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**CREATING SOCIAL WELL-BEING IN CHILDREN'S COMMUNITIES THROUGH
ARCHAIC EXPERIENCES**

A Pedagogical Experience in the Area of the Venus of Kőkénydomb Excavation Site

Theses of Doctoral (PhD) Dissertation

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1. The Motivation for Topic Selection and the Theoretical Backgrounds

How can we feel good, what makes us happy, how can we feel satisfied with our life? Fertility statuettes, cave paintings, the taming and domesticating of animals and the appearance of musical instruments in the Neolithic (Conard–Seidl–Duerr 2016; Haidle–Conard–Bolus 2018) give a definite sign of humans' strive for well-being and the strive to ensure this well-being in the long term. The Venus statuettes, symbolizing well-being, tell us about the mentality of the prehistoric age. The Venus of Kőkénydomb – considered to be the contemporary of the Venus of Willendorf – was discovered in Csongrád County. (Tornyai Museum Neolithic /1942) Ensuring well-being/wellbeing seems to be a pivotal part of human development and culture.

In Hungarian and international literature there is no common terminology. In happiness economics, the expression *well-being/wellbeing* is to be interpreted as *welfare*. (Layard 2007) In happiness research, the expressions *well-being* and *wellbeing* are used. (Diener 1984; Seligman–Csikszentmihályi 2000; Seligman 2011) As in this work we focus on the development of interpersonal relationships, we followed the researches focusing on wellbeing/well-being/quality of life in happiness research, when working out the theoretical and practical framework of our pedagogical research.

In our research, the concept of well-being/wellbeing corresponds with the meaning of quality of life. Therefore, in our research, social well-being means a dynamic state in which people can accept and establish relationships with others, which state is characterized by the receptiveness to cooperation and the appearance of positive emotions and the spiritual dimension.

Examining *the characteristics of well-being research*, certain similarities can be observed, some of which can be applied to our research: the examination of different dimensions (Statham–Chase 2010; Robertson 2010), holistic and contextual approach (Camfield et al. 2009; Choudhury–Barman 2014), the application of combined research paradigms (Priya–Dalal 2015; Wiseman et al. 2016), examinations carried out on small sample size ($N < 10-42$) in the case of small populations (Barnet-Lopez et al. 2016; Rotheram et al. 2017), interdisciplinary approach (Sigfusdottir et al. 2017; White–Jha 2018), taking basic human needs into account (McGregor et al. 2009; Fredrickson 2015).

According to Csikszentmihályi (2011, 2015), Fredrickson (2015) and Kopp and Skrabski (2016), *positive experiences* have a determining role in improving the quality of life. The examination of therapies that evoke positive emotions and that are built on motivation and

based on experiences has already been connected to well-being research, as in the case of Floor time, Sensory Integration, dog-assisted, equine-assisted, art and music therapy. (Lechner et al. 2007; Liao et al. 2014.; Elmaci–Cevizci 2015; Longhi et al. 2015; Haigh et al. 2015; Barnet-Lopez et al. 2016) A common feature of the listed therapeutic methods is that they are connected to providing ancient/natural, that is, archaic experiences.

In our pedagogical experiment, we focused on therapies that are based on ancient/natural experiences and archetypical plays (for example circle games). On the one hand, archaic experiences are related to ancient human needs; on the other hand, they bear multi-dimensional meanings (for example development, health, spirituality, value system) and they can be displayed visually. In our pedagogical experiment, the dimensions of social well-being appeared through archaic experiences.

During the integration of children with symptoms indicating autistic behaviour we examined the possibilities of creating social well-being within their peer communities. Working out the theoretical and practical frameworks of our research was based on the twelve years we spent with pedagogy and special education. Our research – due to choice of the population – does not address autism itself, but rather the application of techniques based on experiential education and their efficiency in creating social well-being. When describing the behavioural patterns of the examined population, we followed the descriptions in the *Recommendations to Autism-specific Basic Services in Education*. (Öszi et al. 2016, hereinafter: Recommendations 2016)

The ***examination of well-being in the care of people with autism*** is becoming the centerpiece of research. Autism expert Vermeulen (2016) finds the focus on well-being essential, as the lack of quality of life and well-being is common in the case of autism. Robertson (2010), a researcher living with autism, thinks that the in-depth (qualitative) examination of factors affecting the quality of life of people with autism can transform the services aimed at the ‘treatment’ of autism, which transformation can contribute to the creation of their well-being. The advocacy organizations arising in more and more countries – including Hungary – pledge themselves to the principle of neurodiversity. Their members firmly believe that their autism is a major determinant as to their identity. As a result, they find the ‘therapies’ and ‘treatments’ that ignore their strengths and motivational bases unacceptable. (Dawson 2004; Waltz 2015) The examination of the quality of life and the psychological well-being of the parents are in the focus of autism research in Hungary. (Stefanik–Győri–Vargáné 2018)

Certain dissonances between the official directives and everyday practices can be observed in the care of children with autism. (Stefanik–Vásárhelyi 2016) In our pedagogical experiment we also used therapeutic elements and therapies (for example, Sensory Integration, equine-assisted and music therapy) that are practiced in the care of children with autism (Dimitriadis–Smeijsters 2011; Kollár 2012; Ószi 2016), although they are not recommended in the official medical directives (Health Care Directives 2017) due to the lack of scientific evidence regarding their autism-specific effects. The efficiency of these experiential methods has been demonstrated in small-sample researches, analyzed in details (for example, Casenhiser et al. 2015; O'Haire et al. 2015). According to the professionals who apply them, these methods provide the children with autism with joy. (Kollár 2012; Kiesling 2014; Gyovai–Hevesi 2015) In the care of children with autism, the contradiction between the research results that official directives are based on and practical experiences (for example, regarding the effects of music) has been indicated internationally. (Dimitriadis–Smeijsters 2011) According to Hammersley (2013), when evaluating the efficiency of methods that are used in everyday practices but have not been proven by evidence-based research yet; we cannot rely solely on evidence-based results. He believes that in such cases the opinion and judgment of the professionals working in the given field is more determining.

Our aim was to conduct an explorative investigation, which aim was propelled by our scientific curiosity and our own observations. The fact that the pursuit of creating an environment for emotional and social well-being appeared in the draft of the National Core Curriculum (2018) shows the timeliness of the topic. Our research is a pedagogical experiment to broaden the approach of the recommended therapeutic methods with the varied dimensions of social well-being, thus contributing to spanning the gap between theoretical research and practical experiences.

Based on our results we tried to propose recommendations from the bordering areas' point of view. Due to the innovative and explorative character of our approach, in the following, whenever we refer to our research, it is meant as an explorative pedagogical research.

2. The Structure of the Research

In the *Introduction* the problem that indicated the research is presented (1.1.), and the aims and questions are set out (1.2.). This is followed by the definition of the terminology used throughout the dissertation (1.3.). The interpretative framework and the context of the terms 'social well-being', 'social competence', 'experiential learning' and 'archaic experience' is also discussed here. This part is closed with the discussion of 'behavioural patterns indicating autism'. Our hypotheses and thesis are drawn up in 1.4.; the applied samples and sampling procedures are presented in 1.5. and 1.6. At the end of the introduction the research methodology is presented (1.7.), outlining the methods and techniques of our applied intervention and the exploring methods.

In the second chapter, *Creating Social Well-Being in Children's Communities*, having summarized the international and Hungarian literature, the theoretical grounding and framework is presented (2.1.), alongside with the development of integrative and systemic pedagogical approaches, and the role of inclusive pedagogy in creating social well-being. In 2.2, the need for adequate quality of life, in particular the role of play and archaic experiences, in 2.3 the diagnostics and needs of people with autism is discussed. The fundamental criteria of intervention and the need for the contextualized development of skills are also outlined and we analyze the alternatives of exclusion and cooperation during integration (2.4.). In the last subchapter (2.5.), we discuss the therapeutic backgrounds of the applied intervention method and the symbolic content of the applied archetypical elements of play.

In chapter 3, *The examination of social well-being with the application of archaic experiences*, the research methodology of our examination is presented in details. First the theoretical framework of the applied research methodology (3.1.), then the research questions, the hypotheses and the thesis are introduced (3.2.). In the next chapter (3.3.) the samples and the sampling procedures are provided. The procedures of developing our diagnostic tools are presented in 3.4., in which chapter the theoretical foundations of the observation criteria of sociality examination and the questionnaires are also discussed in detail. In 3.5., the execution of the pedagogical experiment is presented, with clear definitions of the intervention techniques and the description of their execution. In this chapter we also discuss the demonstration film, shot during the experiment, which documents the implementation of the intervention method. This is followed by the criteria for objectivity, reliability and validity

(3.6.): we list the circumstances that ensured objectivity, discuss the reliability of the coded data and our diagnostic tools and prove the validity of these tools.

In the chapter *The presentation of results* our results are presented. We examine how the acclimatization of children showing autistic behavioural patterns is promoted, their attention to their peers' play in free play situations, their motivation during group activities, how they express emotions and how relationships are established. The influence of background variables on the examined fields was also observed, using the background data on the participating children (4.1.). This is followed by the comparison of executive techniques of our intervention method, examining which intervention technique (camp or consultation) is more effective (4.2.). At the end of the chapter we explore what methodological help professionals working in Csongrád County need in promoting the socialization of children with autism (4.3).

At the beginning of chapter 5, *The Analysis of Results*, we outline our approach to the problems of evaluation and our philosophy of evaluation; we present the viewpoints for the examination of the null hypothesis in our research. In the following subchapters, the results are interpreted in the order of their presentation. At the end of the chapter (5.2), the results are demonstrated with a figure.

In the chapter *Theoretical conclusions and recommendations*, we present specific, practical recommendations and outline the possibilities of new perspectives, on the basis of our results.

In the last chapter, *Summary and perspectives*, we present the possible economic impacts of our results and our future aims.

3. Research aims and questions

The aims of the research

- Complying with the current trends in well-being research, the examination of creating social well-being, with a thorough analysis of the different aspects of sociality.
- Conducting explorative research on the impact of archaic experiences regarding the creation of social well-being.
- Providing social well-being for children with symptoms indicating autistic behaviour by making the surrounding people and objects 'autism-friendly'.

- Providing positive experiences for the children in peer communities during intervention.
- On the basis of our results, formulating recommendations for practitioners on creating social well-being
- Making a film about the interventions with the help of the author of the *Recommendations* (2016) and other field experts.

Research questions

- Can the child in our investigation be calmed down with musical effects among their peers? (H1)
- To what extent does the child in our investigation pay attention to their peers in free play situations, having often been exposed to archaic experiences? (H2)
- To what extent can the child in our investigation be integrated in group activities with their peers after activities offering archaic experiences? (H3)
- To what extent does the child with symptoms indicating autistic behaviour express their feelings after archaic experiences with their peers? (H4)
- What is needed for the child in our investigation to establish relationship with the professionals taking care of them? (H5)
- Do professionals need methodological help with their work with children with autism? (T1)
- How suitable are our tools for the examination of the different dimensions of social well-being?

4. Hypotheses and thesis

In our research five hypotheses and a thesis were examined. This latter (T1) had to be defined as a thesis, thus separating it from the hypotheses, because *a*, in its examination we did not apply an independent variable, and *b*, the population, the sample, the sampling procedure, the diagnostic tools and the statistical methods during the analysis of the results also differed from those of the other hypotheses.

H1: Musical stimuli can promote the acclimatization of children with symptoms indicating autistic behaviour when arriving at the group.

H2: Children with symptoms indicating autistic behaviour pay attention to their peers' play in free play situations after archaic experiences.

H3: Children with symptoms indicating autistic behaviour are more motivated to participate in group activities after archaic experiences.

H4: After archaic experiences, children with symptoms indicating autistic behaviour express their feelings.

H5: Establishing relationships with children with symptoms indicating autistic behaviour – adopting a graduated approach – can be promoted with archaic experiences.

T1: Pre-school teachers, special needs teachers and special education assistants working in Csongrád County need methodological help in promoting the socialization of children with autism.

When examining the hypotheses, by *children with symptoms indicating autistic behaviour* we mean children that have been diagnosed with Autism Spectrum Disorder (ASD). During the examination of our thesis, we did not find the definition of the set of children with symptoms indicating autistic behaviour, and those diagnosed with ASD, and also the definition of the concept of social well-being feasible in a questionnaire format when interviewing the professionals. Therefore, – with simple wording – they were interviewed about their experiences with children with autism and their socialization.

5. Research methods

Sample and sampling procedure during the examination of the hypotheses: The children included in the sample were pre-school-age children (3–7 year old) diagnosed with ASD during the 2012/2013, 2013/2014 and 2014/2015 school year in Szeged and Hódmezővásárhely. In our research, being diagnosed with ASD means that the three typical impairments of autism (impaired social interaction, impaired communication, and repetitive or stereotypical behaviour and interests) could be observed during the diagnosis. During the sampling procedure, within the non-probability sampling group this examination can be categorized as purposive sampling.

Sample and sampling procedure during the examination of the thesis: This sample included pre-school teachers, special needs teachers and special education assistants working with kindergarten children with autism in the areas of Szeged, Mórahalom and Hódmezővásárhely.

During the sampling procedure, within the non-probability sampling group we applied snowball sampling.

Experimental research strategy during the examination of the hypotheses

The research is based on a pedagogical experience, for the analysis of which we applied qualitative and quantitative methods. Complying with the aims of the research, we interfered in the educational process, thus varying the independent variable.

Independent variable (the intervention method): archaic experiences.

Dependent variable: social well-being/sociality/quality of life.

We carried out a two-group pedagogical experiment, which meant 40 examinations (N experimental group = 27, N control group = 13).

The intervention was executed applying two techniques:

- In the 1st investigation period, during the *one-week sensitizing summer camp*, led by the principal investigator, and on the *reminding sensitizing day, before the school year began*, away from the children's familiar surroundings, in novel group composition. (Table 1).
- In the 2nd investigation period with the familiar teachers and peers. The principal investigator conducted *regular consultations* with the teachers, demonstrating her recommendations at *presentation sessions* (Table 1).

In both cases there was a 3-month period between the pilot and the follow-up. The intervention was executed in the experimental group, in parallel with this, in the control group the children were looked after in the traditional way, with the traditional methods.

Table 1: *The distribution of the intervention occasions in the examined period*

Investigation periods	Intervention techniques	ARRIVAL			FREE PLAY			GROUP ACTIVITY			Total time of intervention	
		session		total (h)	session		total (h)	session		total (h)	h/6 days	h/12 weeks
		min/day	min/week		min/day	min/week		min/day	min/week			
1st investigation period (3 months)	sensitizing days (6 days)	20	-	2	40	-	4	180	-	18	24	-
2nd investigation period (3 months)	Professional kindergarden care (12 weeks)	-	2x5	2	-	2x10	4	-	2x45	18	-	24
	Professional early care (12 weeks)	-	10		-	20		-	90			

The two types of archaic experience sources during the intervention:

- *Plays with therapeutic background.* These were based on the following therapies: music, art, Floor time, planned sensory-motor training (TSMT), sensory integration, equine- and dog-assisted therapy.
- *Archetypical plays:* circle games, playing with soil, fire, water, seeds and pebbles; joint balancing games; plays incorporating touching each other.

Exploratory research methods during the examination of the hypotheses and the thesis

- *The Sociality Assessment Sheet* was filled in by three independent coders, on the basis of the two video recordings – 1. and 2. – shot during the pilot and follow-up. The *Assessment Sheet* examines the behaviour of the children in the research individually. It was set up on the basis of Hungarian and international research and diagnostic tools, also taking our experiences into consideration.
- *Questionnaire I.* was filled in about the examined child by the professional participating in the research while video recordings 1 and 2 were being shot (Questionnaire I/1. and I/2.). Our diagnostic tool was set up on the basis of the Social Responsiveness Scale Questionnaire.
- When interviewing about the background data possibly influencing the results of the research, we used the questionnaire *Background data on the child participating in the research.* The questionnaire was set up on the basis of corresponding Hungarian and international literature.

- A questionnaire on the children's socialization was filled in by professionals working with pre-school children with autism in Csongrád County (N=96). *Questionnaire II* was set up on the basis of corresponding Hungarian and international research and our personal experiences.

Data compilation lasted from the 2012/2013 school year to the end of the 2014/2015 school year. This period was followed by the processing and the analysis of the data. As for statistical analysis, the answers of the *Assessment Sheet* and the questionnaires were processed with IBM SPSS Statistics 19 program. The data were analyzed with descriptive and mathematical statistic methods.

During the *Statistical hypothesis testing*, alternative hypotheses (H1; H2; H3; H4; H5) were tested against the null hypothesis. After significance level analysis, null hypotheses were either accepted or rejected. In the case of four of the five hypotheses, the same phenomena were investigated from two foci – using the observations of both the coders (hereinafter: external observers) and the professionals (hereinafter: internal observers). Furthermore, the results of hypothesis testing were interpreted from different points of view, that is, whether a given null hypothesis was considered true depended on two (complex and detailed) or three (complex, detailed and complementary) types of tests. In the case of each hypothesis, first a complex analysis was carried out, aggregating several criteria from the *Assessment Sheet* and the answers to the questions of *Questionnaire I*. The analysis of the explanatory power of background data was part of the complex tests. This was followed by complementary and detailed analysis, which made a holistic analysis of the given hypothesis possible.

During *the analysis of our thesis*, in the test of the first type, the statements were organized into five scales, and the results of the answers were compared scale by scale. In the test of the second type, we created a theoretical reference group, and the data of *Questionnaire II* – in addition to the scalar analysis – were analyzed statement by statement. This way we could check if the results significantly deviate from results from completely random answers.

6. The results of the research

The results and conclusions of our hypotheses refer to children with symptoms indicating autistic behaviour, taken care of in Csongrád County. The results of *Questionnaire II* refer to our sample only. Having processed and assessed the results of the research, conducted in

order to accept or reject the hypotheses and the thesis of the dissertation, our findings were as follows:

H1: Musical stimuli can promote the acclimatization of children with symptoms indicating autistic behaviour when arriving at the group.

The results of the complex analysis have shown that musical experiences may have influenced the children's attention, confidence of interaction, variety of playing activities and attitude towards their peers in the experimental group. When examining the holistic dimension, we could observe the rapport of the children in the intervention with their peers; however, this finding was not attested by the examination of the other dimensions. As the results of the detailed analysis did not evidence the results of the complex analysis, we could not reject the null hypothesis, and consequently, we could not confirm the alternative hypothesis in this regard.

In our research, the examination of musical effects was not suitable, as for the examination of the phenomenon to be measured finer diagnostic tools would have been necessary. In the corresponding literature the difficulties of the examination of the area and the need for finer diagnostic tools have already been indicated. (Gattinoa et al. 2011; Gold 2011) Yet, the need for research in the field has been suggested (Csépe 2016), as results have shown that music may promote socialization, improve communicative skills and cause positive changes in behavior. (Eren–Deniz–Düzkanar 2013)

H2: Children with symptoms indicating autistic behaviour pay attention to their peers' play in free play situations after archaic experiences.

Interpreting the results of the internal and external observations in the complex analysis and the results of the detailed analysis, we concluded that our data contradict the null hypothesis in both (one multi-focus) cases. Therefore, we can confirm the alternative hypothesis.

Our results showed the most definite improvement in sociality as a result of our pedagogical experiment. The results highlight the importance of making a better use of possibilities in free play situations. The applied devices are also of great importance. The more frequent use of games including movement and sensory stimuli, providing suitable toys and tools can be considered as recommendation, resulting from our research. In their concise work on autism, Matson and Sturmey (2011) mention that the positive effects of sensory integration technique have been shown on a small sample. They recommend the application of sensory integration intervention techniques, with an emphasis on the importance of providing challenging,

enjoyable tasks. However, obtaining the experiences provided by free play requires suitable devices. Besides subjective factors, research on integration and inclusion finds objective factors essential, too, which include special teaching tools and aids. (Speck 2011; Réthyné 2013)

***H3:** The children with symptoms indicating autistic behaviour are more motivated to participate in group activities after archaic experiences.*

Interpreting the results of the internal and external observations in the complex analysis and the results of the complementary and detailed analyses, we concluded that our data contradict the null hypothesis in all three (two of which were multi-focus) cases. Therefore, we can confirm the alternative hypothesis.

The children who had participated in the intervention were more motivated to imitate their peers during group activities, when they joined their peers and the group leaders. On the basis of our results, it is a useful addition to our recommendations above, that the games that are based on the children's interest and motivation provide sensory stimulus and archaic experiences should be more frequently applied in guided activities, during group activities. It has been confirmed in international literature that the social interaction of children with autism is promoted by playing with peers in guided playing situations (Corbett et al. 2014), during which sessions it is important to provide enjoyable, meaningful experiences (Mesibov et al. 2008), thus improving the probability that the children with autism find social interactions more pleasant and attractive. Research has shown that art therapy may improve the social and communicative skills of children with autism (Evans 2008; Epp 2008), and dealing with animals has a positive effect on behaviour (Hameury et al. 2010; O'Haire et al. 2015). The incorporation of such sessions in the intervention of children with autism has been recommended. (Emery 2011)

***H4:** After archaic experiences, the children with symptoms indicating autistic behaviour express their feelings.*

Interpreting the results of internal and external observations in the complex analysis and the results of the detailed analyses, we concluded that we could not examine the phenomenon described in the hypothesis. The data we obtained from the sample did not provide us with enough information; we could neither justify nor falsify the null hypothesis, therefore, we cannot justify nor falsify the alternative hypothesis either.

The examination of expressing emotions in pedagogical situations is still an area to be mastered. Analyzing the expression of emotions is closely related to the examination of social well-being and situations providing archaic experiences, therefore, a deeper knowledge of corresponding research in other disciplines (psychology, sociology) is definitely necessary. This observation can be considered as a theoretical result of our research. In our examinations we observed that the participating children more frequently expressed joy, and they have become more confident in social situations, which result may mean that social well-being has been created, as detecting positive emotions is a determining factor in the examination of the quality of life. (Pikó 2005; Seligman 2011; Csíkszentmihályi 2015; Kopp–Skrabski 2016)

H5: Establishing relationships with children with symptoms indicating autistic behaviour – adopting a graduated approach – can be promoted with archaic experiences.

Interpreting the results of the complex (complex and complex-detailed), the complementary and the detailed analyses, we concluded that our data contradict the null hypothesis in all three (two of which were multi-focus) cases. Therefore, we can confirm the alternative hypothesis.

As a result of our investigation, we can make the following methodological recommendation: in the process of establishing relationships, a graduated approach should be adopted. First an acclimatization period should be ensured, in order to give the children time to calm down and stabilize. Then they should be approached during free play, by ensuring and offering them plays offering archaic experiences. Finally, during group activity, their participation might be helped by creating situations that provide archaic experiences, thus raising their attention and interest and also strengthening their will to imitate. The efficiency of Floor time therapy, which emphasizes the gradual establishment of relationship, has been proven internationally. The application of Floor time therapy in the care of children with autism has shown improvements in child-parent interaction (Casenhiser et al. 2015), social communication (Dionne–Martini 2011) and imitation, attention and adaptive behaviour (Salt et al. 2002).

T1: Pre-school teachers, special needs teachers and special education assistants working in Csongrád County need methodological help in promoting the socialization of children with autism.

Having examined our thesis, we came to the conclusion that the interviewed professionals do recognize the problems in the socialization of children with autism in their everyday work and they need methodological help.

The demonstration film, shot during the experiment, introduces plays and situations that provide archaic experiences in everyday practice. Our aim is to deliver the film to parents and professionals with the help of umbrella organizations (Autisták Országos Szövetsége, Autizmus Alapítvány, Megismerhető Autizmus Generáció).

The impact of background data was analyzed in relation with the data obtained from internal and external observations. It could be seen that the number and age of siblings had a significant influence on our results in each case. The following most influential factors were early development and the impact of pre-school and family. On the basis of the results indicate, we can recommend that children with symptoms indicating autistic behaviour should meet other children as early and frequently as possible. In order to promote personal development, earlier special help is also recommended.

As for *the diagnostic tools used in our research*, the ones used for examining the effects of music and the expression of emotions need a full revision, especially for better sensitivity. In other cases, the diagnostic tools proved to be useful. Yet, a revision and preliminary testing is recommended for further use.

Creating social well-being is a complex phenomenon, only a small fragment of which has been examined in our research; complex examination is yet to be carried out. The results so far have indicated that making the surrounding people and realia 'autism-friendly' might promote the creation of social well-being during the integration of children with symptoms indicating autistic behaviour. This happens by providing the children with devices and situations that make archaic experiences accessible and the children are getting involved in social situations gradually, taking their individual characteristics into account, building on their motivational bases. Our analyses did not provide a satisfactory answer to each question and problem, however, in many cases they highlighted new areas to be explored.

7. The Ways of Further Directions of the Research

The combined application of qualitative and quantitative paradigms made a multifaceted analysis of the pedagogical situation. Further on we aim to get a more thorough knowledge on the methodology of qualitative research, which is recommended for the deeper analysis of complex pedagogical phenomena. (Husén 1994; Hammersley 2013) Overseeing our results, the possibility of examining group dynamics also emerged, which could add a new focus (towards social pedagogy) to our research.

Further on we also plan to map the possibilities of creating social well-being in school settings. Continuing the research in elementary schools is a current issue as in Hungary pupils with autism are less welcome in integrated education. According to people with autism (Grandin 2014; Oravecz–Orosz 2017), elementary school life is a series of negative experiences for pupils with autism in majority schools.

As for the economic impact of our research, we can mention that ensuring well-being may lower the risk of depression. Compared to individuals with typical development, individuals with autism have a four times higher probability to experience depressive episodes. (Hudson et al. 2018) The European Commission (2004) has planned actions in order to improve mental health and well-being, combating the adverse health, social and economic consequences of depression. It emphasizes early intervention as the most cost-effective solution, and recommends the application of community-based intervention programs.

We consider the method we used in our research applicable in every situation when the integration of a child/pupil needs support. It is possible to create visually-impaired-friendly or disabled-friendly personal and material environment. Obviously, the method needs to be adapted to the individual needs, age, diagnosis and problems of the given child/pupil. This requires cooperation with the personally closest people (parent, teacher, psychologist etc.) and with specialists (special education teacher, sociologist, anthropologist etc.). This way a network can be established, which the child/pupil to be integrated is part of. According to Litwin and Shiovitz-Ezra (2011), (elderly) people embedded in networks of higher social capital are more balanced; they feel happier, less lonely and less anxious.

On the basis of research on well-being and archaic experiences (Jung 1997; Eliade 1997; Tánzos 2007) and our results, our further aim is to develop the theoretical framework and practical techniques of our approach, under the name *Symbol pedagogy*. Symbol pedagogy emphasizes the common ancestry of humankind and the dimensions of social well-being, the traces of which we believe can be found in Neolithic artifacts. By the development of our pedagogy, the results of present research can be implemented in the long run, helping the work and research of other disciplines. We envision the creation of a network that is empirically demonstrable, widely usable and acceptable of all players (people with difficulty with integration, parents and professionals). It makes it possible to build a macro-system that is flexible and open to other systems and networks, but – due to its self-regulatory subsystems – also closed enough to protect the participants.

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