

INCLUSION OF STUDENTS WITH AUTISM SPECTRUM DISORDER: THE CASE OF THE AUTONOMOUS REGION OF MADEIRA (PORTUGAL)

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Abstract- The education of students with special educational needs occupies a prominent place in international recommendations.

The purpose that autistic children have the right to education alongside their peers triggered differentiated responses that promote inclusion led by different educational agents.

The National Research Council (2001) states: "there are many different goals for educating young children with autism. At the root of these goals are societal desires and expectations about the benefits of education for all children and assumptions about what is important and what is possible to teach children with autistic spectrum disorders (p. 57).

In this paper, we wanted to reflect on the change made in the intervention with students with autism spectrum disorder in the Autonomous Region of Madeira (Portugal), which, in 2007, created the first structured teaching room for the education of these students, in a teaching school regular, where specialized teachers applied the Treatment and Education of Autistic and Communication Handicapped Children program. Supported by qualitative research, we carried out semi-structured interviews (Flick, 2009) and respective content analysis (Bardin, 1995) with the children's families and professionals involved in this process, seeking to assess the circumstances and achievements achieved over these 16 years.

Keywords: autism spectrum disorder, inclusion, education, structured teaching.

INTRODUCTION

Inclusive education has been recognized as a core value and a preferred place for equal opportunities and equity, seen as fundamental pillars of educational success. Gradually, politicians, educators, families, and various social actors have triggered and emphasized the urgent need for transformation, involving changes in attitudes, perspectives, and strategies aimed at welcoming and valuing the heterogeneity of students that the challenge of "education for all" brought to the schools of the 20th and 21st centuries.

Inclusion found its driving force in the Salamanca Declaration (1994) [1], which advocated and ensured the unshakable right of all students to learn together, whenever possible, in regular schools, established as the most conducive environments for the diversity of learning experiences, relationships, and social interactions of learners, regardless of the conditions and specific needs they may have.

Among the diversity of students that we can currently find in different learning environments are students with autism spectrum disorder, who in the past were invariably placed in special education institutions, where they remained segregated from regular education systems and away

from their peers without any diagnosis. Considering that scientific progress and the subsequent contributions of Neuroscience to human life have become increasingly evident and influential in education, we cannot and should not ignore the multiple potentialities that arise from it as a support for pedagogical innovation within learning communities.

However, we believe that the genuine promotion of inclusion, which we all desire, is based on something other than preconceived recipes, rigid prescriptions, indifference, arbitrariness, or capriciousness. On the contrary, it is based on the complementarity of knowledge, empathetic understanding, ethically committed behaviors, and actions combined in implementing practical, effective, and tailored measures that align with the requirements of scientific progress and the identified needs.

It is in this context that this work aims to situate the paradigm shift in intervention with students with autism spectrum disorder, implemented by the Special Education services of the Autonomous Region of Madeira, Portugal, since 2005, using the Treatment and Education of Autistic and Related Communication Handicapped Children (TEACCH) method.

THE INCLUSION OF STUDENTS WITH AUTISM SPECTRUM DISORDER

The Salamanca Declaration (1994) [1] established the challenge that:

“The fundamental principle of the inclusive school is that all children should learn together, wherever possible, regardless of any difficulties or differences they may have. Inclusive schools must recognize and respond to the diverse needs of their students, accommodating both different styles and rates of learning and ensuring quality education to all through appropriate curricula, organizational arrangements, teaching strategies, resource use and partnerships with their communities. There should be a continuum of support and services to match the continuum of special needs encountered in every school”. (pp.11-12)

The Millennium Development Goals in education, initiated by the OECD and UNESCO at the beginning of the 21st century, also triggered the need for significant transformations in learning communities to prepare students for a future that is expected to be rich in complexity, instability, and unpredictability.

Consequently, we believe that educational systems and schools should pay extra attention to the dilemmas and challenges arising from contemporary societies and, as a result, innovate, reconfigure, and redirect their practices to make them meaningful and effective, as advised by Perrenoud (2002)[2]:“There is no innovation without explication, conceptualization, and explanation of goals and practices, nor intense debate about the advantages and disadvantages of such or such learning device (...)” (pp. 2-3).

In complementarity with these goals, the latest OECD report (2023) [3] reaffirms the idea that “Education policy does not happen in a vacuum. It requires openness and interactions between systems and their environments and is influenced by economic, political, social and technological trends”.

In 1943, Leo Kanner identified and classified children who were brought to his clinic and did not fit into any existing diagnostic categories as “autistic”. This category of children still poses a challenge in terms of understanding the underlying cause of autism spectrum disorder. Despite various theories, a universally accepted explanation for autism spectrum disorder is yet to be

established. Garcia and Rodriguez (1997) [4] note that there is still a lack of understanding regarding the etiology of this disorder.

It is important to mention that scientific research in this area has not only sparked debates on the terminology used but has also prompted the search for a better understanding and characterization of children with this condition. The aim is to develop intervention strategies that are customized for each case.

Recently, the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) [5] declared that children with autistic spectrum disorders are characterized by:

- “Persistent deficits in social communication and social interaction across multiple contexts, as manifested by the following, currently or by history (examples are illustrative, not exhaustive): Persistent deficits in social communication and social interaction across multiple contexts, as manifested by the following, currently or by history (examples are illustrative, not exhaustive):
1. Deficits in social-emotional reciprocity, ranging, for example, from abnormal social approach and failure of normal back-and-forth conversation; to reduced sharing of interests, emotions, or affect; to failure to initiate or respond to social interactions.
 2. Deficits in nonverbal communicative behaviors used for social interaction, ranging, for example, from poorly integrated verbal and nonverbal communication; to abnormalities in eye contact and body language or deficits in understanding and use of gestures; to a total lack of facial expressions and nonverbal communication”.
- (p. 27)

The National Research Council (2001) [6] notes that students with autism spectrum disorder require special attention.

“Epidemiological studies and service-based reports indicate that the prevalence of autistic spectrum disorders has increased in the last 10 years, in part due to better identification and broader categorization by educators, physicians, and other professionals. There is little doubt that more children are being identified as requiring specific educational interventions for autistic spectrum disorders. This has implications for the provision of services at many levels”.

(p. 212)

It's crucial to note that children with autism spectrum disorder should not be left out of education. In 1978, the Warnock Report [7] was released in the United Kingdom, which questioned the medical approach of using a limited and one-sided diagnosis to evaluate disabilities. Instead, it emphasized the educational approach, recognizing each student's unique educational potential and requirements. This method enabled a more thorough and all-encompassing assessment and aimed to design customized education plans for every student. These programs could adjust the standard curriculum to accommodate all students, enabling them to achieve their objectives and thrive in an inclusive educational environment.

Following the assumptions presented earlier, we believe that decision-making underlying the change in the education of students with autism spectrum disorder should initially be based on policymakers' vision and subsequent normative regulation. However, these principles should later encompass and integrate educators' vision and pedagogical action without forgetting the fundamental and indispensable coordination with families. Above all, families aim to replace the segregation that their children were once subjected to, when inevitably directed to institutions for individuals with disabilities, with inclusion in regular education systems whenever possible. The goal is to provide and enhance their socio-emotional and educational success.

In this regard, Serra (2009) [8], referring to inclusive schools, clarifies that "the true guarantee of the principle of equality lies in the school providing each child with the necessary adaptations according to their needs." (p. 1)

However, we understand that integrating students with autism spectrum disorder into mainstream schools is a complex endeavor that cannot be accomplished through mere regulation or physical modifications. Achieving success necessitates implementing strategic measures that involve comprehending the needs of its audience, recruiting and leveraging capable personnel, allocating financial resources efficiently, and tailoring spaces and materials to suit individual situations.

It's worth emphasizing Paulo Freire's perspective (2000, p. 47) [9] that "Educational practice can do something, even if it can't do everything." This implies that educators and pedagogues should embody "The subject who learns by teaching, and the subject who teaches by learning" (ibid, p. 35).

Therefore, we believe that awareness, information, and specialized training should be initiated in addition to the dimensions mentioned above. The aim is to equip educational teams with knowledge, techniques, and strategies that contribute to the well-being and success of all students, including those with autism spectrum disorder.

Regarding this intervention, Garcia and Rodriguez (1997) [4] alert us to the fact that:

"Identifying what we should teach an autistic child is a complicated and delicate task since they do not conform to the usual forms of assessment:

Their behaviors are paradoxical. It seems that they can do certain things in specific environments, while, on the contrary, they have significant gaps in areas they should master.

They do not conform to the usual norms of standardized tests and questionnaire administration, so alternative methods adapted to their understanding are necessary.

They tolerate frustration poorly." (p. 255)

It has been shown through various studies that children with developmental differences demonstrate notable discrepancies in key areas such as communication, socialization, and behavior when compared to their peers of the same age. We must develop and consider support measures to address these deficiencies, which can hinder their ability to learn and grow.

III. THE DEVELOPMENT OF STRUCTURED TEACHING UNITS WITHIN THE AUTONOMOUS REGION OF MADEIRA

During the 2005/2006 academic year, the Regional Directorate for Special Education and Rehabilitation (DREER) of the Regional Department of Education established the first TEACCH classroom at the Basic School with Pre-School in Ajuda (municipality of Funchal) in the Autonomous Region of Madeira. This pioneering educational initiative was developed to meet the needs of parents who wished their children to be included in the regular education system rather than attending a separate special education establishment (DREER, 2007) [10].

During its initial phase, this classroom welcomed six children who were able to partially integrate into the school's regular curriculum through extracurricular activities based on their individual abilities and learning levels. Four of these children attended preschool education on a part-time basis, while the remaining two participated in Physical Education, Music, and Visual Arts classes as part of the 1st cycle of basic education.

The TEACCH classroom was staffed with two highly special education teachers, two professional special education technicians, and one socio-educational assistant to ensure the students received proper care and attention. Additionally, the children received support in psychology and psychomotricity, as outlined in DREER (2007) [10].

As outlined in Regional Legislative Decree 33/2009/M of December 31 [11], educational establishments have been given the necessary tools to provide individualized and tailored teaching/learning experiences for students with autism spectrum disorder. This has resulted in the development of several Structured Teaching Units (UEE), which are specifically designed to cater to these students' educational needs, taking into consideration factors such as cognitive abilities, language and social development, age, and academic level of the students (as stated in Sections 1 and 2 of Article 37 of Regional Legislative Decree 33/2009/M).

The creation of the Structured Teaching Units (UEE) aimed to achieve the following objectives:

- a) Promote the participation of students with autism spectrum disorders in curricular and extracurricular activities alongside their classmates.
- b) Implement and develop a structured teaching model, applying principles and strategies based on visual information to promote the organization of space, time, materials, and activities.
- c) Apply and develop interdisciplinary intervention methodologies that, based on the structured teaching model, facilitate learning, autonomy, and adaptation to the school context.
- d) Make the necessary curricular adjustments.
- e) Organize the transition process for post-school life.
- f) Adopt flexible educational options of an individual and dynamic nature, associated with constant assessment of the student's achievements, the teaching and learning process, and family involvement and participation” (Section 3 of Article 37 of Regional Legislative Decree 33/2009/M).

The Structured Teaching Units have special education teachers who perform various roles, which include monitoring the development of the structured teaching model, making necessary curricular adjustments, adapting resources to meet the student's needs, providing necessary support such as psychology, speech therapy, psychomotricity, among others. They also assist in the transition process of children and youth, both between different levels of education and schooling and into post-school life, among other functions.

Educational institutions that implement Structured Teaching Units should have the necessary resources. These resources include furniture, educational materials (such as adapted and educational software, alternative or augmentative communication systems, and psychomotor materials), and computer equipment that meet the needs of the students.

The TEACCH methodology is based on structuring the environment to encourage the child's activity and individual engagement based on their abilities and performance levels. This is done to reduce disruptive behaviors.

The TEACCH classroom is designed to provide children with autism spectrum disorder with a structured, organized environment that promotes independent work and learning. The classroom is divided into different areas, including a working area, a play area, a meeting area, and a sleeping area. Each area is visually clear and well-defined, with distinct reference patterns and routines that help children with autism spectrum disorder communicate through symbols.

This structured environment is essential for the development of areas where children with autism spectrum disorder often face greater difficulties such as attention, concentration, language, memory, interaction with others, and problem-solving. The areas within the classroom can be tailored to meet each child's specific needs. The Directorate-General for Innovation and

Curriculum Development (2008) has provided guidelines for designing and implementing TEACCH classrooms.

METHODOLOGY OF STUDY

Portugal is progressing towards a more inclusive education system with Decree-Law No. 54/2018, dated 6 July [13], and by the Regional Legislative Decree N.º. 11/2020/M of 29 July [14], which adapts to the Autonomous Region of Madeira the regimes contained in Decree-Law No. 54/2018, of 6 July, amended by Law No. 116/2019, of 13 September, and Decree-Law No. 55/2018, of 6 July [15]. The law emphasizes that effective educational support doesn't require labeling students but identifying and implementing necessary measures based on national guidelines. Students won't be categorized by personal characteristics such as SEN or immigrant but rather by the type of support they need.

Article 20 of the law outlines a collaborative process for identifying students needing support, including parents/guardians, teachers, non-teaching staff, and social services. Once identified, the school leader approves the assessment and mobilizes a multidisciplinary team. Each school cluster must have a team dedicated to supporting inclusion, responsible for determining students needing support measures and monitoring their progress. If necessary, the team will write technical pedagogical reports on individual students.

A new system has replaced the old way of identifying students with “special educational needs” and putting them into certain categories. Now, any student from any background can be considered to need support measures. The new system has three categories of support measures: universal, selective, and additional. These categories include tutoring, curriculum enrichment, psychological support, and significant curricular adjustments.

The new system focuses on the support that students receive rather than their personal characteristics. Therefore, Portugal has eliminated labeling, which can have a negative impact on students. The law also prohibits Portugal from collecting data based on personal characteristics, except for nationality and gender. Some data on students with special educational needs and those from ethnic groups are available. Still, they are based on school leaders' perceptions rather than direct answers from students or their families.

It is important to acknowledge that despite legislative modifications, certain educational projects and programs persist in the midst of reform. This study focuses on how early childhood education schools are catering to the requirements of students with Autism Spectrum Disorder (ASD).

This qualitative research (Bogdan & Biklen, 2007) [16] is designed as a case study (Stake, 1995) [17]. It aims to analyze the implementation of a specialized classroom for students with ASD in a primary school with preschool education in the Autonomous Region of Madeira, Portugal. The study uses episodic interviews and document analysis to collect data (Flick, 2022)[18], particularly emphasizing Portugal's inclusive education framework. The data is analyzed and discussed using content analysis (Bardin, 2007)[19], with interviews conducted with a teacher and a parent of a student with ASD. The study aims to understand the strengths and weaknesses of the TEACCH Program, the facilitative elements for inclusion within the school and among teachers, the school's interaction with the family of the student with ASD, the teachers' specific training and their association with the TEACCH Program, and also the families' perspectives and feelings.

AN OVERVIEW OF DATA PRESENTATION AND DISCUSSION OF RESULTS

Establishing a functional relationship between theoretical principles, observation, and interpreting factual reality is crucial in effectively addressing the challenges posed by scientific progress. A literature review has shown that the prevalence of children with autism spectrum disorder has been on the rise. As this group of students possesses unique characteristics, educational systems, and professionals should strive to create tailored responses that promote their inclusion, acceptance, and accommodation. Ensuring they receive the necessary support to thrive academically and personally is vital.

The documentary analysis focused on researching the legislation regulating the creation of Structured Teaching Units. As mentioned earlier, we aimed to contribute to disseminating knowledge in this field of expertise. We endeavored to comprehend and contextualize the journey and process of educating students with autism spectrum disorder. This was done from the perspective of a student's parent and a specialized teacher who has embraced the challenge of teaching in such a classroom for almost two decades.

Considering the crucial importance that families represent in the development process of children with autism spectrum disorder (ASD), we sought to gain a representative perspective from the experience of a father of a young man with ASD (referred to as L.), currently 27 years old, who was one of the students who enrolled in the first Structured Teaching Unit opened in the Autonomous Region of Madeira in the 2005/2006 school year.

Regarding the diagnosis, this father described the initial shock when discovering his son's condition: "Until the age of 3, we considered that L. had a normal development." He mentioned that, at the time, they lived in Lisbon. When L. began attending daycare at the age of 3, he only stayed for one morning because his disruptive behaviors and reactions destabilized and frightened the other children so much that the daycare staff: "called us at the end of the morning, gave us our money back, and sent him away."

This episode reflects and is representative of the prejudices and stigma still faced by many children with autism spectrum disorder, who are judged solely based on their outward behaviors without taking the time to understand their triggers and underlying causes, as advocated by Garcia and Rodriguez (1997) [4].

Nevertheless, the family persisted in their search for an appropriate educational institution for their son. One day, while discussing their predicament with the management of another daycare center, a child psychiatrist overheard their conversation. The psychiatrist asked to observe the child playing and quickly identified his condition: L. had autism. The father recalled the doctor's words that day: "You're facing a lifelong challenge." Later, the doctor may have suggested that the parents seek the services of a reputable children's development center at a Lisbon hospital, where a doctor and his team specialized in working with children diagnosed with autism and closely engaged the families. From that point forward, L. received care from the team, and the family felt more supported and secure.

The passage highlights a key aspect of working with children with special needs: a systemic approach where the roles of family and professionals complement each other. This idea is supported by Camacho (2019) [20].

Later, the family moved to Madeira, where they found it difficult to access the same level of support they had had in Lisbon. Despite this, the father remained determined to find the best for his child and learned about the International Autism Congress in Lisbon. He attended the event, where he encountered people who were skeptical about the success of educating children with

special needs. However, he also gained new perspectives that gave him hope for a brighter future.

Having heard about a school in Lisbon that had started a new intervention methodology for children with ASD, the father requested to visit it. He spent a morning inside the classroom interacting with the children and the teacher who worked there. Recalling this experience, he enthusiastically remembered, "I came out of there eager to do something similar in Madeira. I talked to other parents and had a dialogue with the Secretary of Education in Madeira at the time, who told me, 'If this is good, we should do even better.'" Then the father concluded, "And so it happened: shortly after, in a newly built school, the first Structured Teaching Unit in the Autonomous Region of Madeira was equipped with the best materials and equipment available. My son was part of that first group of students." He added, "It was exceptional for the children and us families... before, we had to send our children to a special education institution... we went to see what was available elsewhere, we persisted, and we succeeded."

After experiencing some initial success, the father realized that the resources provided by government education services were diminishing. As a result, he established an association to bring families together, organize training sessions and case discussions, and seek financial support and resources to fill the gaps in providing specialized technical support to students. He explained that "there was a need to establish an association of parents of children with autism here," which led to the Portuguese Association for Developmental Disorders and Autism of Madeira (APPDA-Madeira). Although the association faces financial difficulties and is not subsidized by the Regional Government, they work with approximately 100 families and have received support from the Funchal Municipal Council in recent years.

Despite awareness-raising efforts and the proclamation of inclusion as a universal value, the father, knowledgeable about the lived experiences of many families that go through the Association, stated: "There are still families who don't want to believe... they are in denial. Others come and go from our headquarters and don't want to be seen. They don't participate in social gatherings to avoid being seen. The stigma persists. Many students with autism spectrum disorders live in single-parent families, primarily composed of mothers, whose husbands or partners abandoned the family because they couldn't cope with the challenges that having a child with these characteristics brings."

Regarding the stages and dilemmas that these families experience over time, he confided in us: "It was and still is difficult for us too... to give you an example, it took us five years to decide whether we would risk having another child, fearing that they might also have autism... we knew it could happen, especially if it was a boy. Ultimately, we took the risk, and a healthy girl came along with no problems."

The 54-year-old teacher highlights her professional journey, which involved working with students with special educational needs in different grade levels. At one point, upon learning about a regular school that had initiated an innovative project for students with autism spectrum disorders, she volunteered to join the team, a role she continues to hold today. Regarding the start of her work with these students, she mentioned that she felt "the need to establish an emotional relationship; to get to know them better through interaction; to observe them in natural environments; to share experiences with families and with the colleague who had been in the classroom longer; to study and learn more about the issue and the TEACCH method." This willingness demonstrated by the teacher to accept diversity and observe the students beforehand, coupled with the need to consolidate knowledge leading to the acquisition of skills and the

capacity to perform in a specialized manner, aligns with what Paulo Freire (2000) [9] asserts when he states that educators should put “affection, joy, scientific capability, and technical mastery in the service of change.” (p. 144)

The referral to the Structured Teaching Unit is made by education or healthcare teams that have previously worked with the children based on assessing the needs and the responses offered in different contexts that seem plausible for their inclusion.

It is recognized that systemic intervention for students with autism spectrum disorders, to achieve its objectives, requires the existence of a collaborative process led by an extended and transdisciplinary team with differentiated yet holistic and complementary roles. All of this is aimed at providing the well-being, autonomy, progress, and promotion of the desired inclusion of students. Based on this assumption, our interviewee emphasized that “At the beginning, there was a weekly meeting with the entire team (teachers, technical assistants, and technical specialists) on a free afternoon when the children were under the care of their parents. Together, we would systematize the work to be done based on evaluating what had been implemented in the previous week (...) That was ideal (but has since been lost). Formal and informal meetings and in-context training are for homeroom teachers and new arrivals (...). There is a cohesive team that is open to sharing and evaluating (...). A pedagogical pair that allows for complementing, disagreeing, agreeing, and building knowledge (...). Colleagues who are sensitive and receptive (regardless of their training) with whom bonds are formed.”

From the words of our interviewee, we can deduce that the school where she works is a dynamic and vital space for inclusion. She states that “One of the positive elements regarding the intervention room is the fact that it is located on the same floor as the regular education classes where the children go (...) it is a spacious room with good lighting (...).” This statement aligns with what Serra (2009) [8] argues when she states that inclusive school is “the safeguard of the right to access, but also the right to success” (p. 1).

Regarding the school's management team, the teacher describes it as “Initially, leadership was very resistant to the presence of these students, but gradually they were able to listen and understand the benefit for students with autism and also for the other students, who developed feelings of solidarity, respect, and help (...) because they live closely with the first group, they know them (...) it was a path achieved.”

Silva and Fraga (2022) [21] highlight the critical role that decision-making, risk-taking, and responsibility play in teaching and educational action. To foster a democratic learning environment, individuals must engage in the decision-making process with consciousness, freedom, and accountability. Furthermore, recognizing the distinct qualities of each region and the local processes that shape public education policies, especially in peripheral and ultra-peripheral areas, is essential for ensuring effective and fair education.

There is a conviction that the role families play is crucial throughout the educational process. The interviewee also highlighted this dimension when she admitted: “Families have accepted well the inclusion of their children in the structured teaching room in this school. They emphasize the advantage of the methodology in the progress they observe in terms of autonomy, routines, socialization, and behavior of their children. Periodically, we assess the effectiveness of the measures, and the parents' satisfaction level has always been 'very satisfied,' which makes us happy.”

As a recommendation, she also stated that it is essential to “Collaborate with the family and involve them in the process. (...) They have a deep knowledge of what their children are (...). I also need to know what stage of grief the family is in. I have to know what I'm asking of a parent

who is still in the denial phase. I have to involve the family in the home routines, in their routines.”

The Structured Teaching Unit we studied implements its activities through the TEACCH methodology. Regarding this choice, the interviewee emphasizes that “since students with ASD need predictability about what will happen, this method has the advantage of providing students with an anticipation of the sequence of tasks and routines they will go through and perform throughout the day. This helps them develop autonomy, communication skills, and behavioral stability. Furthermore, tasks are planned and prepared based on each student's strengths, particularly visual perception, memory, and special interests. This circumstance provides them with security and emotional stability. Therefore, structuring activities represents an effective strategy for promoting the functionality we want to work on and instill.” This structuring aligns with what is recommended by normative documents (Regional Legislative Decree No. 11/2020/M) and guidelines from the Regional Department of Education of Madeira.

Referring the constraints and obstacles to the inclusion of these students in this school, it was mentioned that, although in limited numbers (given the universe of human resources it has), there are still professionals who impose barriers to acceptance and attitudes, citing their lack of specialized training and staunchly arguing that these students should not be in a regular school but in a special education institution.

Regarding the two decades of decision-making and practices in the care of children with autism spectrum disorder (who have since become young adults), which our interviewees have closely followed when asked about their current concerns, the father was unequivocal in his response: “As a parent, I can say that, in the past, we had the best support system for students with autism spectrum disorder. Today, I no longer hold that opinion. As an example, we once again have students with ASD without suitable support for their needs.”

Thinking about the likely existence of an ideal profile for working with students with autism spectrum disorder, the interviewee believes that it is “fundamental to take pleasure and have an interest in this area of intervention”, as well as “knowing how to observe, plan, assess, and then intervene, and be able to assess, observe, and intervene again.” “Creating a relationship is essential, and above all, evaluating our intervention (...), they tell us and teach us a lot. We must believe. Many people do not believe in these students. The results are not always visible or quick. We need to be patient and know how to wait for the results... they will come in their own time. We must take risks.”

The concern expressed by the father about the future, when parents are no longer here, highlights the pressing need to establish supported living arrangements as an alternative to sending their children to institutions designed for mental illness, which has happened to some young adults whose parents have passed away. This concern underscores the urgency for society to organize itself to provide a comprehensive and long-term response that promotes this population's well-being, safety, and dignity.

CONCLUSION

This study has allowed us to reflect on the inclusion of students with autism spectrum disorder in a regular school in the Autonomous Region of Madeira. Data collection through literature review and episodic interviews has led us to conclude that accepting and including students with ASD is complex and requires a synergy of efforts between government entities, families, schools, and professionals.

In 2005, the decision-making process and active involvement of educational authorities in the Autonomous Region of Madeira, as well as families and professionals, were based on what scientific research and pedagogical differentiation recommended, providing the educational process with relevance, meaning, and coherence.

Evidently, families took on the role of protagonists and mediators in a network of collaborative efforts, seeking answers not only for their children but also for other children and families facing similar challenges. They deserve credit for bringing structured teaching to the Autonomous Region of Madeira. As we have observed in the legislation analysis and in the teacher's interview, structured teaching offers numerous advantages. Having it in a school promotes the skills students acquire by allowing them to transition between two adjacent and complementary environments: the structured teaching unit, a smaller group with specific dynamics and resources, and the regular class where they are enrolled. In the normal class, they learn collaboratively and inclusively with peers who do not have special needs.

However, despite all the achievements, there have also been constraints highlighted, including resistance to the inclusion of these students by some professionals, denial by some families in accepting the differences in their children, the rollback of some legislative measures, reduced financial resources that were previously allocated, and the lack of supported living arrangements for those without family support.

Our analysis of the data has led us to the conclusion that teacher training plays a pivotal role in fostering inclusive pedagogy. This finding is further reinforced by the 2020 report from UNESCO, which highlights the critical importance of teachers and their training in the implementation of successful inclusive educational practices. The significance of prioritizing teacher education and support practices to accomplish genuinely inclusive education systems is emphasized in the "Policy Paper 43 – Inclusive teaching: preparing all teachers to teach all students" (UNESCO, 2020) [22]. The document prioritizes the following recommendations:

1. To achieve this objective, pre-service and in-service training systems must be thoroughly scrutinized and revised. A core element of general pre-service training should be an emphasis on inclusion for all, imparting inclusive values, and not as an optional specialist course that only prepares some teachers to teach certain groups.

2. To strike a more effective balance between theory-based learning and hands-on practice, teacher training needs to focus on helping teachers learn how to be child-centered and inclusive. Peer training, professional exchanges, learning communities, resource centers, connections between mainstream and special schools, mentoring, and team teaching should be accorded due priority.

3. Inclusive teaching requires teachers to receive support from teaching assistants, head teachers, and district or thematic education coordinators. These support group members must also be equally well-prepared to fulfill their roles.

4. Governments must engage teachers and their representative organizations, as well as parents and community organizations (especially those representing groups at risk of exclusion), in the development and improvement of teacher standards, competencies, and education programs.

5. To inform and enhance the design and implementation of teacher education programs, a culture of monitoring and evaluation needs to be embedded in these programs. This should focus on classroom practices and the impact of these practices on student achievement and well-being. The need for education laws and policies to clearly articulate a vision of teacher training for

inclusive education that upholds diversity and encourages a sense of belonging cannot be overemphasized.

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