50% of patients with Attention Deficit/Hyperactivity Disorder have disorders. About 30-40% of children with ADHD have Oppositional Defiant Disorder (August, Realmuto, MacDonald, Nugent, & Crosby, 1996), 30-50% has Conduct Disorder (Biederman et al., 1992:32), 38% have Depressive Disorders (Pliszka, 1998:90), and 25% have Anxiety Disorders (Jensen, et al., 2001:12).

According to Hechtman, (2000:89) comorbid disorders affect the manifestation, severity of symptoms, and prognosis and treatment response in patients with ADHD. For example, when CD with ADHD, it makes ADHD symptoms more severe and patients exhibit more aggression, anxiety and poor relationships (Barkley, et al., 1992:12). According to Biederman, et al. (1996:23), disorders such as Conduct Disorders, Affective Disorders and Anxiety Disorders are predictive factors that affect the chronic course of ADHD. The presence of anxiety disorders is associated with a poor response of ADHD symptoms to stimulant medication (DuPaul, Barkely, & McMurray, 1994:89; Pliszka, 1998:78). It is therefore important that disorders of ADHD should be thoroughly investigated as they may influence diagnosis, treatment, outcome of the disorder and academic achievement.

1.9. Delimitation of the study

The purpose of demarcating a study is to make it more manageable and to this end, the proposed research was limited to selected educators and ADHD learners in schools of Vhembe district; Limpopo Province. The study focused on challenges faced by the educators with regard to the management of the ADHD learners towards their academic achievement in Vhembe region.

1.10 Brief Summary of Literature Review

Attention Deficit Hyperactivity Disorder (ADHD) has been described in medical literature as a chronic disorder which may impact upon many aspects of an individual life. In 1902, pediatrician, George Still, described a group of children who were hyperactive, impulsive and inattentive. ADHD affects approximately 6% of the population, while less than 2% receive treatment. According to the National Institute of Mental Health (2010:67), there was no evidence that ADHD is over diagnosed in our society, and child psychiatrist Peter Jensen from the National Institute of Health found that less than one in eight children who met diagnostic criteria for ADHD were taking medication. ADHD is a serious societal problem which can make children of this nature to be misunderstood at times (Landsberg, 2005:23). Often they are unpopular and cause frustration to peers and teachers.

Background on ADHD

ADHD is a cluster of developmental symptoms, characterized by an age and situation inappropriate ability to focus and sustain attention; and/or impulsive response style; and/or unfocused, excessive movement, restlessness and fidgetiness, severe enough to handicap the learner's optimal motor, cognitive, social and/or emotional development at specific stages of life, spanning from childhood to early adulthood (Engelbrecht & Jansen, 2003:89). ADHD is characterized by poor attention and concentration, impulsiveness, motor hyperactivity before the age of seven years, and must persist for at least six months. There is a tendency to divide the syndrome into attention deficit with hyperactivity, and attention deficit hyperactivity, because some learners do not present with motor hyperactivity (Engelbrecht & Jansen, 2003:78). Bostic (2004:45) highlights that the principal characteristics of ADHD are:

- Hyperactivity;
- Inattention; and
- Impulsivity

promoting school frameworks (Foster, van der Jansen, 2003:90). The teacher support team

No one knows exactly what causes ADHD. It runs in families, so genetics may be a factor. A complete evaluation by a trained professional is the only way to know for sure if a child has ADHD. Treatment often includes medications to control symptoms. A structure at home and at school is also important. Parenting classes or behavioral therapy may also help (National Institute of Mental Health, 2009: 38). Difficulties in sustaining attention, impulsivity and hyperactivity are commonly associated with learning difficulties. Children who cannot concentrate experience learning difficulties. It is therefore important to understand the close relationship between these two difficulties (Goodyer & Fourie, 1999:90). The terminology of Attention Deficit Disorder (ADD) has changed because this disorder is now viewed as having two distinct components, namely inattentiveness and hyperactivity.

Members of staff from provincial and regional departments of education and from special schools, and would include therapists, psychologists and school counsellors. The primary function of these district based support teams will be

Challenges Facing Educators

Owing to his daily association with the child and his professional training, the educator is in a good position to notice behaviour and learning problems. The school offers a favourable venue for the systematic observation of the child in different situations; in the teaching-learning situation in the classroom, in his sport involvement and in his participation in other extramural activities. By observing the child over a broad spectrum and in different situations, the educator can gather data which will enable him to reach a better understanding of the child; intimate knowledge ensures a greater dissociation which gives a more objective stance to the interpretation. The educator is in a good position to do the initial identification. In the initial identification his opinion or judgment plays an important role, yet his intuitive or pre-scientific understanding or comprehension of the child is insufficient (Dore 2010:77).

Community-based education support

Teacher support teams

Teacher support teams differ from didactic aid and assistance teams. The latter emphasize direct service delivery and support to learners, whereas teacher support teams focus on empowering teachers to develop preventative and primitive strategies in the health-

promoting school framework (Engelbrecht & Jansen, 2003:90). The teacher support team is composed of teachers in the school who act as the core support team and, where appropriate, include parents and learners. Preferably the coordinator of this team should be an educator with training and/or experience in working with learners with difficulties. This team functions as a permanent structure in the school setting, but involves different teachers, parents and learners on an ongoing basis, based on the needs of the teachers, parents and learners themselves and the role they have to play in the process of providing support to learners (Engelbrecht, 2003:23).

District based support teams

District based support teams comprises of staff from provincial and regional departments of education and from special schools, and would include therapists, psychologists and school councilors. The aim would be to pool limited available resources in order to make optimum use of them. The primary function of these district based support teams will be to evaluate programmes, diagnose their effectiveness and suggest modifications (Engelbrecht & Jansen 2003:8).

Special schools as Resource Centers

Special schools and settings will be converted to resource centers and integrated into district based support teams so that they can provide specialized professional support in curriculum, assessment and instruction to neighborhood schools. This new role is performed by special schools and settings in addition to the services that they provide to their existing learner base (Engelbrecht & Jansen 2003:18).

Community-based education support

Community-based education support should comprise of all human resources and services that could support the system and work collaboratively. Educators now need to actively participate and contribute towards shaping a vision and mission statement that

reflect the values and characteristics of an inclusive learning community. The shaping process includes connecting people so that they eventually arrive at sharing beliefs. This requires a great deal of collaboration. “Collaboration is no longer an ideal to be pursued, but has become a necessity” (Engelbrecht & Green 2001:22).

Psychological service

Psychological services comprises of experts in the “field of education.” They are the professional support personnel who work with many stakeholders to address the needs inclusive of education. Their role is to ensure that there is collaboration and support to learners and educators. The role of the collaboration is at the heart of a more preventative and developmental approach in inclusive education. White Paper 6 (DoE 2001:8) recommends a community-based approach to support with the establishment of institutional level as well as district-based support teams , including psychological services, as strategies to facilitate this approach.

These teams provided the full range of education support services by pooling limited available professional and other resources in order to make optimum use of them (Muthukrishna 2001:33). Collaboration must be recognized as a critical feature for success in this approach. The collaboration itself should be inclusive , encompassing educators, principals, administrators, parents, learners, professional support personnel(psychological services) and should focus on shared decision making in governance, planning, delivery and assessment in education (Friend & Cook , 2000:44).

1.11 Definitions of the concepts

- **Attention Deficit Hyperactivity Disorder (ADHD)**

ADHD is a significant deficit in age- appropriate attention, impulse control and rule governed behavior (compliance , self-control and problem solving) that arises at infancy or early childhood, is significantly pervasive in nature, and is not the direct result of general intellectual retardation, severe language delay or emotional disturbances or gross sensory or motor retardation (Picton, 2002:22).

- **Disorder**

Disorder is a problem or illness that affects person's body or mind (Engelbrecht & Jansen 2003:89). It is the disturbance of the normal state of the body or organ, thus causing a skeletal, muscular or neurological problem. Disorders may occur in various degrees of severity from barely perceptible to profoundly disabled (Kapp, 2002:33).

- **Challenges**

Challenges prepare people for action, are learned from experience and exert a motivating force on behavior. Sdorow and Rickabaugh (2000:12) say challenges are cognitively and emotionally toned dispositions acquired through maturation and experience and they influence a person's approach-avoidance behavior towards persons, objects, events and ideas. All challenges are learned consciously or unconsciously and usually they become stronger and long lasting. Pintrich and Schunk (2002:11) maintain that a challenge always involves a relationship and will involve a certain disposition or action.

- **Disability**

According to Engelbrecht and Jansen (2003:1) disability is a defect that can take place at any stage of life or at birth. The nature and degree of severity of the disability may influence the impact of such a disability on a learner, the family and all those involved with the learner. For those learners with physical or sensory difficulties the nature of the problem is often clearly recognizable. In other cases it may not be obvious to the teacher that the learner has a problem at all, e.g. Intellectual problems, such as retaining information or concentrating on required classroom tasks for any length of time.

- **Education**

Education are those actions in which human beings attempt to produce lasting improvements in the structure of the psychic and physical dispositions of other people in accordance with what is morally justifiable and worthwhile, to retain or reinforce dispositions they consider positive or to prevent the formation of dispositions they regard as negative (Smith , 1999:56).

- **Educator**

According to the South African Schools Act, 1996 an educator is any person who teaches, educates or trains other persons or who provides professional educational services, including professional therapy and education psychological services at any public school, further education and training institutions, departmental office or adult basic education center, and who is appointed in a post or any educator establishment under this Act.

1.12 Organisation of the study

CHAPTER 1: ORIENTATION OF THE STUDY

Chapter 1 outlines the introduction, statement of the problem, objectives of the study, the research question, significance of study, definition of concepts, description of research methodology and a brief summary of literature review.

CHAPTER 2: LITERATURE REVIEW

Chapter 2 outlines literature review of the challenges facing educators in the inclusion of ADHD learners, with emphasis in mainstream classrooms.

CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY

This chapter outlines the research design and method used in the study. Different sources of research to access and collect the challenges facing educators with regard to the management of the ADHD learners towards their academic achievement in Vhembe region.

CHAPTER 4: DATA PRESENTATION, ANALYSIS AND INTERPRETATION

The information collected was presented analyzed and interpreted in this chapter. The results obtained from the respondents were, studied and interpreted in accordance with the title of this study.

CHAPTER 5: FINDINGS, CONCLUSION AND RECOMMENDATION

This chapter discusses the main findings, recommendations and the conclusion.

CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

Attention Deficit Hyperactivity Disorder (ADHD) has been described in the medical literature for about one hundred years. In 1902, pediatrician, George Still, described a group of children who were hyperactive, impulsive and inattentive. Unfortunately he didn't understand that ADHD is a medical disorder and labeled these children as morally defective. ADHD affects approximately 6% of the population, while less than 2% receive treatment. According to the National Institute of Mental Health (2010:12), there was no evidence that ADHD is over diagnosed in our society, and child psychiatrist Peter Jensen from the National Institute of Health found that less than one in eight children who met diagnostic criteria for ADHD were taking medication. ADHD is a serious societal problem which can make children of this nature to be misunderstood at times (Landsberg, 2005:11). Often they are unpopular and cause frustration to peers and teachers.

Children with ADHD will usually have a short attention span and are easily distracted, and may also be hyperactive and impulsive. These symptoms are usually noticed before the child is seven years old and occur in more than one setting, for example both at home and at school. Statistics have also shown that over the years, from 1997-2006; there has been an increase of children with ADHD having learning disabilities (Patricia & Pastor, 2010:78). These children then had a primary and a secondary barrier to deal with and thus educators and parents had to seek guidance and support from various mental health professionals in order to cope and educate such children (National Institute of Mental Health, 2009:22).

ADHD Treatment often includes medications to control symptoms. A structure at home and at school is also important. Parenting classes or behavioral therapy Children with ADHD and Learning Difficulties (LD) had to have contact with a mental health professional, use prescription medication, and have frequent health care visits. These children also have to use special education services. It is important to remember that ADHD is not the only medical condition that can cause impulsivity and hyperactivity. Children with anxiety, depression or a learning disability can also have a

short attention span and be hyperactive and/or impulsive. Pediatricians and school psychologists can assist children with ADHD to cope with the educational and societal demands (National Institute of Mental Health, 2009:56).

2.2 Background on ADHD

ADHD is a cluster of developmental symptoms, characterized by an age and situation inappropriate ability to focus and sustain attention; and/or impulsive response style; and/or unfocused, excessive movement, restlessness and fidgetiness, severe enough to handicap the learner's optimal motor, cognitive, social and/or emotional development at specific stages of life, spanning from childhood to early adulthood (Engelbrecht & Jansen, 2003:54). ADHD is characterized by poor attention and concentration, impulsiveness, motor hyperactivity before the age of seven years, and must persist for at least six months. There is a tendency to divide the syndrome into attention deficit with hyperactivity, and attention deficit hyperactivity, because some learners do not present with motor hyperactivity (Engelbrecht & Jansen, 2003:78). Bostic (2004:11) highlights that the principal characteristics of ADHD are:

- Hyperactivity;
- Inattention; and
- Impulsivity

No one knows exactly what causes ADHD. It runs in families, so genetics may be a factor. A complete evaluation by a trained professional is the only way to know for sure if a child has ADHD. Treatment often includes medications to control symptoms. A structure at home and at school is also important. Parenting classes or behavioral therapy may also help (National Institute of Mental Health, 2009: 38). Difficulties in sustaining attention, impulsivity and hyperactivity are commonly associated with learning difficulties. Children who cannot concentrate experience learning difficulties. It is therefore important to understand the close relationship between these two difficulties (Goodyer & Fourie, 1999:90). The terminology of Attention Deficit Disorder (ADD) has

changed because this disorder is now viewed as having two distinct components, namely inattentiveness and hyperactivity.

• **Inattention** occurs when a child has difficulty in paying attention to the details of tasks or activities: when he or she struggles to listen to full instructions: and when he or she is forgetful and easily distracted from tasks (Engelbrecht & Snyman, 1999:9).

2.3.3 Psychological factors

• **Hyperactivity** occurs when the child can't sit still; when they constantly move, fidget and squirm; when they move or run excessively; when they talk more than other children their age; and when they are impulsive and cannot wait for their turn (Engelbrecht & Snyman, 1999:34).

2.3.4 Health factors

Because of these two factors, this disorder is commonly called Attention Deficit with or without Hyperactivity Disorder (AD/HD). It is important to understand this distinction as there are many children who display inattentiveness without Hyperactivity- which can be overlooked when teaching such children (Picton, 2002:121). It may also cause ADHD, because the learner does not understand what is expected of him/her (Lewis, 2002:78).

2.3 Causes of ADHD in children

2.3.5 Family factors

According to Lewis (2002:23) the causes of ADHD are multiple and varied and may include the following:

Family structures and role models do not have clear guidelines on behavior. They are allowed to do as they please, and discipline is not consistent (Lewis, 2002:23).

2.3.1 Neurological factors

Neurological immaturity might be an important cause. In the past it was said these learners suffer from minimal brain dysfunction. There might be certain neurological soft signs, e.g. slow motor and speech development, poor visual perceptual development, poor social skills (Lewis, 2002:23). Other factors could be lead poisoning, and low levels of radiation (Lewis, 2002:33).

2.3.2 Genetic factors

About 20% of ADHD learners have a father or uncle who is described as having been the same, always busy and very naughty as learners. It seems as if there is a strong genetic indication, but there is uncertainty as to the mechanisms involved (Picton, 2002:121).

2.3.3 Psychological factors

The learner's temperament, emotional stability and his/her general psychological make up may contribute to ADHD (Lewis, 2002:29).

2.3.4. Health factors

Allergies may cause tension-fatigue syndrome. Allergens cause an upset in the chemical balance of the brain, which in turn results in hyperactivity and later in attention deficit. Undetected sensory deficits, such as visual or hearing loss, may also cause ADHD, because the learner does not understand what is expected of him/her (Lewis, 2002:78).

2.3.5 Family factors

Learners with poor family structures and role models do not have clear guidelines on behavior. They are allowed to do as they please, and discipline is not consistent (Lewis, 2002:44).

2.3.6 Environmental factors

The most common known environmental factors causing hyperactivity are food coloring, preservatives and salicylates. Other factors could be lead poisoning, and low levels of radiation (Lewis, 2002:33).

2.3.7 Educational factors

If the learner is placed in a school or class that is inappropriate for his/her needs, such as too high or low expectations, attention deficit and/or hyperactivity (ADHD) may manifest. Sometimes the teacher's personality, e.g. a restless, jerky, impatient personality, may cause the learner to manifest attention deficit and/or hyperactivity. Learning disabilities accompanied by under or over stimulation may also result in attention deficit and/or hyperactivity (Lewis, 2002:56).

2.3.8 Brain injuries

Children who have suffered a brain injury may show some behaviors similar to those of ADHD. However, only a small percentage of children with ADHD have suffered a traumatic brain injury (Lewis, 2002:57).

2.3.9 Sugar

The idea that refined sugar causes ADHD or makes symptoms worse is popular, but research discounts this theory than supports it. In one study researchers gave children foods containing either sugar or a sugar substitute every other day. The children who received sugar showed no different behavior or learning disabilities than those who received the sugar substitute. In another research in which children were given higher than average amounts of sugar substitutes, showed similar results (Picton, 2002:23).

2.4 Challenges Facing Educators

Early identification of the underlying disorder and a comprehensive treatment plan can help avert many difficulties, Bostic (2004:12), says children with ADHD may experience a combination of the symptoms below:

- Difficulty waiting their turns in line, waiting to give an answer during class, or waiting their turn during games. These children may appear impatient or may annoy others.

2.4.1 Identification of ADHD

Owing to his daily association with the child and his professional training, the educator is in a good position to notice behaviour and learning problems. The school offers a favourable venue for the systematic observation of the child in different situations; in the teaching-learning situation in the classroom, in his sport involvement and in his participation in other extramural activities. By observing the child over a broad spectrum and in different situations, the educator can gather data which will enable him to reach a better understanding of the child; intimate knowledge ensures a greater dissociation which gives a more objective stance to the interpretation. The educator is in a good position to do the initial identification. In the initial identification his opinion or judgment plays an important role, yet his intuitive or pre-scientific understanding or comprehension of the child is insufficient (Dore 2010:90).

Early identification of the underlying disorder and a comprehensive treatment plan can help avert many difficulties, Bostic (2004:9), says children with ADHD may experience a combination of the symptoms below:

- Difficulty paying attention, focusing on schoolwork and remembering tasks. A child with ADHD may be easily distracted by peers, sounds, or even artwork on classroom walls.
- Problems organizing schoolwork and remembering tasks. Multiple part verbal directions, such as requesting a student turn to page 133 in your math book, complete problems 1-6, then begin reading pages 20-25 in your history book," may be confusing. Homework assignments and textbooks may be forgotten or misplaced frequently, and papers and notebooks may be quiet cluttered.
- Inability to sit still and remain seated. Children with ADHD may not know why it is difficult for them to sit still. They may be unable to sit quietly, despite frequent reminders.

- Difficulty waiting their turns in line, waiting to give an answer during class, or waiting their turn during games. These children may appear impatient or may insist upon being first. These behaviors can be misunderstood and can easily annoy others.
- Learning disorders are common in people with ADHD. A child's difficulties in school should not be presumed to be due entirely to ADHD. If the child still has academic difficulty after ADHD symptoms are treated, an educational evaluation for a learning disorder should be considered. A child's repeated reluctance to attend school may be an indicator of an undiagnosed learning disability.
- Other mental health conditions, compounding any learning and behavioral challenges. Having one mental health condition does not "inoculate" the child from having other conditions as well. Children with ADHD commonly have co-existing mood and anxiety disorders.
- Speech and language problems that may need evaluation by specialists.
- Side effects from medications. Medications may have cognitive or behavioral effects or physically uncomfortable side effects that interfere with school performance. After a child begins receiving medical treatment for symptoms, any mood changes or new behaviors should be discussed with parents, as they can reflect medication side effects.

2.4.2 Training and competency

According to Kapp (2002:7) remediation of the problems of learning disabled children, i.e. ADHD is a highly specialized subject area which demands specific knowledge and skills from practitioners/teachers. Remedial teachers are specifically trained for this purpose by universities, colleges and education departments to identify and teach ADHD children and to help them with their particular problems.

Learners are increasingly finding themselves in disadvantaged situations that stem mostly from poverty, lack of parental support for education and specific learning needs. It is therefore utmost important for educators to have a good understanding of these learners needs in their unique and relevant contexts (Engelbrecht & Jansen 2003:56). Running a classroom so that it becomes an optimally healthy and inclusive learning environment for all the learners is an extremely complex task. It involves you in a number of different roles each of which needs to be constantly adjusted and coordinated into a harmonious and productive whole (Donald, Lazarus & Lolwana, 2002:23).

The educator needs to qualify to teach learners with barriers to learning by doing constant researches attend workshops/seminars and perhaps also, consider doing in-service courses to uplift their knowledge and understanding of learners with ADHD. Educators depend and rely on School Based Support Teams to assist and guide them with the teaching and learning process by identifying and addressing learner disabilities, thus empowering them to develop preventative and promotive strategies in the health-promoting school framework (DNE, 2001:12).

Bothma, Gravett and Swart (2000:23) state that; the challenge facing many South African educators is that they have not been trained to cope with the diversity of learners entering mainstream schools. Educators will have to be adequately prepared to assess special educational needs, to adapt curriculum content to the needs of learners in the classroom, and to utilize special assistive devices and instructional aids required by some of the ADHD learners (Lewis, 2002:23).

2.4.3 Knowledge and Experience

Educator's feelings that they are not adequately trained or have the abilities that are needed to cope with ADHD learners can be seen as one of the causes of their negative attitudes to inclusive education (Weeks, 2000:8). According to Sethosa (2001:76) educators challenges in inclusive education are closely related to their feelings of competency and effectiveness. Educators feel that they are adequately equipped

(competent and effective) to teach learners with disabilities and/or handicaps if they have relevant training in that field (Mastropier & Scruggs, 2000:23). The training of educators also seems to be a problem for inclusive education in South Africa. The challenge thus facing many South African educators is that they have not been trained to cope with the diversity of learners entering schools.

The most important requirement for the class and subject teacher to fulfill his ortho-
In schools, educators must assume varying roles. One of their primary roles is to advance the principle of inclusion. According to Dore (2010:89) the framework for upholding the law is not well defined, and educators struggle with how best to make accommodations to initiate best practice. The role of general education educators in public education environments in relationship to special education is one of the most challenging obstacles general educators indicate they experience, apart from understanding the different disabilities. One of the main concerns that general education educators express is in carrying out mainstreaming and inclusion is in making appropriate accommodations for special education students, such as, ADHD learners. Often, appropriate accommodations are not well defined (Lilly, 2001:21). These obstacles sometimes create difficulties (Lewis, 2002:23).

2.4.4 Changes in teaching methods

2.4.4 Acceptance of ADHD learners

Inclusive education implies that ADHD learners must be confronted with a differentiated
Acceptance should be unconditional. No preconditions may be set. The parent or educator who sets preconditions or makes certain demands before accepting a child, with ADHD, is already alienating himself from the child (Henning, 2010:20). According to Kapp (2002:12) acceptance is more than mere intellectual acceptance or acquiescence. It is a spiritual and emotional oneness of the parent with the child and of the child with the parent and with the educator thereof. It is important, because acceptance by the parent teaches the child to accept himself and others, hence the importance for the atmosphere in the family to be such that the child actually experiences this acceptance. This child will then feel that sense of acceptance in any environment, especially school. When that happens, the educator will also begin to foster such acceptance of learners with diverse

needs, such as ADHD, thus adjusting the class programmes and drawing Individual Educational Plans (IEPs) to accommodate learners with ADHD (Green, 2001:90).

The DoE (2002:45) indicates that pupils with "mild learning disabilities" are recommended to be placed in mainstream schools and receive additional help which includes special materials and equipment and consultation, tutoring, itinerant services,

The most important requirement for the class and subject teacher to fulfill his orthopedagogical task lies in his personality. Even the knowledgeable and competent teacher will not succeed in helping the child with problems if his disposition precludes willingness to:

- accept the child with his problems unconditionally;
- become involved with the child and try to assist him;
- make time and take the trouble to collect the required information, to plan for the child and to assist him;
- work together with others (the parents, other teachers, etc.), in a professional and tactful manner; and
- Evaluate his/her conduct critically.

Learning for children with ADHD requires individual attention, support and encouragement. It becomes impossible with the large class of 38-40 learners (Clarke, 1999:9). According to Kapp (2002:76) the ADHD child naturally requires individual attention. In order to be effective, the traditional size of the class will have to be adjusted considerably. Smaller classes are essential. According

Inclusive education implies that ADHD learners must be confronted with a differentiated curriculum and evaluation system that will enable them to progress at their own rate and at their own level while placed in mainstream classes ADHD learners to reach optimal learning (Engelbrecht, 2000:99). Inclusive education is assisting all children by facilitating problem-solving and learning to develop their abilities by exposing them to the abilities of normal people, and *vice versa* (Swart & Pettipher, 2001:33). This involves drastic fundamental changes to school curricula, the role of educators in the classroom and educator training or development.

educators. In inclusive schools it is vital that the school's vision for inclusive education is publically stated and based on the democratic and egalitarian principles of inclusion; the belief that all children can learn, that all children have the right to be educated with their peers in age-appropriate mainstream classrooms, and that meeting the diverse educational and psychological needs of all

2.4.7 Time allocation

The DoE (2002:45) indicates that pupils with “mild learning disabilities” are recommended to remain in mainstream schools and receive additional help which includes special materials and equipment and consultation, tutoring, itinerant services, resource room with special education teacher and a diagnostic prescriptive teaching center with their times adjusted so that they could understand and complete their tasks. Dulcan and Martini (1999:22) predict that the standards would possibly drop due to the neglect of the “regular” learners in order to accommodate the ADHD learners. Educators feel that it is not fair to expect the regular learners to support and carry the ADHD learners when their focus should be on their own education (Pillay, 2001:12).

2.4.8 Classroom

Learners with diverse needs, such as ADHD require individual attention, support and guidance from their educator's, which becomes impossible with the large class of 38-40 learners (Clarke, 1999:9). According to Kapp (2002:78) the ADHD child naturally requires more attention and assistance. For teaching to be effective, the traditional size of the class will have to be adjusted considerably. Smaller classes are essential. According to Pretorius (2000:56) educators generally felt that having to cope with the normal day-to-day problems in large classes was nearly more than they were able to do. The concern aired was that an impaired learner demanded so much more attention, yet no allowance was made for this by the education department in the prescribed class sizes (Pretorius, 2000:78).

Educational transformation within an inclusive framework impacts on the roles and responsibilities of principals and educators. In inclusive schools it is vital that the school's vision for inclusive education is publically stated and based on the democratic and egalitarian principles of inclusion: the belief that all children can learn, that all children have the right to be educated with their peers in age-appropriate mainstream classrooms, and that meeting the diverse educational and psychological needs of all

children is the responsibility of the whole-school community (Engelbrecht & Jansen, 2003:99). effort regarding learners with behavioural and emotional needs are parents. Parents are fundamental to the uninterrupted and continuous development of the learner. Depending on the wishes and based on the rights of all learners and their parents, including ADHD learners, no learner may be turned away from any public school if it is at all possible to accommodate the learner. This means that schools may be legally obliged to provide appropriate educational support services and make structural adjustments to accommodate ADHD learners, should they want to attend a regular public school, irrespective of age, gender and race (Lewis, 2002:23). requires a certain degree of capital investment (in buildings and equipment) and an even greater degree of investment. In order to manage individual behaviours, teachers could match different discipline approaches to different learners, i.e. talk to a learner, have learners visualize appropriate behavior, peer-group counseling, behavior contracts, etc. Sometimes the best strategy for a learner may be one matched by a poorly developed intelligence. For example, if a learner has behavior problems due to poorly developed interpersonal intelligence, he may benefit more from activities that seek to develop his social skills. In most cases however, the best strategies will be in a learner's area of strength, which is somewhat difficult with ADHD learners (McCarty, 2006:12). addressing of learning difficulties (Kapp, 2002:8).

2.4.9 Parental involvement

According to Kapp (2002:78) some parents have a negative attitude towards the school, which leads to their children manifesting poor school attendance and a resistance towards the school in general and some parents generally lack interest in their children, do not supervise their schoolwork/homework and do not create adequate opportunities for communication with their children in order to bring them up effectively.

According to Engelbrecht and Jansen (2004:34) some parents may be willing to be voluntary teacher aides, either assisting in the classroom or in the preparation of material. Teachers should make sure that they avail themselves of this valuable voluntary resource and should regularly send out invitations to parents. A productive parent-teacher

relationship provides greater understanding of the needs of a learner. Central to any concerted effort regarding learners with behavioural and emotional needs are parents. Parents are fundamental to the uninterrupted and continuous development of the learner between home and school, without which, the education process would be retarded (De Jong, 2000:34).

2.4.10 Adequate funds

According to Dyson and Forlin (1999:56) inclusive education requires a certain degree of capital investment (in buildings and equipment) and an even greater degree of investment in human resources (educators, managers and administrators). In June 1998 an international conference was held in Salamanca, Spain with the purpose of developing an international policy document on special needs education. The Salamanca statement reaffirmed that inclusive education is not only cost efficient but also co-effective. The most immediate challenge facing a new South African funding framework is to redress the legacy of apartheid of backlogs and inequities. However, this should be achieved within the policy of inclusive education and a commitment to the accommodation of the full diversity of learning needs and the addressing of learning difficulties (Kapp, 2002:8).

2.5 Support governing body

Support is when one receives implicit as well as explicit instruction and guidance concerning the world in which one lives. One learns to cope with one's world through language; to think, to differentiate, to see similarities and differences, as well as to understand relationships (Kapp, 2002:8).

2.5.1 Management

The school management team plays a pivotal role in directing and managing the development of an inclusive school, and hence needs competencies and knowledge in

accommodating diversity as well as addressing barriers to learning and development. Where these competencies are absent, attempts should be made to develop them.

Management should provide leadership in the process of building an inclusive school (Engelbrecht & Jansen, 2003:34). Educators as well as other staff members should be involved actively. The principal has the responsibility of encouraging positive attitudes as well as arranging collaboration, support and defining roles. The whole – school community should share responsibility for the individual learner and not only the educator (Engelbrecht & Jansen 2003:22). According to Lilly (2001:88) healthy guidance and positive support by the principal was critical in upholding the law of inclusion. Principals are central in helping alleviate personality conflicts, providing adequate planning time, providing collaboration among staff, and in allowing special education educators to spend structured and sufficient time in general education classrooms. Daam, Beirne-Smith and Latham (2001:336) maintain that all educators should be given more training in collaboration, and special education educators, general education educators, and management should be provided with professional development to help them understand their lawful responsibilities in providing a collaborative environment in which inclusion is made available to all groups.

2.5.2 School governing body

The school governing body (often referred to with the acronyms of SGB or GB) is a legally constituted body governed by stipulated processes of election. Parents select five members to represent them. The educators elect two representatives, the non-educators appoint one member. The principal is the only non-elected member who becomes a part of the governing body (Kapp, 2002:28). The number of representatives increases in larger schools with the condition that the parent members must always be one more than half of all the members who may vote, thus having more votes also means having the power to make all decisions at school, i.e. finances, budgets funding for resources, in-service for educators, learner welfare, etc.

The school governing body also plays a pivotal role in directing and managing the development of an inclusive school, in developing a common vision for the school, and incorporating the values and principles embodied in the schools mission statement in a practical school policy (Donald, Lazarus & Lolwana 2002:90).

2.5.3 School – based support teams

A school-based support team is a team of members within the school which lends support, guidance and assistance to anyone in need of help. The establishment of school-based support teams is in keeping with the notion that the capacity of the school community needs to be developed in order to ultimately meet the individual needs of all learners. Although principals, educators, parents and learners as equal members fulfill a vital role on such teams, the team can also be strengthened by the expertise of external facilitators and consultants (Engelbrecht & Jansen 2003:99) Changing roles require reflection, re-thinking of one's values, beliefs and attitudes towards diversity, education and learning , movement from isolation to collaboration, changing leadership roles and perceptions of leadership, and a focus on new instructional strategies to accommodate diversity. The primary function of these teams will be to put in place properly coordinated learner and educator support services that will support the learning and teaching process by identifying and addressing learner, educator and institutional needs (Kapp, 2002:8).

2.5.4 Teacher support teams

Teacher support teams differ from didactic aid and assistance teams. The latter emphasize direct service delivery and support to learners, whereas teacher support teams focus on empowering teachers to develop preventative and primitive strategies in the health-promoting school framework (Engelbrecht & Jansen, 2003:34). The teacher support team is composed of teachers in the school who act as the core support team and, where appropriate, include parents and learners. Preferably the coordinator of this team should be an educator with training and/or experience in working with learners with difficulties.

This team functions as a permanent structure in the school setting, but involves different teachers, parents and learners on an ongoing basis, based on the needs of the teachers, parents and learners themselves and the role they have to play in the process of providing support to learners (Engelbrecht, 2003:44).

2.5.5 District based support teams

District based support teams comprises of staff from provincial and regional departments of education and from special schools, and would include therapists, psychologists and school councilors. The aim would be to pool limited available resources in order to make optimum use of them. The primary function of these district based support teams will be to evaluate programmes, diagnose their effectiveness and suggest modifications (Engelbrecht & Jansen 2003:22).

2.5.6 Special schools as Resource Centers

Special schools and settings will be converted to resource centers and integrated into district based support teams so that they can provide specialized professional support in curriculum, assessment and instruction to neighborhood schools. This new role will be performed by special schools and settings in addition to the services that they provide to their existing learner base (Kapp, 2002:8).

2.5.7 Community-based education support

Community-based education support should comprise of all human resources and services that could support the system and work collaboratively. Educators now need to actively participate and contribute towards shaping a vision and mission statement that reflect the values and characteristics of an inclusive learning community. The shaping process includes connecting people so that they eventually arrive at sharing beliefs. This requires a great deal of collaboration. Collaboration is no longer an ideal to be pursued, but has become a necessity (Engelbrecht & Green 2001:9).

2.5.3 Psychological service

Psychological services comprises of experts in the field of education. They are the professional support personnel who work with many stakeholders to address the needs of inclusive education. Their role is to ensure that there is collaboration and support to learners and educators. The role of the collaboration is at the heart of a more preventative and developmental approach in inclusive education. White Paper 6 (DoE 2001:8) recommends a community-based approach to support with the establishment of institutional level as well as district-based support teams , including psychological services, as strategies to facilitate this approach.

These teams will provide the full range of education support services by pooling limited available professional and other resources in order to make optimum use of them (Muthukrishna, 2001:90). Collaboration must be recognized as a critical feature for success in this approach. The collaboration itself should be inclusive , encompassing educators, principals, administrators, parents, learners, professional support personnel (psychological services) and should focus on shared decision making in governance, planning, delivery and assessment in education (Friend & Cook , 2000:89).

2.6 Conclusion

ADHD is characterized by poor attention and concentration, impulsiveness, motor hyperactivity before the age of seven years, and must persist for at least six months. Children with ADHD will usually have a short attention span and are easily distracted, may also be hyperactive and impulsive. Statistics have shown that there are learners with ADHD with learning difficulties and without learning difficulties.

Statistics have also shown that ADHD is more prevalent in boys than in girls. Learners with ADHD undergo many neurological, genetic, psychological, health, family, environmental and educational factors. However, there are many interventions that aides in the treatment of such learners. Some of which are medical treatment, dietary control,

psychological treatment and behavior therapy. Educators and parents dealing with ADHD learners need to have high levels of understanding, knowledge and tolerance towards them. There are many support structures and guidelines to assist and guide educators and parents to cope and handle such learners. Educators and parents can work towards collaborative consultation to overcome the challenges/difficulties they face with ADHD learners. The next chapter will focus on the research methodology used in the investigation.

Research methodologies refer to the rationale and the philosophical assumptions that inform the research process. Research methodologies are informed by both quantitative and qualitative approaches.

CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY

3.1 Introduction

According to Leedy (2004:90), quantitative approach is based on positivism, in which

The aim of the research design is to illustrate an overall methodology together with the methods used to achieve the objectives of this research as stated in chapter one. It also describes the overall methodology adopted, population identification, sampling procedures and unit of analysis, the means to study site methods for data collection and analysis.

Quantitative research focuses on measuring objective facts and variables and uses

3.2. The Study Area

statistics and numbers (Neuman, 2006:23). Because of the power the

statistical evidence provides to research methods, it was used in this study to statistically analyze data. The study was in the form of an exploratory, descriptive cross-sectional survey, which was conducted on educators faced with challenges from ADHD Learners in public schools in Vhembe Region.

Qualitative study defines qualitative study as an inquiry process of understanding a

3.3 Research Methods

social or human problem based on building a complex, holistic picture formed with word

and informant and conducted in a natural setting. From the participant's point of view, constructivist or post-positivist approach. In this study In the preceding chapter educators challenges towards the inclusion of ADHD learners were described by means of literature research. The literature study has revealed numerous factors which may influence educator's challenges towards inclusive education for ADHD learners. Mainstream educators feel that they are not adequately trained and hence they lack the abilities to cope with a diversity of learners, which includes ADHD

learners. Lack of relevant knowledge and experience of learners with special educational needs also affects the educator's challenges towards inclusive education. In order to gain insight into educator's challenges towards inclusive education and their perceptions of the success of each education, a research instrument was developed to provide the necessary data. This research instrument comprised a questionnaire administered to school educators in the Vhembe district in the Limpopo province.

Research methodologies refer to the rationale and the philosophical assumptions that underlie a particular study (Leedy, 2004:9). This is therefore, informed by both quantitative and qualitative approaches.

According to Leedy (2004:90), quantitative approach is based on positivism, in which scientific explanation is adopted. Quantitative data collection methods are based on measurements using verification instruments in order to objectify phenomena under study. Measuring instruments involves the assignment of numbers, in terms of fixed rules, to reflect differences between them in some of their characteristics.

Quantitative research focuses on measuring objective facts and variables and uses statistical analyses to express numbers (Neuman, 2006:23). Because of the power the statistical evidence provides to research methods; it was used in this study to statistically support how the educators think about learners with ADHD.

Leedy (2001:8) further defines qualitative study as an inquiry process of understanding a social or human problem based on building a complex, holistic picture formed with word, reporting detailed view of informants and conducted in a natural setting. From the participant's point of view, constructivist or post positivist approach. In this study qualitative research is also suitable since it provides the researcher with the understanding of experiences and problems faced by the educators.

3.4 Research Population

Mouton (2002: 134) points out that a population is a collection of objects, events or individuals having some common characteristics that the researcher is interested in studying. More specifically, it is known as a target population. A portion of the target population to which the researcher has reasonable access is known as the accessible population (Mouton 2002: 134). The target population in this study was all educators facing challenges from ADHD learners in schools of Vhembe District.

3.5 Sampling methods

Mouton (2001:23) further mentions that the aim of sampling is to produce representative selection of population elements. With regards to presentation, Wimmer and Dominick (1983:58) mentioned that a sample that is not representative of population, regardless of its size, is inadequate for testing purposes-the results cannot be generalised for the population. Cohen and Manion (1989:10) view a sample as a smaller group or subset of the population from which the researcher attempts to collect information so that the knowledge gained typifies the total population under study. Best and Kahn (1993:13) also share similar views regarding sampling by defining a sample as a small proportion of a population selected for observation and analysis.

In these study simple random and purposive samplings were used in different contexts for the selection of a population sample. In simple random sampling, every school have an equal chance of being selected. The selection of the school sampling will be done randomly for questionnaire distribution in both schools. Purposive sampling gathers data on specific descriptors. A purposive sampling technique was employed in selection study participants and population of the study.

3.6 The Sample size

Questionnaire design is an activity that should not take place in isolation. The researcher Best and Kahn (1993:19) stated that there is no fixed number or percentage of subjects that determine the size of an adequate sample. It may depend upon the nature and the population of interest or data gathered and analysed. Best and Kahn (1993:19) indicated that in practice the population is usually large although the size is not the definitive factor. Wimmer and Dominick (1983:68) state that a primary consideration in determining sample size is the methodology to be used. Wimmer and Dominick (1983:60) conclude by stating that generally speaking the larger the sample used the better. However a large un-representative sample is as meaningless as a small un-representative sample.

In this study the Sample size of the study were characterized of Fifty respondents who will be interviewed, 5 principals, 5 parents, 20 learners and 20 educators.

3.7 Method of data collection

The purpose of a research design is to provide the most valid and accurate answers possible to research questions. McMillan and Schumacher (1998:34) say that since there are many types of research questions and many types of designs, it is important to match the design with the questions. The responses of respondents to the questionnaire will be recorded in coded format, presented in frequency tables, graphs and/or chart formats, analyzed and interpreted (De Vos, 2001:44).

3.7.1 Questionnaire Survey

According to Leedy and Ormrod (2000:8) a questionnaire is a set of questions dealing with some topic or related group of topics, given to a selected group of individuals for the purpose of gathering data on a problem under consideration. Edyburn (1999:12) says that the questionnaire is a prepared question form submitted to certain persons (respondents) with a view to obtaining information.

3.8 Data Analysis

Questionnaire design is an activity that should not take place in isolation. The researcher should consult and seek advice from specialists and colleagues at all times during the construction of the questionnaire (Lei & Young, 1998:9). Questions to be taken up in the questionnaire should be tested on people to eliminate possible errors. A question may appear correct to the researcher when written down but can be interpreted differently when posed to another person. There should be no hesitation in changing questions several times before the final formulation whilst keeping the original purpose in mind.

which were used to interview teachers, parents, and educators. Quantitative studies

The instrument's items, format and procedures was taken from Noveno (2003:89); however, some modifications were made by the researcher to fit to the current study. The first part of the instrument contained a statement of purpose and directions, and was designed to collect biographical or personal data that include gender, age, and, educational attainment and years of work experience.

3.9 Ethical consideration

The second part of the questionnaire consisted directions and 20 five point Likert-scale items for rating personnel's perceptions of challenges facing educators' in the addition of Attention Deficit Hyperactivity Disordered (ADHD) learners in the mainstream classroom towards academic achievement. The items asked participants to rate the extent to which they agreed or disagreed with certain aspects of their stay at the hospital. The rating scale had the following designations: 5=strongly agree; 4=agree; 3=Uncertain; 2=disagree; 1=strongly disagree. The Likert type scale was employed because it provided greater flexibility since the scale descriptions varied to fit into the nature of the question (McMillan and Schumacher, 1993:245).

The researcher further aimed to avoid ambiguity, vagueness, bias, prejudice and technical language in the questions. The questions will be formulated to establish educator's responses with regard to the following; educator's challenges towards inclusive education; the requirements for the successful implementation of academic achievement of the learners with ADHD and biographical information of the respondents.

should follow immediately after the participation.

3.8 Data Analysis

Miles & Huberman (1994:88) state that data analysis is the process of systematically searching and arranging the interview transcription, field note, and other materials that are accumulated to increase the researcher's own understanding of them and to enable one to present what one has discovered.

Statistical package for scientific solutions (SPSS) was used to analyze the questionnaires which were used to interview learners, parents, and educators. Quantitative studies emphasise the use of numerical measures to arrive at specific findings. The obtained information from questionnaires and interviews was first coded for each and every question and then entered in the Microsoft excel spreadsheet in words and number. Data from questionnaires was analysed by means of using tables and figures.

3.9 Ethical consideration

Paul and Jeanne (2010:101) say most ethical issues in research fall into one of four categories which 'I' as the researcher will consider while conducting my research which are as follows:

- Honesty with professional colleagues

- Protection from harm

The researcher should not expose research participants to unnecessary physical or psychological harm. Participants should not risk losing life or limb, nor should they be subjected to unusual stress, embarrassment, or loss of self-esteem. In cases where the nature of study involves creating a small amount of psychological discomfort, participants should know this ahead of time, and any necessary debriefing or counseling should follow immediately after the participation.

- **Informed consent**

According to Paul and Jeanne (2010:101) they say when people are intentionally recruited for participation in a research study, they should be told the nature of the study to be conducted and given the choice of either participating or not participating. Furthermore, they should be told that, if they agree to participate, they should have the right to withdraw from the study at any time. Any participation in a study should be strictly voluntary.

- **Right to privacy**

Paul and Jeanne (2010:102) further say that any research study involving human beings should respect participants' right to privacy. Under no circumstances should a researcher report, either oral or written, be presented in such a way that others become aware of how a particular participant has responded or behaved. In general, a researcher must keep the nature and quality of participants' performance strictly confidential.

- **Honesty with professional colleagues**

Researchers must report their findings in a complete and honest fashion, without misrepresenting what they have done or intentionally misleading others about the nature of their findings. And under no circumstances should a researcher fabricate data to support a particular conclusion, no matter how seemingly noble that conclusion may be.

In this study, respondents were assured of anonymity and the information provided by the participants was regarded as confidential unless agreed upon by the participant and the researcher.

4.1 Introduction

3.10 Conclusion data that was collected from the completed questionnaires will be analyzed, findings will be interpreted and some comments will be presented. The data This chapter has described in detail the process involved in conducting this research. Special focus was given to discussing the research design, population site and size, the research tool used for data collection purposes, and the process of data collation. In the next chapter, the results are presented, analysed and interpreted.

4.2 Biographical Information of the respondents

Table 4.1: Frequency distribution according to the gender of respondents

Gender	Frequency	Percentages
Male	21	42
Female	29	48
Total	50	100

Table 1 shows that the majority (58%) of the respondents in the research sample were females. Possible reasons for the finding are the following:

- There were more females than males in the teaching profession. The research sample involved only primary schools. Primary schools tend to appoint more female than male educators, as female educators always tend to reward good performance from learners. A female educator represents a motherly figure and is more acceptable by younger children as *in loco parentis*.
- Female educators have special qualities to care and notice unusual behaviour in junior primary learners.
- Also, female educators have chosen education as their career because it affords them more time to be with their own children and attend to family demands.

CHAPTER 4: DATA PRESENTATION, ANALYSIS AND INTERPRENTATION

4.1 Introduction

In this chapter, the data that was collected from the completed questionnaires will be analyzed, findings will be interpreted and some comments will be presented. The data comprised the respondent's biographical information and their perceptions of the challenges facing educators in the successful inclusion of ADHD learners in the mainstream classroom.

4.2 Biographical Information of the respondents

Table 4.1: Frequency distribution according to the gender of respondents

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- Female educators have special qualities to care and notice unusual behaviour in junior primary learners.

- Also, female educators have chosen education as their career because it affords them more time to be with their own children and attend to family demands

Table 4.2: Frequency distribution according to the age group of the respondents

Age (Years)	Frequency	Percentage
20-25	4	8
26-30	3	6
31-35	7	14
36-40	12	24
41-45	23	26
46-50	5	10
51-55	3	6
56-60	3	6
Total	50	100

Half of the respondents (50%) that partook in the research were in the age group of 36 – 45 years (Table 2). The table also showed that nearly a third (29%) of the respondents were 35 years and younger. The possibility exists that younger educators may stay in the education profession for a longer period of time to gain more experience with the aim of possible promotion. Younger educators are probably more amenable to the changes required in an inclusive classroom ie. Younger educators possibly trained in more recent methods; however they lack the understanding and experience of teaching ADHD learners in an inclusive classroom

Table 4.3: Frequency distribution according to the qualifications of respondents

Qualification	Frequency	Percentage
Academic Qualification	13	26
Professional Qualification	27	54
Academic & Professional	10	20
Total	50	100

From Table 4.3 it emerges that the minority (20%) of the respondents possessed academic and professional qualifications that by many are perceived as being better qualified for the teaching profession. However, the finding that most (54%) of the

respondents had diplomas and certificates, professional qualifications, may be because they were teaching in primary schools. The contents (curricula) of teaching diplomas and certificates are more practical than theoretically orientated degree courses and therefore more appropriate for teaching younger primary school children, thus providing them with positive attributes and hence makes them excellent educators. In order to be an effective educator a person should have obtained the most suitable qualifications.

Table 4.4: Frequency distribution according to the respondent's years of completed service in the teaching profession

Years of service	Frequency	Percentage
0-5	8	16
6-10	12	24
11-15	7	14
16-20	3	6
21-25	5	10
26-30	6	12
30 and more	4	8
Total	50	100

Table 4.4 showed that the majority of respondents (60%) in the research sample had more than 10 years teaching experience. Experience together with adequate training is needed for the responsibilities and the demands imposed on. The experience and training an educator has, the more confidence and expertise he would have acquired to be an effective educator. Professional development and experience are pre-requisites for educators to keep up with the rapid pace of change in knowledge, advancement of technology and increasing demands imposed upon educators.

Table 4.5: Frequency distribution according to the post level of the respondents

Post level	Frequency	Percentage
Principal	4	8
Deputy principal	3	6
HOD	7	14
Educator	37	74
Total	50	100

According to the frequency distribution in Table 4.5 nearly three quarters (73%) of the respondents were level one educator. This finding is consistent with the composition of educators in most schools. Level one educator generally comprises a little over seventy percent of the teaching personnel at schools. Level one educator are the ones who have the most amount of interaction with learners, especially ADHD learners, thus placing them in quite a challenging position concerning inclusive education.

Table 4.6: Frequency distribution according to the area in which respondents schools are situated

Area	Frequency	Percentage
Urban	14	28
Semi-urban	22	44
Rural	14	28
Total	50	100

The larger percentage (45%) selected for administration of the questionnaire were situated in semi-urban areas. The Vhembe District from which the primary schools for the research sample were randomly selected is situated on the Vhembe District and includes large rural areas. The geographical location of Vhembe District is classified as rural area, as there are many indigent communities that surround the schools even from informal dwellings, thus 45% of the educators have indicated that their schools are semi-urban. ADHD learners will therefore need to be transported to their schools.

4.3 Challenges facing educators' in the insertion of ADHD learners

Table 4.7: I must set an example in accepting ADHD learners

	Frequency	Percentages
Strongly Disagree	6	12
Disagree	40	80
uncertain	1	2
Strongly Agree	2	4
Agree	1	2
Total	50	100

The majority of the respondents (92%) supported this statement. Maintains that inclusion is unconditional and the program must fit the child rather than children fitting the program. The inclusive classroom should foster acceptance, tolerance and caring in all learners. The educator has the responsibility of creating and maintaining a classroom atmosphere, which nurtures the personal, cognitive and social development of all learners.

Table 4.8: It is necessary to change my teaching methods

	Frequency	Percentages
Strongly Disagree	10	20
Disagree	3	6
uncertain	2	4
Strongly Agree	15	30
Agree	20	40
Total	50	100

Most of the respondents (70%) in the research sample said that to educate ADHD learners there must be fundamental changes to the teaching method in mainstream classes. Educators felt threatened by having to change their tried and tested teaching methods and having to cope with too much diversity in their classroom.

Table 4.9: I need more time to meet the needs of ADHD learners

	Frequency	Percentages
Strongly Disagree	20	40
Disagree	15	30
uncertain	5	10
Strongly Agree	5	10
Agree	5	10
Total	50	100

The majority of the respondents (71%) admitted that educators had to spend more time attending to the needs of learners with ADHD. Educators are very concerned about the normal learner in their classroom. The general sentiment appeared to be that the normal learners in the system would be neglected due to the educators' time and effort being consumed by the ADHD learners in their class.

Table 4.10: I have to suppress negative feelings towards ADHD learners

	Frequency	Percentages
Strongly Disagree	10	20
Disagree	8	16
uncertain	3	6
Strongly Agree	15	30
Agree	14	28
Total	50	100

Most of the educators (58%) that partook in the research said they did not experience negative feelings towards ADHD learners because of inclusion. A positive feeling towards inclusive education is closely tied to educator's feelings of competency and effectiveness in educating learners with disabilities. Table 4.10 shows that school educators are by far not unanimous in their views of inclusive education. In fact, relatively high percentages of school principals and teachers report negative feelings and attitudes towards inclusion.

Table 4.11: The diversity of learners demands more effort of me

	Frequency	Percentages
Strongly Disagree	30	60
Disagree	7	14
uncertain	4	8
Strongly Agree	5	10
Agree	5	10
Total	50	100

Nearly three quarters (73%) of the respondents indicated that they experienced difficulty in meeting the needs of learner diversity in an inclusive class. Education support services points out that ordinary educators are now challenged with the task to accommodate diversity and to prevent and address barriers to learning and development. Educators perhaps felt inadequately prepared and therefore unable to cope with ADHD learners in the classroom. They work with learners of different ages and stages of development, cultural and linguistic diversity and a wide range of ability/disability and special educational needs. According to their findings a low percentage of educators (20%) were able to meet the needs of learner's diversity.

Table 4.12: Networking with educators in similar circumstances is essential

	Frequency	Percentages
Strongly Disagree	25	50
Disagree	23	26
uncertain	3	6
Strongly Agree	5	10
Agree	4	8
Total	50	100

Networking refers to the interaction between mainstream schools. The majority of the respondents (77%) indicated that networking with educators in similar circumstances is essential for successful interaction. Educators felt that there was a need to work

collaboratively with other mainstream schools so that they could overcome some of their common challenges. Networking with other mainstream schools was essential to serve the needs in the classroom and provide support to teachers as well. A support network should take place to brainstorm, problem-solve or perform any other activity that is required.

Table 4.13: Large number of learners in class makes individual attention difficult

	Frequency	Percentages
Strongly Disagree	20	40
Disagree	16	32
uncertain	2	4
Strongly Agree	10	20
Agree	2	4
Total	50	100

In the current class sizes of 38-40 learners to one educator, ADHD learners would not receive anywhere near the kind of individual attention they need. The majority of the respondents (72%) supported the statement that educators felt they would not have the time to give adequate individual attention to ADHD learners, because of the large number of learners in their classes.

Table 4.14: I need more (special) training to assist ADHD learners

	Frequency	Percentages
Strongly Disagree	20	40
Disagree	22	44
uncertain	2	4
Strongly Agree	3	6
Agree	3	6
Total	50	100

The majority of the respondents (84%) in the research sample agreed that educators need more training to educate ADHD learners. Educators need to receive in-service education and training to gain the necessary knowledge, skills and values to cope with learners of varying abilities and diverse needs.

The objective is not to train subject educators as specialized remedial educators but to provide information about problems that may be encountered and how these may be solved. The successful implementation of inclusive education will depend on in-service training and ongoing retraining (educator development of all educators). This training should have a reflective and research approach, exploring innovatory ways of responding to day-to-day concerns in the workplace.

Nearly three quarters (74%) of the respondents in the research sample agreed that

Table 4.15: I am unable to identify an ADHD learner

	Frequency	Percentages
Strongly Disagree	25	50
Disagree	2	4
uncertain	4	8
Strongly Agree	15	30
Agree	4	8
Total	50	100

The larger percentage (53%) of the respondents agreed that they experienced difficulty identifying ADHD learners. Parents and very often teachers are the first to notice something wrong with the learner; however they have difficulty identifying the learner as ADHD. The learner is therefore referred to the psychologist, neurologist or pediatrician to make a correct diagnosis. Although in many cases, the teacher is unable to identify the child's problems and its ramifications, he remains an important key to, and is usually the start of, the identification process. The teacher is usually the one who notices developmental/learning problems and in many instances is able to pinpoint causes such as a poor socio-economic environment, mental handicap, didactical shortcomings, and in the case of learning disability, neurological dysfunction.

Table 4.16: I must be careful not to discriminate against ADHD learners

	Frequency	Percentages
Strongly Disagree	15	30
Disagree	22	44
uncertain	2	4
Strongly Agree	11	22
Agree	5	10
Total	50	100

Nearly three quarters (74%) of the respondents in the research sample agreed that educators should not discriminate against ADHD learners. Educators who have negative attitudes to inclusive education would reject learners with special educational needs and this would hinder the successful implementation of inclusive education. Educator's attitudes are expected to influence the extent to which ADHD learners become not only physically integrated, but the integral members of the regular classes benefiting academically, socially and emotionally from the experience.

Table 4.17: I must avoid treating ADHD children sympathetically

	Frequency	Percentages
Strongly Disagree	15	30
Disagree	17	34
uncertain	7	14
Strongly Agree	4	8
Agree	7	14
Total	50	100

Most of the respondents (64%) indicated that educators should avoid treating learners with ADHD more sympathetically in class. Inclusion requires that ADHD learners are

not simply thought of with pity but viewed more positively in terms of their abilities rather than their disabilities. Care should be taken not to emphasize individual disabilities, but to look at the class holistically, in a total context.

Table 4.18: All learners must be disciplined in the same manner

	Frequency	Percentages
Strongly Disagree	20	40
Disagree	16	32
uncertain	4	8
Strongly Agree	4	8
Agree	6	12
Total	50	100

The majority of the respondents (72%) that partook in the research agreed that all learners must be disciplined in the same manner. Maintain that educators have the responsibility of creating and maintaining a classroom atmosphere that nurtures the personal, cognitive and social development of all learners. Discipline in the classroom will be influenced by the ethos of the school. Most schools follow a democratic system of discipline that encourages the participation of parents, teachers, learners and the community. All learners must be disciplined in an appropriate manner within the regular classroom.

Table 4.19: More relevant knowledge is required to better understand ADHD learners

	Frequency	Percentages
Strongly Disagree	20	40
Disagree	15	30
uncertain	6	12
Strongly Agree	10	10
Agree	4	8
Total	50	100

Seventy one percent (71%) of the respondents were in agreement that educators require more relevant knowledge to better understand ADHD learners. Educators need to understand the challenge of successful inclusive education and to recognize that they do have the power and the responsibility to act as agents of change in education and in society. To support the inclusion of learners with ADHD, educators have to understand not only the particular needs of the individual learners, but also their own challenges and feelings concerning ADHD learners.

Total	50	100
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In most mainstream schools there are a significant percentage of learners with learning problems. These learners require specialised assistance to ensure that their learning potential is realized and for this purpose intensive teaching, known as remedial teaching

Table 4.20: Teaching ADHD learners requires more patience and tolerance

	Frequency	Percentages
Strongly Disagree	10	20
Disagree	25	50
uncertain	4	8
Strongly Agree	6	12
Agree	10	10
Total	50	100

Table 4.23: Accountable parental involvement is required

The majority of respondents (69%) confirmed that the education of ADHD learners require more patience and tolerance from educators. The success of inclusive education is dependent on the educator's attitudes towards the special needs of ADHD learners and to the extent of their willingness to make adaptations to accommodate these learners. Educators need to have tolerance and patience in teaching ADHD learners by drawing up an individual education plan (IEP) in line with Curriculum 2005, implement it and monitor it and also apply good classroom management strategies.

Table 4.22: The assistance of remedial educators are necessary important in inclusive

	Frequency	Percentages
Strongly Disagree	30	30
Disagree	21	42
uncertain	4	10
Strongly Agree	4	8
Agree	10	10
Total	50	100

In most mainstream schools there are a significant percentage of learners with learning problems. These learners require specialized assistance to ensure that their learning potential is realized and for this purpose intensive teaching, known as remedial teaching is necessary. The majority of respondents (72%) were in agreement that the assistance of remedial educators was needed to educate ADHD learners. In spite of normal intellectual, physical and sensory abilities, the disabled child is affected in such a way that their learning problems cannot be rectified in the normal class situation. Remedial teaching is mainly given on an individual basis due to the uniqueness of each child and his specific learning. Remedial and special teaching has improved the performance of ADHD learners.

Table 4.23: Accountable parental involvement is required

	Frequency	Percentages
Strongly Disagree	20	40
Disagree	14	28
uncertain	2	4
Strongly Agree	5	10
Agree	9	18
Total	50	100

Most of the respondents (68%) agreed that parental involvement is important in inclusive education. Maintain that parent involvement and contribution is valuable in an inclusive classroom. Parents can provide valuable information about their child, and most parents are willing to cooperate with teachers by reinforcing classroom programmes at home. Teachers should therefore, involve as many parents as possible in school activities, academically as well as for extramural activities.

Agree	5	10
Total	50	100

Table 4.24: There should be an adapted curriculum for ADHD learners

	Frequency	Percentages
Strongly Disagree	19	38
Disagree	15	30
uncertain	3	6
Strongly Agree	10	20
Agree	3	6
Total	50	100

The majority of the respondents (69%) agreed that there should be an adapted curriculum to suit the learner's special educational needs. Teaching learners with disabilities and diverse needs can become quite frustrating not only for the educator but also for the learner. Teachers should adapt and adjust their teaching methods and programming to suit the different levels of learners in their class. Teachers should gain support, assistance and guidance from support structures, so that a suitable programme can be drawn, whereby learners learn optimally.

Total	35	100
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Most of the respondents (71%) in the research sample said that there needs to be more time allocated for tasks and tests for ADHD learners. These learners tend to become easily distracted, hence losing time and failed to complete tasks. Learners with ADHD have problems with concentration and they may tire quickly due to the efforts needed to

Table 4.25: More effort is required to better understand ADHD learners, which also

	Frequency	Percentages
Strongly Disagree	6	12
Disagree	3	6
uncertain	4	8
Strongly Agree	5	10
Agree	5	10
Total	50	100

More than seventy percent (71%) of the respondents acknowledged that educators need more effort to better understand ADHD learners. Without proper understanding of the diverse educational needs of learners, it becomes difficult to cope and teach ADHD learners. Teachers need to put in more effort in order to better understand the diverse needs of learners. By attending in-service training, forming teacher support groups and attends workshops and seminars, will equip teachers to better understand learners with ADHD.

Table 4.26: More time needs to be allocated for ADHD learners to complete tasks/tests

	Frequency	Percentages
Strongly Disagree	4	16
Disagree	15	60
uncertain	1	4
Strongly Agree	3	12
Agree	2	8
Total	25	100

Most of the respondents (71%) in the research sample said that there needs to be more time allocated for tasks and tests for ADHD learners. These learners tend to become easily distracted, hence losing time and failed to complete tasks. Learners with ADHD have problems with concentration and they may tire quickly due to the efforts needed to

study. Also, ADHD learners work and learn through repetition of instruction, which also takes time.

Table 4.27: Sufficient funds to obtain special equipment

	Frequency	Percentages
Strongly Disagree	10	20
Disagree	10	20
uncertain	4	8
Strongly Agree	10	20
Agree	16	32
Total	50	100

More than half (53%) of the respondents that partook in the research said that their schools lacked the necessary funds for resources to implement successful inclusive education. Adequate funding is required for the successful inclusion of ADHD learners in the mainstream class. Many parts of the country have large classes, inadequate or no support facilities, a lack of ortho-didactic materials as well as a lack of expertise of educators to deal with ADHD learners. This makes it impossible to fully implement placement of ADHD learners in mainstream classes. To provide for effective inclusive education the financial issues will have to be addressed carefully so as to be cost-effective.

Table 4.28: A school governing body that effectively supports inclusive education

	Frequency	Percentages
Strongly Disagree	20	40
Disagree	3	6
uncertain	2	4
Strongly Agree	8	16
Agree	17	34
Total	50	100

More than half (51%) of the respondents said that their school governing bodies do not support inclusive education. For the successful inclusion of ADHD learners, parents need to become more involved in the education of their children through the governing body. This involvement could include insight into progress, participation in decisions, and information on educational issues. An efficient school governing body would include parents understanding of the movement towards inclusive education and can influence views more positively. Parents, who respect diversity and are willing to become involved, can influence a community.

regarding the challenges facing educators in the inclusion of ADHD learners in the mainstream classroom and the successful inclusion of ADHD learners, were organized in frequency tables to simplify statistical analysis. Findings from

Table 4.29: Procedures to deal with harassment of ADHD learners

	Frequency	Percentages
Strongly Disagree	30	60
Disagree	2	4
uncertain	3	6
Strongly Agree	10	20
Agree	15	30
Total	50	100

Despite the result that the majority of respondents (53%) said that procedures to deal with the harassment of ADHD learners are available at their school, more than thirty percent (31%) said that their schools did not have such procedures in place. Harassment may include a refusal to admit a ADHD learner in a public school, or to provide appropriate educational support services to such a learner. Forms of harassment include learners with ADHD who have to face beatings from educators, teasing from fellow-learners or anger from parents. The community labels these children as retarded or naughty when they may in fact be dyslexic or hyperactive, or have an attention deficit disorder. ADHD learners who either fail repeatedly or are passed without merit are what one educator called just passengers in class. A policy to address harassment of ADHD learners in any form should be part of the school's mission statement.

4.4 Conclusion

5.1 Introduction

In this chapter the researcher's aim was to give order to the range of information provided by the respondents (educators) in their responses to the statements (questions) in the questionnaires. Some of the data collected were of a demographic nature which enabled the researcher to construct a broad profile of the sample selected for the investigation. Data collected regarding the challenges facing educators in the inclusion of ADHD learners in the mainstream classroom and the successful inclusion of ADHD learners were organized in frequency tables to simplify statistical analysis. Findings from the organized data were analyzed by means of descriptive statistics. The final chapter of this study will focus on a summary and findings from the literature and empirical investigation followed by recommendations.

- Time allocation – educators felt that too much of time was taken to teach and accommodate ADHD learners in mainstream classes. Educators were concerned that they have a syllabus to complete by a specified time and that they will not be able to do so, thus neglecting/holding back the „normal“ learners in class.
- Classroom Size – the large number of learners in mainstream classrooms were too much for educators to handle, let alone accommodating ADHD learners who need „individual“ attention.
- Discipline – discipline in the mainstream classroom is quite problematic and having ADHD learners can become twice as problematic. Educators try many strategies to maintain discipline but eventually become very tired and frustrated and are unable to cope with the school/class programmes.
- Parent involvement – parents are not keen in communicating with teachers or attend any school meetings, let alone assist their children with homework, therefore, each learner's school performance and attendance deteriorates, leaving

5.1 Introduction

In this chapter, there is an overall discussion of the study results, which begins with an overview of some of the more descriptive results. This is followed by a discussion of the key findings concerning the reasons why the participants chose to either stay or leave in 2013. In this final chapter of the dissertation the main aim of the investigation is restated, a summary of the entire study given, conclusions drawn and recommendations made.

5.2 Major Findings

- Time allocation – educators felt that too much of time was taken to teach and accommodate ADHD learners in mainstream classes. Educators were concerned that they have a syllabus to complete by a specified time and that they will not be able to do so, thus neglecting/holding back the „normal“ learners in class.
- Classroom; Size – the large number of learners in mainstream classrooms were too much for educators to handle, let alone accommodating ADHD learners who need „individual“ attention.
- Discipline – discipline in the mainstream classroom is quite problematic and having ADHD learners can become twice as problematic. Educators try many strategies to maintain discipline but eventually become very tired and frustrated and are unable to cope with the school/class programmes.
- Parent involvement – parents are not keen in communicating with teachers or attend any school meetings, let alone assist their children with homework, therefore, such learner’s school performance and attendance deteriorates, leaving

the educator in a very difficult position. A good teacher-parent relationship fosters good learner performance.

- Adequate funding – educators lack the necessary funding for human resources to educate ADHD learners appropriately.
- The majority of the respondents (92%) agreed that mainstream educators should foster acceptance, tolerance and caring to all learners irrespective of their race, gender or disability. Mainstream educators don't have enough time and patience to deal with learners with learning and behavioural problems, likely ADHD.
- Eighty four percent (84%) of the respondents agreed that educators need more training to educate ADHD learners. They are not in a position to teach such learners, as the Department of Education has not provided adequate in-service education and training to gain the necessary knowledge, skills and values to cope with ADHD learners.
- The larger percentage (53%) of the respondents agreed that they experienced difficulties identifying ADHD learners. Identification refers to the establishment on the determination of the nature of a problem on the basis of certain perceivable behavior manifestations or symptoms that require further explanation. The teacher is in a position of noticing behaviour and learning problems if he/she is professionally trained. When one understands ADHD then he/she can identify, cope and understand the condition.
- Seventy one percent (71%) of the respondents were in agreement that educators need more relevant knowledge to better understand ADHD learners.
- In most mainstream schools there is a significant percentage of learners with learning problems. These learners require specialized assistance to ensure that their learning potential has been realized. Hence, the majority of the respondents

(72%) were in agreement that the assistance of remedial educators is needed to better understand and educate ADHD learners.

- The majority of the respondents (68%) agreed that parental involvement is important. Parents should be actively involved in their children's education as this will motivate the learner to have a willingness to learn.
- More than half (53%) of the respondents that partook in the research said that their schools lacked the necessary funds or resources to implement successful inclusion of ADHD learners in the mainstream class.
- The larger percentage (47%) of the respondents acknowledged that they don't have adequate opportunities for networking with special schools where they would be able to gain more knowledge and understanding of the special educational needs of ADHD learners.
- More than half (51%) of the respondents said that school governing bodies do not support inclusive education. For successful inclusion of ADHD learners, parents need to become more involved in the education of their children as governing body represents parents.
- More than forty percent (42%) indicated that life-skills programmes for the integration of ADHD learners is lacking in their schools.
- More than thirty percent (31%) said that their schools did not have procedures in place to address possible harassment of ADHD learners. Harassment may include a refusal to admit a ADHD learner in a public school, or to provide appropriate educational support services to such a learner.
- Nearly three quarters of the respondents (74%) agreed that there is a need for constant intervention from psychological services to provide support, guidance

The need for training and assistance in the successful implementation of inclusive education. Mainstream educators had reluctance in teaching learners with learning difficulties, namely ADHD, as they felt that special schools were in place for such learners, however, there was a need to admit ADHD learners in mainstream schools, thus teachers then relied on psychological services for assistance and support.

5.3 Conclusion

The fundamental aim of this study was to investigate the challenges facing educators in the inclusion of ADHD learners in the mainstream classroom. In the last chapter of the study a summary of the previous chapter was given and the findings that derived from the literature review and empirical survey would be discussed. This will be followed by recommendations, limitations of the study and a final remark.

In this study an enquiry was made into challenges facing educators in the inclusion of ADHD learners in the mainstream classroom. In the literature study and through empirical investigation, it was found that educators are faced with many challenges concerning the successful inclusion of ADHD learners in the mainstream classroom, and hence inclusive education.

Educators feel that they have to change their tried and tested teaching methods in order to cope with more diversity in their classrooms. Furthermore, most educators feel inadequately prepared and unequipped for inclusive education and therefore are unable to cope with “ADHD learners” in their classrooms.

The assistance educators need concerning the successful inclusion of ADHD learners in the mainstream classroom or in inclusive education is adequate human and material resources, decreased class sizes and relevant training, guidance and support.

The term ADHD refers to Attention Deficit Hyperactivity Disorder which is characterized by hyperactivity, inattention and impulsiveness. This condition is more prevalent in boys than girls. ADHD makes a child easily distracted thus limiting his concentration hence, resulting in learning difficulties. The educator is placed in a position of doing the initial identification of the learner with ADHD as he notices all learning and behaviour problems. The educator also looks at numerous factors that may contribute to ADHD and ways in which to deal with ADHD.

The success of inclusive education is a challenge to educators who teach in mainstream schools. Many educators have difficulties in identifying and coping with ADHD learners. They need special support and guidance in dealing with ADHD learners. They also lack the necessary training and expertise in characterizing ADHD learners. The challenges educators are facing in inclusive education are influenced by their level of competence and effectiveness.

The success of inclusive education in South Africa depends on how school principals manage change, motivate their staff, learners and other stakeholders in education and establish a relationship with the community it serves.

The purpose of this chapter was to statistically discuss data collected from the questionnaires completed by 50 educators, which included school principals, deputy principals, heads of departments, learners, parents and educators. Comments were offered and interpretations were made of the findings. At the outset an explanation and description was provided as to the methods employed in the categorization of the responses and the analysis of the data. This was followed by the presentation and discussions of the responses to the questions in the questionnaire.

5.4 Recommendations of the Study

- There should be more appointments of remedial educators and educators with
- There should be a development of an integrated system of education where the separate systems of “special” and “mainstream” education are integrated into one system responsive to the diverse needs of the learner population.
- Assurance should be made that all centers of learning reflect an inclusive ethos and engage in whole school and center development to address the diverse needs of all learners including the ADHD learners.
- There should be facilitation of women’s involvement from educational practice,
- There should be facilitation of ongoing campaigns to raise public awareness and address discriminatory attitudes within and outside the education system. training institutions and could include a specific cultural group. In this way educators
- There should be a provision of a holistic approach to institutional development to facilitate a positive culture of teaching and learning; all aspects of learning have to be developed including strategic planning and evaluation, organizational leadership and management, staff development and other related mechanisms.

5.5

- The recommendation is that further research of a quantitative and qualitative
- There should be a development of health promotion centers of learning for the implementation of inclusive education. mainstream educators with the necessary skills to effectively manage inclusive schools, including effective staff
- There should be establishment of a center based learning support team that would ensure that support is accessible to educators, learners, parents and communities.
- It can be presumed that many of the school educators who completed the
- There should be ensure that teaching and learning materials accommodate the diverse needs of the learner population. probability therefore exists that a number of educators indicated what is theoretical to their challenges of inclusive education
- There should be a provision of a flexible curriculum which is responsive to differences in the learner population and ensures that all learners can participate effectively in the process.

- There should be more appointments of remedial educators and educators with training in specialized education who have already undergone training and who can provide a valuable service in mainstream schools where trained experts fulfill a supportive role.
- Assurance should be made that all human resources in our institutions and communities are used optimally and in a structured manner.
- There should be a reward for all positive behavior in an acceptable manner
- There should be facilitation of expert's involvement from educational practice, representing the various population groups, in the training of educators. Such experts could act as guest lecturers, offering lectures at various training institutions and could include a specific cultural group. In this way educators would receive first-hand knowledge from educational practitioners.

5.5 Recommendations for Further Research

- The recommendation is that further research of a quantitative and qualitative nature must be undertaken with the aim of developing well-planned strategies to be implemented in order to provide mainstream educators with the necessary skills to effectively manage inclusive schools, including effective staff development strategies.
- It can be presumed that many of the school educators who completed the questionnaires drew their challenges towards inclusive education from the media and relevant policy documents. The probability therefore exists that a number of educators indicated what is theoretical to their challenges of inclusive education and not what is practical.

- More research can be comprised of educators from junior and senior primary schools. Dissimilar responses might have been elicited from educators of secondary schools.
- There should be a control of noise levels in classes, because it may encourage poor attention and hyperactivity. Explain to the class that the noise is disturbing everyone.
- There should be a reward for all positive behavior in an acceptable manner according to your principles and the learner's needs.



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APPENDICES: QUESTIONNAIRES

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SECTION A: BIOGRAPHIC INFORMATION

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Table 4.2: Frequency distribution according to the age group of the respondents

Age Years	
26-30	
31-35	
36-40	
41-45	
46-50	
51-55	
56-60	

Table 4.3: Frequency distribution according to the qualifications of respondents

Qualification	
Academic Qualification	
Professional Qualification	
Academic & Professional	

APPENDIXES: QUESTIONNAIRES

Please make a tick in the appropriate block for each of the following statement

SECTION A: BIOGRAPHIC INFORMATION

Table 4.1: Frequency distribution according to the gender of respondents

Gender	
Male	
Female	

Table 4.2: Frequency distribution according to the age group of the respondents

Age (Years)	
20-25	
26-30	
31-35	
36-40	
41-45	
46-50	
51-55	
56-60	

Table 4.3: Frequency distribution according to the qualifications of respondents

Qualification	
Academic Qualification	
Professional Qualification	
Academic & Professional	

Table 4.4: Frequency distribution according to the respondent's years of completed service in the teaching profession

Years of service	
0-5	
6-10	
11-15	
16-20	
21-25	
26-30	
30 and more	

Table 4.5: Frequency distribution according to the post level of the respondents

Post level	
Principal	
Vice principal	
HOD	
Educator	

Table 4.6: Frequency distribution according to the area in which respondents' schools are situated

Area	
Urban	
Semi-urban	
Rural	

SECTION B: Challenges facing educators' in the insertion of ADHD learners

Please complete all questions Mark with an "x" Mark from Strongly Agree to Strongly Disagree

Statement	Strongly Agree	Agree	Uncertain	Disagree	Strongly Disagree
I must set an example in accepting ADHD learners					
It is necessary to change my teaching methods					
I need more time to meet the needs of ADHD learners					
I have to suppress negative feelings towards ADHD learners					
The diversity of learners demands more effort of me					
Networking with educators in similar circumstances is essential					
Large number of learners in class makes individual attention difficult					
I need more (special) training to assist ADHD learners					
I am unable to identify an ADHD learner					
I must be careful not to discriminate against ADHD learners					
I must avoid treating ADHD children sympathetically					

LIBRARY OF VENDA

All learners must be disciplined in the same manner					
More relevant knowledge is required to better understand ADHD learners					
Teaching ADHD learners requires more patience and tolerance					
The assistance of remedial educators are necessary					
Accountable parental involvement is required					
There should be an adapted curriculum for ADHD learners					
More effort is required to better understand ADHD learners					
More time needs to be allocated for ADHD learners to complete tasks/tests					

Thank you for your Participation