EXCEPTIONAL LEARNERS

AN INTRODUCTION TO SPECIAL EDUCATION

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FIFTEENTH EDITION

Exceptional Learners

An Introduction to Special Education

Fifteenth Edition

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About the Authors

Daniel P. Hallahan, PhD, is Professor Emeritus of Education, University of Virginia. At UVA, Hallahan served as a department chair (twice), director of doctoral studies, and elected representative of the Curry School of Education (four 3-year terms) to UVA's faculty senate. He held three endowed professorships, including the UVA Cavaliers' Distinguished Teaching Professorship. He received the UVA Outstanding Teaching Award and the Virginia State Council of Higher Education Outstanding Faculty Award. Hallahan was inaugural editor of *Exceptionality* and currently reviews for *Exceptional Children, Learning Disability Quarterly, The Journal of Special Education*, and *Exceptionality*. He is a past president of the Division for Learning Disabilities of the Council for Exceptional Children (CEC). In 2000 he received the CEC Career Research Award. Hallahan's expertise covers a broad spectrum—learning disabilities, ADHD, autism, intellectual disabilities, blindness, and deafness. Much of his early scholarship focused on cognitive strategy training for students with learning disabilities and ADHD. Most recently, he has focused on the need for more individualized, intensive special education instruction for students with disabilities. Hallahan is author of over 100 articles and over 40 chapters, and is coauthor or coeditor of 18 books, including *Handbook of Special Education* (2nd ed.) (with J. M. Kauffman & P. C. Pullen, Routledge, 2017) and *Special Education: What It Is and Why We Need It* (2nd ed.) (with J. M. Kauffman, P. C. Pullen, & J. Badar, Routledge, 2018). Some of his books have been translated into German, Spanish, Korean, and Arabic. Hallahan has taught thousands of pre-service and in-service teachers in the introductory course in special education, characteristics of students with learning disabilities, and characteristics of students with intellectual disabilities, as well as hundreds of PhD students in research seminars.

Paige Cullen Pullen, PhD, is Chief Academic Officer at the University of Florida's (UF) Lastinger Center for Learning and a Research Professor in the School of Special Education, School Psychology, and Early Childhood Studies. In her role at UF, Pullen works closely with the Florida Department of Education to develop and implement a statewide comprehensive program for increasing the knowledge and skills of administrators, coaches, and teachers on the science of reading. Pullen's research focuses on early language and literacy development and interventions to prevent reading disability for vulnerable populations (e.g., cultural differences, poverty, rural living environments), as well as the educational outcomes of children with developmental disabilities. Prior to her position at the University of Florida, Pullen held a joint appointment in University of Virginia's School of Medicine in Developmental Pediatrics and the Curry School of Education in Special Education (2001–2017). She earned her doctorate at the University of Florida in 2000, before which she had 12 years of K–12 teaching experience in general and special education. She has served as the Principal Investigator of federal and foundation-funded projects; has coauthored several books, including *Teaching Students*

with Learning Disabilities and *Students with Learning Disabilities* (with Cecil D. Mercer, Pearson, 2009; 2011); and has published book chapters and peer-reviewed articles, as well as presented papers focused on evidence-based reading instruction for students with disabilities. Pullen is Executive Editor of *Exceptionality: A Special Education Journal* (Taylor & Francis). She has also conducted reading research and professional development in Nigeria, Zambia, and Botswana, Africa, as well as in the United States. Pullen is the recipient of the prestigious UVA Seven Society's Excellence in Mentoring Award—2011 and the Curry School of Education Foundation's Most Outstanding Professor Award. Pullen has taught thousands of pre-service and in-service teachers in introductory courses in special education and language and literacy intervention for students with disabilities.

James M. Kauffman, EdD, is Professor Emeritus of Education at the University of Virginia. He is a past president of the Council for Children with Behavioral Disorders (CCBD) and the recipient of several awards, including the 1994 Research Award of the Council for Exceptional Children, the 2006 award of the Society for Applied Behavior Analysis for Presentation of Behavior Analysis in the Mass Media, and the 2011 Distinguished Alumni Award from the University of Kansas School of Education. His primary research interests are emotional and behavioral disorders, learning disabilities, and the history of and policy in special education. He has published over 100 articles in refereed journals; authored or coauthored dozens of book chapters; and is author, coauthor, or coeditor of more than 30 books, including *Characteristics of Emotional and Behavioral Disorders of Children and Youth* (11th ed.) (with Timothy J. Landrum, Pearson, 2018), *Handbook of Special Education* (2nd ed.) (with D. P. Hallahan & P. C. Pullen, Routledge, 2017), *Special Education: What It Is and Why We Need It* (2nd ed.) (with J. M. Kauffman, P. C. Pullen, & J. Badar, Routledge, 2018), and *On Educational Inclusion: Meanings, History, Issues and International Perspectives* (Routledge, 2020). He is also the editor of several forthcoming books. In his career, Kauffman has taught thousands of pre-service and in-service teachers in courses on emotional and behavioral disorders and behavior management, as well as hundreds of PhD students in doctoral seminars.

Author Order

The authors of the first edition of this textbook, in 1978, were Hallahan & Kauffman, with order of authorship determined by the flip of a coin. For the 11th edition, Paige Pullen joined the team—Hallahan, Kauffman, and Pullen (2009). Since then, Pullen has assumed more responsibility with each successive edition. **Thus, this, the 15th edition, is authored by Hallahan, Pullen, and Kauffman (2023).**

Regardless of authorship order, the three of us have worked and written numerous publications together. Dozens of publications—books, chapters, articles—bear the names of two, or all three, of us. Our history of collaboration is a strength of our text—its readability, clarity, and coherence. When longtime users of our text are asked the reasons for their loyalty, their answers are typified by this respondent:

> Comprehensive yet consumable. Accurate and up-to-date.… Continuity.… The disability chapters are consistent.… Lends well to teaching and student understanding.… The authors have really found a great setup for these chapters. There's rhythm and flow. At this point, I know what to expect out of a chapter before I read it and I'm able to navigate it with ease due to the common structure.… The right topics are covered and the topics are consistently discussed

> across the chapters.... The authors do a great job laying out each chapter in a similar manner. I think this allows the reader to know what to expect as they read the text.... This is helpful to professors, obviously, but it is really helpful to students.

As another reviewer put it: "This text is laid out in a very clear and easy way. It makes navigating the text easy."

Preface

About This Book

Exceptional Learners: An Introduction to Special Education, Fifteenth Edition, is a general introduction to the characteristics of exceptional learners and their education. (*Exceptional* is the term that has been used traditionally to refer to people with disabilities as well as to those who are gifted.) In this book, we feature classroom practices as well as the psychological, sociological, and medical aspects of disabilities and giftedness.

We've written this book to prepare special educators and general educators to work together in their shared goal of meeting the challenge of educating exceptional learners. In today's schools, the majority of students with disabilities spend most of their time in general education classrooms. Given federal legislative mandates, insofar as possible, schools must include students with disabilities together with students without disabilities as long as this placement is consistent with their education needs. Our goal is to equip both educator types, special and general, to provide appropriate educational programming for students with disabilities. Our belief is that it is a moral imperative that students with disabilities be included as much as possible in every facet of society, including education.

We've also written this book to prepare teachers and related personnel to work together in their shared goal of educating each student with disabilities in a manner that is tailored to the student's individual needs. Students identified for special education represent a diversity of disabilities, ranging from autism to learning disabilities to ADHD to blindness to deafness and beyond, as well as combinations of these conditions. Furthermore, students within these categories present a spectrum of characteristics, strengths and weaknesses, racial and cultural backgrounds, and family dynamics, among other things. Given the complexities inherent in serving the needs of exceptional students, the talents and skills of a variety of professionals are needed to meet the challenge. To borrow from an African proverb, it takes a village to raise a child, and it takes an interdisciplinary team to educate that child if the child is an exceptional learner. Our book has been written to be an important resource for several key related personnel, such as speech-language pathologists, audiologists, physical therapists, occupational therapists, adapted physical educators, administrators, physicians, nurses, school counselors, and social workers.

We believe we've written a book that reaches both the hearts and the minds of readers. Feedback received from students and instructors on previous editions strengthens our confidence that we've done so. Our conviction is that professionals working with exceptional learners need to develop a solid base of knowledge, but also a healthy attitude and appreciation toward their work and the people whom they serve. Professionals must constantly challenge themselves to acquire a solid understanding of current research, theory, and practice in special education and to develop an ever more sensitive understanding of exceptional learners and their families.

New to This Edition

Enhanced Digital Presence

This edition takes even more advantage of being available as FULLY DIGITAL. We as well as the publisher, Pearson, are convinced that the electronic format offers multiple benefits for students, instructors, and us, the authors. For students it offers a much more affordable learning resource than the traditional text. For instructors it offers a way of engaging students and opening up myriad possibilities for class discussions and lectures. For us, the

authors, it offers a way to bring teaching practices to life, to portray the human side of disabilities, to go into more depth on critical topics. Excuse the cliché, but "a picture is worth a thousand words" comes to mind.

The bottom line: This edition includes 139 videos accessible to eText readers, with 106 being new or re-formatted since the last edition.

Enhanced Focus on Justice, Equity, Diversity, and Inclusion

It is no secret that as a society we continue to battle injustices in our communities. In Chapter 3, we turn a spotlight on justice, equity, diversity, and inclusion (JEDI) in our schools, with its focus on promoting pride in students' own identities and understanding and appreciating differences among students, in the pursuit of equitable educational opportunities for all.

Aside from Chapter 3, aspects of JEDI are woven throughout the text. Some examples include the following:

- Chapter 2 frames instructional and assessment accommodations in the context of being designed to level the playing field and increase equitable education opportunities for students with disabilities.
- Chapter 9 includes coverage of socioeconomic and racial disparities in access to accurate diagnosis of autism spectrum disorder, and it examines recent promising research on "family navigation," originally used with cancer patients, as a potential solution. This involves trained ethnically and racially matched "navigators" to guide the individual or family with a seamless flow through the complex system of diagnosis, treatment, and follow-up.
- Chapter 10 emphasizes the importance of honoring language variations such as African American English and Appalachian English, recognizing that each is a true language; these differences from mainstream American English must be accounted for in order to provide equitable instruction and assessment.
- Chapter 11 highlights Deaf Culture and the research documenting sign language as a true language.
- Chapter 13 includes research providing fair warning that young athletes from families for whom English is not their first language may be disadvantaged in accessing information about sports concussions.
- Chapter 15 contains a thorough discussion of the disproportionality of students of color specifically, and lack of diversity generally, in gifted and talented programs; we recommend eight practices to improve equitable identification of students with special gifts and talents that look at giftedness through an antiracist lens.

Enhanced Focus on Evidence-Based Content

Based on comments from the field, we can confidently claim that a hallmark of our textbook has been its emphasis on research. With each new edition, we've taken care to cover the latest cutting-edge research. Taking advantage of the ever-expanding world of databases and the Internet, we've enjoyed the challenge of keeping pace with the mushrooming scientific advances in special education and related fields.

To note just a couple of examples, in Chapter 6, we provide extensive coverage, including videos of instructional practices based on what's come to be known as the "Science of Reading," as well as Direct Instruction, self-regulated strategy development (SRSD) for writing, explicit instruction for math, content enhancement, graphic organizers, mnemonics, and peer tutoring for science and social studies.

Also, in Chapter 9, we highlight several evidence-based practices and programs for autism spectrum disorder, reviewed by the National Clearinghouse on Autism Evidence

and Practice, such as social stories, video modeling, Picture Exchange Communication System (PECS), Treatment and Education of Autistic and Related Communication Handicapped Children (TEACCH), and Pivotal Response Training (PRT).

Enhanced Focus on Abilities

Beginning in Chapter 1, and carried throughout the text as appropriate, we emphasize abilities as well as disabilities. We include several interviews and videos featuring a balance between individuals' abilities and disabilities.

Enhanced Coverage of Identification and Assessment Practices

The popularity of response to intervention (RTI) continues to grow. Accompanying the growth, however, has been an increase in confusion over RTI's purpose and effectiveness. We provide extensive discussion of RTI's role and effectiveness in assessment, along with multitiered systems of support and prevention.

Pearson eText
Video Example 13.1
Rebekah's life changes in an instant.

New *Up Close* Subjects

New to this edition are interviews, along with videos, of Rebekah Lozano, who has traumatic brain injury, and Jessica Richards, who has juvenile rheumatoid arthritis. Another new *Up Close* features Jerron Herman, a dancer with cerebral palsy. See Video Example 13.1 here for the interview with Ms. Lozano.

Coverage of the Impact of COVID-19 on People with Disabilities

The COVID-19 pandemic that began in 2020 resulted in widespread societal, psychological, and economic consequences. Research suggests that its impact was even greater for individuals with disabilities, their families, and those professionals involved in their education, treatment, and care. An obvious problem has been the attempt to provide diagnostic and treatment services. In Chapter 1, we extensively discuss its impact in a *Focus On* feature. We address it again in subsequent chapters, illustrating that the effects of the pandemic have been myriad, depending on the disability. For example, persons with Down syndrome are vulnerable to infection because of their propensity for immune system dysregulation and upper respiratory infections. Residents and caretakers in small residential facilities are vulnerable because of close proximity to one another. The tendency toward noncompliance in persons with autism spectrum disorder, combined with their propensity to exhibit sensory idiosyncrasies, such as tactile sensitivity, has created difficulties with face-mask compliance. And we'd be remiss if we didn't note the difficulties of delivering explicit instruction virtually instead of in person to students with disabilities. We hope the pandemic will have abated by the time this text is published, but the lessons learned will still have relevance for years to come. For example, the pandemic has exposed the longtime neglect of mental health services in America.

Key Content Updates by Chapter

- *Chapter 1—Exceptionality and Special Education:* More emphasis on *abilities,* rather than *disabilities,* of students in special education; updated prevalence percentages for students identified for special education; expanded coverage of role of parent organizations; coverage of latest scientific advances on causes of disabilities; coverage of COVID-19 and its impact on services for students with disabilities.
- *Chapter 2—Current Practices for Meeting the Needs of Exceptional Learners:* Updated expanded coverage of response to intervention; updated percentages for educational placements of students in special education; coverage of assessment and instructional accommodations for academic equity.

- *Chapter 3—Justice, Equity, Diversity, and Inclusion in Special Education:* Re-named the chapter from *Multicultural and Bilingual Aspects of Special Education* to reflect the importance of promoting equitable educational opportunities for all students; coverage of multicultural education through a JEDI lens; coverage of "Juneteenth"; coverage of LGBTQ with disabilities; updated percentages of students of various ethnic groups receiving special education; coverage of equity issues in identification of students with gifts and talents.
- *Chapter 4—Parents and Families:* Expanded emphasis that professionals should be attentive to what parents tell them about their children's needs; coverage of the concept of work-family conflict; coverage of mindfulness training for parents of students with disabilities.
- *Chapter 5—Learners with Intellectual and Developmental Disabilities:* Coverage of the World Health Organization's definition of intellectual disabilities; coverage of the COVID-19 pandemic's impact on services for persons with intellectual disabilities; updated coverage of social-emotional problems of individuals with intellectual disabilities; updated coverage of issues concerning functional versus academic programming.
- *Chapter 6—Learners with Learning Disabilities:* Coverage of the World Health Organization's definition of learning disabilities; coverage of hybrid models of identification of learning disabilities that include a combination of students' responses to instruction and psychoeducational assessment; updated percentages of students' reading proficiency in U.S. schools; updated coverage of the "Science of Reading"—the knowledge of how to effectively teach reading based on 40 years of converging evidence from research conducted by educators, psychologists, and cognitive scientists.
- *Chapter 7—Learners with Attention Deficit Hyperactivity Disorder:* Updated coverage of prevalence percentages of children identified as having ADHD; updated coverage of neurological underpinnings of ADHD and the role of heredity; coverage of the controversial role of an "Internet gaming disorder" in ADHD; updated coverage of Mischel's classic "marshmallow test"; coverage of the controversial notion of "sluggish cognitive tempo" and its relationship to ADHD; updated coverage of ADHD and sleep disturbances; updated percentages on the use of psychostimulants for ADHD; updated coverage of abuse/misuse.
- *Chapter 8—Learners with Emotional or Behavioral Disorders:* Coverage of COVID-19's role in exposing the neglect of children's mental health; coverage of the lack of evidence-based instruction for students with emotional/behavioral disorders; coverage of the role of adverse childhood experiences and trauma; coverage of the correct way to use time-out as a behavioral technique.
- *Chapter 9—Learners with Autism Spectrum Disorders:* Coverage of social (pragmatic) communication disorder versus Asperger syndrome; updated coverage of the percentages for autism spectrum disorder (ASD); coverage of racial and socioeconomic disparities in identification of ASD; coverage of "patient/family navigation" to address health care barriers in a *culturally sensitive manner* for a variety of health problems, including ASD; updated coverage of the role of gut bacteria in ASD; updated coverage of neurotoxins in pollution as a contributing factor to occurrence of ASD; coverage of tele-screening in diagnosis of ASD; coverage of children with ASD being targets of bullying; coverage of the use of "camouflaging" by individuals with ASD as a strategy to fit in socially; coverage of evidence-based intervention strategies by the National Clearinghouse on Autism Evidence and Practice and the University of North Carolina Frank Porter Graham Child Development Institute's Autism Focused Intervention Resources and Modules (AFIRM); updated coverage of colleges noted for accommodating the needs of students with ASD.

- *Chapter 10—Learners with Communication Disorders:* Updated coverage of stuttering; updated coverage of augmentative and alternative communication (AAC); updated coverage of the mismatch between African American English (AAE), as well as Appalachian English, and Mainstream American English (MAE) used in academic settings; coverage of issues related to accurate identification of students with communication disorders who are also English language learners (ELLs); coverage of letter identification as a predictor of later dyslexia; updated coverage of secondary developmental language disorders; updated coverage of phonological awareness and its relation to phonological sensitivity, phonemic awareness, and phonics; coverage of video tips for parents and teachers for developing early language and literacy skills.
- *Chapter 11—Learners Who Are Deaf or Hard of Hearing:* Updated coverage of the debate about deafness being a disability or a cultural difference; updated coverage of Black American Sign Language (BASL) dialect; updated coverage of cochlear implantation; updated coverage of research on manual versus oral approaches; coverage of COVID-19's effects on persons with deafness.
- *Chapter 12—Learners with Blindness or Low Vision:* Updated coverage of language development in children with visual impairments; coverage of the "Expanded CORE Curriculum"—the ECC stresses teaching a curriculum of skills that may be difficult for students with visual impairments because poor or no sight hinders opportunities to learn them; coverage of virtual reality to help those with visual impairments; updated coverage of employment statistics.
- *Chapter 13—Learners with Low-Incidence, Multiple, and Severe Disabilities:* Coverage of TASH's mission to promote the full inclusion and participation of children and adults with significant disabilities in every aspect of their community, and to eliminate the social injustices that diminish human rights; updated coverage of the percentages of youth who experience a traumatic brain injury (TBI); coverage of *Up Close* with Rebekah Lozano, including video showing how she leads a productive life despite having a TBI; updated coverage of concussions in sports, including the revised *Suggested Guidelines for Management of Concussions in Sports* by the National Federation of State High School Associations; coverage of the disadvantages faced by non-English-speaking families in accessing information on concussions; updated prevalence percentages for deaf-blindness and its causes; coverage of Protactile American Sign Language (PTASL), an innovation evolving from the Deaf-Blind community that is anchored in contact space consisting of touching areas of the body to communicate.
- *Chapter 14—Learners with Physical Disabilities and Other Health Impairments:* Coverage of Jerron Herman, a professional dancer with cerebral palsy; updated coverage of what to do when someone has a seizure; updated coverage of muscular dystrophy; updated coverage of juvenile rheumatoid arthritis (JRA), with a video interview of Jessica Richards, who was diagnosed with JRA as a child; coverage of the effects of the COVID-19 pandemic on services for those with physical disabilities.
- *Chapter 15—Learners with Special Gifts and Talents:* Coverage of the National Association for Gifted Children's definition of gifted and talented; updated coverage of the role of genetics; updated coverage of Sternberg's Triarchic Theory of Intelligence, Gardner's Theory of Multiple Intelligences, Renzulli's Three-Ring Conception of Giftedness, and Stanley's Talent Search Model of giftedness; updated coverage of students who are "twice exceptional," having a disability and being gifted or talented; coverage of emotional intelligence; coverage of the role of anxiety among students who are gifted and talented; coverage of leadership ability among those who are gifted and talented; coverage of issues related to underserved gifted students from low socioeconomic and/or rural populations; coverage of using universal screening to combat low representation of minorities in gifted and talented programs; coverage of eight practices to improve equitable identification of students with special gifts and talents that look at giftedness through an antiracist lens.

Pedagogical Features

GUIDING QUESTIONS Each chapter contains questions that allow students to monitor their understanding as they proceed through the chapter.

CHAPTER SUMMARIES A summary at the end of each chapter is organized around answering the guiding questions at the beginning of the chapter.

FOCUS ON This feature highlights important concepts, hot new topics, informative anecdotes; helps readers delve deeper into the content; and engages readers' attention.

HOW CAN I HELP? This feature explicitly describes how special education and general education teachers can **collaborate** to benefit students with disabilities; authored by Dr. Margaret Weiss, George Mason University.

RESPONSIVE INSTRUCTION We firmly believe that most students with disabilities require intensive instruction to maximize their potential. Located throughout the text are boxed features that offer a variety of sound, research-based strategies (e.g., mnemonics, self-monitoring, classwide peer tutoring, functional behavioral assessment) for teaching students with disabilities. Most are authored by Dr. Kristin Sayeski, University of Georgia.

UP CLOSE WITH This feature presents individuals who, in various ways, serve as inspirational role models for all people, whether with a disability or not. Some are accompanied by a video that brings to life the person's accomplishments.

PEER CONNECTIONS We believe students reading this book will have a better understanding of exceptionality if they read about the lives of exceptional learners who are young adults. In *Peer Connections,* the personal stories of individuals with disabilities help readers realize that their peers with disabilities are very much like themselves.

SUCCESS STORIES: SPECIAL EDUCATORS AT WORK Special educators work in a variety of settings, ranging from general education classrooms to residential institutions. Although their main function involves teaching, these professionals also engage in a variety of activities, such as counseling, collaborating, and consulting. This feature, contained in several chapters, emphasizes the importance of education for students with special needs that is intensive, relentless, and specific, and includes questions for students that relate to CEC Standards.

MISCONCEPTIONS ABOUT EXCEPTIONAL LEARNERS: MYTHS AND FACTS BOXES We start each chapter with a feature that juxtaposes several myths and facts about the subject of the chapter. This popular feature, familiar to longtime users of previous editions, serves as an excellent advance organizer for the material to be covered.

Pearson eText
Video Example 2.3
IDEA requires that, at least annually, the IEP team meet with parents regarding the student's progress toward his goals. Here, the team meets with Kevin's mother for the annual review.

Pearson eText
Video Example 4.6
As this mother of a child with autism articulates, the public can sometimes be quick to judge the parents of a child with disabilities because they lack an understanding of why the child's behavior is abnormal.

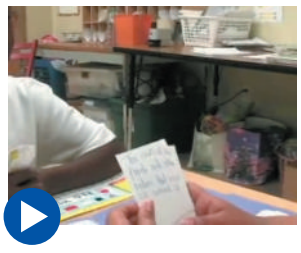
Pearson eText, Learning Management System (LMS)–Compatible Assessment Bank, and Other Instructor Resources

Pearson eText

The Pearson eText is a simple-to-use, mobile-optimized, personalized reading experience. It allows you to easily highlight, take notes, and review key vocabulary all in one place—even when offline. Seamlessly integrated videos will engage you and give you access to help when you need it. To gain access or to sign in to your Pearson eText, visit: https://www.pearson.com/pearson-etext.

Video Examples

Each chapter includes *Video Examples* that illustrate principles or concepts aligned pedagogically with the chapter. A total of 139 clips enable you to hear from experts and to experience what practicing professionals do in the field of special education.



Pearson eText
Video Example 5.6
This video shows elementary-aged students using classwide peer tutoring.

Pearson eText
Video Example 9.3
The teacher provides a deliberate degree of explicit instruction to help a child with ASD to interact with her nondisabled peers.

Pearson eText
Video Example 13.6
Chris sustained a head injury from a car accident. He discusses his difficulty with language, as well as the importance of his Wednesday night art class and how it helps him to have fulfillment in life.

Captions prompt reflection, asking you to consider how you would respond to situations depicted in the video.

LMS-Compatible Assessment Bank

With this new edition, all assessment types—quizzes, application exercises, and chapter tests—are included in LMS-compatible banks for the following learning management systems: Blackboard (978-0-13-752011-4), Canvas (978-0-13-752017-6), D2L (978-0-13-752019-0), and Moodle (978-0-13-752024-4). These packaged files allow for maximum flexibility to instructors when it comes to importing, assigning, and grading. Assessment types include:

Learning Outcome Quizzes

Each chapter learning outcome is the focus of a *Learning Outcome Quiz* that is available for instructors to assign through their Learning Management System. Learning outcomes identify chapter content that is most important for learners and serve as the organizational framework for each chapter. The multiple choice questions in each quiz, many of them higher-order thinking items, will measure understanding of chapter content, guide expectations for learning, and inform the accountability and the application of knowledge newly acquired. Each multiple choice question includes feedback for the correct answer and for each distractor to help guide learning.

Application Exercises

Each chapter provides opportunities to apply what is being learned through *Application Exercises.* These exercises are short-answer format and are based on Pearson eText Video Examples, written cases, or pedagogical text features. A model response written by experts is provided to help guide learning.

Chapter Tests

Suggested test items are provided for each chapter and include questions in multiple choice, true/false, and short-answer/essay formats.

Instructor's Resource Manual (978-0-13-752028-2)

The Instructor's Resource Manual, provided as a Word document, synchronizes all of the resources available with this textbook, providing a multitude of activities and ideas to help instructors teach their courses, whether traditional or online. Each chapter provides a teaching outline, learning activities, discussion points, and lecture ideas.

Powerpoint™ Slides (978-0-13-752034-3)

The PowerPoint™ slides are designed to help students understand, organize, and remember core concepts and theories.

Acknowledgments

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- Adam Jordan, College of Charleston
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- Samantha Riggleman, Saint Joseph's University

We are once again thankful for the wonderful support and assistance we received from the folks at Pearson. Our Developmental Editor Jeff Johnston's combination of wise counsel, good humor, and persistence makes him the ideal partner for the revision. Rebecca Fox-Gieg is a consummate professional—a perfect blend of publishing know-how, exuberance, and commitment to excellence.

Janelle Rogers, Content Producer for this edition, brought all the complex pieces of the project to completion flawlessly. Once again, Janelle, we are grateful for your attention to detail.

Our copy editor, Joanne Boehme, did a terrific job of keeping us stylistically and grammatically correct. We also thank Kathy Smith for her meticulous, thoughtful proofreading work. And we are so grateful to Gowthaman Sadhanandham for an outstanding job as project manager for our book.

Some Final Thoughts

For those loyal users of previous editions, we assure you that we weighed carefully each change or update. We hope you agree that our revisions reflect the myriad changes in the field of special education over the past few years as well as the information explosion brought about by ever more accessible computer databases and the Internet. We also hope you'll agree that we haven't failed in our continuing commitment to bring you the best that research has to offer for educating exceptional learners.

DPH
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JMK

Brief Contents

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Chapter 1

Exceptionality and Special Education

Moodboard/Brand X Pictures/Getty Images

Learning Outcomes

By the end of this chapter, you will:

1.1 Become oriented to exceptionality, understand the definitions of exceptional learners and special education, and learn about the prevalence of exceptional learners in both high- and low-incidence categories.

1.2 Understand and appreciate the history and origins of special education.

1.3 Learn about legislation and litigation that have affected special education.

1.4 Consider what the future might hold for exceptional learners.

Misconceptions About

Exceptional Learners

Myth Public schools may choose not to provide education for some students with disabilities.

Fact Federal legislation specifies that to receive federal funds, every school system must provide a free appropriate public education (FAPE) for every student, regardless of any disabling condition.

Myth The causes of most disabilities are known, but little is known about how to help individuals overcome or compensate for their disabilities.

Fact In most cases, the causes of disabilities are not known, although progress is being made in pinpointing why many disabilities occur. More is known about the treatment of most disabilities than about their causes.

Myth People with disabilities are just like everyone else.

Fact First, no two people are exactly alike. People with disabilities are unique individuals, just like everyone else. Often, most of their abilities are much like those of the average person who is not considered to have a disability. Nevertheless, a disability is a characteristic that is not shared by most people. It is important that disabilities be recognized for what they are, but individuals with disabilities must be seen as having many abilities—other characteristics that they share with the majority of people.V

Myth A disability is a handicap.

Fact A disability is an inability to do something, the lack of a specific capacity. A handicap, on the other hand, is a disadvantage that is imposed on an individual. A disability might or might not be a handicap, depending on the circumstances. For example, the inability to walk is not a handicap in learning to read, but it can be a handicap in getting into the stands at a ball game. Sometimes handicaps are needlessly imposed on people with disabilities. For example, a student who cannot write with a pen but can use a tablet or computer would be needlessly handicapped without such equipment.

Guiding Questions

- How can we get oriented to exceptionality and special education?
- What is the educational definition of *exceptional learners*?
- What is the prevalence of exceptional learners?
- What is the definition of *special education*?
- What are the history and origins of special education?
- What legislation and litigation have affected special education?
- What is our perspective on the progress of special education?

The study of exceptional learners is the study of both differences and similarities. The exceptional learner differs in some way from the average. In very simple terms, such an individual might have problems or special talents in thinking, seeing, hearing, speaking, socializing, or moving. More often than not, she has a combination of special abilities or disabilities. Today, more than 6 million learners with these differences have been identified in public schools throughout the United States. About 1 of every 10 school-age students in the United States is considered exceptional. The fact that many so-called normal students have school-related problems makes the study of exceptionality essential.

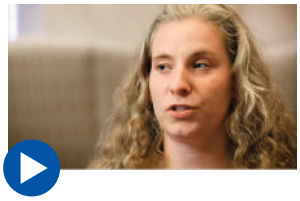
The study of exceptional learners is also the study of similarities. Exceptional individuals are not different from the average in every way. In fact, most exceptional learners are average in more ways than they are not. Until recently, professionals—and laypeople as well—tended to focus on the differences between exceptional and nonexceptional learners, almost to the exclusion of the ways in which all individuals are alike. Today, we give more attention to what exceptional and nonexceptional learners have in common—to similarities in their characteristics, needs, and ways of learning. As a result, the study of exceptional learners has become more complex, and many so-called facts about children and youths with disabilities and those who have special gifts or talents have been challenged.

Pearson eText
Video Example 1.1
Although not all individuals with Down syndrome are as high functioning as John Cronin, co-founder with his father of John's Crazy Socks, he is an example of how many people with disabilities aspire to and attain life goals similar to those of the typical adolescent or young adult.

https://www.youtube.com/watch?v=FDYVVDbUQ_s

Getting Oriented to Exceptional Learners and Special Education

Learning Outcome 1.1 Become oriented to exceptionality, understand the definitions of exceptional learners and special education, and learn about the prevalence of exceptional learners in both high- and low-incidence categories.



Pearson eText
Video Example 1.2
Jennifer, who has a learning disability and a hand tremor, discusses stereotyping, hurtful words, and their emotional impact on a person with a disability.

Students of one of the hard sciences might boast about the difficulty of the subject matter because of the many facts they must remember and piece together. Students of special education face quite different problems. To be sure, they study facts, but the facts they must master are relatively few compared to the unanswered questions or ambiguities within their minds. Any study of human beings must take into account inherent ambiguities, inconsistencies, and unknowns. In the case of the individual who deviates from the norm, we must multiply all the mysteries of typical human behavior and development by those pertaining to the individual's exceptionalities. Because no single theory of development is universally accepted, it is not at all surprising that relatively few definitive statements can be made about exceptional learners and that many controversies remain (Kauffman, 2008; Kauffman et al., 2017).

The Importance of Abilities

Many people with disabilities have abilities that go unrecognized because their disabilities become the focus of concern and distract attention from what the individual can do. We must study the disabilities of exceptional children and youths if we are to learn how to help them maximize their abilities in school. Some students with disabilities that are not obvious to the casual observer need special programs of education and related services to help them live full, happy, productive lives. However, we must not lose sight of the fact that the most important characteristics of exceptional learners are their abilities, not their disabilities.

Consider Richie Parker, born with no arms: "Growing up for me, it was . . . my 'normal.' I wasn't raised to think of it as being different." Parker has had similar life goals to those who have arms. As a teen he learned to drive a car. With an engineering degree from Clemson University, he became a leading race car designer on the NASCAR circuit. After 12 years at Hendrick Motorsports, one of stock car racing's premier organizations, he returned to Clemson for a master's degree in business administration. He then co-founded Optimech Solutions (https://www.optimechsolutions.com/), which offers mechanical

Pearson eText
Video Example 1.3
Richie Parker, born without arms, exemplifies how educators need to focus on both similarities and differences.

https://www.youtube.com/watch?v=vRi4zCiclRY

engineering services to other organizations. When asked how he achieved this, Parker says, "I learned how to do those things the same way that other people learned how to do things. I just did [it] with my feet."

As educators, we need to focus on both similarities and differences. Moreover, we should be impressed by individuals such as Richie Parker to help them reach their maximum potential given their disabilities. We must not allow people's disabilities to keep us from recognizing their abilities or to become so much the focus of our concern that we overlook their capabilities.

Disability Versus Handicap

We recognize an important distinction between disability and handicap: A **disability** is an inability to do something, a diminished capacity to perform in a specific way (an impairment); a **handicap**, however, is a disadvantage imposed on an individual. Thus, a disability might or might not be a handicap, depending on the circumstances. Likewise, a handicap might or might not be caused by a disability. For example, blindness is a disability that can be anything but a handicap in the dark. In fact, in the dark, the person who has sight is the one who is handicapped. Needing to use a wheelchair might be a handicap in certain circumstances, but the disadvantage may be caused by architectural barriers or other people's reactions, not the inability to walk. Other people's insensitive responses can handicap those who differ from themselves (in color, size, appearance, language, and so on) by stereotyping them or not giving them opportunities to do the things they are able to do. When working and living with exceptional individuals who have disabilities, we must constantly strive to separate their disabilities from the handicaps. That is, our goal should be to confine the handicaps to those characteristics and circumstances that can't be changed and to make sure that we impose no further handicaps by our attitudes or our unwillingness to accommodate their disabilities.

Disability Versus Inability

Another important distinction is that between inability and disability. All disabilities are an inability to do something. However, not every inability to do something is a disability. That is, disability is a subset of inability: "A disability is an inability to do something that most people, with typical maturation, opportunity, or instruction, can do" (Kauffman & Hallahan, 2005, p. 30). Consider age and ability. Most 6-month-old infants cannot walk or talk, but they are not thought of as having a disability because their inability is age appropriate. However, if that inability extends well past the time when most children learn to walk and talk, then we consider their inability a disability. Consider the role of instruction. An adult's inability to read is not a reading disability if she or he has not had reading instruction. Weigh the factor of typical adult human abilities. A typical adult male might not be able to lift 400 pounds, but this isn't considered a disability, because most men simply can't lift 400 pounds. Judging inability in the context of old age, the average 70-year-old can't run 10 miles, but most 70-year-olds can walk a considerable distance. Not being able to run 10 miles is not considered a disability for a 70-year-old, but being unable to walk *at all* is. The point is, simply, that disability is a significant difference from what we expect most people to be able to do, given their age, opportunities, and instruction.

Educational Definition of *Exceptional Learners*

For purposes of education, exceptional learners are those who require special education and related services if they are to realize their full human potential (Kauffman & Hallahan, 2005). They require special education because they differ markedly from most students in one or more of the following ways: They may have intellectual disabilities, learning or attention disabilities, emotional or behavioral disorders, physical disabilities, disorders of communication, autism, traumatic brain injury, impaired hearing, impaired sight, or special

gifts or talents. The chapters that follow define as exactly as possible what it means to have an exceptionality.

Two concepts are important to this educational definition of exceptional learners: (1) diversity of characteristics and (2) need for special education. The concept of diversity is inherent in the definition of exceptionality; the need for special education is inherent in an educational definition. Exceptional learners differ from most (typical or average) individuals in a particular way that is relevant to their education. Their particular educationally relevant difference demands instruction that differs from what most (typical or average) learners require (Kauffman & Hallahan, 2005; Kauffman & Konold, 2007; Stichter et al., 2008).

Although people with disabilities may need special education services, it doesn't follow that they need to be defined by their disability. Consider the case of Doug Landis, a successful artist who is gifted at drawing but is paralyzed from the neck down. Landis is an example of how the focus on individuals with disabilities should not be just on what they can't do or can only do with limitations, but also must be on what they can do. (To learn more about this successful artist, see Up Close with Doug Landis.)

Up Close with Doug Landis Doug Landis became quadriplegic (all four limbs are paralyzed) in high school as a result of a wrestling accident. After Doug's accident, his brother thought he was watching too much television and challenged him to start drawing by putting a pencil in his mouth. Using a pencil attached to a mouth stick, Doug has become a major artist. Doug is an active member of the organization Mouth and Foot Painting Artists (https://mfpausa.com/), which assists artists with disabilities to meet their financial needs.

As remarkable as Landis's accomplishments are, however, we shouldn't let such striking accomplishments, in spite of having a disability, detract from two fundamental realities—realities that can be viewed as two sides of the same coin:

- Cases like that of Doug Landis are rare. Most people who are quadriplegics can't become highly accomplished artists. Nor will most be able to realize extraordinary accomplishments in other professions or endeavors. In addition to his dogged perseverance, Landis was also endowed with artistic talent, which that perseverance allowed him to tap. Likewise, sheer grit and determination alone won't result in a person who is a quadriplegic becoming a renowned physician, scientist, musician, and so forth. In addition, of course, the interplay between determination and talent applies to all disabilities, not just quadriplegia.
- Although cases like that of Landis are uncommon, there are countless instances of people with disabilities, some not as disabling as Landis's, who make remarkable progress given the inherent physical, cognitive, and behavioral resources available to them. Such examples might be a young adult with moderate intellectual disabilities who successfully holds a job as a grocery bagger, or a student with a reading disability who improves her reading proficiency from the 15th percentile to the 45th percentile.

We point out these two realities for three reasons. First, it is natural to consider cases like Landis as remarkable and, thus, to hold them up as inspirational. As well we should. In doing so, however, we should guard against others who have similar or even less severe disabilities from feeling like failures if they aren't capable of such extraordinary achievements. Second, we should be attuned to viewing achievements that, on their face, may be less phenomenal, as inspirational in and of themselves. We should be alert to celebrate the above-named grocery bagger and student with reading disabilities. Finally, it's important that we also acknowledge the efforts of parents, families, teachers, and other professionals that made these accomplishments possible.

Special education does not always work as it should, but when it does, educators identify a student's disability early and provide effective special education. Pediatricians also are an important part of this process, particularly for young children, as they can refer patients for evaluation and early childhood special education services. In both early

Pearson eText
Video Example 1.4
Doug Landis's exquisite drawings and paintings of wildlife illustrate how the focus on individuals with disabilities must be on what they can do rather than on how they are limited.

https://www.youtube.com/watch?v=55AFFtP2pSA

childhood special education and special education for school-age children, the child's parents are involved in the decision about how to address the student's needs, and the outcome of special education is the student's improved achievement and behavior.

Students with exceptionalities are an extraordinarily diverse group in comparison to the general population, and relatively few generalizations apply to all exceptional individuals. Their exceptionalities can involve sensory, physical, cognitive, emotional, or communication abilities or any combination of these. Furthermore, exceptionalities may vary greatly in cause, degree, and effect on educational progress, and the effects may vary greatly depending on the individual's age, gender, and life circumstances. Any individual presented as an example of an "exceptional learner" is likely to be representative of exceptional learners in some respects but unrepresentative in others.

The typical student who receives special education has no immediately obvious or visible disability. He (more than half of the students served by special education are males) is in elementary or middle school and has persistent problems in learning and behaving appropriately in school. His problems are primarily academic and social or behavioral, and may not be apparent to many teachers until they have worked with him for a period of weeks or months. His problems persist despite teachers' efforts to meet his needs in the regular school program in which most students succeed. He is most likely to be described as having a learning disability or to be designated by an even broader label indicating that his academic and social progress in school is unsatisfactory owing to a disability.

By federal law, schools should not identify these exceptional students as eligible for special education until careful assessment indicates that they are unable to make satisfactory progress in the regular school program without special services designed to meet their extraordinary needs. Federal special education laws and regulations include definitions of several conditions (categories such as learning disability, autism, and hearing impairment) that might create a need for special education. These laws and regulations require that schools provide special services to meet whatever special needs are created by a disabling condition that can't be met in the general educational program. The law doesn't require provision of special education simply because a student has a disability.

Researchers have documented that the earlier a child's disability is identified and an intervention instituted, the better are the chances for the child to realize his or her potential. The Centers for Disease Control and Prevention (CDC) has established an extensive campaign, "Learn the Signs. Act Early," that encourages the early identification of developmental disabilities, including autism. On its website, the CDC provides a library of videos to help parents and professionals track the development of young children (https://www.cdc.gov/ncbddd/actearly/milestones/milestones-in-action.html).

Pearson eText
Video Example 1.5
The director of a preschool program discusses the value of the CDC's "Learn the Signs. Act Early."

https://www.youtube.com/watch?v=iSZilw8UGFw

Prevalence of Exceptional Learners

Prevalence refers to the percentage of a population or number of individuals having a particular exceptionality. Obviously, accurate estimates of prevalence depend on the ability to count the number of people in a given population who have a specific exceptionality.

The task of determining the number of students with exceptionalities might appear simple enough, yet the prevalence of most exceptionalities is uncertain and a matter of considerable controversy. Multiple factors make it difficult to state the number of exceptional individuals with great accuracy and confidence. These factors include vagueness in definitions, frequent changes in definitions, and the role of schools in determining exceptionality—matters that we discuss in later chapters (see also Kauffman et al., 2017).

Recent government figures indicate that over 6.3 million students (9.5%) between the ages of 6 and 21 years receive special education services in schools (U.S. Department of Education, 2020). It's important to keep in mind that the number of students served in special education is not necessarily equal to the number of students who actually have a disability. The latter is much more difficult to calculate than the former, because the federal government requires school districts to report the number of students with disabilities they are serving each year. Beginning in the mid-1970s, the number of students served by special

education grew steadily, from about 3.75 million in 1976 to more than 6 million in the early 21st century. Most of the children and youths served by special education are between the ages of 6 and 17. Although preschoolers and youths age 18 to 21 are being identified with increasing frequency as having disabilities, school-age children and youths in their early teens make up the bulk of the identified population.

The percentage of the special education population identified as having certain disabilities has changed dramatically over several decades. For example, the number of students identified as having learning disabilities has more than doubled since the mid-1970s; students with learning disabilities now make up about half of all students receiving special education services. In contrast, the percentage identified as having intellectual disabilities is now about half of what it was in 1976. Also, from 1992, the first year the federal government required states to report the number of students with autism being served, until now, the prevalence of autism has increased 33% (from about 0.03% to about 1%). No one has an entirely satisfactory explanation of these changes. However, most authorities think they in part reflect the social acceptability of some labels and alterations in definitions and diagnostic criteria for certain disabilities. For example, some parents find the designation "learning disabled" preferable to "intellectually disabled." In addition, it's undeniable that for the past decade or so autism has garnered the most research attention of all the disability categories. And this focus on autism has resulted in children who previously would have been diagnosed as having intellectual disabilities being now more likely to be identified as having autism. In subsequent chapters, we discuss in greater detail the prevalence of specific categories of exceptionality and accompanying issues.

High-Incidence and Low-Incidence Categories

Some disabilities occur with a relatively high frequency and are called *high-incidence disabilities* because they are among the most common. Learning disabilities, communication (speech and language) disorders, emotional disturbance, and mild intellectual disabilities are among those usually considered high incidence (Stichter et al., 2008). Other disabilities (such as blindness, deafness, severe intellectual disabilities, and traumatic brain injury) occur relatively rarely and are considered low-incidence disabilities.

Although the rates of occurrence of most high-incidence disabilities have remained relatively stable in the early 21st century, some of the low-incidence categories have increased dramatically. For example, as we noted above, being identified as having autism or autism spectrum disorder (ASD) has mushroomed. In fact, some professionals speculate that it will eventually be considered a high-incidence disability. Other low-incidence categories showing a substantial increase in numbers include **traumatic brain injury (TBI)**, orthopedic impairments, and other health impairments (OHI). Increases in the first two are due to increases in spinal cord injury and in survival of severe physical trauma because of better medical care. As we point out in Chapter 7, the increase in OHI is due to an increase in attention deficit hyperactivity disorder (ADHD), which is included in OHI.

Much of the increase in diagnosis of autism probably represents improved identification procedures along with identification of milder cases of autism, not an epidemic (National Research Council, 2001). Although some of the increase in TBI might represent better diagnosis, it might also reflect actual increases in brain injuries, as we will discuss in Chapter 13. Increases in orthopedic impairments might reflect the increasing survival rates of infants born with significant physical anomalies and of children involved in accidents. Reasons for the increase in ADHD are open for speculation. It may be partially the result of increased awareness.

Definition of Special Education

Special education means specially designed instruction that meets the unusual needs of an exceptional student and that requires special materials, teaching techniques, equipment, and/or facilities. Students with visual impairments might require reading materials in

large print or braille; students with hearing impairments might require hearing aids and/or instruction in sign language; those with physical disabilities might need special equipment; those with emotional or behavioral disorders might need smaller and more highly structured classes; and students with special gifts or talents might require access to working professionals. Related services—special transportation, psychological assessment, physical and occupational therapy, medical treatment, and counseling—might be necessary if special education is to be effective. The single most important goal of special education is finding and capitalizing on exceptional students' abilities.

The best general education cannot replace special education for those who need it; special education is more precisely controlled in pace or rate, intensity, relentlessness, structure, reinforcement, teacher–pupil ratio, curriculum, and monitoring or assessment (Pullen & Hallahan, 2015). We think it's a good idea to improve the education of all children, an objective of the federal education laws of the early 21st century; however, good or reformed general education does not and cannot replace special education for those students at the extremes of the range of disabilities (Kauffman & Konold, 2007; Pullen & Hallahan, 2015; Zigmond, 2007; Zigmond & Kloo, 2017; Zigmond et al., 2009).

History and Origins of Special Education

Learning Outcome 1.2 Understand and appreciate the history and origins of special education.

There have always been exceptional learners, but there haven't always been special educational services to address their needs (see Holmes, 2004; Metzler, 2006). During the closing years of the 18th century, following the American and French Revolutions, effective procedures were devised for teaching children with sensory impairments (i.e., those who were blind or deaf; Winzer, 1993). In 1829, Samuel Gridley Howe created the first residential school for students who were blind; the curriculum focused on both instruction in traditional reading, writing, and mathematics and the development of students' individual interests and abilities (Sapp & Hatlen, 2010). Early in the 19th century, the first systematic attempts were made to educate children who then were termed "idiotic" and "insane"—those who today are said to have **intellectual disabilities** and **emotional or behavioral disorders** (or **emotional disturbance**; Kauffman & Landrum, 2006; Stichter et al., 2008). (It may seem hard to believe, but those terms, as well as "imbecile" and "moron," were labels accepted and used by the medical community and the general public.)

In the prerevolutionary era, the best that society offered most children with disabilities was protection—asylum from a cruel world that had no place for them and in which they couldn't survive with dignity, if they could survive at all. But as the ideas of democracy, individual freedom, and egalitarianism swept across America and France, a change in attitude occurred. Political reformers and leaders in medicine and education began to champion the cause of children and adults with disabilities, urging that these "imperfect" or "incomplete" individuals be taught skills that would allow them to become independent, productive citizens. These humanitarian sentiments surpassed a desire to protect and defend people with disabilities. The early leaders sought to normalize exceptional people to the greatest extent possible and confer on them the human dignity they presumably lacked.

Contemporary educational methods for exceptional children can be traced directly to techniques pioneered during the early 1800s. Many (perhaps most) of today's vital, controversial issues have been concerns ever since the dawn of special education. Some contemporary writers believe that instruction in the history of special education is critical in fostering understanding of today's issues because of the lessons we can learn from our past (e.g., Gerber, 2017; Kauffman & Landrum, 2006). In our discussion of major historical events and trends since 1800, we comment briefly on the history of people and ideas, the growth of the discipline, professional and parent organizations, and legislation.

People and Ideas

Many of the originators of special education were European physicians. They were primarily young, ambitious people who challenged the wisdom of the established authorities, including their own friends and mentors (Kanner, 1964; see also Kauffman & Landrum, 2006; Stichter et al., 2008).

Most historians trace the beginning of special education as we know it today to Jean-Marc-Gaspard Itard (1774–1838), a French physician who was an authority on diseases of the ear and education of students who are deaf. In the early 19th century, this young doctor began to educate a boy of about 12 years of age who had been found roaming naked and wild in the forests of France (he is sometimes referred to as the "wild child" or the "wild boy of Aveyron"). Itard's mentor, Philippe Pinel (1745–1826), a prominent French physician who was an early advocate of humane treatment of "insane" people, advised Itard that his efforts would be unsuccessful because the boy, Victor, was a "hopeless idiot." But Itard persevered. He did not eliminate Victor's disabilities, but he did dramatically improve the wild child's behavior through patient, systematic educative procedures (Itard, 1962). Several years ago, Mary Losure (2013) published a nonfiction book for children and adolescents that provides the history of the wild boy of Aveyron. Cases such as the wild boy of Aveyron bring into question the role of nature and nurture in human development (see Focus On: The Nature–Nurture Controversy).

The ideas of the first special educators were truly revolutionary for their times. Following are some of the innovative ideas of Itard, Édouard Séguin, and their successors that form the foundation for present-day special education:

- *Individualized instruction*, in which the child's characteristics, rather than prescribed academic content, provide the basis for teaching techniques
- *A carefully sequenced series of educational tasks*, beginning with tasks the child can perform and gradually leading to more complex learning
- *Emphasis on stimulation and awakening of the child's senses*, to make the child more aware of and responsive to educational stimuli
- *Meticulous arrangement of the child's environment*, so that the structure of the environment and the child's experience of it lead naturally to learning
- *Immediate reward for correct performance*, providing reinforcement for desirable behavior
- *Tutoring in functional skills*, to make the child as self-sufficient and productive as possible in everyday life
- *Belief that every child should be educated to the greatest extent possible*, because every child can improve to some degree

So far, we've mentioned only European physicians who figured prominently in the rise of special education. Although much of the initial work occurred in Europe, many U.S. researchers contributed greatly during those early years. They kept informed of European developments as best they could, some of them traveling to Europe for the specific purpose of obtaining firsthand information about the education of children with disabilities.

Among the young U.S. thinkers who were concerned with the education of students with disabilities was Samuel Gridley Howe (1801–1876), an 1824 graduate of Harvard Medical School. Besides being a physician and an educator, Howe was a political and social reformer, a champion of humanitarian causes and emancipation. He was instrumental in founding the Perkins School for the Blind in Watertown, Massachusetts, and also taught students who were deaf and blind. His success in teaching Laura Bridgman, who was deaf and blind, greatly influenced the education of Helen Keller. In the 1840s, Howe was also a force behind the organization of an experimental school for children with intellectual disabilities and was personally acquainted with Séguin.

Focus On

The Nature–Nurture Controversy

One of the oldest controversies involving the education of exceptional learners is the extent to which nature and nurture contribute to what a child becomes. What is attributable to biological factors such as genetics and other aspects of physical endowment, and what is attributable to environmental factors such as opportunity, encouragement, and teaching? The controversial idea was part of Itard's work in the early 19th century and is still being debated by psychologists (e.g., Pinker, 2002) and popular writers (e.g., Gladwell, 2008) today.

For many years, theoreticians tended to view the nature–nurture issue from an either/or perspective: Either you believed that heredity held the key to determining intellectual development or you believed that the environment was the all-important factor. Today, however, most authorities believe that both heredity and the environment are critical determinants of intelligence. Some scientists have tried to discover how much of intelligence is determined by heredity and how much by the environment, but many view this quest as futile. They assert that heredity and environment do not combine in an additive fashion to produce intelligence. Instead, the interaction between genes and environment results in intelligence.

Pearson eText
Video Example 1.6
Laurence Steinberg of Temple University explains the interaction of genetics and the environment and its role in human behavior; he highlights the need to break down the false dichotomy between genes and the environment.

http://www.youtube.com/watch?v=j-nnJpV1iuE

Pearson eText
Video Example 1.7
Authors Paige Pullen and James Kauffman discuss the term "full inclusion" and what that means for students receiving special education services.

When Thomas Hopkins Gallaudet (1787–1851), a minister, was a student at Andover Theological Seminary, he tried to teach a girl who was deaf. He visited Europe to learn about educating the deaf and in 1817 established the first American residential school for students who were deaf (now known as the American School of the Deaf) in Hartford, Connecticut. Gallaudet University in Washington, D.C., the only liberal-arts college for students who are deaf, was named in his honor.

The early years of special education were vibrant with the pulse of new ideas. It isn't possible to read the words of Itard, Séguin, Howe, and their contemporaries without being captivated by the romance, idealism, and excitement of their exploits. The results they achieved were truly remarkable for their era. Today, special education remains a vibrant field in which innovations, excitement, idealism, and controversies are the norm. Teachers of exceptional children—and that includes all teachers—must understand how and why special education emerged as a discipline (see Gerber, 2017).

Normalization, Deinstitutionalization, and Inclusion

Among the major 20th-century ideas in special education is *normalization*, the philosophy that we should use "means which are as culturally normative as possible, in order to establish and/or maintain personal behaviors and characteristics which are as culturally normative as possible" (Wolfensberger, 1972, p. 28). With normalization, the barriers to the participation of people with disabilities in normal life are broken down. The concept of normalization was in itself important and led to related ideas, such as closing institutions and including exceptional learners in general education classrooms and schools.

Normalization continues to be a goal in special education and all other aspects of responding to disability. Breaking down barriers to participation of people with disabilities in activities with nonhandicapped individuals was one of the ideas leading to the **deinstitutionalization** movement of the late 20th century. At one time, it was common to place nearly all children and adults with intellectual disability (formerly mental retardation) and/or mental illness in residential institutions. In the 1960s and 1970s, systematic efforts were made to move people out of institutions and back into closer contact with the community. This led to more children with disabilities being raised by their families and resulted in the closure of many institutions regardless of the nature of the problems of the people involved. Today, smaller facilities within local neighborhoods are common. Transitional living homes (sometimes called halfway houses) exist for individuals with emotional difficulties, who no longer are thought to need the more isolated environment of a large institution. However, much still needs to be done to improve the quality of life for some people with disabilities who previously may have been in institutions. In fact, many people who formerly would have been in institutions are now homeless or in jail (see Earley, 2006;

Goin, 2007; Nomani, 2007; Powers, 2017). Increasing numbers of individuals are homeless in the United States, and cognitive and mental health disabilities are significant risk factors for homelessness (Edens et al., 2011; Mercier & Picard, 2011).

Perhaps the most controversial issue growing out of the idea of normalization is **inclusion**. Actually inclusion, or integration, has long been an issue with all exceptional students, including those with special gifts or talents. Although, historically, educators built educational programming for students with disabilities on the assumption that a variety of service delivery options need to be available (Crockett & Kauffman, 1999, 2001; Kauffman et al., 2008), inclusion of exceptional learners in ordinary classrooms with their nonexceptional peers has become the single most important issue for some advocates. The issue of inclusion became controversial among parents and others in the late 20th century and continues to be a topic of heated opinion and discussion.

At the unfolding of the 21st century, the inclusion controversy was sharpened, especially by the higher standards expected of all students. The direction the controversy will take is anyone's guess (see Bateman, 2017; Kauffman & Hung, 2009; Kauffman et al., 2016; Zigmond & Kloo, 2017). We can't overemphasize the importance of intensive instruction in meeting the needs of exceptional learners. In our opinion, exceptional children should be placed where such instruction is most likely to be provided, even if that place is somewhere other than the general education classroom. It is critical that inclusion in the general education setting full time should not be at the expense of the specialized instruction that is required to help students with disabilities meet their academic potential.

Council for Exceptional Children and Development of the Profession

Special education didn't suddenly spring up as a new discipline or develop in isolation from other disciplines. The emergence of psychology and sociology and especially of the widespread use of cognitive tests in the early years of the 20th century had enormous implications for the growth of special education. Psychologists' study of learning and their prediction of school failure or success by means of tests helped to focus attention on children with special needs. Sociologists, social workers, and anthropologists drew attention to the ways in which exceptional children's families and communities responded to them and affected their learning and adjustment. Anecdotal accounts of intellectual disabilities or mental disorders can be found in the 19th-century literature, but they are not presented within the conceptual frameworks that we recognize today as psychology, sociology, and special education (Kauffman & Landrum, 2006). Even in the early 20th century, the concepts of disability seem crude by today's standards.

As the education profession itself matured and as compulsory school attendance laws became a reality, realization was growing among teachers and school administrators that a large number of students must be given something beyond the ordinary classroom experience. Elizabeth Farrell, a teacher in New York City in the early 20th century, was highly instrumental in the development of special education as a profession. She and the New York City superintendent of schools attempted to use information about child development, social work, mental testing, and instruction to address the needs of children and youths who were being either ill served in or excluded from general education classes and schools. Farrell was a great advocate for services for students with special needs. Her motives and those of the teachers and administrators who worked with her were to see that every student—including every exceptional child or youth—had an appropriate education and received the related health and social services necessary for optimum learning in school (Gerber, 2017). In 1922, Farrell and a group of other special educators from across the United States and Canada founded the Council for Exceptional Children (CEC), which is still the primary professional organization of special educators.

Contemporary special education is a professional field with roots in several academic disciplines—especially medicine, psychology, sociology, and social work—in addition to professional education. The discipline is sufficiently different from the mainstream of professional education to require special training programs but sufficiently like the mainstream to maintain a primary concern for schools and teaching.

Parent Organizations

Much of the progress in providing services for children with disabilities and their families has been achieved by the collective efforts of professionals and parents. Historically, professional groups organized in the early 19th century followed by parent organizations in the mid-20th century. Parent organizations have typically served three essential functions: (1) provide an informal group for parents who understand one another's problems and needs and help one another deal with anxieties and frustrations, (2) provide information regarding services and potential resources, and (3) advocate for needed services for their children. Two of the organizations that came about primarily as the result of parents' efforts include the ARC (https://thearc.org/) and the Learning Disabilities Association of America (https://ldaamerica.org/).

With respect to advocating for needed services, parents were instrumental in advocating for many of the laws we discuss below that are now in place to ensure equal access education and nondiscrimination in such things as employment. The prime example is the passage in 1975 of the Education for All Handicapped Children Act (now amended as the Individuals with Disabilities Education Improvement Act). Prior to 1975, public schools could refuse to enroll children with disabilities. However, taking a cue from the *Brown v. Board of Education* U.S. Supreme Court ruling in 1954, stipulating that public schools could not segregate children on the basis of race, parents brought lawsuits arguing that excluding children from school based on their disabilities was discriminatory. These lawsuits, as well as parent-led lobbying of Congress, led to the passage of the Education for All Handicapped Children Act.

More recently, a grassroots parent organization, Decoding Dyslexia (http://www.decodingdyslexia.net/home.html), was founded due to concerns about the lack of interventions available for children with reading disabilities in schools. As a result of these parents' efforts, new legislation is on the books in multiple states that requires universal definitions of dyslexia in state code, mandatory teacher training, universal screening for dyslexia, mandatory services provided in both general and special education, and access to appropriate assistive technologies. Decoding Dyslexia has state organizations in all 50 states plus the District of Columbia.

In addition to the significant role that the government and parent and professional organizations have played in bettering the lives of individuals with disabilities, countless numbers of private foundations and organizations are devoted to promoting services for and inclusion of people with disabilities. Two of the most prominent of these organizations are the Special Olympics and Best Buddies International. Interestingly, the former was founded by the late Eunice Kennedy Shriver and the latter by her one of her sons, Anthony Paul Kennedy Shriver.

The impetus for the Special Olympics came from Eunice Kennedy Shriver, one of the sisters of the late President John F. Kennedy. Rosemary, the second eldest of the Kennedy children, had an intellectual disability. Eunice was inspired by witnessing Rosemary's struggles to be included in school and other aspects of society. Being athletic, she came up with having sports competitions in which individuals with disabilities could compete. The Special Olympics stands as an example of advocacy for caring and fair treatment of individuals with disabilities that has no doubt enriched the lives of many. Ms. Shriver undeniably changed the self-perception of many people with disabilities and also changed the general public's perceptions of individuals with disabilities for the better and improved the quality of life for many.

Established in 1989, Best Buddies was the United States' "first national, unified, social, and recreational program for people with intellectual disabilities" (https://www.bestbuddies.org/what-we-do/history/). Best Buddies provides people with intellectual and developmental disabilities chances for social inclusion and job opportunities by arranging one-on-one friendships of students with intellectual and developmental disabilities with students without disabilities. In 2010, the Eunice Kennedy Shriver Act authorized federal money for Best Buddies to award grants for projects to promote inclusion for individuals with disabilities.

Pearson eText
Video Example 1.8
Eunice Kennedy Shriver: One Woman's Vision.
https://www.youtube.com/watch?v=0CukBoFytFY

Legislation and Litigation

Learning Outcome 1.3 Learn about legislation and litigation that have affected special education.

Legislation (lawmaking) and litigation (defending one's rights under law) have played major roles in how students with disabilities are identified and educated. These roles have often been reciprocal, with one influencing the other and vice versa. Legislation refers to laws, and litigation refers to lawsuits and court decisions.

LEGISLATION Much of the progress in meeting the educational needs of children and youths with disabilities is attributable to laws requiring states and localities to include students with special needs in the public education system (Bateman, 2007, 2017; Bateman & Linden, 2006; Huefner, 2006). We focus here on significant legislation that represents a culmination of decades of legislative history.

A landmark federal law was passed in 1975: the **Education for All Handicapped Children Act**, commonly known as PL 94-142* (Martin, 2013). In 1990, this law was amended to become the **Individuals with Disabilities Education Act (IDEA)**. In 1997, the law was amended again, but its name was not changed [see Bateman & Linden (2006) and Yell (2012) for details]. The law was reauthorized again in 2004, as the **Individuals with Disabilities Education Improvement Act (IDEIA)**. As a field, we still refer to the law simply as IDEA, as the basic requirements of the law have not changed. The federal law known as IDEA ensures that all children and youths with disabilities have the right to a free, appropriate public education. IDEA was revolutionary because it was the first federal law mandating free appropriate public education for all children with disabilities. Its basic provisions are described in Focus On: The Major Provisions of IDEA.

Focus On

The Major Provisions of IDEA

Each state and locality must have a plan to ensure*:

Identification	Extensive efforts to screen and identify all children and youths with disabilities.
Free Appropriate Public Education (FAPE)	Every student with a disability has an appropriate public education at no cost to the parents or guardian.
Due Process	The student's and parents' rights to information and informed consent before the student is evaluated, labeled, or placed, and the right to an impartial due process hearing if they disagree with the school's decisions.
Parent/Guardian Surrogate Consultation	The student's parents (or guardian) are consulted about the student's evaluation and placement and the educational plan; if the parents (or guardian) are unknown or unavailable, a surrogate parent must be found to act for the student.
Least Restrictive Environment (LRE)	The student is educated in the least restrictive environment consistent with his or her educational needs and, insofar as possible, with students without disabilities.
Individualized Education Program (IEP)	A written individualized education program is prepared for each student with a disability, including levels of functioning, long-term goals, extent to which the student will *not* participate in the general education classroom and curriculum, services to be provided, plans for initiating and evaluating the services, and needed transition services (from school to work or continued education). Parents must be invited to the meeting and efforts made to enable them to attend.
Nondiscriminatory Evaluation	The student is evaluated in all areas of suspected disability and in a way that is not biased by his or her language or cultural characteristics or disabilities. Evaluation must be by a multidisciplinary team, and no single evaluation procedure may be used as the sole criterion for placement or planning.
Confidentiality	The results of evaluation and placement are kept confidential, though the student's parents (or guardian) may have access to the records.
Personnel Development, In-service	Training for teachers and other professional personnel, including in-service training for general education teachers, in meeting the needs of students with disabilities.

**Detailed federal rules and regulations govern the implementation of each of these major provisions. The Code of Federal Regulations comprises the rules for implementation of the law.*

*Legislation is often designated PL (for public law), followed by a hyphenated numeral; the first set of digits represents the number of the Congress that passed the bill, and the second set represents the number of that bill. Thus, PL 94-142 was the 142nd public law passed by the 94th Congress.

IDEA and another federal law focusing on intervention in early childhood (PL 99-457) mandate a free appropriate public education for every child or youth between the ages of 3 and 21, regardless of the nature or severity of the disability. PL 99-457 also provides incentives for states to develop early intervention programs for infants with known disabilities and those who are considered at risk. Together, these laws require public school systems to identify all children and youths with disabilities and to provide the necessary special education and related services to these students.

Historically, legislation has been increasingly specific and mandatory. Beginning in the 1980s, however, a renewed emphasis on states' rights and local autonomy plus a political strategy of federal deregulation led to attempts to repeal some of the provisions of IDEA (then still known as PL 94-142) and loosen federal rules and regulations. Federal disinvestment in education and deregulation of special education programs remain popular ideas. It's not surprising that federal mandates for special education have come under fire. Dissatisfaction with federal mandates is due in part to the fact that the federal government contributes relatively little to the funding of special education. Although the demands of IDEA are detailed, state and local governments pay most of the cost of special education programs.

Another landmark federal law, enacted in 1990, is the **Americans with Disabilities Act (ADA)**. It gives civil rights protections to individuals with disabilities that are like those provided to individuals on the basis of race, sex, national origin, and religion. ADA ensures the right of individuals with disabilities to nondiscriminatory treatment in other aspects of their lives; it provides protections of civil rights in the specific areas of employment, transportation, public accommodations, state and local government, and telecommunications. For more detail on ADA's provisions, see https://www2.ed.gov/about/offices/list/ocr/docs/hq9805.html.

In the early 21st century, under the administration of President George W. Bush, the federal No Child Left Behind Act (NCLB) became a major factor in the focus of public schooling, including special education. NCLB was an attempt to improve the academic performance of all students, including those with disabilities. Under President Barack Obama, NCLB was succeeded in 2015 by the Elementary and Secondary Education Act (ESSA). An important element of ESSA is that of statewide assessments administered to all students. Schools are allowed to administer alternate assessments to 1% of all students to allow for the students with the most significant cognitive disabilities. However, some researchers and practitioners in special education have argued that this percentage is unreasonably low.

Pearson eText
Video Example 1.9
Haben Girma, who is a deaf-blind graduate of Harvard Law School, speaks at a celebration of the Americans with Disabilities Act. Girma punctuates her praise of the ADA by contrasting it with East Africa, from which her family emigrated to the United States.

https://www.youtube.com/watch?v=61HzFPs2LXQ

LITIGATION Laws have little or no effect on the lives of individuals with disabilities until litigation (lawsuits or court decisions) occurs and courts interpret exactly what the laws require in practice. Litigation has played a critical role in special education (see Yell, Crockett, et al., 2017; Yell, Katsiyannis, & Bradley, 2017). Primarily through the actions of parent and professional organizations, exceptional children have been getting their day in court more frequently since IDEA and related federal and state laws were passed.

In the early days of public education, school attendance was seen as a privilege that could be awarded to or withheld from an individual child at the discretion of local school officials. During the late 19th and early 20th centuries, the courts typically found that schools could exclude disruptive children or those with intellectual disabilities for the sake of preserving order, protecting the teacher's time from excessive demands, and sparing children the discomfort of seeing others with disabilities (Zelder, 1953).

Now, the old excuses for excluding students with disabilities from school are no longer valid. Today, the courts have determined school attendance as the right of every child, regardless of their disability. Litigation focuses now on ensuring that every child receives an education that is appropriate for their individual needs. Litigation may involve legal suits primarily filed for either of two reasons: (1) special education services aren't being provided for students whose parents believe their children deserve them or (2) students are being assigned to special education when their parents believe that the assignment is unwarranted.

Suits for special education have been brought primarily by parents whose children are unquestionably disabled and either are being denied any education at all or are being given very meager special services. The parents who file these suits believe that the advantages of

their children's identification for special education services clearly outweigh the disadvantages. Suits against special education have been brought primarily by parents of students who have mild or questionable disabilities and who are already attending school. These parents believe that their children are being stigmatized and discriminated against rather than helped by special education. Thus, the courts today are asked to make decisions in which individual students' characteristics are weighed against specific educational programs.

Parents want their children with disabilities to have a free public education that meets their needs but doesn't stigmatize them unnecessarily and that permits them to be taught in the general education classroom as much as possible. The laws governing education recognize parents' and students' rights to such an education. In the courts today, the burden of proof is ultimately on local and state education specialists, who must show in every instance that the student's abilities and disabilities have been completely and accurately assessed and that appropriate educational procedures are being employed. Much of the special education litigation has involved controversy over the use of intelligence (IQ) and other standardized testing to determine students' eligibility for special education. Although the debate about IQ tests has been acrimonious, some scholars have found that IQ scores themselves haven't been the primary means of classifying children as eligible for special education (MacMillan & Forness, 1998).

One historic court case of the 1980s deserves particular consideration. In 1982, the U.S. Supreme Court made its first interpretation of PL 94-142 (now IDEA) in *Hudson v. Rowley*, a case involving Amy Rowley, a child who was deaf (*Board of Education of Hendrick Hudson v. Rowley, 1982*). The Court's decision was that appropriate education for a deaf child with a disability does not necessarily mean education that will produce the maximum possible achievement. Amy's parents had contended that she might be able to learn more in school if she were provided with a sign language interpreter. But the Court decided that because the school had designed an individualized program of special services for Amy and she was achieving at or above the level of her nondisabled classmates, the school system had met its obligation under the law to provide an appropriate education. In fact, Amy's education proved to be successful in that she went on to coordinate the American Sign Language Program at California State University East Bay, where she is currently an associate professor in Modern Languages and Literature.

For decades, school districts have used the precedent set in the *Rowley* case concerning the necessary level of benefits a student must be provided; however, a case since then has increased the level of benefit districts need to provide students with disabilities to meet FAPE. In the case of *Endrew F. v. Douglas County School District (2017)*, the U.S. Supreme Court decided the following:

> When all is said and done, a student offered an educational program providing "merely more than de minimis" progress from year to year can hardly be said to have been offered an education at all.… The IDEA demands more. It requires an educational program reasonably calculated to enable a child to make progress appropriate in light of the child's circumstances. (580 U.S.—No. 15–827. Argued January 11, 2017—Decided March 22, 2017, p. 15).

It is still unclear what effect the Endrew F. case will have on future legal cases and educational practices. As one special education expert put it, IDEA cases are typically "ponderous" as they work their way through the legal system (Zirkel, 2018). As of May 2021, the best information indicates that, so far, the cases have not had much of an effect (Zirkel, 2021). However, there are sure to be more cases over several years.

What Might the Future Hold?

Learning Outcome 1.4 Consider what the future might hold for exceptional learners.

In this chapter, as well as each chapter hereafter, we're careful not to present an unquestioningly sanguine view of disability and special education. Many challenges remain. (As an example, see Focus On: Impact of the COVID-19 Pandemic on People with Disabilities.)

Focus On

Impact of the COVID-19 Pandemic on People with Disabilities

The COVID-19 pandemic that began in 2020 resulted in widespread societal, psychological, and economic consequences. Research suggests that its impact was even greater for individuals with disabilities, their families, and those professionals involved in their education, treatment, and care. To start with, some individuals with disabilities ran a greater risk of being infected by COVID-19. This was especially the case for those with Down syndrome. People with Down syndrome are prone to immune system dysregulation as well as upper respiratory infections. Because COVID-19 often results in acute respiratory disease (ARD), it's not surprising that people with Down syndrome would be at-risk for COVID-19 infection. In fact, researchers found individuals with Down syndrome were 4 times more likely to contract COVID-19 and 10 times more likely to die (Clift et al., 2021).

Besides their physical health, the population with disabilities faced myriad behavioral and psychological challenges due to the coronavirus. The research literature is replete with documentation of negative impacts incurred by children, adolescents, and adults from all categories of disabilities served by special education (Asbury et al., 2021). For example, in one study of adults from a variety of different disability categories, COVID-19 was correlated with a higher degree of stress, depression, anxiety, suicidal ideation, and substance abuse (Okoro et al., 2021). Those with cognitive disabilities were no doubt more vulnerable because of their reduced capacity to understand the reasons for restrictions and how to abide by them (Courtenay & Perera, 2020; Tromans et al., 2020). For school-age students with intellectual disabilities, virtual schooling, rather than in-person schooling, interfered with teaching daily living skills, which is largely dependent on hands-on instruction and modeling. For adults living in group homes, lockdowns and quarantines disrupted their daily routines. It is noteworthy that the pandemic not only affected the residents but also had an emotional impact on the staff (Embregts et al., 2021), with one large-scale study of 838 workers finding that one in four experienced moderate to severe emotional distress (Lunsky et al., 2021).

For students with emotional or behavioral disorders and some students with autism spectrum disorders, teachers and parents noted an increase in behavioral problems (Nunez et al., 2021). It was to be expected that the stress of dealing with disrupted routines and lack of consistent behavior management procedures would lead to a regression in the ability to control emotions and impulses. A good example of how the pandemic triggered particular vulnerabilities of individuals with autism spectrum disorders was the recommendation for individuals to wear masks. Considerable research indicates that people on the spectrum frequently have problems complying with medical or hygiene procedures (Cuvo, 2011). This tendency toward noncompliance, combined with their propensity to exhibit sensory idiosyncrasies, such as tactile sensitivity (Blakemore et al., 2006), was a formula for problems with face-mask compliance (Halbur et al., 2021; Lillie et al., 2021).

Although at the time of publication of this text it's too early to be certain, evidence thus far suggests that academic instruction for all students suffered during the COVID-19 pandemic (Kuhfeld et al., 2020). Furthermore, based on what we know from prior research about difficulties with remote instruction and learning, it's doubtful that these early academic indicators will be reversed (Garcia & Weiss, 2020). Online instruction resulted in lower rates of academic progress. Given that students without disabilities suffered academic repercussions, it's not surprising that students with reading, writing, and math disabilities, and so forth, would be disadvantaged by instruction without direct contact with the teacher. As we emphasize throughout the text, all students with disabilities, including those with academic learning disabilities, need relentless, intensive, systematic, and explicit instruction (Pullen & Hallahan, 2015), and such concentrated teaching is more difficult to deliver remotely than in person.

IEP meetings were also affected by scheduling complications. And related to this, for example, were the difficulties school psychologists faced in testing, in light of social distancing guidelines. Such restrictions presented challenges to complete valid and comprehensive diagnostic assessments (Krach et al., 2021).

Parents and families of individuals with disabilities were disrupted in many ways; parents of children receiving online instead of in-school instruction struggled with child-care issues while also monitoring their children's adherence to instruction via Zoom or other Internet platforms. Families of individuals in residential settings experienced disruptions to visiting their loved ones, among other things. Because of these increased challenges, family members reported an impact on their well-being and, in some cases, anxiety, depression, and stress (Chafouleas & Iovino, 2021; Paulauskaite et al., 2021; Rogers et al., 2021).

As of the publication of this textbook, the jury is still out on how long lasting the effects of the pandemic will be. For example, will any lost ground in academic achievement or learning of independent living skills be regained? Will any emotional distress that was created leave psychological scars that persist? Another possible outcome of COVID-19 is neurological damage, but it's too early to determine if it will occur (Roy et al., 2020). The common consequence of COVID-19 being acute respiratory disease (ARD) leaves those infected with the virus susceptible to central nervous system (CNS) dysfunction. This is supported by a considerable body of research documenting that ARD often results in central nervous system disorders (Sasannejad et al., 2019).

These very challenges, however, are what make special education a dynamic field—a field rewarding not only for researchers to study but also for teachers and other professionals to practice their craft. Personally, each of the textbook authors knows many teachers and other professionals devoted to bettering the lives of students with disabilities. Their devotion and the constant scientific advances arising from dedicated researchers are reasons to be optimistic about the future for people with disabilities.

Scientific Advances on Causal Factors of Disability

In the vast majority of cases, professionals are unable to identify the exact reason *why* an individual is exceptional, but researchers are making progress in determining the causes of some disabilities. Scientific advances focused on identifying the functional elements of the human genome sequence are resulting in a greater understanding of the role of genes in various disabling conditions. It's now possible to imagine a day when many genetically based disabilities can be reduced, if not eliminated. Physicians can now perform surgery to correct some identifiable defects on a fetus before birth (in utero), completely avoiding some conditions, such as **hydrocephalus** (an accumulation of fluid around the brain that can cause mental or physical disabilities if not corrected). Before long, research might lead to the ability to grow new organs from tissues taken from an individual or from stem cells, perhaps allowing replacement of a poorly functioning lung, pancreas, or other internal organ and avoidance of the associated physical disabilities. Advances in reproductive technology also hold promise for preventing many disabilities.

Research on environmental toxins holds promise for discovering their role in contributing to autism spectrum disorders and other neurologically based disabling conditions (Cole et al., 2020; Rahbar et al., 2020). In general, humans can be exposed to neurotoxins either by the food they eat or by the air they breathe. And the exposure can occur prenatally or in the first few years of life, when the brain is in the earliest stages of development. Some of the food contaminants implicated are heavy metals such as lead, mercury, arsenic, and cadmium, as well as polychlorinated biphenyls (PCBs). The neurotoxic air pollutants are particulate matter, such as smog, cement dust, and fly ash, and aerosols.

Great strides are also being made in the area of brain–computer interface (BCI) technology. Research funded by the National Institutes of Health's Brain Research Through Advancing Innovative Neurotechnologies® (BRAIN) Initiative as well as the National Institute of Neurological Disorders and Stroke (NINDS) and the National Institute on Deafness and Other Communication Disorders (NIDCD) has demonstrated that a person paralyzed from the neck down can communicate thoughts via a computer–brain connection (Willett et al., 2021). The research was based on the premise that although a person might not be able to move hands or arms to write, the brain still produces similar signals related to the intended movement. Thus, with electrodes implanted in the brain, an individual can produce words on a computer screen by thinking about making the handwriting movements to produce those words.

Scientific Advances in Learning and Teaching

Over the past several years, research has been accumulating on the most promising methods and strategies for teaching students with disabilities (McCleskey et al., 2017). This body of research is often referred to as documenting evidence-based practices (EBPs) or high-leverage practices (HLPs). These practices refer to teaching procedures that several independent teams of researchers have found to lead to positive outcomes for students with disabilities. For example, one such practice is that of explicit instruction—explaining skills and concepts in a clear and direct manner and providing a clear explanation or model of the skill or concept (Pullen & Hallahan, 2015).

Several individuals and organizations have devoted resources to collecting and updating lists of EBPs/HLPs, with the prominent website being the High-Leverage Practices for Students with Disabilities (https://highleveragepractices.org/). A collaboration between the Council for Exceptional Children and the CEEDAR (Collaboration for

Effective Educator Development, Accountability, and Reform) Center at the University of Florida offers information, including videos, on 22 HLPs grouped into four categories: collaboration, assessment, social/emotional/behavioral, instruction. Two other websites that provide information on EBPs are the National Center on Intensive Intervention (https://intensiveintervention.org/tools-charts/levels-intervention-evidence) and the Iris Center (https://iris.peabody.vanderbilt.edu/resources/ebp_summaries/).

One Final Point

We all must learn to live with disabling exceptionalities, whether our own or those of others, but we must never accept them. We prefer to think there is hope for the eventual eradication of many of the disabling forms of exceptionality. In addition, we believe that it is of paramount importance to realize that even individuals whose exceptionalities are extreme can be helped to lead fuller lives than would be possible without appropriate education.

Summary

How can we get oriented to exceptionality and special education?

- Exceptionality involves similarities and differences.
- Reasons for optimism include better treatment and education, medical breakthroughs, and prevention.
- Abilities as well as disabilities must be recognized.
- A disability is an inability to do something; a handicap is a limitation that is imposed on someone.
- Not all inabilities are disabilities; a disability is an inability to do something that most people, with typical maturation, opportunity, or instruction, can do.

What is the educational definition of *exceptional learners*?

- Exceptional learners are those who require special education services to reach their full potential.
- Many individuals with disabilities require special education services, but some do not.

What is the prevalence of exceptional learners?

- About 1 student in every 10 (9.5% of the population between 6 and 21 years of age) is identified as exceptional for special education purposes.
- Some categories of disability are considered high incidence because they are found relatively frequently (e.g., learning disabilities, communication disorders, emotional or behavioral disorders).
- Some categories of disability are considered low incidence because they occur relatively rarely (e.g., blindness, deafness, deaf-blindness).

Moodboard/Brand X Pictures/Getty Images

What is the definition of *special education*?

- *Special education* means specially designed instruction that meets the unusual needs of an exceptional student. It may include special materials, teaching techniques, or equipment and/or facilities.
- The trend is toward placement in environments closest to the general education classroom in format, especially for younger children.

What are the history and origins of special education?

- Special education became common in institutions and in major cities' public education systems in the 19th century.
- Physicians and psychologists played important roles in the early formation of special education.
- The Council for Exceptional Children (CEC) and many important parent and professional organizations were formed in the 20th century.

What legislation and litigation have affected special education?

- The primary federal law affecting special education is the Individuals with Disabilities Education Act (IDEA), enacted in the 1970s and reauthorized by the U.S. Congress in 2004.
- Also important is the Americans with Disabilities Act (ADA), which prohibits discrimination against persons with disabilities in employment and communications.
- In the 21st century, the No Child Left Behind Act (NCLB) also was important in the education of exceptional learners.
- Lawsuits (litigation) have added to interpretation of the meaning and application of the law.
- Some parents sue because they want their children with unquestionable disabilities to be identified for special education and provided services or because they want them placed in more specialized environments. Others sue because they feel their children have been incorrectly identified for special education or because they want to have them educated in less atypical situations.

What is our perspective on the progress of special education?

- Special education has made great progress, but making it better is a continuing struggle.
- The COVID-19 pandemic had negative consequences for children with disabilities, their families, and the professionals who work on their behalf. As of publication of this textbook, it's too early to tell how long the effects will last and whether they can be ameliorated.

Internet Resources

Pertinent Organizations

- The major professional organization for practitioners, policymakers, and researchers in special education, with about 40,000 members, is the Council for Exceptional Children (CEC) (https://exceptionalchildren.org/). CEC is made up of 17 divisions, each covering a different aspect of special education:
  - Division for Learning Disabilities, https://www.teachingld.org/
  - Division on Autism and Developmental Disabilities, http://www.daddcec.com/
  - Council of Administrators of Special Education, https://www.casecec.org/
  - Division for Culturally and Linguistically Diverse Exceptional Learners, https://ddel.exceptionalchildren.org/
  - Council for Children with Behavior Disorders, https://debh.exceptionalchildren.org/
  - Division for Physical Health and Multiple Disabilities, https://ccc.exceptionalchildren.org/
  - Division for Research, https://cecdr.org/
  - Pioneers Division, https://cecpioneers.exceptionalchildren.org/
  - Council for Educational Diagnostic Services, https://ceds.exceptionalchildren.org/
  - Division of Visual and Performing Arts, https://darts.exceptionalchildren.org/
  - Division for Communication, Language, and Deaf/Hard of Hearing, https://dcdcec.org/
  - Division on Career Development and Transition, https://dcdt.org/
  - Division for Early Childhood, https://www.dec-sped.org/
  - Division of International Special Education and Services, http://www.dises-cec.org/
  - Division on Visual Impairments and Deaf/Blindness, https://dvidb.exceptionalchildren.org/
  - Innovations in Special Education Technology Division, https://www.isetcec.org/
  - The Association for the Gifted, https://cectag.com/
  - Teacher Education Division, https://tedcec.org/

Chapter 2

Current Practices for Meeting the Needs of Exceptional Learners

Jim West/Alamy Stock Photo

Learning Outcomes

By the end of this chapter, you will:

2.1 Understand how students are evaluated and identified for special education services, including the use of response to intervention (RTI) and multitiered systems of support (MTSS).

2.2 Learn about the intent of special education law as it pertains to individualized education programs (IEPs), individualized family service plans (IFSPs), and transition plans for adolescents with disabilities.

2.3 Learn about the various placement options and how they relate to least restrictive environment (LRE), inclusion of students with disabilities, and implementing inclusive teaching practices.

2.4 Learn about the roles of general education teachers and special education teachers and how they complement each other.

Misconceptions About

Learners with Disabilities

Myth There is now a universally accepted model of response to intervention (RTI), which research has shown to be effective for instructing students with disabilities.

Fact When implemented with fidelity on a small scale, RTI can lead to positive outcomes in achievement. However, wide variability is found in how RTI is implemented, and this variation has contributed to the fact that minimal research exists when RTI is implemented on a large scale, e.g., statewide or across several states.

Myth RTI is a proven method of identifying students with learning disabilities.

Fact Research on its use of identification is mixed. Several researchers have pointed to technical issues and assert that it should be used only as a model for *instruction* and *prevention* of disabilities or the need for specialized services.

Myth The concept of least restrictive environment (LRE) demands that all students with disabilities be educated in the general education classroom.

Fact LRE means that students are to be educated in the least separate setting given the student's individual learning, behavioral, and physical needs. The LRE means the most enabling environment for the student.

Myth Research has established beyond a doubt that special classes are ineffective and that inclusion is effective.

Fact Research comparing special versus general education placement is inconclusive because most of these studies have been methodologically flawed. Researchers are now focusing on finding ways to make inclusion work more effectively.

Myth Co-teaching (special education and general education teachers working together in the general education classroom) has a strong research base.

Fact Co-teaching can be successful, but it's a complicated model, and much research still needs to be done to determine how best to make it generally effective.

Myth All professionals agree that technology should be used to its fullest to aid people with disabilities.

Fact Some believe that technology should be used cautiously because it can lead people with disabilities to become too dependent on it. Some professionals believe that people with disabilities can be tempted to rely on technology instead of developing their own abilities. Many people with disabilities choose not to use technology for varying reasons. Honoring their wishes reinforces their self-efficacy.

Guiding Questions

- How are students with exceptionalities evaluated and identified for special education services in school settings?
- How is the intent of special education law implemented in individualized education for students with disabilities?
- What are the various placement options for exceptional learners?
- What are some ways that teachers implement inclusionary practices?
- What are the current practices in collaboration between general and special educators?
- What are the roles of general and special educators in providing exceptional learners an individualized education program?
- What are the trends and issues in universal design?
- What are the current strategies in the use of technologies?
- What are our concluding thoughts about providing services to exceptional learners?

Special education has a rich history of controversy and change. Controversy and change make teaching and studying disabilities challenging and exciting. The history of special education, described briefly in Chapter 1, is replete with unexpected twists and turns. Many developments in the past have had unanticipated consequences, and many of today's events and conditions will have consequences that we don't foresee.

Dramatic changes have occurred during the first two decades of the 21st century, and more changes will undoubtedly follow. One critical issue in special education today is the identification of students for special education services, particularly in the area of specific learning disabilities. The long-term debate over methods of identification resulted in response to intervention (RTI), an approach to identifying students with learning disabilities, which has captured the attention of researchers and practitioners alike. Multitiered systems of support (MTSS) models are currently used either instead of, or in conjunction with, RTI models. And now, debate over their efficacy exists. The movement toward antiracist practices in school settings is increasingly in the forefront of education generally, and special education specifically—a topic we will address throughout each chapter and examine more deeply in Chapter 3. In this chapter we explore the major trends in providing services to exceptional learners as well as the significant issues in responding to the needs of individuals with disabilities. Although it has been more than a decade since the Individuals with Disabilities Education Act was reauthorized, practices have shifted based on case law and research on how best to identify, teach, and assess the progress of exceptional learners.

Evaluation and Identification of Exceptional Learners

Learning Outcome 2.1 Understand how students are evaluated and identified for special education services, including the use of response to intervention (RTI) and multitiered systems of support (MTSS).

Although the landscape of special education has changed dramatically since the passage of PL 94-142: The Education for All Handicapped Children Act, one issue has remained constant. In 1975, the intent of the original law was the same as the intent today: to ensure that all children with disabilities receive a free appropriate public education (FAPE). The mandate requires that students with disabilities be provided specially designed instruction and services to meet their unique and individual needs (Yell, 2019). Furthermore,

Focus On

IDEA Requirements for Special Education Identification

Child Find

This is a requirement for states to identify and evaluate all children who may have a disability. It is each state's obligation to have a reasonable plan to locate children in the state even if they do not attend public schools (e.g., private schools, homeless, home-schooled). Once identified using "child find" strategies, the child is referred for special education evaluation.

Referral

School personnel, most likely the general education teacher, or a parent may make the referral or request for evaluation. The parents must give consent (verbal or written) before a child is evaluated.

Evaluation

Within 60 days of parental consent, the district must provide a full evaluation of the child in the areas of concern. Under IDEA, consent for evaluation does not mean consent for placement. The results of the evaluation help to determine the student's eligibility for special education and related services.

Eligibility Determination

To determine whether a student is eligible for services, a multidisciplinary team meets to determine (a) if the student has a disability, and (b) if as a result of the disability he or she needs special education or related services. If parents disagree with the decision, they may seek an outside evaluation.

the services must be provided in an appropriate educational setting that maximizes their potential—the least restrictive environment (LRE). Before the individualized services are identified, and the appropriate setting is selected, schools must first employ effective practices in identifying exceptional learners. A longstanding debate continues on how to best identify students who are exceptional learners. Regardless of the method of identification, the federal law requires that specific steps be followed in the process. The special feature Focus On: IDEA Requirements for Special Education Identification provides a summary of these steps.

Prereferral Interventions and Multidisciplinary Teams

The determination of eligibility for special education services has lifelong implications for students with disabilities. Consider the consequences for a student who is not provided appropriate, thoughtful interventions before a full evaluation is conducted. A student may be performing below expected levels of performance for a variety of reasons; it doesn't necessarily mean that the student has a disability. **Prereferral** interventions developed by a **multidisciplinary team** may help prevent an inaccurate placement in special education. The purpose of prereferral interventions is to ensure that students receive evidence-based instruction before they are evaluated for special education. Typically, when a teacher observes that a child is struggling in school, a multidisciplinary team (e.g., the student's parents or guardian, a special education teacher, the student's general education teacher, counselor, administrators, school psychologist) is convened to identify alternative, evidence-based educational strategies for the student before making a referral for special education evaluation. The team reviews the information about the student and develops a plan for prereferral interventions that are implemented before a formal evaluation is conducted. If the student continues to struggle, the student is referred for a full evaluation to determine eligibility for special education.

Although some variation of a prereferral process has been followed in schools for many years, since the passage of IDEA 2004, many states have followed a more systematic method of prereferral called response to intervention (RTI), particularly for identifying students with learning disabilities. Distinctions of RTI from earlier prereferral processes include universal screening, evidence-based interventions, multiple tiers of intervention that are increasingly more intense, frequent progress monitoring, and fidelity of implementation (Mellard & Johnson, 2008; Zirkel, 2011).

Response to Intervention and Multitiered Systems of Support

In the most recent reauthorization of the Individuals with Disabilities Education Act (IDEA), Congress included an additional option for determining eligibility for special education in the case of suspected learning disabilities that forces varying levels of support in general education before referral to special education. The regulations state: "in determining whether a child has a specific learning disability, states may rely on a process that determines whether the child responds to scientific, research-based intervention as a part of the evaluation." In practice, this concept has been termed **response to intervention (RTI)**.

WHAT IS RTI? Response to intervention refers to a student's change (or lack of change) in academic performance or behavior as a result of instruction (Duhon et al., 2009; Fuchs et al., 2003; O'Connor et al., 2017). In an RTI identification model, a student must first receive quality instruction in the general education classroom before being given a formal evaluation for special education services. Teachers gather data to determine whether the student is benefiting from that instruction. Only after educators determine that a student is nonresponsive to quality, research-based instruction by a general educator would a formal evaluation to special education occur.

RTI is usually associated with learning disabilities and academic learning. However, it has implications for students with any disability and is not confined to academic learning, but can be applied to social behavior as well (Cheney et al., 2008; Fairbanks et al., 2007; Kauffman, 2014). Practitioners have applied various RTI approaches for students with disabilities, including emotional and behavioral disorders, intellectual disabilities, autism, and giftedness.

MULTITIERED MODEL FOR PREVENTION The RTI approach is based on a multitiered model of prevention. No model is universally accepted; however, RTI typically provides for three progressively more intensive tiers of instruction for students who are experiencing difficulties (Fuchs et al., 2012; Mercer et al., 2011). Generally, Tier 1 includes universal screening to identify students who may be at risk of academic failure; implementation of quality, research-based instruction; and weekly monitoring of student progress (Fuchs et al., 2010; Silberglitt et al., 2016). The teacher monitors the student's progress in the curriculum and in relation to peers and provides differentiated instruction. If the student's achievement improves, no other action is taken. If the student's performance doesn't improve, the student moves to Tier 2. In Tier 2, the student usually receives small-group instruction by a teacher or highly trained assistant three to four times per week with a research-validated program in the areas of difficulty (e.g., reading or writing). Tier 2 interventions should take place for approximately 6 to 8 weeks. If the student's performance doesn't improve at this level, a multidisciplinary team is convened to determine whether a student has a disability and therefore qualifies for Tier 3, which is special education. Tier 3 includes more intensive intervention provided by a special educator in an appropriate placement to be determined by the student's individualized education program (discussed later in this chapter). Figure 2.1 illustrates how instruction and possible placement in special education is facilitated in an RTI framework.

ASSESSMENT PRACTICES IN AN RTI MODEL The basic purposes of assessment in an RTI model are to identify students who may be at increased risk of school failure and to collect data to determine the effectiveness of instruction so that appropriate instructional decisions can be made (Mercer et al., 2011). The two most common forms of assessment in an RTI process are screening and progress monitoring.

Teachers or school psychologists use **screening instruments** to identify those students who may be at increased risk of school failure. Screening instruments are typically administered to an entire group of students and may be given to a large number of students in a short period of time. School personnel use results of the screening administrations to identify students for whom additional progress monitoring and Tier 2 instruction are required.