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Foundation phase teachers' points of view on the viability of Response to Intervention in their school context

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Guided by an interpretivist paradigm, the qualitative case study reported on here provided insight into the points of view of 9 foundation phase teachers on whether they believed that Response to Intervention (RtI) could be a viable approach to implement within their own school context. A semi-structured, focus group interview was conducted to explore the participants' views regarding the viability of RtI for their school. Through exploring these teachers' views, we aimed at initiating further research into whether RtI could potentially be a viable approach to assessment and intervention within a South African context. The findings suggest that the participants envisioned numerous challenges in the implementation of RtI within their school context. These challenges related to a lack of resources and challenges associated with the curriculum. The participants envisioned such challenges as potentially preventing the effective implementation of RtI and, therefore, decreasing its viability in their school context. The participants believed that if certain challenges, such as a lack of time and a lack of qualified teaching staff could be addressed and overcome, then an RtI approach could become viable in their school context. They believed that an effective RtI implementation could yield benefits associated with improved overall service delivery to learners and their parents. Furthermore, the participants believed that RtI could potentially result in a reduced need for financial resources to pay for referrals to learner support specialists, which they perceived as a challenge in their learner support interventions. The insights obtained from this study may be useful in guiding further research endeavours into the perceived viability of RtI in other school contexts in South Africa.

Keywords: differentiated instruction; inclusive education; learner support; response to intervention (RtI)

Introduction and Background

RtI is a promising approach for assessment and intervention which has been implemented internationally and which holds the potential to improve learning outcomes of all learners in inclusive educational settings (Fox, Carta, Strain, Dunlap & Hemmeter, 2010; Fuchs, D & Fuchs, 2006; Fuchs, D, Mock, Morgan & Young, 2003; Hughes & Dexter, n.d., 2011; Jimerson, Burns & VanDerHeyden, 2016). RtI is a multi-tiered instructional approach that aims to identify learning difficulties early on in childhood education and subsequently provide appropriate intervention to prevent further developmental delays and challenges (Fuchs, D & Deshler, 2007; Fuchs, LS & Fuchs, 2007; Greenwood, Bradfield, Kaminski, Linas, Carta & Nylander, 2011). This approach focuses on adjusting instruction and intervention strategies in response to diverse learner needs, which can help provide a more accurate reflection of a learner's abilities (Greenfield, Rinaldi, Proctor & Cardarelli, 2010). RtI, therefore, aims to support all children in school systems (Fuchs, D & Deshler, 2007; Greenwood et al., 2011).

In South Africa, following an international trend, the Department of Basic Education has adopted a philosophy of inclusivity which is intended to guide planning, organisation and teaching at all schools in the country (DBE, 2010b; Department of Education [DoE], 2002). This philosophy requires that high-quality education is provided equally to all learners and that the diverse needs of learners are responded to effectively (Swart & Pettipher, 2016). To advance these aims of inclusivity, policies such as the Education White Paper 6 on Special Needs Education (EWP6); the Screening, Identification, Assessment and Support Policy (SIAS); and the Curriculum and Assessment Policy Statements (CAPS) have been developed.

Despite the implementation of the aforementioned policies, the vision of inclusive education has not yet been fully achieved (DBE, 2010a; Nel, M, Engelbrecht, Nel & Tlale, 2014; Wium & Louw, 2015). Many learners experiencing learning difficulties or disabilities are being held back, drop out of high school, are unnecessarily placed in special education or lose confidence in their abilities (Rossi & Stuart, 2007). In a study by NM Nel, Tlale, Engelbrecht and Nel (2016), teachers were of the opinion that a lack of practical strategies prevented them from effectively supporting learners with learning difficulties. In addition to this, Ladbrook (2009) found that primary school teachers had a limited understanding of how the curriculum could be adapted to support learners and that teachers and school management believed that learners were achieving lower levels of competencies within the current curriculum.

Furthermore, it seems that although many teachers attempt to fulfil the technical requirements of assessment as outlined in CAPS, assessment rarely results in constructive feedback and targeted interventions (Umalusi, 2009). Teachers often experience challenges in understanding how to use assessment results to guide differential teaching techniques and to respond to diverse learner needs (Du Plessis & Marais, 2015; Geldenhuys & Wevers, 2013; Kanjee & Moloi, 2014).

Based on the aforementioned evidence, there appears to be a need in South Africa for a structured, practical approach to guide teachers in their teaching and assessment practices to support individual learner needs appropriately. RtI is such an approach to assessment and intervention that offers the potential to assist

teachers in inclusive education classrooms. RtI has been a driving force of educational reform in the United States of America (USA) and has been integrated into the Individuals with Disabilities Education Act (Council for Exceptional Children, 2020). The integration of RtI into this policy has resulted in all 50 American states permitting the use of RtI in the identification of learning disabilities and referrals to special education (Fuchs, LS & Vaughn, 2012).

Exploring the viability of RtI in a South African context may, therefore, be beneficial. Such an endeavour could reveal insights into RtI's potential as a practical approach to assist teachers in identifying and supporting learners with learning difficulties in inclusive education classrooms. Such an approach could support the inclusive education practices that are outlined in South African policies (DoE, 2001).

RtI as a Multi-Tiered Instructional Approach

The RtI process is a multi-tiered instructional approach which refers to different levels of intervention as tiers (Gersten, Compton, Connor, Dimino, Santoro, Linan-Thompson & Tilly, 2008). The first tier (T1) of RtI includes high-quality, scientifically based classroom instruction provided by a teacher in a general classroom setting (Gersten et al., 2008). In this tier, systematic, universal screening and progress monitoring is used to obtain information about a learner's level of achievement and learning rate to assist in the identification of learners who require further assistance to learning (Castro-Villarreal, Rodriguez & Moore, 2014).

Tier 2 provides targeted interventions for learners who are unable to make adequate progress and meet the suggested outcomes in response to the instruction provided in Tier 1 (Castro-Villarreal et al., 2014). These interventions generally consist of small-group interventions (Fuchs, LS & Vaughn, 2012) and are more intensive and specialised than instruction in Tier 1. Tier 2 interventions function as additional support beyond the core curriculum (Fox et al., 2010). Learners who continue to experience challenges and who do not progress sufficiently at this level of intervention are then considered to require more intensive and individualised interventions provided in Tier 3 (Castro-Villarreal et al., 2014).

Tier 3 provides learners with more intensive and individualised interventions that entail a variety of instructional approaches to address individual learner needs (Gersten et al., 2008). If the learner does not indicate progress during these interventions, then referral for a comprehensive evaluation for possible special education services is necessary (Gersten et al., 2008). Comprehensive evaluations, along with data collected during the RtI process, are then used to make decisions regarding the referral of learners to special

education services (Gersten et al., 2008).

Potential Value of RtI in South Africa

In South Africa, pedagogical barriers to learning can often result in learners being misidentified as experiencing learning disabilities and consequently being incorrectly referred for special education (Kerfoot & Van Heerden, 2015; Nel, M & Theron, 2008). Pedagogical barriers to learning can be experienced when, for example, curriculum materials, teaching strategies and assessment approaches are not adjusted to accommodate for learners' diverse needs (Prinsloo, 2016).

RtI aims to acknowledge the role that extrinsic factors such as inadequate instruction, cultural circumstances or socio-economic backgrounds may have on learners' learning performances (Hagans, 2008). As such, teaching instruction and intervention are adjusted throughout the RtI process in response to diverse learner needs which can help provide a more accurate reflection of a learner's abilities (Greenfield et al., 2010).

RtI's structured process of responding to diverse learners' needs (Hagans, 2008) could potentially address pedagogical barriers to learning and prevent the inappropriate referral to special education of learners who underachieve due to inadequate instruction or other extrinsic factors (Ardoin, Witt, Connell & Koenig, 2005). This can help reduce the global trend where there is an overrepresentation of linguistically and culturally diverse learners misidentified as having specific learning disabilities (Artiles, Trent & Palmer, 2004; VanDerHeyden, Witt & Gilbertson, 2007).

RtI, therefore, has the potential to become a more cost-effective approach to assessment and intervention in the long term (Huguenin, 2012). As an early intervention strategy, which addresses learning difficulties early on (Fuchs, D & Deshler, 2007; Fuchs, LS & Fuchs, 2007; Greenwood et al., 2011), RtI could reduce costs associated with prolonged interventions that often accompany late diagnoses of learning challenges (Huguenin, 2012).

Although numerous RtI reviews and studies suggest that RtI is effective in supporting the early identification and intervention of learners with learning difficulties (Fox et al., 2010; Fuchs, D et al., 2003; Greenfield et al., 2010; Hughes & Dexter, n.d., 2011; Jimerson et al., 2016; Murray, Woodruff & Vaughn, 2010; O'Connor, RE, Harty & Fulmer, 2005; VanDerHeyden et al., 2007; Wise, 2017), findings need to be critically interpreted to identify a causal relationship between the RtI approach used and the outcomes achieved. Before research into RtI can commence in a South African context, it is important to note the shortcomings in current research on RtI implementation as well as current limitations experienced in its implementation. These limitations are discussed in the following section.

Limitations of RtI

Since 2003 research has portrayed a relatively optimistic view of RtI. However, the research base for RtI is still emerging and needs to be expanded to address a broader range of learning areas and grade levels (Fuchs, LS & Vaughn, 2012; Hughes & Dexter, 2011). Furthermore, there needs to be more focus on longitudinal efficacy research and research on factors affecting the implementation of RtI (Hughes & Dexter, 2011). Fox et al. (2010) similarly report that not enough rigorous research exists on systemic variables that affect RtI implementation. They further state that such research is necessary to indicate the fidelity and sustainability of RtI implementation. If systemic variables are not considered in the implementation of RtI, the model may be ineffective in addressing all learner needs, despite its potential in improving learners' academic performances (Tyre, Feuerborn, Buisse & McCready, 2012).

Existing research that focused on factors affecting RtI implementation suggests that the most common challenges to implementation include: a lack of evidence-based curricula for Tier 1 instruction as well as a lack of evidence-based intervention strategies for Tiers 2 and 3 (Fuchs, D & Deshler, 2007; Greenwood et al., 2011). Furthermore, a lack of resources needed to implement RtI models and a lack of knowledge on how to implement such models are contributing challenges to RtI's implementation (Greenwood et al., 2011). Another predominant challenge is the lack of sufficiently trained school personnel (Greenwood et al., 2011). This is problematic as engaged administrators and effective district-level support structures need to be in place to help embrace the multi-tiered instructional process of RtI (Fuchs, D & Deshler, 2007). Furthermore, the premise behind an RtI approach lies on high quality early intervention to prevent the onset of more substantial learning difficulties which can hinder later development (Fuchs, D & Deshler, 2007; Fuchs, LS & Fuchs, 2007; Greenwood et al., 2011). Therefore, highly trained early childhood teachers are vital for the successful implementation of differentiated instruction within RtI components (Fuchs, LS & Vaughn, 2012).

The aforementioned challenges to RtI implementation must be carefully considered before RtI can be implemented in a South African context. South Africa is challenged by a lack of funding and insufficient physical and human resources, which contributes to preventing the effective implementation of inclusive education policies (Savolainen, Engelbrecht, Nel & Malinen, 2012). Furthermore, limited understanding and insufficient professional training in inclusive education practices also minimise the successful creation of fully inclusive classroom environments (Nel, M et al., 2014). These contextual issues need

to be fully explored and considered before the implementation of an RtI approach in South Africa can be investigated.

A continued need also exists to explore the thoughts and beliefs about RtI implementation of practitioners at grassroots levels (Fuchs, D & Deshler, 2007). Teachers' views are particularly important to explore as they play an integral role in the RtI process (Stuart, Rinaldi & Higgins-Averill, 2011; Sullivan & Long, 2010). According to international research on teachers' perceptions of RtI, there is a popular acceptance that RtI is a viable method to assist learners with learning difficulties (Cowan & Maxwell, 2015). Teachers have, however, reported that RtI implementation can be overwhelming with too much paperwork and not enough time and resources to implement specialised interventions (Castro-Villarreal et al., 2014; Cowan & Maxwell, 2015; Pyle, 2011).

Research indicates that teachers' beliefs and skills regarding an RtI implementation are largely influenced by their level of knowledge of RtI (Castillo, Wang, Daye, Zhuang Shum & March, 2018; Castro-Villarreal et al., 2014). Furthermore, studies have revealed that a lack of knowledge and training in RtI can impact teachers' views on RtI implementation negatively (Castro-Villarreal et al., 2014; Cowan & Maxwell, 2015).

Teachers' beliefs are influenced by the wider systems within which they function (such as school districts, provinces and communities) which all impact the potential for change and reform efforts such as RtI (Fullan, 2010). Teachers could, therefore, hold vital information about systemic variables which may affect RtI implementation within a South African context. Exploring teachers' views could assist in formulating how to specifically implement RtI components optimally in a South African context and whether optimal implementations could render beneficial outcomes in learner performances. A feasible starting point for research could, therefore, be to explore foundation phase teachers' views on the viability of RtI within their school context.

Methodology

In this study we used a qualitative methodological approach and a single exploratory case study design, embedded in an interpretivist meta-theoretical paradigm to guide our actions and decisions throughout the research process (Willis, 2007). This research design allowed us to focus on obtaining rich, context-dependent data on different teacher perspectives (Blatter, 2008). It provided us with a more flexible approach to explore the views of foundation phase teachers on the viability of RtI in depth. This was a particularly beneficial approach to data collection since RtI is a relatively new area of research in South Africa (Streb, 2010).

One case, an independent primary school in

Pretoria, and nine foundation phase teachers were purposefully selected as participants for this exploratory study. The case was purposefully selected based on the knowledge that the school contained diverse learners and the assumption that foundation phase teachers within such a school would have the relevant experience of teaching practices and the education system to provide the best data in fulfilling the purpose of this study (Creswell, 2014). The participants included teachers from each grade within the foundation phase at the selected school.

The researchers gained permission from the principal at the selected school to conduct this study and were given access to all the foundation phase teachers at the school. A letter of informed consent was distributed to all the foundation phase teachers, after which the willing participants met for the focus group interview. At the onset of the interview, we discussed the information contained in the letter of informed consent with the participants. We provided a brief synopsis of the research process and discussed issues of confidentiality, anonymity and voluntary participation. Thereafter, willing participants provided verbal and written consent for their participation.

Since we assumed that the participants in this study may not be familiar with RtI, we believed that a semi-structured focus-group interview would allow us to have some control in guiding the discussion to the areas that needed to be explored through using six open-ended questions (Creswell, 2014; Gill, Stewart, Treasure & Chadwick, 2008). We also allowed for the flexibility to explore participants' views in more detail by asking further questions in response to participants' comments (Creswell, 2014). We provided an overview of the RtI approach and discussed the components of RtI and how the various tiers of instruction are implemented. We addressed any questions posed by the participants regarding RtI before exploring the participants' views. The procedure allowed for new discoveries to be made which may have been pertinent to the participants but were not previously considered by the researchers (Gill et al., 2008).

Using a focus-group interview allowed rich information to be captured based on the teachers' collective views and experiences (Morgan, 1998). The interactive context allowed a dynamic approach to providing information (Gill et al., 2008). The teachers in the group could provide a wide range of views in an economical manner and wherein any differing perspectives among the teachers could be illuminated.

The role of any researcher is critical in the collection of high-quality data without bias in a focus-group interview (Sim, 1998). To minimise researcher bias, we encouraged discussions, but avoided influencing specific responses to reinforce

our expectations and points of view (Sim, 1998).

The focus-group interview was conducted in two sessions outside of school hours, lasting 45 minutes each. The two sessions were conducted on two consecutive days. In total, the focus group interview took 90 minutes to complete. With the participants' consent, the interview was recorded using a voice recorder. We transcribed the audio-recording for data analysis.

Inductive thematic analysis was used to analyse and interpret the data generated in this case study. The identification of themes was driven by data rather than by the researchers' theoretical standpoint on the research topic (Braun & Clarke, 2006). We adhered to six phases of inductive thematic analysis as described by Braun and Clarke (2006). This entailed familiarisation with the data, developing initial codes, searching for themes, reviewing identified themes, defining and naming themes and producing the final report.

To ensure the trustworthiness of this study, we established the participants' voluntary participation and encouraged them to express their honest views (Shenton, 2004). We guarded against potential researcher bias by engaging in regular reflections and providing transparency throughout the research process (Creswell, 2014). Data were triangulated from the verbatim responses of the focus-group participants and field notes taken during the study. After the completion of the data analysis process a follow-up interview was conducted with the participants. This provided an opportunity for member checking where the participants could comment on the final findings of the study and raise any concerns regarding the findings (Creswell, 2014). The participants verified that the final findings accurately reflected their views.

Results

Comparison between RtI and Current Support Practices

Since the participants were not familiar with RtI, a brief overview of an RtI process was provided. Thereafter, the participants began reflecting on their current learner support practices and compared their practices to the three tiers of RtI. Although the participants were not asked to compare an RtI approach with the learner support practices in their school, participants regularly referred to such comparisons to help them evaluate the viability of RtI.

The results suggest that the participants believed that they implemented a similar process to Tier 1 of RtI. Similar to Tier 1, they monitored learners' progress and identified learners that struggle to achieve learning outcomes in the mainstream classroom. They stated the following in this regard:

Because what we do is, we've got an intervention committee and then each teacher identifies how

many kids [that struggle] they have in their class at the beginning of the year. We give them that 8 to 10-week period to observe them.

It's very similar, we also have a few kids that we identify as having problems and then we do interventions ... we try to do that.

Some participants believed that they tried to implement support interventions that were similar to Tier 2 of an RtI process. They indicated that they identified learners who struggled to make progress in response to universal instruction in the mainstream classroom and then referred such learners for supplemental interventions offered at the school. Such supplemental interventions were, however, not offered by all the foundation phase teachers but rather by only one foundation phase teacher after school hours. They stated the following: *“Teachers refer [learners who struggle] to [participant 5] for extra mathematics or extra English.”* However, one participant felt that their learner support practices did not reflect a Tier 2 implementation of RtI. This participant believed that learners who struggled to meet learning outcomes in Tier 1 were often referred directly for additional support interventions that more accurately reflected a Tier 3 implementation of RtI. Other participants then confirmed that teachers often referred learners with learning difficulties for external additional support services as it was easier for the teachers than providing additional support interventions in the school context: *“You know what we do, we do T1 and T3, we don't actually do T2. It's mainly like T1 then refer.”*

The participants believed that they implemented a similar process to Tier 3 of RtI in their learner support practices. The participants indicated that teachers were not responsible for providing specialised, individual interventions but that they rather referred learners with learning difficulties to specialists for interventions. This is evident from the following statement:

And we've got the educational psychologist ... the child has been with me for a month now [referring to a learner attending extra classes], nothing I'm going to do is going to help him. I'm not going to waste your money, please refer your child or take your child to a ... specialist.

In comparing their learner support practices to the principles of RtI, participants began evaluating the viability of RtI within their school context. During this process, participants identified numerous challenges that they believed might impede the viability of RtI. This is discussed in the next section.

Challenges Foreseen with the Implementation of RtI
The participants envisioned various challenges in the implementation of RtI in their context. These included a lack of resources necessary to develop an infrastructure to effectively support RtI, as well as curriculum challenges, which might undermine

an effective RtI approach.

Lack of resources

With regard to resources, the participants believed that a lack of time, a lack of highly qualified teaching staff, a lack of financial resources, as well as a lack of parental involvement could all contribute to ineffective implementation of RtI.

The participants believed that a lack of time could be especially challenging in implementing the necessary RtI components effectively. The participants indicated that they worked long hours, had many teaching responsibilities, and had a large number of learners with learning difficulties. As such, they believed that it would be challenging to effectively instruct learners, monitor learner progress and provide the necessary support interventions. In particular, the participants envisioned that they would not have enough time to implement supplemental support interventions required during Tier 2 – especially after school hours. They stated the following:

Time ... it's so difficult to do that [referring to identifying and providing interventions to learners who struggle] within our time frame; ... and then after hours ... we leave here at 3 o'clock, and we have a 9 hour day already.

... it's difficult to implement that ... we don't have time for T2 that's why [referring to why they often refer learners with learning difficulties after Tier 1].

In conjunction with a lack of time, the participants envisioned that additional teaching assistants would be necessary to implement RtI in mainstream classrooms. Along with this perceived need, the participants identified that schools may lack the financial resources to appoint staff to support an RtI approach.

... the more kids you have in a class is a problem ...; I don't think that one teacher alone can do that ... [In the American system], they have [teacher] assistants; ... in the public or government schools, you sit with 40 kids in a class.

... It's not very often possible in South Africa to even get to stage 2 [referring to Tier 2] on your own. They [referring to the United States] have two or three assistants in the class and they can really take a group out and really do intensive [support].

... Because if your school cannot afford two assistants per class or per grade, then that's another financial issue for the actual school.

Look, I think RtI might work in private schools but not in public schools [all participants agreed], not at all [Government schools] don't have the funds.

The participants furthermore envisioned that a lack of training for teaching staff, including teaching assistants, could present a challenge to the implementation of RtI in their school context. Despite their formal training in teaching and valuable in-service training they received at their school, the participants still doubted their

competency to provide specialised support interventions. They believed that they lacked the necessary practical skills to identify and effectively support learners with learning difficulties. They stated the following:

Another thing with the T2, with the remedial work, I know there's a section, when we study we do a bit of remedial work and overcoming barriers ... but sometimes it's difficult ... Sometimes you question whether you have the right material to help the child ... how you accommodate them ... do I have the right equipment to help the child regarding the certain remedial work ... Not even to mention, [it is difficult] to identify [referring to identifying learners with learning difficulties] without sufficient training or qualifications.

The participants furthermore appeared to lack knowledge of what differentiated instruction entailed and how differentiated instruction should be implemented effectively. This was evident from their responses which revealed that they regarded differentiation to be providing additional exercises, and they did not refer to differentiated learning strategies during the interviews:

it's like, the intervention, then you make like an extra book for the child, you do extra exercises ... If that does not work [referring to additional support in the classroom], then they need to go to the extra classes....

The participants additionally envisioned that a lack of parental involvement in learners' education may be a challenge to RtI implementation in their school context. They believed that any learner support process, including an RtI approach, would be ineffective if the parents were not involved in the process of accessing or providing additional support to learners who struggle.

And the thing is, the parents would have to fall for it [referring to T2 and T3 interventions provided at the school].

You need the parents ... parent support ... Because if we have to tell the parents, listen your child is partaking in T2, we'll get, 'NO, WHY?'

... I think the biggest barrier for us as teachers is that the parents say we don't have the funds, we can't pay for this [referring to referrals to specialised services in Tier 3].

Curriculum challenges

In addition to the perceived lack of resources, the participants envisioned that curriculum challenges may hinder the effective implementation of an RtI approach in their school context. They believed that the CAPS curriculum lacked clarity, which resulted in teachers applying the curriculum inconsistently. As such, the participants indicated that learners may access learning at different levels, resulting in some learners falling behind academically. Furthermore, participants believed that the curriculum did not promote high-quality learning consistently throughout the grades. Since RtI required high-quality instruction according to a scientifically-based curriculum, the aforementioned

curriculum challenges may prevent the effective implementation of an RtI approach. They stated the following in this regard:

And it's [referring to CAPS] too wide. One teacher will do the minimum ... and another teacher will go out all the way.

[At our school] we get feeder schools for Grade 1, but then our two Grade R classes go into the Grade 1. Then the Grade 1 teachers are like, 'Gees, but half of the kids are way above [the other learners] but then the other half are completely struggling. Now you've got a year backlog. Get through Grade 1, [then] there's a backlog, get to Grade 2 and there's still a backlog ... it's not their [referring to learners] fault ... It's CAPS' [fault].

Potential Benefits of RtI

Participants believed that RtI may potentially be more cost-effective for parents as they may be able to save the costs that they paid for additional support services. According to the participants, if supplemental support interventions could be offered to learners for free within the school context, it could eliminate external referrals to learning support specialists, thereby decreasing costs for parents. They stated that *"They'd love it because then it's eliminating referrals and they don't have to pay for it."*

The participants also indicated that improved learning efficacy in the classroom could be a potential benefit of RtI. This would reduce teacher stress levels. They stated as follows in this regard: *"... Your pass rate, kids' self-image ... Teacher stress ... Teacher stress, yes, number one [benefit]."*

Participants believed that the implementation of Tier 2 and Tier 3 interventions of RtI may assist struggling learners to access learning at similar levels to other learners in the class, thus improving overall learning efficacy. Participants indicated that learners could potentially be more equally stimulated in a classroom context, due to RtI, and there would be less potential for learning to slow down due to learners being at different learning levels.

Because if [the learners who struggle] get T2 and T3 [participant 2 agrees] in that week would they not then maybe be on par [with learners who do not struggle].

Yes [with support], [the learners would be] more on track.

Discussion

From the onset it was evident that the participants in this study were not familiar with an RtI approach. However, after having listened to a brief overview of the RtI process, participants began a process of comparative thinking by identifying how their learner support processes compared to Tiers 1, 2 and 3 of an RtI approach. The process of comparison is often used by people when any type of judgement is needed and may have been central

to the participants' decision making about RtI (Kahneman & Miller, 1986; Mussweiler & Posten, 2012).

The participants accurately compared their learner support practices to components of Tier 1 as they similarly implemented progress monitoring to assist them in identifying learners who required further assistance to learning. However, the participants did not indicate that they implemented differentiated instruction, which is required for high-quality instruction in RtI. Although the participants regarded their practice of providing extra exercises to learners as a form of intervention, extra examples or exercises do not represent differentiated instruction. The lack of reference to the use of differentiated instruction may indicate that the participants were not familiar with and/or did not readily implement differentiation in classroom instruction. High-quality instruction, including differentiation, is integral to Tier 1 and necessary during Tier 2 and Tier 3 for an RtI process to be effective (Ardoin et al., 2005). As such, a lack of knowledge or training on differentiated instruction may present a significant challenge in enabling an RtI process altogether.

Some participants indicated that their supplemental support practices more accurately compared to Tier 3. According to the participants' responses, learners were referred for specialised learning support services before accommodating for systemic or other extrinsic factors that may be impacting their learning. An authentic RtI process requires that teaching instruction and intervention should be adjusted throughout the various tiers to provide an accurate reflection of a learner's true abilities (Greenfield et al., 2010). Instruction and intervention need to be adjusted to accommodate diverse factors, such as cultural circumstances and socioeconomic backgrounds, which can impact on how a learner learns (Hagans, 2008). By addressing these factors effectively in the learning process, RtI aims to avoid inappropriate referrals of learners with learning difficulties to special education services (Greenfield et al., 2010), which can be very costly and time-consuming.

The participants' practice of referring learners for additional learning support services is a common practice in South Africa where learners who struggle to progress in mainstream schools are often required to pay for additional class assistants or extra remedial services (Human Rights Watch, 2015). M Nel and Grosser (2016) report that it is also common in South Africa for schools or parents who have the financial capability to consult with private health care professionals to assist with support services to learners. These services are expensive and not easily accessed by schools or learners from poorer socio-economic backgrounds. As such, an effective RtI approach could be beneficial in South Africa to reduce costs

associated with unnecessary referrals of learners to specialists (VanDerHeyden et al., 2007). RtI would, however, require of teachers to implement the high-quality instruction and intervention required during the various tiers, which could present challenges as envisioned by the participants.

In relating their learner support practices to the potential of implementing RtI principles, the participants associated the challenges that they faced then to a potentially challenging implementation of RtI. The participants envisioned that a lack of resources could provide a challenge in the implementation of RtI in their school context as well as in other South African schools. Greenwood et al. (2011) similarly report that a contributing challenge to implementing an RtI model effectively in the international context is the lack of resources, which are necessary to develop an infrastructure for effective RtI support.

The participants indicated that they worked long hours and had many teaching responsibilities that prevented the allocation of additional time to implementing the components required of RtI. They believed that with the large number of learners often found in mainstream classrooms, one teacher would struggle to instruct learners, monitor individual learner progress and implement specialised support interventions. The participants indicated that a lack of time presented a further challenge in implementing supplemental support interventions consistently, especially after school hours. As such, the participants believed that referring learners for supplemental support interventions was easier for teachers than to provide supplemental support interventions themselves.

Findings from international research on RtI similarly found that teachers reported RtI implementation as involving too much paperwork and that there was not enough time and resources to implement specialised interventions (Castro-Villarreal et al., 2014; Cowan & Maxwell, 2015; Pyle, 2011). If teachers in other school contexts similarly experienced a lack of time and an overload of teaching responsibilities, the implementation of RtI components may present a challenge and render an RtI approach ineffective. Time as a resource must be carefully considered in evaluating the viability of RtI implementation.

In conjunction with a lack of time, the participants believed that teaching assistants would be necessary to support teachers in implementing Tier 1 components with a large number of learners in mainstream classrooms. This finding is consistent with continuing challenges identified as preventing the effective implementation of inclusive education in general in South Africa, which includes the lack of physical and human resources (Savolainen et al., 2012). One participant further indicated that they experienced challenges

in supporting all learners because they had large numbers of learners within their school who required additional, specialised support interventions. This finding aligns with M Nel and Grosser (2016) who report that a lack of specialised schools in all school districts resulted in many learners with learning disabilities needing to be accommodated in mainstream schools. A lack of teaching staff may, therefore, present a challenge in implementing the components of RtI, especially when needing to accommodate a large number of learners within mainstream classrooms.

Greenwood et al. (2011) report that a predominant challenge to RtI implementation internationally has been the lack of sufficiently trained school personnel. If teachers do not have adequate knowledge of differentiated instruction, this may contribute to challenges in RtI implementation since it is integral to an RtI process (Shepherd & Salembier, 2011). The participants in this study similarly envisioned that a lack of training, in general, would be a challenge for teaching staff to implement RtI at some schools. They believed that unqualified teachers would not be able to implement RtI as they would not understand its principles. This finding aligns with Castillo et al. (2018) who state that for RtI to be implemented with accuracy, teachers needed to enhance their capacity to implement the practices associated with RtI. The participants believed that although they possessed formal teaching qualifications, they still lacked the practical skills to provide effective support to learners with different learning needs.

A perceived level of incompetency may challenge teachers' ability to implement an RtI process effectively before seeking the need to refer learners for special education services. The participants additionally believed that teaching assistants in their school context were not adequately qualified to assist teachers in providing instruction and support to learners in the classroom. Skills development would be crucial to enhance the capacity of all teaching staff to implement RtI effectively (O'Connor, EP & Witter Freeman, 2012). Castillo et al. (2018) state that teachers need to engage with effective pre-service training and in-service professional development to enhance their capacity to implement RtI. The participants in this study similarly indicated that to consider the potential viability of RtI, formal teacher training programmes at tertiary institutions would first need to be improved to provide teaching staff with the necessary practical skills to implement learner support principles effectively.

As discussed previously, RtI has the potential to reduce the costs necessary for referrals to specialists (VanDerHeyden et al., 2007). RtI can potentially help differentiate between learners with specific learning disabilities and those who may

have other learning difficulties that can be resolved with appropriate support interventions (Ardoin et al., 2005; Knudson, 2008). As such, learners from different socio-economic backgrounds could potentially be accommodated equally in receiving the support they needed to develop. This could avoid the inequality in the provision of support services accessible between private and public schools, as indicated by the participants.

A lack of parental involvement in learners' education was another challenge highlighted by the participants who indicated that they experienced challenges in providing learner support when parents were not involved in their children's education. The participants indicated that it was particularly challenging for them when parents did not access additional, specialised learning support services that they were referred to by the teachers. They indicated that this challenge could potentially be due to parents not having the financial resources to pay for such services. Participants believed that a potential benefit of RtI, if it were to be implemented effectively, would be its cost-effectiveness to parents. The participants indicated that if supplemental, specialised support interventions could be provided free of charge within the school context, then the referral to specialists could be minimised. Research supports this finding outlining RtI's potential to reduce the costs involved in unnecessary referrals for special education services (VanDerHeyden et al., 2007).

The participants indicated that many parents' denial of their children's barriers to learning posed another challenge. They indicated that this was exacerbated by the fact that such parents did not provide additional leaning support at home and did not communicate with teachers about the learning support that the teachers suggested. Research shows that increased parental involvement in their children's education contributes to improved learner achievements, irrespective of the parents' level of education, ethnic background, or socio-economic status (Khosa, 2013). Participants in this study similarly indicated that parental buy-in and input were necessary to provide effective learner support practices to learners who struggle. As such, a lack of parental involvement may contribute to challenges in RtI implementation.

In addition to the perceived lack of resources, the participants envisioned challenges with the curriculum as preventing the effective implementation of RtI. Research indicates that the lack of clarity and details in the CAPS curriculum contributed to the ineffective implementation of inclusive education in South Africa (Du Plessis & Marais, 2015; Geldenhuys & Wevers, 2013; Ladbrook, 2009; Nel, NM et al., 2016; Van Staden & Motsamai, 2017). The participants similarly believed that the CAPS curriculum lacked clarity, which resulted in teachers applying the curriculum

inconsistently. Instruction and assessment were not implemented optimally by teachers, and learners consequently accessed learning at different levels, contributing to some learners falling behind academically.

Ladbrook (2009) found that teachers and management believed that learners were achieving at lower levels of skills or competencies within the current curriculum. The findings of this study correlate with this finding, as participants also indicated that the curriculum contributed to a low achievement of educational outcomes. Participants believe that the CAPS did not promote high-quality learning in pre-school education and was inconsistent in learning expectations as the grades progressed. The curriculum challenges are important to consider in evaluating the potential viability of an RtI approach, as RtI requires high-quality instruction according to a scientifically-based curriculum (Fuchs, D & Fuchs, 2006). The most common challenge to the implementation of RtI internationally has been identified as a lack of evidence-based curricula for Tier 1 instruction as well as a lack of evidence-based intervention strategies for Tiers 2 and 3 (Fuchs, D & Deshler, 2007; Greenwood et al., 2011). As such, the findings of this study suggest that curriculum challenges may prevent the effective implementation of an RtI approach.

Research indicates that RtI holds the potential to improve academic performances of all learners, including those at risk for learning difficulties, in a general education classroom (Fox et al., 2010; Hughes & Dexter, n.d., 2011). The participants similarly believed that if RtI were effectively implemented, the pass rates of learners would improve, implying improved academic performances of all learners. Furthermore, RtI has a strong focus on early intervention to prevent the onset of more substantial learning challenges (Vaughn & Fuchs, 2003). Due to the provision of early and specialised intervention, RtI could potentially lessen the likelihood for learning regression and loss of ability over time (Greenwood et al., 2011). The participants similarly believed that an RtI approach could potentially assist struggling learners to improve in achieving learning outcomes to such an extent that they progressed at similar learning levels as other learners in the class. As such, there would be less risk of learning slowing down in the classroom due to struggling learners, and learning efficacy could be enhanced.

Conclusion

This study provided insight into the views of nine foundation phase teachers from one particular school, on the viability of RtI in their school context. This was the first qualitative study on the subject in South Africa. The study could serve as a

starting point to guide further research endeavours into the potential viability of implementing RtI in a South African context. The foundation phase teacher participants' views offered insight into systemic conditions that could potentially be challenges to the implementation of RtI in their school context. Exploring and describing their views may initiate further research endeavours into similar systemic conditions that may impact other school contexts and as such, could potentially affect the implementation and viability of RtI within those schools. Furthermore, the foundation phase teachers' views offered insight into what they perceived to be the strengths or benefits of effective RtI implementation in their school context. Exploring and describing their perceived benefits may initiate further research into other teachers' perceived benefits of RtI and the potential viability of implementing an RtI approach in a South African context.

The findings of this study, although limited by the small sample, suggest that RtI could potentially be a viable approach to implement in South Africa if various systemic conditions could be addressed effectively. The findings of this study can potentially raise awareness among educational professionals on the potential value of applying the principles that guide an RtI approach.

Authors' Contributions

Both authors wrote the manuscript, conducted the qualitative data analysis and reviewed the final manuscript. MC conducted the focus group interview.

Notes

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