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Inclusion and inclusive education through the eyes of the majority in Slovakia

Abstract: This paper deals with inclusive education, primarily in relation to the awareness and opinions of the majority in Slovakia about this form of education. It points to the human factor as the key condition for the successful implementation of inclusive education. The paper presents the results of a research study that gathered the opinions of the majority in Slovakia on the implementation of inclusive education. The data was collected via a questionnaire with 557 respondents. Besides the quantitative statistics, the results were analysed by grounded theory methods. The collected data provides information on the persistent lack of awareness and orientation of the majority regarding the basic terminology of inclusive education. Additionally, we found a prevalent positive perception and attitude towards the implementation of inclusive education in regular Slovak schools by the majority, whereas the greatest issues related to its implementation were identified as the parents' concerns about the behaviour of the intact children already in the mainstream system towards children with disabilities and the inability of children with disabilities to become members of a group, concerns about specific types of disability, concerns about the quality and course of education, concerns about children with disabilities being bullied and concerns about the occurrence of unpredictable events.

Key words: inclusion, inclusive education, conditions for inclusive education, Slovak Republic, majority, disability, impairment, human factor

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Introduction

The Slovak Republic aligned with countries that were striving for the introduction and implementation of inclusive education several years ago. Objectively, inclusive education involves both pros and cons, more precisely, risks. Inclusive education *a priori* not only concerns individuals with disabilities, impairments or those in danger of exclusion, but the whole of society, which is often neglected during the implementation phase. Until the intact population develops positive attitudes (in terms of cognitive, emotional and behavioural components) towards inclusive education, its introduction and implementation are problematic. Regarding the sociological component of inclusive education, there is a difference between the usual tolerance of those with disabilities, impairments or those in danger of exclusion, and its acceptance; that is, embracing inclusive education (Lechta 2009). Consequently, the research study requires sufficient data to be gathered on the attitudes and opinions regarding inclusion and inclusive education from the following perspectives: individuals with disabilities, impairments or those in danger of exclusion; as well as their intact classmates; pedagogic, expert and non-pedagogic school employees and educational employees within the school; parents of both the intact pupils and those with disabilities, impairments or those in danger of exclusion; and society as a whole.

The paper aims to point primarily at the importance of the positive attitudes and opinions of the majority towards inclusive education and will present the research data collected from the majority category regarding inclusive education.

Historic approaches to individuals with disabilities throughout the world

Every individual has a right to education and therefore the right conditions must be created for everyone to equally access the same educational opportunities. The attitudes and opinions towards people with disabilities have changed and developed throughout history. Even the ancient thinkers such as Plato, Socrates or Aristotle

considered individuals with disabilities. As a short historical excursus shows, the approaches towards people with disabilities in the past have transformed from repression (abandonment, exclusion or even murder), through to utility (misuse and abuse of the remaining abilities of the handicapped), charity (providing essentials for people with disabilities), humanity (an increased interest in human beings in general), altruism (a selfless and unselfish attitude), emancipation (a great boom in the care of those with disabilities), intervention (striving for those with disabilities to achieve full independence) up to a lack of exclusion (i.e. inclusion; Požár 2007). It is necessary to emphasise that the aforementioned processes were not linear, and in examining the history, there have also been negative steps backwards (fascist Germany, concentration camps) when those with disabilities or specific differences were physically eliminated. The 20th century can be viewed as an important milestone in terms of the attitudes about and the care provided for those with disabilities, impairments or those who are in danger from exclusion. According to Kusý (2015, p. 7), in the first half of the 20th century there was a huge breakthrough in personality theories, and the emphasis gradually shifted from isolated individuals towards individuals in interaction through relationships within society. Human beings were generally not viewed (whether they had a disability or not) as isolated, independent selves anymore, but as the opposite – as social beings requiring social interactions for their full social existence. Simultaneously, the views and perceptions of human beings regarding the excluded have transformed, resulting in changes to things such as terminology whereby terms such as "imbecile", "retarded" and "handicapped" have lost their significance, and even the expression "a disabled person" is now viewed as inappropriate and has been replaced by the expression "a person with a disability", emphasising and placing the value and purpose on the person, and only thereafter, on the disability. The aforementioned changes in viewing and approaching those with disabilities, impairments or those in danger of being excluded, which are also increasingly reflected in legal frameworks, has led to a growing awareness regarding inclusion as a new paradigm, when those with disabilities, impairments or those who are in danger of exclusion no longer have to adapt to the conditions placed on them by society, but where society creates the optimal conditions for them, thus leading to the fully-fledged inclusion of all people in all areas of social life (Bizová 2013). The starting point of inclusive education is the person as a whole and not their specific disability, impairment or the danger of them being excluded, which has arisen from the new perspective on those with disabilities, who are now considered fully-pledged persons, and where no differences exist between the intact person and those with disabilities (Kudláčová 2013, p. 18).

Inclusive education in the Slovak Republic

Despite the above-listed changes that have taken place throughout history, currently no generally legally binding law in the Slovak Republic defines the terms "inclusive education" or "inclusive school", and no law even specifies the details about the changes that schools need to undergo to ensure an adequate quality of

education for all people without bias in terms of their age, health status, gender or social status. Under normal conditions, we are legally and morally bound to create inclusive educational provisions when we consider the Convention on the Rights of Persons with Disabilities (Tekelová 2012). Ratification of the Convention was delayed in Slovakia in comparison to other European Union countries; the Slovak Republic ratified the Convention in June 2010 and was one of the last countries to do so. One of the consequences of this delay is the contemporary status of education for individuals with disabilities, impairments and those in danger of exclusion that can be defined as being somewhere between integration and inclusion, typically overlapping the elements of both models (Lechta 2013). In the Slovak Republic of today, we cannot talk about the implementation of inclusive education in schools and within school facilities. Thus, it is also reflected across the whole of Slovak society, because Slovakia cannot be said to be a fully inclusive country.

Humans as a key condition for inclusive education

The success of inclusive education depends on several factors. Generally, the personal, technical, material, organisational, financial or legislative conditions are regarded as the most important. While only specific persons (government representatives, civil servants) are entitled to and are primarily able to determine ensuring and implementing some of the conditions, all of us can participate in ensuring another group of such factors (Šuhajdová 2015). This was aptly stated by Lechta (2010, p. 6): "[W]hile inclusive education implementation in [the] material sphere correlates primarily with the amount of effectively used financial means, implementation of inclusive education on the spiritual level is bound to fundamental qualitative changes in viewing all layers, classes and groups of society on the otherness of others." (Ibid.) Also, Kudláčová (2010, p. 98) emphasises that "inclusive education can only be successful after a change in thinking, not only in the pedagogic or educational community, but also in the whole [of] society. It refers to the aforementioned change in [the] thinking of people, or a change in viewing individuals with disabilities, impairments or in danger, and their inclusive education by society." (Ibid.) This is the least financially demanding of all the factors, but paradoxically, it can be the most decisive and most important condition as it can represent the primary motive underlying all the other factors, including the financially more demanding conditions that are necessary for the successful implementation of inclusive education. Inclusion is a process whereby not only the school system, but also the thinking of people has to change (Ostatníková 2010). It requires a certain amount of time, since the successful introduction and implementation of inclusive education cannot be achieved in a day, just as it is not possible to change the attitudes and opinions of the majority in a day regarding individuals with disabilities, impairments or regarding those in danger of exclusion and their inclusive education. The moral decay of contemporary society and its excessive financial orientation threaten not only the healthy functioning of society, but also the successful inclusion of individuals with

disabilities, impairments or of that in danger of exclusion (Ostatníková 2013). It is clear that the inclusion concept and its implementation are significantly influenced by the current social conditions. As Zászkaliczky (2010) states, economic crises and the crisis surrounding social identity have caused many conflicts, and values such as acceptance, tolerance and respect, typical for inclusion, are increasingly being depreciated. Regarding this, Schwarz (2012, p. 11) very aptly writes that "it is also typical for the current-day crisis, which appears to be financial, but we need to bear in mind that the economy is only a tool in the hands of the people. The background and the source of the crisis are a crisis of man and his relations, and the moral crisis." (Ibid.) The economic crisis is thus only the result of the long-term moral decay of the whole of society, where the value of a man is calculated on the basis of his economic and social utility. However, an individual's human dignity should be based on completely different parameters (Rajský 2013) and should never be grounded on or interchanged with his or her utility.

Research methodology

The attempts at the implementation of inclusive education for pupils with special educational needs (SEN) are noticeable in Slovakia. Consequently, the main goal of the research study was *to identify the opinions of the majority in Slovakia on the implementation of inclusive education*.

On the basis of the main research goal, a set of partial research questions were formulated. Our goal was to answer the following partial research questions:

1. What information and knowledge on inclusion and inclusive education have the majority of the population in Slovakia got?
2. What does the majority understand by the term "inclusive education implementation"?
3. Which conditions must the school meet to be viewed as inclusive by the majority?
4. What are the greatest concerns of the majority regarding the introduction and implementation of inclusive education?
5. What are the advantages of implementing inclusive education in the eyes of the majority?

A self-constructed questionnaire containing 27 items was used as the research methodology. The first seven items were designed to investigate the background information on the respondents (gender, age, marital status, number of children, region, the highest achieved educational level and whether there was a child with a disability in their circle of friends). Items 8 to 14 investigated the key knowledge and information held by the respondents about inclusion and inclusive education. The final part of the questionnaire contained items collecting the opinions of the respondents towards the implementation of inclusive education. The questionnaire's items were open-ended, closed, allowed for a follow-up to determine the

respondents' opinions, and involved matching items and items with a hierarchical ordering of the answers. The grounded theory method was used in the qualitative data analysis with three-level coding (open coding, axial coding, selective coding). The quantitative data was evaluated via descriptive statistics and and the data are also presented in per cent in Table 1. The research was conducted in late 2017, with the analysis and data interpretation being undertaken in early 2018.

After elimination, the questionnaires (some questionnaire items were not answered, the respondent's data was incomplete, more than one option was selected for an item), the research sample consisted of 557 respondents. The deliberately selected research sample complied with two requirements set out by the researcher. Firstly, the research respondents had to be at least 18 years old (i.e. of legal age in the Slovak Republic). The researcher's second requirement was crucial, because the research participants were not to be parents or grandparents of a child with any type of disability. The stated requirement ensured the research sample contained only representatives of the majority of the population who were not raising a child with a disability. Successively, to ensure sufficient heterogeneity of the sample, the primary variables about the respondents were collected; that is, age, gender, marital status, number of children, the highest achieved educational level and the presence of a child with a disability in the immediate family (e.g. the children of siblings, cousins, godparents, in-laws or other relatives) or in the circle of the closest friends that they stayed in touch with. The representation of the respondents in their individual categories is presented in the following table.

Gender	**Male**		**Female**		**Total**
	n	%	n	%	
	132	24	425	76	557
Age (years)					
18–30	98	74	260	61	
31–40	17	13	62	15	
41–50	8	6	69	16	
over 51	9	7	34	8	
total	132	100	425	100	557
Marital status					
single	91	69	232	55	
married	25	19	146	34	
divorced	2	1	14	3	
in a relationship (shared household)	14	11	30	7	
widowed	0	0	3	1	
total	132	100	425	100	557
Number of children					
none	104	79	268	63	
one	11	8	45	10	
two	10	7	84	20	
three	5	4	25	6	
more than three	2	2	3	1	
total	132	100	425	100	557
The highest achieved educational level					
lower secondary	5	3	7	2	
higher secondary without Matura exam	11	8	25	6	
higher secondary with Matura exam	76	58	228	54	
university – undergraduate	22	17	69	16	
university – graduate	15	11	85	20	
university – postgraduate	2	2	9	2	
other	1	1	2	0	
Total	132	100	425	100	557
A child with a disability in the immediate family	28	21	94	22	
yes	97	74	322	76	
no	7	5	9	2	
I do not know					
Total	132	100	425	100	557

Table 1: Research sample statistics

Research results and discussion

The experience with inclusive education specific to the age and gender of the respondents is presented in table 2.

	Yes		No		I do not know	
Gender	n	%	n	%	n	%
female	110	26	216	51	99	23
male	18	14	79	60	35	26
Age (years)						
18–30	73	20	193	54	92	26
31–40	21	27	40	50	18	23
41–50	23	30	41	53	13	17
Over 51	11	26	21	48	11	26

Legend: n – number of respondents, % – percentage
Table 2: Comparison of the experience with the term "inclusive education"

The results show that only 23 percent of respondents had ever heard of the term "inclusive education". More than half of them, specifically 53 percent, had no experience with inclusive education; the remaining 24 percent did not remember having any experience with inclusive education, neither theoretical nor practical. The table shows that 26 percent of female respondents had already encountered the term "inclusive education", but only 14 percent of men had. The age-specific distribution of the data shows that 30 percent of the respondents aged between 41 and 50 had already heard of the term, and only 20 percent of the respondents aged between 18 to 30 years old had, thus making them the smallest group.

The awareness of the majority about inclusion and inclusive education

With inclusive education, the primary terminology consists of such terms as "integration", "segregation", "inclusion", "intact pupil", "pupils with SEN" and "included pupil".

We found that less than half (42 percent) of the respondents could correctly identify an intact pupil as a pupil without a disability and only 21 percent as a pupil without an impairment. A pupil with SEN was considered an intact pupil by 18 percent of the respondents, a pupil with a disability by 6 percent and a pupil with an impairment by 11 percent of all respondents. In reality, these groups of students are in the categories targeted by the goals set for inclusion and are therefore the polar opposite of intact pupils. The remaining 2 percent viewed an intact pupil differently. Specifically, regarding gender, the following conclusions were made. Of all the female respondents, 44 percent could correctly identify an intact pupil as a pupil without a disability, and equally, 22 percent of female respondents correctly identified a pupil without an impairment as an intact pupil. This means

that significantly less than half of the questioned female respondents could answer correctly, while the score for impairments was less than half than that for the case of disabilities. The results were even worse for male respondents, as only 35 percent of them knew that a pupil without an impairment was an intact pupil and only 17 percent knew that the category of intact pupils also comprised pupils without impairments.

The complete opposite of the intact pupil is the included pupil. In this case we learned that 32 percent of all respondents could correctly answer that an included pupil was a pupil with a disability who was being educated in a regular class and 22 percent of all respondents identified that it was a pupil with an impairment who was educated in a regular class. Again, gender-specific data analysis highlighted how 35 percent of female respondents could correctly answer that an included pupil was a pupil who was educated in a regular school in a normal class, and respectively, 22 percent correctly answered that it involved the education of a pupil with an impairment in a regular school in a normal class. Of all the male respondents, 23 percent correctly identified it was a pupil with a disability and 21 percent a pupil with an impairment. In this comparison, the male respondents achieved worse results than the female respondents did.

We also wanted to determine to what extent the respondents could correctly identify the terms "integration", "inclusion" and "segregation".

Answers	**Integration**		**Segregation**		**Inclusion**	
	N (male) (female)	**%** (male) (female)	**n** (male) (female)	**%** (male) (female)	**n** (male) (female)	**%** (male) (female)
Shared education of pupils, while the pupils with disabilities or impairments have to adjust.	**285** (68) (217)	**51** (52) (51)	**57** (16) (41)	**10** (12) (10)	**215** (48) (167)	**39** (36) (39)
Division of pupils according to some criteria into specific groups and resulting in segregated education.	**56** (13) (43)	**10** (10) (10)	**465** (108) (357)	**84** (82) (84)	**36** (11) (25)	**6** (8) (6)
Shared education of all pupils, where they all actively participate in all activities according to their own abilities and possibilities.	**217** (49) (168)	**39** (37) (40)	**35** (9) (26)	**6** (7) (6)	**305** (74) (231)	**55** (56) (54)

Legend: n – number of respondents, % – percentage
Table 3: Answers to questions regarding what integration, segregation and inclusion mean

The results are presented in table 3, also showing the comparison between gender-specific answers. The results show that the identification of the term "segregation" was the least problematic, and it was correctly answered by 84 percent of respondents, and it was equally correctly answered by 84 percent of female and 82 percent of male respondents. The terms "integration" and "inclusion" were often mutually interchangeable because both terms were correctly identified by 51 percent in the case of integration and by 55 percent in the case of inclusion. When comparing the genders, the differences were not significant.

The respondents were also asked to describe, in their own words, what inclusive education implementation meant to them. Despite the transparency of the question resulting from the previous item and the possible choices explaining it, 27 percent of respondents could not explain the term "inclusive education": "I have no idea" (female, 45–50 years old, married, 3 children); "I can't guess" (male, 18–30 years old, married, 2 children). Twenty-one percent of responses were incorrect: "Some special education" (female, 31–40 years old, married, no children); "A child with a disability adapts to school requirements" (female, 18–30 years old, single, no children). The remaining 52 percent were accepted as answers expressing the essence of inclusive education: "To include a disabled child into the process of education, learning in regular schools under adequate conditions" (female, 31–40 years old, married, 2 children). The essence of inclusive education could not be expressed in their own words by 52 percent of respondents. The results indicate that the selected majority sample does not have sufficient knowledge and information on inclusion and inclusive education at their disposal. We identified the continuously persistent problem in orientation for the primary terminology; above all, the confusion between the terms "integrated" and "included" pupils and their subsequent identification. The insufficient knowledge and information about inclusive education, its focal point and goals is viewed as an equally important problem. All the aforementioned deficiencies in the area of primary terminology and knowledge on inclusion and inclusive education are more specific for male respondents. Vágnerová (1997) formulated similar conclusions when she pointed out the low level of awareness of the majority in the Czech Republic about individuals with disabilities and about inclusion. On the contrary, the conclusions of Požár's (2007) research indicate a sufficient level of awareness of the majority in the Slovak Republic about individuals with visual impairments. Nowadays, it can be said that the majority has had sufficient opportunities to acquire the necessary knowledge and information about individuals with disabilities and inclusion. The question remains as to whether the majority is actually interested in the knowledge and information (Šuhajdová 2018).

The opinion of the majority on the implementation of inclusive education

We found that 17 percent of the respondents fully agreed with the shared education of pupils with disabilities or impairments with intact pupils in regular schools and in normal classes. Partial agreement was expressed by 44 percent of respondents, meaning that in total, 61 percent of respondents agreed with inclusive education. Partial agreement was explained as follows: "The child is like any other; he or she has a right to education. The child is different, but healthy children will at least learn to respect and get on with these people" (female, 18–30 years old, single, no children); "All are equal in school and in life" (male, over 51, single, 1 child). No opinion was expressed by 9 percent of respondents, and finally, partial disagreement was expressed by 25 percent of respondents and strong disagreement by 5 percent of respondents. In total, 30 percent of respondents did not agree with inclusive education, advocating for their attitude with the following statements:

"A pupil with a disability requires a special approach that is not possible in regular classes; the teachers wouldn't spend as much time with the child as the pupil requires" (female, 18–30 years old, married, 1 child); "In my opinion, disabled children wouldn't feel comfortable in a group of regular children who wouldn't understand them, they couldn't speak together, play together, and in my opinion, they also couldn't learn the same curriculum at the same time" (female, 18–30 years old, single, no children). Analysing the results more closely, we can see that in comparison with female participants, who agreed with inclusive education in 63 percent of cases and did not agree in 28 percent of cases, the male respondents expressed agreement in 56 percent and disagreement in 35 percent of cases. For the age-specific results, the greatest agreement (67 percent) was expressed by the respondents aged 31–40 years old. The comparison of the data according to the number of children that the participants had showed that less agreement was expressed by individuals with no children (59 percent); however, it was still more than half of the respondents.

With regards to inclusive education, the majority were primarily interested in their own "healthy" child. We investigated whether the parents were interested in their own child being educated in the same class with a child with a disability. It was found to be no problem for 80 percent of the respondents: "It is important that my child acquires emotional experience with a disabled friend. It is suitable for him to learn to understand a peer with a disability, how to treat him and to know what he feels, needs and what makes him happy" (male, 31–40 years old, married, 1 child). On the contrary, 16 percent of the respondents disagreed with the possibility of educating their "healthy" child with a child with some type of disability: "I wish my child was educated in a class with calm atmosphere, where the child can progress in learning, and not in a classroom where psychological distress must be consistently dealt with. This happens if a child is failing in school regimen and habits, even if the child has a personal assistant. I have rich experiences " (female, 41–50 years old, married, 2 children). The remaining 4 percent of respondents did not express their opinion. Out of the respondents who fully disagreed with inclusive education (5 percent of all respondents), half of them had no issues about their child being educated alongside pupils with disabilities in the same class. No opinion was expressed by 27 percent of respondents and disagreement by 23 percent. Out of the respondents who partially disagreed with inclusive education implementation (25 percent of all respondents), 57 percent of them had no issues about their child being educated with a child with a disability in the same class, 35 percent of them did not express any opinion and 8 percent did not agree with educating their child in the same class as a child with a disability. Thus, in total, 31 percent of respondents did not agree with their "healthy" child being educated in inclusion with children with disabilities or impairments. At the same time, Požár (2010) emphasises that the necessary conditions for successful inclusion not only relate to the positive attitudes of society towards people with disabilities, but also to inclusion itself.

The data that is specific for different age groups indicates that the category of respondents aged between 18 and 30 years old could represent the greatest risk for inclusion and its introduction and implementation. From the gender specifics,

the positive perception of inclusive education was identified primarily in female respondents. In addition, inclusive education was viewed positively specifically by the group of 31–40-year old individuals. A positive attitude towards inclusive education and its implementation was also strong in individuals who knew a child with a disability or an impairment in their close circle of friends.

When we consider inclusion and real inclusive education, then we do not only have the education process itself in mind, but also its informal aspects (i.e. the time before and after classes, the breaks, leisure activities etc.). Thus, we were also interested in the respondents' opinions on the participation of pupils with disabilities in school and in leisure activities alongside the other pupils. Pupils with disabilities should attend all activities and should not be excluded at all according to 61 percent of respondents: "In my opinion, if the child follows the curriculum, he or she could also attend trips and such things; only really such things that the child wouldn't like to attend or that were not suitable for the child and could be harmful for the person" (female, 18–30 years old, married, 1 child). Disagreement regarding the inclusion of pupils in absolutely all school and leisure activities was expressed by 8 percent of respondents: "Because the child's health doesn't allow it" (male, 31–40 years old, divorced, 1 child); "Because each activity would have to be done individually" (male, 41–50 years old, married, 2 children). The remaining 31 percent of respondents did not express their opinion. We should note that a frequent answer emphasised that everything would depend on the type and degree of the disability. Lang and Berberich (1998) draw attention to the fact that the real yardstick of inclusive education is in informal education (during breaks or school trips, in the schoolyard) when children participate in activities of their own choice and not of the teacher's choosing.

Inclusive education implemented under optimal conditions can be beneficial for all its participants. In total, 56 percent of the participants, with a greater percentage of female (59 percent) than male (48 percent) respondents, believed that shared education with intact classmates can be beneficial for pupils with disabilities or impairments, primarily due to better socialisation, progress, higher motivation, greater self-confidence, improvements in communicative skills, positive thinking, personal development, finding purpose and self-acceptance: "The child will learn how to get on with healthy people that he or she will meet all his or her life" (female, 18–30 years old, single, no children); "The child will feel like a fully-fledged person and will know that he or she belongs among other children and will forget that he or she is different from other children" (female, 18–30 years old, single, no children). Simultaneously, 21 percent of the respondents believed that a child with a disability or impairment could gain better knowledge and a better overall education in a general school in comparison to a special school. Besides pupils with disabilities or impairments, inclusive education could also be beneficial for intact pupils. This statement was agreed with by 57 percent of respondents, the opposite opinion was held by 7 percent of them, and the remaining research participants did not express their opinion. The most frequent benefit for intact pupils was noted in the areas of recognition of the value of health, the development of empathy, tolerance, respect and dignity, a sense of belonging, responsibility, patience and acceptance: "It helps

the pupils to understand that nothing in life is to be taken for granted, for example, health" (female, 41–50 years old, married, 2 children); "It will teach them tolerance and empathy" (female, 18–30 years old, single, no children).

One of the most frequent causes of the failure of inclusive education was expressed as the concern the participants felt about its introduction and implementation. The concerns of the majority often led to building mistrust or even negative attitudes towards the whole idea of inclusive education. We found that 68 percent of the respondents had these feelings, 10 percent did not respond and 22 percent had no concerns regarding inclusive education. The most frequent concerns were identified as follows. The respondents had concerns about:

1. The child with a disability or impairment: "I would worry more about the disabled child" (female, 18–30 years old, married, 2 children); "The disabled child might be bullied" (female, 18–30 years old, single, no children).
2. Intact pupils: "Won't my child stagnate"? (female, 41–50 years old, in a relationship, 1 child); "The wasted potential of the healthy children" (male, 18–30 years old, single, no children).
3. The behaviour of the child with a disability or impairment: "Whether the disabled child will be aggressive" (female, 18–30 years old, single, no children); "If the disabled child has some kind of aggressive outburst and hurts another child" (female, 18–30 years old, married, 1 child).
4. The responses of intact pupils: "My greatest concern would probably be whether my child would treat the disabled child during normal children's quarrels in a human and correct way" (female, over 51 years old, married, no children).
5. The lack of preparation of the intact pupils for the arrival of the child with a disability or impairment: "That the intact pupils won't be prepared enough to help him and will hurt him" (female, 18–30 years old, single, no children).
6. The quality of the education process: "Slower learning" (male, 31–40 years old, single, no children); "Pupils in the class mutually disturbing each other" (female, 31–40 years old, married, 3 children).
7. The attitude of the teacher: "Less attention from the teacher for healthy children" (male, 18–30 years old, single, no children).
8. The quality of personal conditions: "Whether the teachers are qualified enough, because sometimes they don't even cope with healthy children" (female, 18–30 years old, single, no children).
9. Positive discrimination: "The teacher will mostly pay attention to that child and will ignore my child" (female, 41–50 years old, married, 2 children).
10. Negative changes in the behaviour of intact children: "Whether my child won't be scarred" (female, 18–30 years old, single, no children).
11. Bullying pupils with disabilities or impairments: "I hope that when I do have a child, I will raise her well and she won't hurt the weak. But as I cannot see the reaction of my child at school, I would be worried about whether she would hurt that disabled child" (female, 18–30 years old, single, no children).

12. Ostracism: "Exclusion of the disabled pupil from the group" (female, 31–40 years old, married, 3 children).
13. The occurrence of unexpected events: "A physical attack cannot happen" (female, 41–50 years old, in a relationship, 1 child); "An eventual accident" (male, 31–40 years old, married, 2 children).
14. The question of intact pupils: "Fear probably at the beginning, that my child will not stare at the child with a disability all the time and ask questions and whether I will be able to explain everything so that it is good and does not wonder about the disabled children" (female, 18–30 years old, married, 1 child).

The positive finding is the fact that 64 percent of the respondents were persuaded that the presence of a child with a disability or impairment in a regular school would not impact the school success of intact pupils.

With regards to the need to know what conditions, according to the majority, have to be fulfilled in order to introduce and implement inclusive education and to eliminate the aforementioned concerns, we also focused on this area. The opinion that inclusive education could be implemented without regard to the conditions in schools was held by 27 percent of respondents. On the contrary, 51 percent of the respondents believed that inclusive education could not be implemented by any school. Barrier-free access was mentioned the most: "So that the access to school, school aids, toilets or the canteen would also be suitable for children with disabilities, as well as for healthy children. Without mutual limitations" (female, 18–30 years old, in a relationship, no children). A sufficient number of pedagogic and expert workers was also mentioned: "A special school pedagogue should be present, and if necessary, also a teaching assistant" (female, 18–30 years old, single, no children); "Teachers with expert training" (male, 18–30 years old, single, no children). Regarding the preparation of intact pupils: "It is necessary to think about the healthy children, because it concerns them as well, so they need to talk about it as well, so that it is not a shock for them that suddenly they have a disabled classmate in their class and they won't know how to respond" (male, 41–50 years old, married, 2 children). In terms of the quality of the technical school equipment and materials, the respondents mentioned: "Special classrooms and teaching aids" (female, 18–30 years old, single, no children); "Teaching aids for children with disabilities, books in Braille, visual aids for the pupils with hearing impairments etc." (female, 18–30 years old, single, no children). Besides the school, the intact pupils themselves have to be prepared for the arrival of pupils with disabilities or impairments. Out of all the respondents, 72 percent believed that such preparation was crucial. The preparation of intact pupils for the arrival of a classmate with a disability or impairment was viewed as useless by 9 percent of the respondents. One of the reasons for not preparing the intact pupils in advance for the arrival of their new classmate with a disability or disorder was noted as: "I don't think that the pupils should be prepared in advance, their upbringing should be such that they don't hurt anyone, don't ridicule them and mostly understand that there are no differences between people" (female, 18–30 years old, married, 1 child); "Nobody

should have to prepare them if the parents have talked to the children" (male, 18–30 years old, single, no children). In such cases we can assume that the respondents did not underestimate the preparation of intact pupils for inclusive education, but they expected that the child should be prepared for such situations due to the right upbringing at home. It may be concluded that the majority of respondents considered a school inclusive when it primarily met personal, spatial and material conditions. However, the research conclusions by Učeň (2004) indicate that pupils with disabilities themselves view the ability to form friendly relations with their intact classmates, even outside the classroom, as the key factor of an inclusive school.

Conclusions

We acknowledge that the presented research has two essential shortcomings. Firstly, we focused primarily on inclusion and inclusive education in general. The respondents' answers to items were often related to individual types and degrees of various disabilities. Even though we identified the most problematic types of disabilities as viewed by the majority with regards to inclusive education, we believe that more valid and reliable data could be collected in similar research studies focusing not on inclusion and inclusive education in general, but on inclusion and inclusive education for specific types of disabilities. The second shortcoming of the presented research is that we primarily aimed at pupils with disabilities. Minimal attention was paid to pupils with impairments and even less attention was paid to pupils from socially disadvantaged backgrounds. It is necessary to highlight that all three categories of pupils (with a disability, an impairment or those in danger of exclusion) are equally important in terms of inclusive education.

An awareness about inclusion is not sufficient to change the attitude of the majority regarding inclusion; positive contact and experience is also critical (Cloerkes 1997), where "inclusion needs to be understood as natural, matter-of-course and an everyday part of life" (Kováčová 2010, p. 4). The successful implementation of inclusive education cannot be achieved in a day, just as it is not possible to change the attitudes of the intact society towards the individuals with disabilities in the same timeframe (Šuhajdová 2018). The question is, why not give it a try? People with disabilities, impairments or those who are in danger of exclusion are an inseparable part of our society. Their inclusion does not end with the end of their school attendance – it is only the first (but from our perspective, probably the most important) step towards their life-long social inclusion.

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STALIŠČA JAVNOSTI O INKLUZIJI IN INKLUZIVNEM IZOBRAŽEVANJU NA SLOVAŠKEM

Povzetek: V prispevku obravnavamo inkluzivno vzgojo in izobraževanje, zlasti z vidika stališč, ki jih ima o tem javnost na Slovaškem. Poudarjamo, da je človeški dejavnik ključni pogoj za uspešno udejanjanje inkluzije. Predstavljamo rezultate raziskave, s katero smo zbrali stališča javnosti na Slovaškem o implementaciji inkluzivnega izobraževanja in v kateri je sodelovalo 557 respondentov. Rezultati so bili obdelani tako kvantitativno kot tudi kvalitativno. Zbrani podatki kažejo na pomanjkljivo zavedanja pomena inkluzije, pa tudi na to, da ima javnost težave že z razumevanjem osnovne z inkluzivnim izobraževanjem povezane terminologije. Ugotovili smo sicer, da prevladuje pozitivna naravnanost do udejanjanja inkluzije v izobraževanju, a so zlasti starši izrazili zaskrbljenost, kakšen bo odnos učencev v večinskih šolah do učencev s posebnimi potrebami, pa tudi, kako se bodo slednji vključili v vrstniške skupine. Zaskrbljenost so izrazili tudi glede pojavnosti medvrstniškega nasilja ter nepredvidljivih dogodkov.

Ključne besede: inkluzija, inkluzivno izobraževanje, pogoji za inkluzivno izobraževanje, Slovaška, javnost, oviranost, prikrajšanost, človeški dejavnik

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