CLASSROOM SUGGESTIONS Accommodations

Realistic Reflections

Classroom Examples

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Realistic Reflections

Exceptional Students

Fourth Edition

Preparing Teachers for the 21st Century

Lydia R. Smiley
Florida Atlantic University

Stephen B. Richards
West Liberty University

Ronald L. Taylor
Florida Atlantic University

EXCEPTIONAL STUDENTS: PREPARING TEACHERS FOR THE 21ST CENTURY, FOURTH EDITION

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About the Authors

Lydia R. Smiley, Ph.D. retired as a professor of Exceptional Student Education at Florida Atlantic University in 2012. She received her doctorate in Special Education from Georgia State University. Dr. Smiley coauthored *Language Delays and Disorders: From Research to Practice* (1998) and has also written several articles and chapters on a variety of topics. She taught both undergraduate and graduate classes and was the recipient of several teaching awards and the CLD Professional of the Year Award. Her current interests are in methods of teaching students with mild/moderate disabilities and language disorders.


Courtesy of Lydia Smiley

Stephen B. Richards is Associate Professor of Education at West Liberty University in West Virginia. He currently teaches in the undergraduate special education certificate program at West Liberty University, a regional comprehensive university in West Virginia's northern panhandle. He received his doctorate in Special Education from Florida Atlantic University. He has coauthored three textbooks, *Intellectual/Cognitive Disabilities: Historical Perspectives, Current Practices, and Future Directions* (2015), *Collaboration Among Professionals, Students, Families, and Communities* (2016), and *Single Subject Research and Design: Applications in Educational Settings* (2019, 3rd ed.), in addition to journal articles on a variety of topics. His current interests are in assessing the preparation of preservice teacher education candidates for their first year in teaching.


Courtesy of Stephen Richards

Ronald L. Taylor, Ed.D. was a professor of Exceptional Student Education at Florida Atlantic University. He received his bachelor's and master's degrees in psychology at Austin College and Trinity University. He received his doctorate in Special Education from the University of Houston. Prior to coming to Florida Atlantic University, Dr. Taylor was a school psychologist and consulting teacher for a Title III grant that focused on working with culturally diverse students. He also served on the faculty in Special Education at Boston University. Dr. Taylor published extensively, including nine books (21 counting various editions) and over 20 chapters and 90 articles. He received over 2 million dollars in grant funding. He was active in several professional organizations, having made over 60 presentations, and was editor of *Diagnostique,* the journal for the assessment division of the Council for Exceptional Children.


Courtesy of Ronald Taylor

Brief Contents

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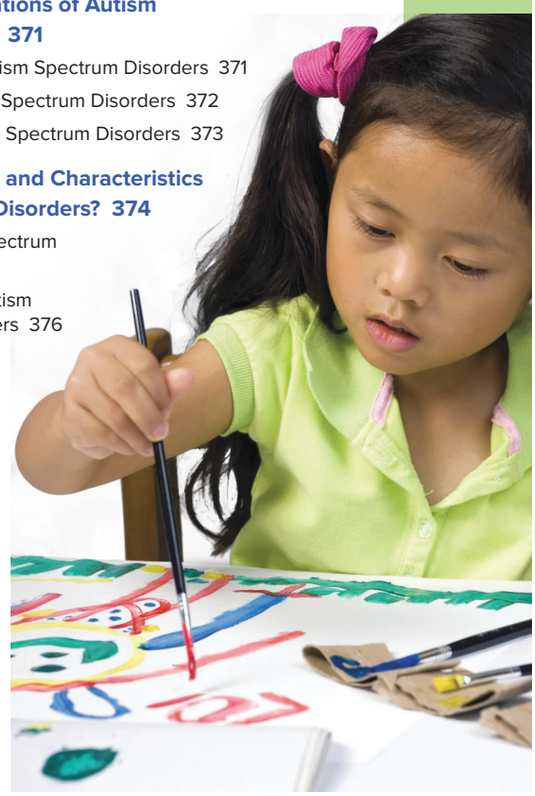

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PART FOUR Other Exceptionalities: Foundations and Instruction

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Preface

We are excited to offer you the fourth edition of *Exceptional Students: Preparing Teachers for the 21st Century.* The field of education has evolved into one that requires collaboration among families, communities, and schools. Within schools, special and general educators must collaborate to be effective and efficient in teaching and responding to the demands of new standards, statewide assessments, and calls for education reform. In this fourth edition of *Exceptional Students: Preparing Teachers for the 21st Century*, we have refined and updated our content to reflect the role of the special educator while continuing to address the role of the general educator in serving special populations.

The fourth edition includes updated references and photographs, changes to the content emphases and discussions to reflect current thought and practice, and additions/deletions of tables and figures to also reflect current thought. The following section, New Additions to the Fourth Edition, outlines more specifics. We would like to stress that this text includes information from *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (*DSM–5*), the latest from the American Association on Intellectual and Developmental Disabilities (AAIDD), and other important publications and references that define and influence the field of special education. We are grateful to the instructors and students who have given us their feedback on the text. Their classroom experiences inspired suggested refinements that we incorporated throughout the fourth edition. Case studies have been updated as needed to reflect current practices.

New Additions to the Fourth Edition

Each chapter of the book has been rewritten and revised to reflect current research. References and photographs have been updated throughout. The content has been refined for clarity and consistency. Case studies have been updated as needed to reflect current practices.

Chapter 1: New research and figures reflect the 41st Annual Report to Congress on Individuals with Disabilities Education Act (IDEA). Content has been updated to reflect trends in 21st century schools.

Chapter 2: Content has been reorganized slightly to reflect multitiered system of supports and response to intervention research. Content regarding laws has been updated to reflect the Every Student Succeeds Act.

Chapter 3: Person-centered planning information has been updated to reflect current practice. The co-teaching models have been revised and updated to reflect current practice. The interagency agreement section has been removed to more closely match the actual practice of most teachers. Working with families content has been updated.

Chapter 4: Information on instructional practices has been expanded a bit to reflect the emphasis on STEM programs. The practices section has also been updated to reflect the ever-increasing focus on access to the general education curriculum.

Chapter 5: The terminology has been changed to *intellectual disabilities* from mental retardation (except as when historically appropriate). The definition and identification procedures have been changed to reflect the AAIDD's most recent publications. The supports model of service delivery has been updated as well. The preventive measures section now reflects more current thinking in the field. The academic content and instructional technology sections have been expanded to reflect the more current focus on inclusion while maintaining the need for functional skills and community-based instruction.

Chapter 6: The definition and identification procedures have been changed to reflect the *DSM-5* revisions and a more current focus on evaluation. The instructional procedures sections have been updated.

Chapter 7: The content has been updated to reflect the changes in delivery of services options.

Chapter 8: The characteristics information has been updated to reflect more recent research. The environmental arrangements section has also been updated. There have been updates to the historical information and perspectives.

Chapter 9: Both the national agenda and expanded core curriculum information include more recent changes. The assessment section has been updated to include current practice. The assistive technology section has been updated with outdated material deleted.

Chapter 10: The Individualized Health Care plans section has been revised to better reflect current practice.

Chapter 11: All of the foundation section has been rewritten to reflect changes made in the *DSM-5.* Outdated tables also have been deleted to reflect these changes. The practices section has been updated to reflect more emphasis on accessing the general education curriculum. Instructional technology has been updated and expanded.

Chapter 12: In general, the overall coverage in this chapter has been reduced to better reflect reviewers' preferences. The levels of support discussion have been updated to reflect the new AAIDD publications. The table on various syndromes has been deleted, and readers are referred to the National Institutes of Health (NIH) website for detailed information of medical conditions and syndromes. Accessing the general education curriculum discussion has been revised and updated. Information on alternative assessments has been minimized, as the procedures vary from state to state.

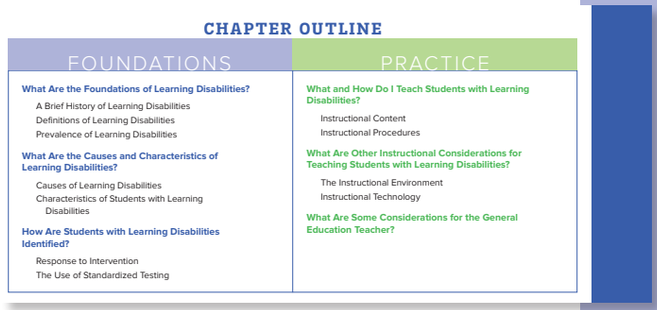
Chapter 13: All prevalence and risk factors statistics have been updated to reflect newer definitions and trends. Assessment tools have been updated. Information that was duplicative has been removed. The skills in early literacy identified by the National Early Literacy Panel (NELP), which have replaced the National Reading Panel skills as the areas on which to focus with this age group, are discussed.

Chapter 14: The definition section and tables in the foundations section have incorporated the changes made in the *DSM-5.* The instructional procedures sections have been updated.

Chapter 15: Schoolwide Enrichment Model (SEM) material has been added to expand coverage of research on gifted and talented students. Bloom's Taxonomy has been updated to the newer revision.

An Emphasis on What Teachers *Need to Know* and *Be Able to Do*

The new edition of *Exceptional Students* provides balanced coverage of the foundations of exceptionalities that future teachers *need to know* to understand their students and responsibilities, and the practical information they need to effectively teach their students. Although the general topics addressed are similar to those of other textbooks, coverage of these topics is enhanced within each chapter of *Exceptional Students,* fourth edition.


CHAPTER OUTLINE

FOUNDATIONS

What Are the Foundations of Learning Disabilities?
- A Brief History of Learning Disabilities
- Definitions of Learning Disabilities
- Prevalence of Learning Disabilities

What Are the Causes and Characteristics of Learning Disabilities?
- Causes of Learning Disabilities
- Characteristics of Students with Learning Disabilities

How Are Students with Learning Disabilities Identified?
- Response to Intervention
- The Use of Standardized Testing

PRACTICE

What and How Do I Teach Students with Learning Disabilities?
- Instructional Content
- Instructional Procedures

What Are Other Instructional Considerations for Teaching Students with Learning Disabilities?
- The Instructional Environment
- Instructional Technology

What Are Some Considerations for the General Education Teacher?

Coverage of practical information related to instructional content, instructional procedures, the instructional environment, and instructional technology has been expanded from its traditional treatment so that each chapter provides equal amounts of foundational and practical material. In addition, two topics crucial for future teachers to understand in order to best support their students—collaboration and students at risk—are stand-alone chapters.

Foundational Information for Understanding Exceptionalities

The first half of each exceptionality chapter is devoted to the foundational information about exceptionalities that future teachers need to know. This section discusses the history, definitions, prevalence, causes, characteristics, and identification procedures of the specific exceptionality. Devoting the first half of the chapter to foundational content provides future teachers with the groundwork they will need to make informed instructional decisions in the classroom.

Foundational coverage is also highlighted through the *An Important Event* feature, which presents a key event or the publication of seminal research that has helped shape special education today. Reflection questions, designed to help students consider their opinion or the importance of the event, accompany each discussion. Examples of important events include the founding of the Council for Exceptional Children, publication of Wang and Birch's proposal for the use of the Adaptive Learning Environment Model, and publication of the results of the Carolina Abecedarian Project. Even though *Exceptional Students* emphasizes practical applications, we believe it is vital for students to understand how special education has evolved and to consider their place in its continuing development. Foundational content also supports teacher education candidates in passing state licensure exams.

Practical Information to Guide Classroom Planning and Instruction

The second half of each exceptionality chapter provides instructional and pedagogical information future teachers need to know to effectively teach students. This part of the chapter is organized around instructional content, instructional procedures, the instructional environment, and instructional technology, as well as specific considerations for the general education teacher. In addition, the general education section introduces topics that are important when planning and implementing instruction for students with special needs within the general education classroom. Practical strategies are also highlighted in the following features:

INTRODUCING ALLISON

Allison is a 6-year-old girl who has just started the first grade. She has a hearing loss resulting from repeated and severe ear infections in infancy and throughout her early childhood. The infections resulted in a bilateral conductive hearing loss. Her loss is mild to moderate—she does not hear clearly until sounds reach a 40 decibel level. She experiences this hearing loss across all frequencies of sound detectable by the human ear. Prior to entering school, Allison received early intervention services at home from an audiologist and early childhood special educator. Because of her frequent illnesses, she only sporadically attended a center-based preschool program. With time, medical interventions greatly reduced the infections and their severity.

Allison uses hearing aids that make it possible for her to learn using her auditory channel. Her speech and language skills are delayed, likely the result of not hearing adequately in early childhood. Her parents are concerned about her literacy skills development as she begins school. Because she qualified for early intervention, the school and Allison's parents developed an IEP for her. She receives speech and language services regularly. An itinerant teacher for students who are deaf or hard of hearing provides consultation to her general education teacher. The team did not feel they should "pull out" Allison for resource room services if her literacy skills, which will be monitored and assessed frequently, can be developed in her general education class. Also, an audiologist will provide consultation to Allison's parents, teachers, and speech and language pathologist to ensure her hearing aids are working properly, are being maintained, and are being used as effectively as possible. ■

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Chapter-opening Case Study and *Revisit* Opportunities

Each chapter begins with a scenario describing a student with special needs in the context of his or her educational experience. Throughout the chapter, readers are presented with related questions called *Revisits*, which ask students to apply key concepts they have just learned to an actual situation.

These cases tie the chapter together, allow for contextual learning, and offer an instructor several additional topics for discussion. For example, in Chapter 8, the reader is introduced to Allison, a student with a hearing loss. Later in the chapter, the reader is asked whether Allison would be considered deaf or hard of hearing, what issues she might have with her identity, and how her teacher might plan for accommodations during literacy instruction.

Classroom Suggestions

As in the previous editions, the emphasis on practical classroom suggestions and strategies is maintained. Each chapter includes several *Classroom Suggestions* with strategies and tips. These clear, concise strategies serve as mini-guides for future teachers, giving them confidence to enter their classrooms ready to handle myriad situations. Examples of *Classroom Suggestions* include Strategies to Promote Family Involvement, Guidelines for Implementing Cooperative Learning, Examples of Instructional Grouping Accommodations for Students with Intellectual Disabilities, and Accommodations for a Student Who Has Difficulty with Self-Control.

Classroom Suggestion Tips for Software Selection

When selecting software, make sure:

- ❑ Content is free of gender, cultural, and racial stereotypes.
- ❑ Content is interesting, engaging, and encourages exploration and imagination.
- ❑ Activities require decision making and judgments.
- ❑ It has a high degree of interactivity.
- ❑ The screen is not cluttered. The less clutter on the screen, the better.
- ❑ Procedures and goals match those being taught in school.
- ❑ Directions are simple to read or have images or speech to guide use.
- ❑ Software is modifiable (e.g., speed, quantity of problems, levels).
- ❑ Programs contain more than one activity.
- ❑ There are small increments between levels.
- ❑ Only a limited number of incorrect responses are allowed per problem.
- ❑ There are built-in instructional aids (e.g., virtual manipulatives in math).
- ❑ There are minimal keyboard skill requirements and easy-to-understand icons.
- ❑ There are praise and helpful feedback provisions.
- ❑ It has a built-in review.
- ❑ Real-life solutions are simulated.
- ❑ It has good record-keeping capabilities.

And

- ❑ Remember software is a learning tool—not the total solution!

Source: Lee (1987), Babbitt (1999), and Hutinger and Johanson (1998).

Classroom Examples

The fourth edition of *Exceptional Students* continues to include classroom artifacts and sample handouts of real and relevant student and teacher work. For example, the text shares a sample Team-Teaching plan, a Contingency Contract, and a Social Story with picture cues to assist with waiting in line in the cafeteria.

Classroom Example Mnemonic Strategy for Teaching Students to Write a Friendly Letter

Purpose: To aid students in writing a friendly letter.

Population: Elementary

LETTER

Let my friend know the date and my greeting.

Express my thoughts and ideas in the letter.

Terminate with a closing and my name.

Take time to reread.

Edit and rewrite if necessary.

Realize that I can write a good letter.

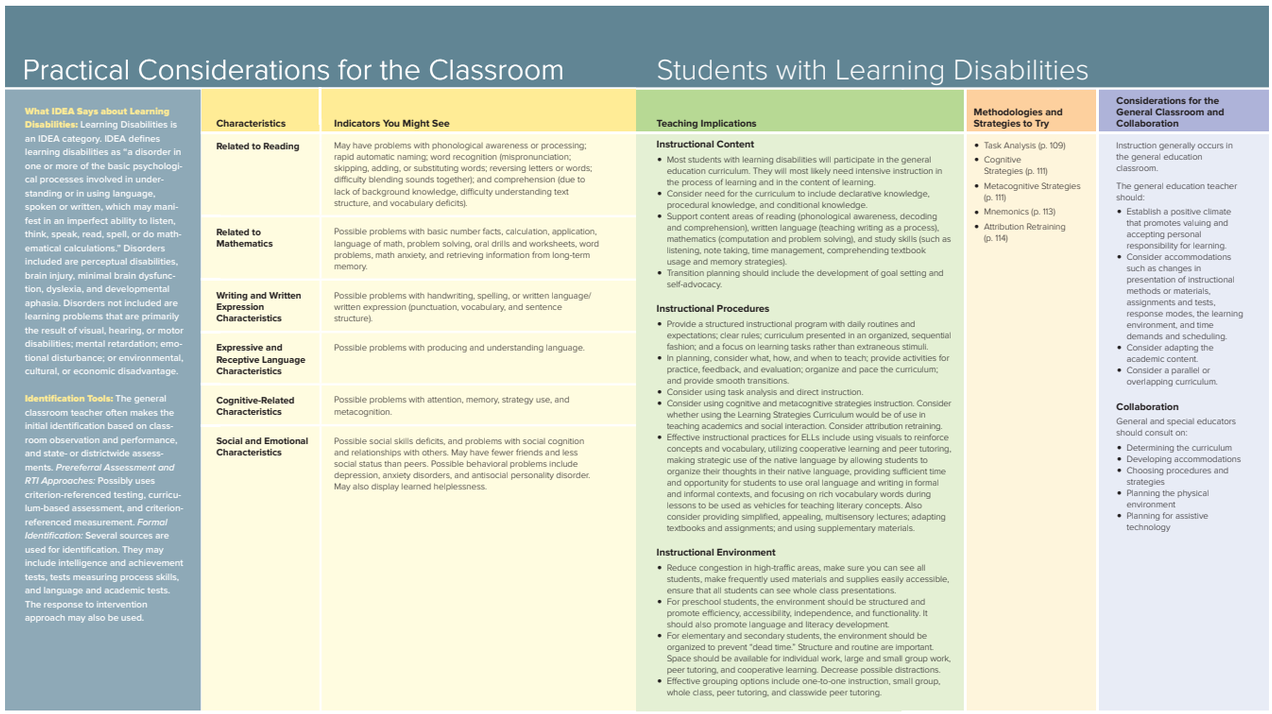
Source: Adapted from Ellen Karger (1998), South Florida teacher of students with learning disabilities.

Practical Considerations for the Classroom

Concluding each chapter, *Practical Considerations for the Classroom: A Reference for Teachers* provides an at-a-glance practical summary the future teacher can take into the classroom. Sections of the feature include What IDEA Says about the Specific Exceptionality, Identification Tools, Characteristics, Indicators You Might See, Teaching Implications, Methodologies and Strategies to Try, Considerations for the General Classroom, and Collaboration. Again, understanding the principles of planning, implementing, and delivering special education and related services is vital to passing state licensure exams.

Coverage of Collaboration

We strongly believe that helping our future teachers to be part of a collaborative team will result in a better educational experience for the exceptional student, the general education teacher, and the special education teacher. We have continued to devote a complete chapter to collaboration and have updated the section on co-teaching in particular. The chapter provides an introduction to collaboration including its history and key concepts and the roles of different team members. It also explores best practices in collaboration among schools and families, between school personnel, and between schools and communities. In addition, we've integrated issues of collaboration in individual chapters where relevant.



Practical Considerations for the Classroom — Students with Learning Disabilities

What IDEA Says about Learning Disabilities: Learning Disabilities is an IDEA category. IDEA defines learning disabilities as "a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest in an imperfect ability to listen, think, speak, read, spell, or do mathematical calculations." Disorders included are perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. Disorders not included are learning problems that are primarily the result of visual, hearing, or motor disabilities; mental retardation; emotional disturbance; or environmental, cultural, or economic disadvantage.

Identification Tools: The general classroom teacher often makes the initial identification based on classroom observation and performance, and state- or districtwide assessments. *Prereferral Assessment and RTI Approaches:* Possibly uses criterion-referenced testing, curriculum-based assessment, and criterion-referenced measurement. *Formal Identification:* Several sources are used for identification. They may include intelligence and achievement tests, tests measuring process skills, and language and academic tests. The response to intervention approach may also be used.

Characteristics	Indicators You Might See
Related to Reading	May have problems with phonological awareness or processing; rapid automatic naming; word recognition (mispronunciation; skipping, adding, or substituting words; reversing letters or words; difficulty blending sounds together); and comprehension (due to lack of background knowledge, difficulty understanding text structure, and vocabulary deficits).
Related to Mathematics	Possible problems with basic number facts, calculation, application, language of math, problem solving, oral drills and worksheets, word problems, math anxiety, and retrieving information from long-term memory.
Writing and Written Expression Characteristics	Possible problems with handwriting, spelling, or written language/written expression (punctuation, vocabulary, and sentence structure).
Expressive and Receptive Language Characteristics	Possible problems with producing and understanding language.
Cognitive-Related Characteristics	Possible problems with attention, memory, strategy use, and metacognition.
Social and Emotional Characteristics	Possible social skills deficits, and problems with social cognition and relationships with others. May have fewer friends and less social status than peers. Possible behavioral problems include depression, anxiety disorders, and antisocial personality disorder. May also display learned helplessness.

Teaching Implications

Instructional Content

- Most students with learning disabilities will participate in the general education curriculum. They will most likely need intensive instruction in the process of learning and in the content of learning.
- Consider need for the curriculum to include declarative knowledge, procedural knowledge, and conditional knowledge.
- Support content areas of reading (phonological awareness, decoding and comprehension), written language (teaching writing as a process), mathematics (computation and problem solving), and study skills (such as listening, note taking, time management, comprehending textbook usage and memory strategies).
- Transition planning should include the development of goal setting and self-advocacy.

Instructional Procedures

- Provide a structured instructional program with daily routines and expectations; clear rules; curriculum presented in an organized, sequential fashion; and a focus on learning tasks rather than extraneous stimuli.
- In planning, consider what, how, and when to teach; provide activities for practice, feedback, and evaluation; organize and pace the curriculum; and provide smooth transitions.
- Consider using task analysis and direct instruction.
- Consider using cognitive and metacognitive strategies instruction. Consider whether using the Learning Strategies Curriculum would be of use in teaching academics and social interaction. Consider attribution retraining.
- Effective instructional practices for ELLs include using visuals to reinforce concepts and vocabulary, utilizing cooperative learning and peer tutoring, making strategic use of the native language by allowing students to organize their thoughts in their native language, providing sufficient time and opportunity for students to use oral language and writing in formal and informal contexts, and focusing on rich vocabulary words during lessons to be used as vehicles for teaching literary concepts. Also consider providing simplified, appealing, multisensory lectures; adapting textbooks and assignments; and using supplementary materials.

Instructional Environment

- Reduce congestion in high-traffic areas, make sure you can see all students, make frequently used materials and supplies easily accessible, ensure that all students can see whole class presentations.
- For preschool students, the environment should be structured and promote efficiency, accessibility, independence, and functionality. It should also promote language and literacy development.
- For elementary and secondary students, the environment should be organized to prevent "dead time." Structure and routine are important. Space should be available for individual work, large and small group work, peer tutoring, and cooperative learning. Decrease possible distractions.
- Effective grouping options include one-to-one instruction, small group, whole class, peer tutoring, and classwide peer tutoring.

Methodologies and Strategies to Try

- Task Analysis (p. 109)
- Cognitive Strategies (p. 111)
- Metacognitive Strategies (p. 111)
- Mnemonics (p. 113)
- Attribution Retraining (p. 114)

Considerations for the General Classroom and Collaboration

Instruction generally occurs in the general education classroom.

The general education teacher should:

- Establish a positive climate that promotes valuing and accepting personal responsibility for learning.
- Consider accommodations such as changes in presentation of instructional methods or materials, assignments and tests, response modes, the learning environment, and time demands and scheduling.
- Consider adapting the academic content.
- Consider a parallel or overlapping curriculum.

Collaboration

General and special educators should consult on:

- Determining the curriculum
- Developing accommodations
- Choosing procedures and strategies
- Planning the physical environment
- Planning for assistive technology

Coverage of Students at Risk

As part of our belief in including practical and relevant information for all future teachers, we have included a chapter dedicated to at-risk children (see Chapter 13). Regardless of whether they receive services under Part C of IDEA, children at risk may be identified as needing services through Part B of IDEA. If identified early and addressed appropriately, the learning challenges of some of these students can be remediated without formal identification. This chapter enables future teachers to identify students who may be at risk and provide them with the appropriate supports.

Integration of Key Topics

Based on our experience teaching introduction to special education courses, and feedback from readers, instructors, and reviewers, we have updated but maintained integration of topics that include:

- *Inclusion:* The inclusive classroom is first introduced in Chapter 2 (The Special Education Process). To further emphasize the importance of this topic, and to discuss it in a relevant and practical manner, the final section of each chapter in Parts Two–Four focuses on the inclusive, general education classroom. As members of the collaborative special education team, both the special education teacher and the general education teacher benefit from fully understanding inclusion. It prepares the future general education teacher for a classroom with exceptional students and enables the future special education teacher to better understand general classroom needs, thereby fostering better collaboration.
- *Student Cultural Diversity:* Diversity is first introduced in Chapter 1 (An Overview of Special Education) and then discussed within each chapter. For example, effective instructional strategies for English language learners with learning disabilities are suggested in Chapter 4 (Students with Learning Disabilities); working with families

from diverse backgrounds when implementing assistive technology for students with intellectual disabilities is discussed in Chapter 5 (Students with Intellectual Disabilities); and the underidentification of culturally diverse gifted students is explored in Chapter 15 (Students Who Are Gifted and Talented).

- *Technology:* Technology offers a range of support and learning opportunities for students. With the explosive growth of technology tools, an understanding of how and when to use these tools and their benefits should be discussed. Each chapter in Parts Two–Four presents a section on relevant technologies useful in the instruction and support of students with special needs.
- *Early Intervention and Transition:* Like technology, early intervention and transition issues vary by exceptionality. Coverage ranges from the importance of early intervention with children diagnosed with an autism spectrum disorder, to special transition support, such as for postsecondary education for students with learning disabilities.

Features That Support Student Learning

Students in our classrooms not only need to read textual information but also need to understand, analyze, and synthesize the large amount of material presented to them. The fourth edition of *Exceptional Students* includes the following pedagogical aids as guides for future teachers, resulting in more application and a better understanding of special education.

- *Chapter Opening Outline:* Each chapter begins with a chapter outline designed as an advance organizer to prepare the reader for the content to come.
- *Check Your Understanding:* Concluding each major section are several questions presented to check understanding of key ideas. This allows students to learn and digest material in smaller chunks. By using this tool, students can work through the material at their own pace, checking that they fully understand one concept before moving to the next.
- *Marginal Definitions of Key Terms:* For easy reference, full definitions of key terms are presented in the margin next to where they appear in the chapter. These definitions are also available in the glossary at the end of the text.
- *Chapter Summary:* Key concepts are highlighted to reinforce an understanding of the most important concepts and provide an effective tool for studying.
- *Reflection Questions and Application Activities:* Chapter-ending reflection questions encourage debate, active learning, and reflection, along with application activities that may involve field components and emphasize learning in real environments, with real students and practitioners, and in schools and communities.

Supplemental Offerings

The fourth edition of *Exceptional Students* is accompanied by a wealth of teaching and learning resources.

- **Instructor's Manual.** Each chapter includes an overview, objectives, outline, and key vocabulary list; teaching strategies; classroom activities; alternative assessment activities; possible responses to the Revisit questions asked in the text; and additional case studies and examples.
- **Test Bank** by Kelly Brown Kearney, Florida Atlantic University. Each chapter is supported by multiple-choice and true/false questions categorized by type of question and level of difficulty, and essay questions.
- **PowerPoint Slides.** The PowerPoint slides cover the key points of each chapter and include charts and graphs from the text. The PowerPoint presentations serve as an organization and navigation tool, and can be modified to meet your needs.

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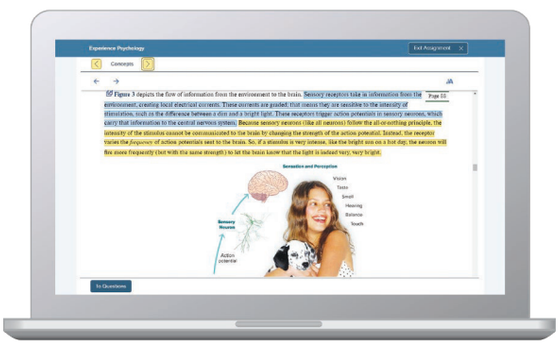

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Acknowledgments

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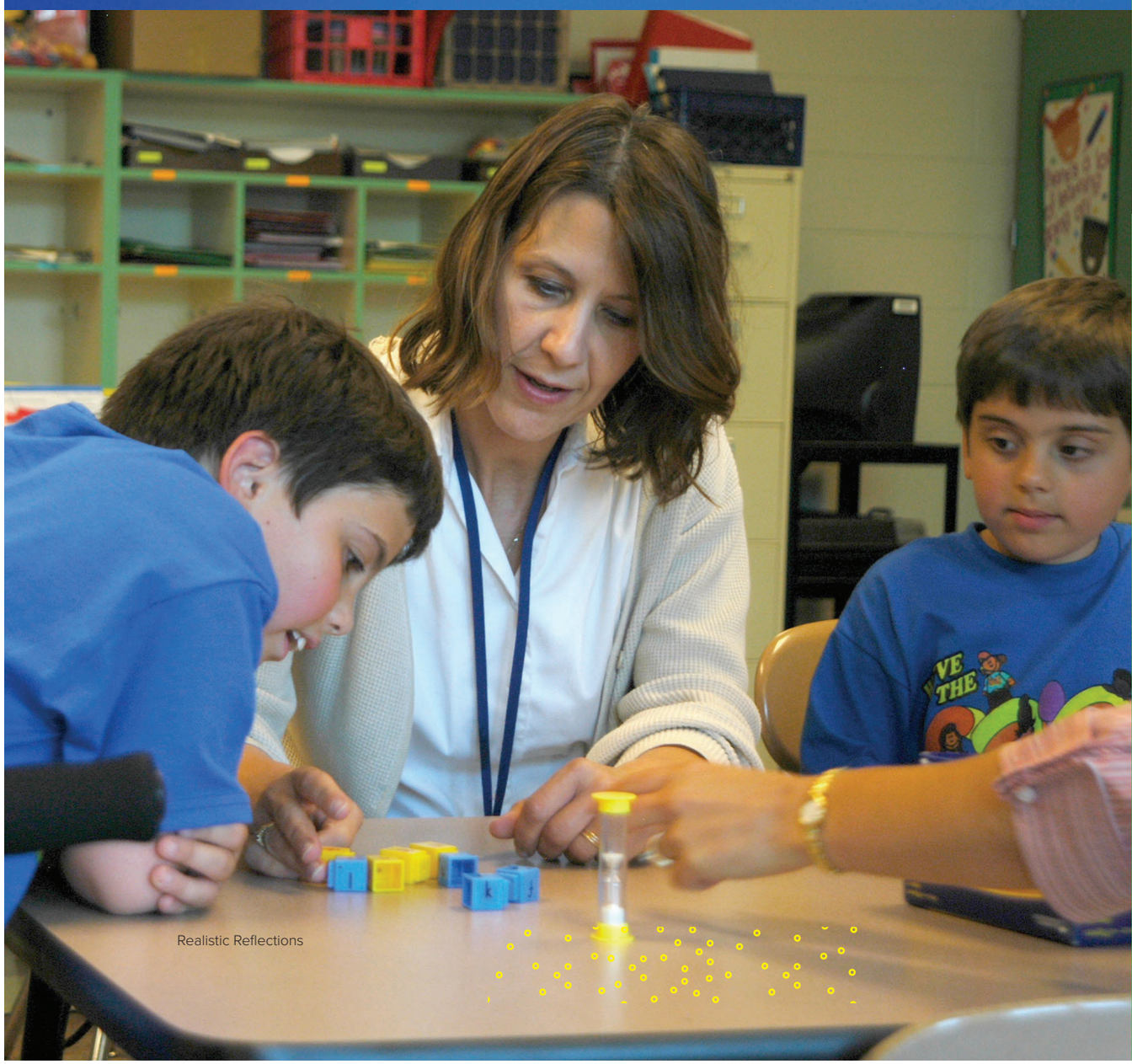
CHAPTER 1

An Overview of Special Education



Realistic Reflections

CHAPTER OUTLINE

This book is about teaching exceptional students—what both special education and general education teachers, and other professionals, can do to educate students with special needs with their peers without exceptionalities to the maximum extent appropriate. It covers foundational information on the history, definitions, prevalence, causes, characteristics, and identification of exceptional students that teachers need to understand in order to make informed teaching decisions. In this book, we discuss practical information regarding the instructional content, procedures, environment, and technology that teachers will use in their day-to-day activities. Teaching exceptional students is a challenging, rewarding, and sometimes both a frustrating and joyful endeavor. Through research and practical experience, we are constantly discovering more and more about the characteristics, capabilities, and educational needs of exceptional students. Similarly, we have learned a great deal about the educational approaches to use with students with special needs. However, we have also learned that just as each student has individual characteristics, needs, and strengths and weaknesses, there is no single approach, theory, or philosophy that gives us all the answers or will be relevant for all exceptional students. Current federal law requires that students with disabilities be taught using research-based instruction. With this in mind, the approaches, models, and techniques discussed in this text are supported by research. We share this research-based information for you to use as you begin your personal collection of approaches, models, and techniques to meet the needs of all students.

In this first chapter, we provide you with the foundational understanding you need to understand the different categories of exceptionality and to effectively support and teach students with exceptionalities. We first explain how exceptional students are defined and how many exceptional students are being served in the schools. This leads to an explanation of the meaning and intent of special education and related services. Next, we provide an overview of the history of the treatment and education of individuals with exceptionalities. We then discuss the litigation and legislation that define special education today and that will, in many cases, outline your responsibilities in the classroom. We conclude this chapter by introducing you to three issues in special education that we will revisit throughout the text: (1) the overidentification of students from culturally and linguistically diverse backgrounds in many categories of disability, (2) the need for early intervention and transition of young children with disabilities, (3) the transition of students from high school to adult living, and (4) the important role of the general education teacher.

Who Are Exceptional Students?

In the simplest terms, an **exceptional student** is one whose educational needs are not met by traditional educational programs. Exceptional students include those who are at-risk for delayed development and those actually experiencing disabilities. Exceptional also includes students who have gifts and talents that are outside typical development. Finally, students who are gifted and talented may experience disabilities as well and are therefore, twice-exceptional. Three terms that have historically been used to apply to those with exceptionalities are *impairment, disability,* and *handicap*.

exceptional student A student whose educational needs are not met by traditional education programs. An exceptional student can have a disability or can have gifts and talents.

An **impairment** refers to a loss or abnormality of a psychological, physiological, or anatomical structure or function. For example, Devon, who had a diving accident and is paralyzed below his waist, has an impairment. A **disability** is a limitation that is inherent in the individual as a result of the impairment, whereas a **handicap** is caused when an individual encounters a situation based on external factors. For example, Devon has a *disability* due to a lack of mobility caused by his paralysis. Devon would also have a *handicap* if he wanted to enter a building that has stairs but no ramp for his wheelchair. The terms *impairment* and *handicap* are used much less frequently today. The Individuals with Disabilities Education Act of 1990 (IDEA), an earlier version of the current federal law, first recommended that the term *disability* replace the term *handicap,* which had been used in previous legislation. Today, the term *disability* is used primarily. Some believe that the terms *impairment* and *handicap* are less preferable and in some way demeaning. Even the term *disability* may be considered as demeaning as emphasizing a condition rather than the person, but remains the term used in legislation.

impairment A loss or abnormality of a psychological, physiological, or anatomical structure or function.

disability A limitation that is inherent in an individual as a result of the impairment.

handicap A problem an individual encounters based on external factors.

Another recommendation made by IDEA was the use of "person-first" terminology that emphasizes the individual first and then the disability. For example, prior to IDEA an individual might be referred to as "a learning disabled student" or "an orthopedically impaired child." Now, the appropriate terminology is "a student with a learning disability" and "a child with an orthopedic impairment."

Students are defined as having a disability, and in need of special education, based on criteria outlined in the most recent federal law, the Individuals with Disabilities Education Improvement Act of 2004 that guides today's special education practices. This law is discussed in depth later in this chapter and will be referred to throughout the text. IDEA identifies the following specific types, labels, or categories of students who are considered as having a disability:

> A child with a disability means a child evaluated . . . as having an intellectual disability, a hearing impairment (including deafness), a speech or language impairment, a visual impairment (including blindness), a serious emotional disturbance (referred to in this part as "emotional disturbance"), an orthopedic impairment, autism, traumatic brain injury, an other health impairment, a specific learning disability, deaf-blindness, or multiple disabilities, and who, by reason thereof, needs special education and related services.*

IDEA also states that, as a result of the disability, there must be (1) an adverse effect on educational performance, and (2) requires special education. One student with Type I diabetes may have few effects from the condition. Another may experience more absences, loss of vitality, need for frequent breaks,

*Readers should note that the states may use different terms for the disability categories than those used in IDEA and from one state to another.

Source: [71 FR 46753, August 14, 2006, as amended at 72 FR 61306, October 30, 2007; 82 FR 31912, July 11, 2017]

The challenge for educators is to limit the effects of a disability on a child.

Realistic Reflections

and monitoring by a school nurse. The second child may qualify for special education while the first child may not.

Parts 2 and 3 of this text contain chapters that provide foundational and practical information related to children identified with disabilities. There are 13 categories of disability defined in IDEA and each is discussed in this text. Also discussed are students at-risk for identification for special education, those who experience attention deficit/hyperactivity disorder (AD/HD), and those with gifts and talents. All of these students may be considered exceptional, though not necessarily as having a "disability" under the definitions in IDEA. These exceptional students are discussed in a separate Part 4 of this text. Remember that students with gifts and talents could be twice-exceptional, as well.

Check Your Understanding

1. What is the definition of an exceptional student?
2. What is the difference between an impairment, a disability, and a handicap?
3. Students with which disabilities are served under IDEA?
4. For a student to be identified under IDEA, what two criteria must be met in addition to having a disability?

How Many Exceptional Students Are There?

Two terms are typically used when describing the number of exceptional students. Incidence refers to the number of individuals identified as falling into a particular category for the first time during a specific period. The period of time used to determine incidence figures can vary, although 1 year is frequently used. Prevalence, on the other hand, refers to the total number of individuals who are in a given category at a particular point in time. The prevalence, which is more commonly used when states and the U.S. Department of Education (USDOE) report data on students who receive special education services. For example, the USDOE reported in 2008, 8.3% of all students aged 6 to 21 years received special education across all states. In 2017, the prevalence had increased to 9.2% (USDOE, 2019). Incidence can be useful as well. For example, if there were to be pandemic that affected unborn children by causing disabilities, the incidence of disabilities may be higher for that year in comparison to previous or subsequent years. For practical purposes, prevalence is more useful than incidence because it gives an indication of the total number of individuals who are actually receiving special education services; therefore, we report prevalence figures rather than incidence figures in this text.

Although prevalence rates are often estimates that have remained relatively consistent over the years, the most pragmatic method of determining the prevalence figures is to identify the percentage of individuals who are actually identified and receiving special education services. In 2017, 9.2% of students aged 6 to 21 years received special education under IDEA (USDOE, 2019). This percentage does not include gifted and talented students (unless twice-exceptional) as they are not served under IDEA. The prevalence of gifted and talented students has been estimated to be between 6% and 10% of all students in school (National Association for Gifted Children, retrieved www.nagc.org, 06/2020). Some of these students might also be twice-exceptional. Because services for gifted and talented services are not mandated by the USDOE, precise prevalence figures may not be precise.

Figure 1.1 shows the percentage of students ages 6 to 21 receiving services in each category of disability as reported by the USDOE as a function of the total population of all students with disabilities. Over 90% of students with disabilities are identified in six IDEA categories: specific learning disabilities (38.2%), speech or language impairments (16.7%), other health impairments (15.8%), autism (10.1%), intellectual disabilities (6.8%), and emotional disturbance (5.5%). The remaining categories combined include 7.1%.

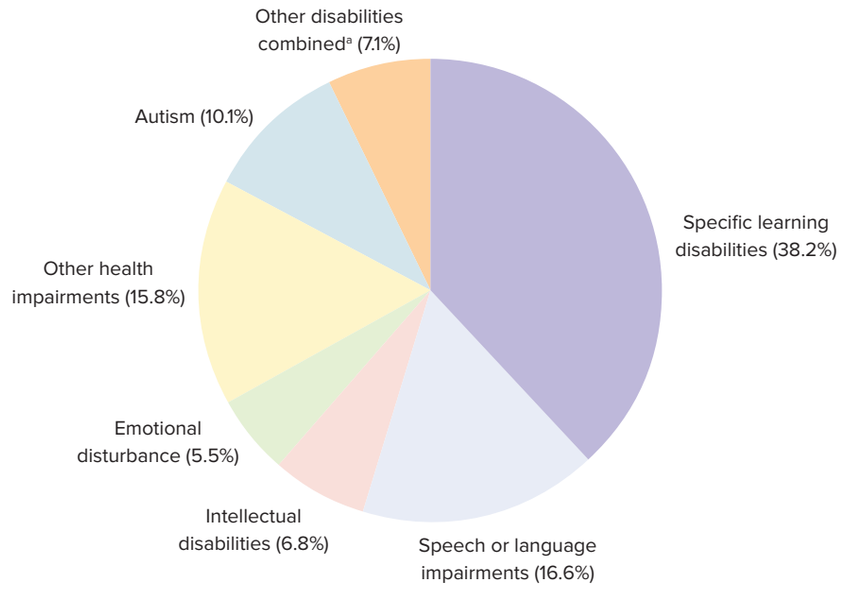


FIGURE 1.1 Percentage of students ages 6 through 21 served under IDEA, Part B, by disability category: Fall 2017.

[a]"Other disabilities combined" includes *deaf-blindness* (less than 0.05%), *developmental delay* (2.6%), *hearing impairments* (1.1%), *multiple disabilities* (2.0%), *orthopedic impairments* (0.6%), *traumatic brain injury* (0.4%), and *visual impairments* (0.4%).

Note: Percentage was calculated by dividing the number of students ages 6 through 21 served under *IDEA,* Part B, in the disability category by the total number of students ages 6 through 21 served under *IDEA,* Part B (6,130,637), then multiplying the result by 100.

Source: "Thirty-first Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, Parts B and C. 2009." Home. US Department of Education (ED), November 28, 2012. Web. April 21, 2017.

Bear in mind these are the percentages of students served under IDEA in each category, not the percentage of all students in school. Again, that percentage was 9.2% as of fall 2017.

The percentage of students in different categories receiving special education has changed over the years. Table 1.1 shows the increases and decreases in the various categories of disabilities between 1998 and 2007. Interestingly, only two categories—other health impairment and autism—showed relative increases over that time period. The increase in the other health impairment category may be largely attributed to some states' use of this category to provide services for students with attention deficit/hyperactivity disorder, which itself is rapidly growing. The probable reason for the increase in autism is that it was not considered as a disability area under federal law until 1990. Substantial interest and awareness, as well as improved diagnostic procedures, have resulted in more students being identified.

There was an overall increase in the percentage of students served under IDEA from 2008 to 2017. Aside from the other health impairment and autism categories, most remained relatively the same. Of some interest is the decrease, albeit small, in the specific learning disability category which is the largest category overall. Only other health impairment, specific learning disability, and speech or language impairment categories exceeded 1% of the overall school population. It should also be noted that these percentages may differ from a state to the overall United States and from state to state. Even within the same state, these percentages may differ from one region/district to another. Readers are encouraged to access the most recent Annual Report to Congress on the implementation of IDEA from the U.S. Department of Education. Finally, these percentages do not include children birth through 2 years served under Part C of IDEA.

TABLE 1.1 Percentage of School-Aged Population (6–21 Years of Age) Served Under Part B in 2008 and 2017

IDEA CATEGORY	2008 DATA	2017 DATA
All disabilities	8.5%	9.2%
Autism	0.4%	0.9%
Deaf-blindness	#	#
Emotional disturbance	0.6%	0.5%
Hearing impairment (deaf and hard of hearing)	0.1%	0.1%
Intellectual disability	0.7%	0.6%
Multiple disabilities	0.2%	0.2%
Orthopedic impairment	0.1%	0.1%
Other health impairment	1.0%	1.5%
Specific learning disability	3.7%	3.5%
Speech or language impairment	1.6%	1.5%
Traumatic brain injury	#	#
Visual impairment (blind and low vision)	#	#

#Percentage was less than 0.05% or 5/100 of 1%.
Source: U.S. Department of Education, EDFacts Data Warehouse (EDW), OMB #1875-0240: IDEA Part B Child Count and Educational Environments Collection, 2008–17. These data are for the 50 states, DC, and BIE schools, with the following exceptions. For 2008, data for Vermont were not available. For 2010 and 2014, data for Wyoming were not available. For 2011 and 2013, data for BIE schools were not available. For 2016, data for Wisconsin were not available. For 2017, data for Maine, Vermont, and Wisconsin were not available. U.S. Department of Commerce, U.S. Census Bureau. Intercensal Estimates of the Resident Population by Single Year of Age and Sex for States and the United States: April 1, 2010 to July 1, 2017, 2008–17. These data are for the 50 states and DC with the following exceptions. For 2008, data for Vermont were excluded. For 2010 and 2014, data for Wyoming were excluded. For 2016, data for Wisconsin were excluded. For 2017, data for Maine, Vermont, and Wisconsin were excluded. Students served through BIE schools are included in the population estimates of the individual states in which they reside. Data for 2008 through 2010 were accessed spring 2012. Data for 2011 were accessed fall 2012. Data for 2012 were accessed fall 2013. Data for 2013 were accessed fall 2014. Data for 2014 were accessed fall 2015. Data for 2015 were accessed fall 2016. Data for 2016 were accessed fall 2017. Data for 2017 were accessed fall 2018.

Check Your Understanding

1. What is the difference between incidence and prevalence?
2. What is the prevalence of students with all exceptionalities (ages 6–21) actually receiving services?
3. What is the most prevalent exceptionality? Approximately what percentage of the school-aged population falls into this category?
4. Why has the prevalence of some categories increased so dramatically?

What Are Special Education and Related Services?

IDEA specifies that students with disabilities are entitled to a free appropriate public education (FAPE) that addresses their individual educational needs. It also defines what constitutes *special education* and specifies that *related services* must be provided to allow students to have access to their special education program. In this section, we will discuss special education and related services separately.

Special Education

The reasons that a student's educational needs are not being met in the usual educational program can vary. These can include physical, sensory, health, or intellectual limitations; emotional or psychological problems; learning problems; communication deficits; or intellectual, academic, or creative gifts or talents. **Special education** is instruction specifically designed to meet the individual needs of these exceptional students. IDEA defines special education as specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability, including instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings, and includes instruction in physical education.

special education Instruction specifically designed to meet the individual needs of an exceptional student.

Components of Special Education

Special education involves many different components. For example, special education could include the use of a curriculum that focuses on functional life skills for a student with an intellectual disability, or it could involve the use of a learning strategy to teach math skills to a student with a specific learning disability.

In this text, we address four components of special education, each of which should be considered when working with exceptional students. The first component is *instructional content,* or what is taught to the student. The functional life skills curriculum for the student with an intellectual disability is an example of this component. The second component is *instructional procedures,* or how the content is taught to the student. The use of the learning strategy to teach math skills to the student with a specific learning disability is an example of this. One commonly implemented instructional design procedure is the use of accommodations. An accommodation is a change in a lesson or procedure that is made to help a student learn the material or complete the task. For example, a student who has difficulty taking notes might be allowed to record the lectures. Another student, who, because of his disability, works very slowly, might be given additional time to complete his class assignments. In later chapters, we provide a list of specific accommodations for students with whom teachers are most likely to work—those with specific learning disabilities, intellectual disabilities, and emotional and behavioral disorders.

The third component of special education is the *instructional environment,* which not only includes where the instruction takes place (e.g., in the general education classroom or in a separate classroom), but also involves adaptations to the instructional environment that facilitate learning. For example, a student with autism might need a classroom with structure, clear expectations, and a consistent schedule. The final component of special education we address is the *instructional technology* that is used to help support learning. Included in this component is the use of **assistive technology devices.** IDEA defines an assistive technology device as "any item, piece of equipment, or product system whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve functional capabilities of a child with a disability." Assistive technology devices can range from something "low tech," such as a pencil grip for a student with a physical disability, to something "high tech," such as a voice synthesizer activated through the use of a computer for a nonverbal student.

assistive technology device Any item, equipment, or product system that is used to increase, maintain, or improve functional capabilities.

Universal Design for Learning

What each of the above components of special education has in common is that they encompass the concept of **universal design** for learning (UDL) emphasized in IDEA. Universal design is a term borrowed from architecture that refers to the development of environments that are accessible to everyone. For example, following the concept of universal design, a school would be designed so that it would maximize accessibility for everyone. In addition to allowing easy entrance into the school for everyone, the application of universal design would affect the design of the classrooms, bathrooms, and all school environments.

universal design The concept that environments, instruction, and assessments should be designed to be accessible to all individuals.

IDEA indicates that UDL is the concept or philosophy that products and services should be designed and delivered so that they can be used by individuals with the widest range of capabilities. Although UDL is obvious in the physical environment, it can also

TABLE 1.2 Elements of Universal Design

Universal Design for Learning (UDL) involves a number of elements for instructional and assessment use. These elements are summarized from udlguidelines. cast.net:

Provide Multiple Means of Engagement
- Provide options for recruiting interest (e.g., give students autonomy and choice, help students see the relevance of the learning).
- Provide options for sustaining attention and persistence (e.g., vary resources and demands to enhance challenges, foster collaboration among students).
- Provide options for self-regulation (e.g., help students with coping skills, help students develop self-assessment skills).

Provide Multiple Means of Representation
- Provide options for perception (e.g., vary displays or provide alternatives to visual or auditory information).
- Provide options for language and symbols (e.g., teach vocabulary and symbols in context, support decoding of textual information).
- Provide options for comprehension (e.g., activate background knowledge, highlight patterns and critical features in texts or materials).

Provide Multiple Means of Action and Expression
- Provide options for navigation (e.g., provide access to learning tools and assistive technology).
- Provide options for expression and communication (e.g., use multimedia and help students create multimedia work).
- Provide options for executive functions (e.g., help students with goal-setting, making plans for use of learning strategies).

Source: Adapted from CAST (2018). Universal Design for Learning Guidelines version 2.2. http://udlguidelines.cast.org, retrieved September 2020.

apply to instructional and assessment modifications. Teachers can implement UDL by planning lessons that *all* students can access. Cast.org (n.d.) states that universal design for learning guidelines includes "a set of concrete suggestions that can be applied to any discipline or domain to ensure that all learners can access and participate in meaningful, challenging learning opportunities." These suggestions are organized into three categories including multiple means of engagement, representation, and action and expression (CAST, 2018). These three categories include options broken down into checkpoints with suggestions that are evidence-based.

Mandlawitz (2006) reminds us that IDEA now allows states to use funding to support technology using universal design principles; encourages research toward how to incorporate the principles in the development of curricula, instructional materials, and assessment tools; and requires, where feasible, that assessments be developed and administered using these principles. Table 1.2 shows some elements of UDL and how they can be applied in the classroom when designing tests and instructional materials. Table 1.2 illustrates how a teacher might apply the principles of UDL in classroom instruction. In Chapter 4, there is a more detailed discussion of the principles and checkpoints.

In summary, two points regarding universal design are important. First, it is a philosophy that should be the guiding force in developing educational programs. Second, each of the four components of special education should be considered when developing a program that reflects the concept of universal design. In other words, each component should ensure that all students, with or without disabilities, have access to an appropriate educational program.

Where Special Education Is Delivered

Special education of exceptional students can occur in a number of settings. A special education program can potentially take place totally within the general education classroom, partially within the general education classroom, in a separate classroom for students with disabilities within a public or private school, or in a separate school that includes just students with disabilities. More restrictive settings such as residential facilities or home/hospitals may be used by a very small number of students with severe or unique needs. These placement options are discussed in depth in the next

chapter. It should be emphasized, however, that the special education program should be carried out in the general education classroom whenever possible, and the student should participate in the general education curriculum to the maximum extent appropriate.

Who Delivers Special Education

A special education program can be implemented by any number of professionals including a special education teacher specifically trained to support students with disabilities or a general education teacher who teaches in a classroom that includes children with and without disabilities. In the latter situation, the special education teacher and other specialists will collaborate with the general classroom teacher to plan and assist in instruction.

The role of a special education teacher will vary based on the school and students' needs. The second half of each chapter in Parts 2 to 4 includes specific information to help prepare you to teach exceptional students. Whether you plan to be a special education teacher or a general education teacher, you will need a strong foundation of the components of special education to effectively plan and deliver your instruction.

Related Services

Related services are those activities or supports that enable a child with a disability to receive a free appropriate public education, and to benefit from the special education program. IDEA includes some related services that a student might receive.

related services Those activities or services that enable a child with a disability to receive a free appropriate public education and to benefit from the special education program.

- Transportation
- Speech-language pathology and audiology services
- Interpreting services
- Psychological services
- Physical and occupational therapy
- Recreation (including therapeutic recreation)
- Early identification and assessment
- Counseling services (including rehabilitation counseling)
- Orientation and mobility services
- Medical services for diagnostic or evaluation purposes
- School health services and school nurse services
- Social work services
- Parent counseling and training

Necessary related services are determined by the team responsible for developing a student's individualized education program (IEP), an overall plan for the student's education that is required by IDEA and introduced later in the chapter. The following are brief descriptions of the roles of each of the related services identified by IDEA. It is important to understand that this list of related services is not exhaustive.

Transportation

Special transportation is a related service provided to many students, often those with more moderate to severe disabilities. If students cannot get to school, they cannot receive an appropriate education. Particularly for students with physical disabilities, special transportation that includes a wheelchair lift may be needed. Also, because some programs may include students from outside the school's neighborhood, such as a special class for all students who are deaf in a district, special transportation is needed because the school attended is in a different location than the student's neighborhood school.

Speech-Language Pathology and Audiology Services

Speech and language therapy is the most widely used related service. Speech and language pathologists serve students with a wide range of communication problems. These specialists may perform assessments and evaluations, collect data for progress monitoring,

and provide direct intervention (ASHA, n.d.). In some instances, speech and language pathologists may also focus on other issues such as swallowing difficulties. These specialists can make recommendations for interventions related to the development of communication and literacy skills.

Audiology services can involve assessment of hearing for both degree and type of hearing loss. Audiology specialists can also fit, adjust, and maintain assistive listening devices such as hearing aids. In some cases, audiologists may provide counseling to individuals who have experienced hearing loss as well as make recommendations for adaptations and assistive technology that can aid the student. Audiologists can make recommendations to teachers on how best to arrange the physical and instructional environment and to communicate with a student to make maximum use of any residual hearing.

Interpreting Services

Interpreters are related service personnel that can work with those whose hearing loss is so severe that they cannot hear sufficiently to learn in the classroom. Generally, in this case, the student uses sign language as the primary means of communication. Interpreters usually accompany a student in all environments as needed, providing a bridge between the student and others who may not use sign language.

Psychological Services

School psychologists are related services providers who are frequently involved in assessment activities, especially those associated with the identification of students for eligibility for special education. In this capacity, they serve as data collectors and administer individual assessments. For example, they may observe a student's performance in a classroom setting or administer intelligence and achievement tests. Psychologists may also devise and implement behavioral interventions, and provide counseling as well as other services as needed. Psychologists can assist teachers in many ways including how to manage student behavior, how best to assess students, and by providing a source of data for educational decision making.

Physical therapists often work on developing a student's muscle tone.
Realistic Reflections

Physical and Occupational Therapy

Physical therapists perform individual and ongoing assessments of physical functioning, make recommendations for physical therapy interventions, and use exercise and electrical stimulation to help students become stronger, more mobile and flexible (Davies, 2013). Physical therapists usually focus on large muscle groups and functioning such as walking, posture, and positioning of the body. For example, a student with cerebral palsy may need assistance from a physical therapist in walking and proper positioning. Occupational therapists typically focus on smaller muscle groups and their use in daily activities. For example, they may help a student with the use of hands for writing, eating, and dressing. Occupational therapists provide initial and ongoing assessments as well as direct services and supervision of assistants.

Recreation

Some students with disabilities need related services for special recreational opportunities and instruction. For example, students who use wheelchairs may need an adapted program to develop and maintain good physical health and wellness. There are specialists who focus in this area, but these services are also provided by a variety of team members including teachers, parents, and community

agencies (such as the YMCA). These services can include assessment of recreation and leisure interests and preferences, provision of therapeutic services (such as therapeutic swimming/water activities), adaptation of activities and equipment, and identification of recreational resources and facilities.

Early Identification and Assessment

The related services of early childhood screening and assessment are often provided by community agencies, such as a local health service agency. These services include developmental screening to determine if individual assessments are needed, and the individual assessments themselves. These services can also involve monitoring overall development to determine whether important milestones are being achieved, such as walking and talking at an appropriate age. Medical professionals are also involved in this type of screening and assessment. These services are important in establishing the need for and implementation of interventions, whether medical, therapeutic, or educational, which can mediate the effects of an existing disability or reduce or eliminate the risks associated with other conditions, such as malnourishment or low birth weight.

Counseling Services

Counseling services might include academic counseling, emotional counseling, and rehabilitation counseling. Rehabilitation counselors provide assessments of a student's career/vocational attitudes, abilities, and needs; vocational guidance and counseling; training in career/vocational knowledge and skills; and identification of job sites and placements. These specialists can be especially helpful to teachers, students, and families in the transition from school to adult living.

Orientation and Mobility Services

Orientation and mobility specialists teach students with vision losses how to navigate within environments and from one environment to another. They would teach, for example, how to move within the classroom and how to navigate around the overall school environment. They assist students in traveling independently and can work with students on the use of canes, guide dogs, wheelchairs, and public transportation. These specialists are helpful to teachers, students, and families as they have special knowledge and skills to train individuals with vision losses to function in a variety of settings.

Medical Services for Diagnostic or Evaluation Purposes

Medical services for diagnostic purposes, for example, to assist in the identification of attention deficit/hyperactivity disorder, are included as a related service under IDEA. However, other medical services, such as prescribing medication and performing routine physical examinations, are not covered. On the other hand, health services such as dispensing medication and monitoring its effects at school are considered related services.

School Health and School Nurse Services

Some students with health-impairing conditions or multiple disabilities need monitoring and special services such as tube feeding and catheterization. School nurses may be involved in the provision of services or may train classroom personnel to carry out such services when special medical knowledge and training is not needed. For example, catheterization has been established as a related service that does require training, but neither special medical knowledge nor training pertinent only to medical professionals. Teachers and aides can be trained to perform this service.

Social Work Services

Social work services can include preparing developmental or social histories of a child, group and individual counseling for a student or the family, working with families on interventions at home and in the community, identifying and mobilizing community resources and agencies, and assisting in developing positive behavioral interventions. Social workers can be a great asset to teachers by serving as a bridge among the school,

family, and community. For example, social workers can assist families in obtaining food stamps, housing, and other assistance from various agencies, which, in turn, help the student and family to meet needs that are critical to being prepared to learn and thrive.

Parent Counseling and Training

Counselors are available to assist parents with the many needs and concerns that they might face as a result of having a child with a disability. This might involve addressing parents' feelings of guilt or anger. Also, particularly with parents of young children, specific training may be necessary to assist them in areas such as early intervention services that could be implemented in the home. Parents may also need advocacy services to assist in ensuring their child receives a free, appropriate education.

In summary, under IDEA every student with a disability is entitled to a special education program and any related services that are necessary. In this text, we focus on four components of special education: instructional content, instructional procedures, the instructional environment, and instructional technology. Important in all four components is the concept of universal design, or making sure all content and services are accessible for all students regardless of their capabilities and limitations.

Check Your Understanding

1. What is special education?
2. What are the components of special education?
3. What is universal design for learning?
4. What are related services? What are some related services that students with disabilities might receive?

What Is the History of Special Education?

To fully appreciate how far we have come in teaching exceptional students in recent years, one must look at the history of special education, which has had a dramatic impact on our current thinking and educational practices. Over the last several hundred years, there has been an evolution from intolerance to treatment to education of individuals with disabilities. As you will see, special education as a formal profession is relatively new. A general history of disabilities is provided here; histories of specific disabilities are presented in the relevant chapters in Parts 2 to 4. Luckily, there have been several seminal books that have summarized the long history of special education.

Early History

Documentation of individuals who have disabilities, as well as those individuals with great gifts and talents, has been provided since the beginning of recorded history. The early treatment of individuals with disabilities varied from kindness and pity to cruelty and even barbarism. Scheerenberger (1983) noted, for example, that in ancient Egypt, children who would now be considered as having an intellectual disability were treated by priests using spiritual healing, amulets, and incantations. In Sparta, however, children with disabilities would be brought before a board of elders to determine their fate, and they were frequently thrown into the Eurotes River or abandoned in the wild. Scheerenberger pointed out that such practices were widespread until the fourth century when Christianity began to have a positive influence. On the other hand, early societies valued individuals who helped further societal goals with their gifts and talents. In Sparta, for instance, gifted individuals were those who were considered strong leaders and warriors (Colangelo & Davis, 2003). These individuals were perhaps the first exceptional students, being chosen for Plato's Academy primarily based on intelligence and physical ability. Treatment of individuals with disabilities began to improve during the Middle Ages, Renaissance, and Reformation. With advances in medicine, European physicians began to influence the way in which individuals were treated.

The 17th through 19th Centuries

Although there was some interest in deaf and blind individuals in the 17th century and the beginning of the 18th century, the treatment of individuals with disabilities during this time is best described as uncaring and inhumane. In Europe, individuals with disabilities were largely confined to hospitals and prisons, where the death rate was high. At one time in the United States, many exceptional individuals were thought to be witches, and were often persecuted and sometimes executed. Real attempts made to treat exceptional individuals in a humane fashion were not made until the middle of the 18th century and continued in the 19th century. The influence of European physicians spread, and eventually interest and attention were paid to the abilities, rather than the limitations, of exceptional individuals. These efforts were carried to the United States by physicians and other professionals (see Table 1.3).

One person, Jean Marc Itard, is generally accepted as having the most influence during this time period. He is best known for working with Victor, the wild boy of Aveyron, a child who had been found wandering naked in the woods and reportedly had been raised by animals. Victor was taken to the Institution for Deafmutes in Paris in 1800, where Itard was on the medical staff. Itard implemented an intensive training program that lasted for 5 years. Although Itard was not completely successful, he did teach Victor to identify objects and letters of the alphabet, as well as to understand the meaning of several words (Kanner, 1964). Also of significance was Victor's progress in social development. When others saw the progress that Victor had made, interest in the possibility of teaching individuals who had been previously considered unteachable was stimulated. Interested students can check YouTube for several excellent videos on Itard and Victor.

Although the first public school was established in 1839, the first special education class was not introduced until almost 30 years later. In 1867 a class for deaf students commenced at the Horace Mann School for the Deaf in Boston. Several more classes for students with disabilities were formed over the latter part of the 19th century and beginning of the 20th century. These classes, however, were not legally sanctioned, and for the most part money to support them was negligible (Winzer, 1993).

The 20th Century

Negative attitudes by many toward individuals with disabilities continued in the early 1900s. These negative feelings were reinforced by Goddard's (1912) research that implied that low intelligence and deviant behavior were hereditary, a point that resulted in discrimination and more negative stereotypes. In fact, forced sterilization and segregation were popular solutions at that time. The negative attitude toward individuals with disabilities was perhaps exemplified best by the movie *The Black Stork*. This movie, shown in public theatres in 1917, told the story of Dr. Harry Haisenden, a Chicago physician who

TABLE 1.3 Individuals Making Significant Contributions to Special Education in the 18th and 19th Centuries

Jacob Periere	Taught individuals who could not hear or speak to use simple sign language in the mid-1700s
Phillippe Pinel	Freed patients from their chains in two insane asylums in Paris in the mid-1700s
Samuel Gridley Howe	Founded the New England Asylum for the Blind in 1832 (now the Perkins School for the Blind)
Thomas Hopkins Gallaudet	Founded the American Asylum at Hartford for the Education of the Deaf and Dumb in 1819 (now the American School for the Deaf)
Edouard Seguin	One of the first to work with individuals with intellectual disabilities in the United States

AN IMPORTANT EVENT

1922—Founding of the International Council for the Education of Exceptional Children

On August 10, 1922, the International Council for the Education of Exceptional Children, now known as the Council for Exceptional Children (CEC), was formed with only 12 members. It began when educators from New York attended a summer session at Teachers College of Columbia University. The group was concerned that exceptional children were receiving inappropriate, and in many cases no, instruction in the public schools and was formed to provide advocacy and support for exceptional children and their parents. Elizabeth E. Farrell, a teacher in New York City, was the founder and first president of the organization. The first convention of the organization was held in 1923 in Cleveland. CEC now is the largest international organization dedicated to the education of exceptional students with over 50,000 members. In addition to hosting an annual convention, CEC provides members with two professional journals, *Exceptional Children* and *Teaching Exceptional Children.* Student memberships are available at a nominal cost and include all the CEC benefits, the two journals, and low registration rates for the annual convention. The Web site for the CEC is www.cec.sped.org.

REFLECTION At that time in history, why was the birth of CEC so significant?

supported euthanasia for children with disabilities and refused to perform surgery on "deformed babies."

There were, however, some positive advances during the early 20th century. Grace Fernald, Samuel Orton, and others were making contributions to the field of special education, becoming actively involved in developing remedial approaches for individuals with reading problems. Also, the first professional organization, the International Council for the Education of Exceptional Children, was founded (see An Important Event).

In the 1930s, parents of children with disabilities began grassroots movements to push their agenda of advocacy. In the 1940s, Alfred Strauss and Heinz Werner created additional interest in special education by suggesting and researching a neurological basis for learning problems. Although their work initially focused on individuals with intellectual disabilities, it was later applied to other areas and greatly affected the field of learning disabilities.

During the 1950s and 1960s, the civil rights movement helped to raise interest in equality, resulting in grassroots efforts of parents and organized advocacy groups such as the National Association of Retarded Children (now the ARC) and the United Cerebral Palsy Association. Also during this time, more favorable economic conditions prevailed, and the existing politics provided a positive attitude and more available funding for educational programs such as Head Start, an early intervention program for young children living in poverty. At the same time, research based on the work of Strauss and Werner continued, particularly after Samuel Kirk coined the term "learning disability" in 1963. In the 1970s, litigation and legislation began to have a significant impact on the field of special education. In a sense, the decades of the 1960s and 1970s were the beginning of the formal field of special education as it was recognized, and eventually funded, by federal legislation.

Check Your Understanding

1. Describe how individuals with disabilities or gifts were treated prior to the 18th century.
2. Which historical figures had an impact on special education in the 18th and 19th centuries in Europe and the United States?
3. What were some positive and negative events or occurrences related to special education in the 20th century?

How Have Litigation and Legislation Affected Special Education?

As special education became more of a formal, identifiable professional field in the latter part of the 20th century, parents and other advocates sought the best programs possible for all exceptional students and wanted to ensure that their rights were not violated. Many students with disabilities were still being excluded from school or were participating in inferior educational programs. This dedication to the education of students with special needs resulted in several noteworthy court cases in the early 1970s that focused on the issue of exclusion of students from special education programs. Ironically, litigation also addressed discrimination issues at this time, claiming that minority students who were receiving special education programs were inappropriately identified as needing them. All of these cases eventually led to legislation that significantly affected special education practices. The most significant legislation was PL 94-142, the originally entitled Education for All Handicapped Children Act, which initially defined and funded special education practices in the United States and guides its practice today through its current incarnation as the Individuals with Disabilities Education Improvement Act (IDEA) of 2004.

Early Court Cases

The early court cases related to special education revolved around exclusion and discrimination. Two court cases of the early 1970s are representative of litigation related to the exclusion of exceptional students from appropriate educational programs. The first was *Pennsylvania Association for Retarded Citizens (PARC) v. Commonwealth of Pennsylvania* (1971), a class action suit filed on behalf of a group of students with mental retardation who were not receiving appropriate educational programs. The result of the litigation was the mandate for a free, public education for students with intellectual disabilities. The second case, *Mills v. Board of Education of the District of Columbia* (1972), was similar to the *Pennsylvania* case but broadened the right to a free, public education to include students with all disabilities.

The discrimination cases during this period primarily dealt with assessment issues that led to the possible erroneous labeling of minority students as having mental retardation (see Table 1.4). Specifically, these cases examined the possible inappropriate use of intelligence tests in assessment. In some cases, the cultural bias of the tests was called into question. Of the court cases listed in Table 1.4, the one that has had the greatest impact is *Larry P. v. Riles* (1972). This case addressed the question of whether or not intelligence tests are biased against African American students. It ultimately resulted in a ban on the use of intelligence tests with African American students in California. Inevitably, litigation and court battles such as these result in legislation.

TABLE 1.4 Representative Court Cases Focusing on Discriminatory Assessment Practices

Hobson v. Hansen (1967)	Ruled that standardized testing was biased against African American and disadvantaged students.
Diana v. California State Board of Education (1973)	Ruled that tests must be administered in the native language of the student; also indicated that students could not be placed into special education on the basis of culturally biased tests.
Guadalupe v. Tempe (Arizona) Board of Education (1979)	Decision was similar to *Diana* ruling requiring the use of culturally nonbiased assessment.
Larry P. v. Riles (1972)	In perhaps the most well-known and controversial assessment case, the plaintiff argued that intelligence tests (the Wechsler Intelligence Scale for Children in particular) were biased against African American children. The case resulted in the banning of intelligence tests with African American students in California.
PASE v. Hannon (1980)	A case similar to the *Larry P.* case. The court, however, ruled that intelligence tests were not biased against African American students.

TABLE 1.5 Early Laws Affecting the Field of Special Education

LEGISLATION	YEAR	SCHOOL PROGRAMMING AFFECTED
National Defense Education Act PL 85-926	1958	Provided funding to train special education teachers of students with mental retardation
Special Education Act PL 87-276	1961	Provided funding to train special education teachers of deaf students
Elementary and Secondary Education Act (ESEA) PL 89-10	1965	Provided funding to develop programs for economically disadvantaged students
Amendment to Title 1 of ESEA PL 89-313	1966	Provided funding for state-supported schools and institutions for students with disabilities
ESEA Amendments of 1966 PL 89-750	1966	Established first federally funded program for students with disabilities at the local school level
Vocational Education Amendments of 1968 PL 90-576	1968	Mandated that 10% of the funds for vocational education be earmarked for students with disabilities
ESEA Amendments of 1970 PL 91-230	1970	Resulted in the acceptance of exceptional students as a unique population with special educational needs

During the past 50 years, there have been considerable advances in the laws that govern special education.

Early Legislation Affecting Special Education

The earlier laws of the 1950s and 1960s related to special education (see Table 1.5) paved the way to the more significant legislation of the Rehabilitation Act of 1973 (Section 504, Public Law 93-112) and the Individuals with Disabilities Education Act (originally entitled Education for All Handicapped Children Act) (Public Law 94-142).

These two acts, particularly PL 94-142, provided the basis for many of the special education practices in place today. Specifically, the current special education legislation, the IDEA of 2004, evolved from the basic premises of PL 94-142. Before we discuss these laws, we want to let you know what the hyphenated number means in a public law. The first part of the number identifies the congressional session in which the law was passed. The second part of the hyphenated number refers to the number of the law passed within that congressional session. Thus PL 93-112 was the 112th law passed by the 93rd Congress, and PL 94-142 was the 142nd law passed by the 94th Congress.

Rehabilitation Act of 1973 (PL 93-112, Section 504)

The Rehabilitation Act was passed in 1973 as an attempt to end education and job discrimination on the basis of a person's disability. Similar legislation had already been passed to prevent discrimination on the basis of sex, ethnic background, and religion. Essentially, this law stated that no otherwise qualified handicapped individual in the United States could be excluded from participation in any program or activity receiving federal financial assistance based solely on his or her handicap. Prior to this legislation, an employer of a university, hospital, U.S. government agency, or any other business or organization receiving federal funding could deny employment of an individual based solely on his or her disability. After the law was passed, this practice was no longer acceptable if the individual had the necessary qualifications to meet the job requirements. The Rehabilitation Act also resulted in the development of "504 Plans," which allow for instructional accommodations for students who do not qualify for special education services under IDEA but who, nonetheless, need additional help. This legislation

also was the basis for the passage of PL 94-142, which expanded these concepts with many specific educational mandates and provided funding for special education services.

Individuals with Disabilities Education Act (PL 94-142)

Passed in 1975, PL 94-142 is the most significant piece of legislation related to special education to date. PL 94-142 and its subsequent amendments and reauthorizations have provided guidelines, requirements, and funding for the education of exceptional students. PL 94-142 mandated six major principles to guide the education of individuals with disabilities:

1. Provision of a *free appropriate public education* (FAPE) for all students with disabilities (referred to as *zero reject*)
2. Use of *nondiscriminatory evaluation*
3. Development of an *individualized education program* (IEP)
4. Education of the student in the *least restrictive environment* (LRE)
5. Implementation of *due process* procedures
6. Right of *parental participation*

Source: Public Law 94-142 94th Congress, H. R. 2580 November 29, 1975. Education for All Handicapped Children. Retrieved from https://www.gpo.gov/fdsys/pkg/STATUTE-89/pdf/STATUTE-89-Pg773.pdf

These and other principles and requirements will be addressed in depth later in this chapter in the discussion of the most recent reauthorization of IDEA in 2004, which is directly related to PL 94-142.

After the passage of PL 94-142 in 1975, several court cases, some heard by the Supreme Court, focused on the interpretation of the new law. This litigation further defined and strengthened legislation related to special education (see Table 1.6).

Post–PL 94-142 Legislation

After PL 94-142 had been implemented for a number of years, several major amendments were made to respond to litigation regarding its interpretation, to provide additional

TABLE 1.6 Significant Post–PL 94-142 Litigation

COURT CASE	ISSUE	RESULT
Board of Education of the Hendrick Hudson Central School District v. Rowley (1982)	Meaning of "appropriate" within FAPE	Although a school district must provide an appropriate education, it does not have to provide an optimal education.
Luke S. and Hans S. v. Nix et al. (1984)	Timely assessment	There should be more assessment before a referral to avoid a backlog of referrals.
Irving Independent School District v. Tatro (1984)	Related services	Clean intermittent catheterization was considered a related service for a student who needed it to attend school.
Burlington School Committee v. Department of Education of Massachusetts (1985)	Private school placement	The school district must pay for private school placement if the public school program is deemed inappropriate.
Honig v. Doe (1988)	Discipline	A student whose misbehavior is related to his disability cannot be denied a public school education.
Timothy W. v. Rochester School District (1988)	Educability	The school district must provide an educational program for a student with profound disabilities even if the district feels he is uneducable.

Endrew F. v. Douglas County School District (2017) - Individualized education programs - School districts must provide IEPs designed to provide more than minimal progress.

TABLE 1.7 Amendments and Reauthorizations of PL 94-142 Leading to the IDEA

LAW	YEAR	PRIMARY CHANGES
EHA Amendments PL 99-457	1986	Required states to provide services for children ages 3–5; required states to provide services for infants and toddlers from birth through age 2.
Individuals with Disabilities Education Act PL 101-476	1990	Changed the name from EHA to IDEA. Changed term "handicap" to disability and added person-first language; added autism and traumatic injury as disability categories; required an individualized transition plan by age 16.
Reauthorization of IDEA 1997 PL 105-17	1997	Students with disabilities must participate in statewide or districtwide assessments or take an alternate assessment. Students must participate in the general education curriculum to the maximum extent appropriate.

funding for exceptional individuals, to extend the rights of students with disabilities, and to change terminology used in the special education field. These acts, briefly summarized in Table 1.7, include the Education of the Handicapped Act Amendments of 1986 (PL 99-457), the Individuals with Disabilities Education Act (IDEA; PL 101-476), and the 1997 reauthorization of IDEA (IDEA 97; PL 105-17). Additional legislation was passed that provided safeguards against discrimination of individuals with disabilities, the Americans with Disabilities Act, and that encouraged accountability for student progress, the No Child Left Behind Act. These pieces of legislation directly or indirectly affected the current law, the IDEA of 2004, which guides current special education practices.

Americans with Disabilities Act (PL 101-336)

Enacted in 1990, the Americans with Disabilities Act (ADA) is essentially a civil rights act for individuals with disabilities. Among the provisions of the ADA are:

- Employers (for any business with 15 or more employees) cannot discriminate against those with disabilities. In other words, employers cannot use an individual's disability as a reason for not hiring him or her. In addition, employers must provide reasonable accommodations (e.g., modification of equipment), if necessary. Implementation of the ADA does not necessarily mean undue expense for the employer; there is language in the law that addresses the issue of excessive expenses. In addition, employers can be creative. For example, rather than replace a water fountain that is out of reach for an employee in a wheelchair, an employer could simply provide paper cups.
- Public accommodations (e.g., hotels, restaurants) must have appropriate building codes to allow free access for individuals with disabilities (e.g., ramps for individuals in wheelchairs).
- All public transit authorities must have vehicles that allow accessibility for individuals with disabilities.
- Companies offering usual telephone services must also provide similar services for individuals with disabilities. For example, a large corporation with an employee with a hearing impairment must have a telecommunication system such as a relay service in which a caller dials a special number to reach an interpreter who, in turn, contacts the employee. This allows the caller and the employee to communicate through the interpreter.

Source: Americans With Disabilities Act of 1990, Pub. L. No. 101–336, 104 Stat. 328 (1990).

Take a look around your college or university. Do you see signs of the ADA such as Braille room numbers and wheelchair ramps? The ADA has had, and will continue to have, a major impact on the lives of those with disabilities.

No Child Left Behind Act (PL 107-110)

The 1965 Elementary and Secondary Education Act was reauthorized in 1994 as the Improving America's Education Act, and again in 2002 as the No Child Left Behind (NCLB) Act. One of the main provisions of NCLB is an emphasis on standards and accountability, requiring annual assessments to demonstrate that students are making adequate yearly progress. Data indicated that prior to IDEA, students with disabilities were frequently being excluded in these types of assessments. The passage of NCLB made it clear that *all* students should be held accountable for their academic achievement. This meant that students with disabilities could not be excluded from districtwide or statewide assessments.

Every Student Succeeds Act (2015)

The Every Student Succeeds Act (ESSA) replaced NCLB and included several important provisions. All students should be educated using college and career ready standards. States have greater latitude in measuring student progress but must address achievement gaps for targeted groups including those students who receive special education. Only 1% of students may receive alternate assessments to the district and statewide assessments given to general education students.

Current Legislation: Individuals with Disabilities Education Act (PL 108-446)

The Individuals with Disabilities Education Improvement Act of 2004 is the latest reauthorization of IDEA. It was passed on November 19, 2004, and signed into law by George W. Bush on December 3, 2004. Congress made several statements justifying the rationale for reauthorizing IDEA. They acknowledged that the implementation of PL 94-142 and subsequent legislation resulted in improved services for children with disabilities and their families. But they also noted that efforts have been impeded by low expectations and a lack of focus on applying methods based on replicable research (considered scientifically based instruction).

The two parts of IDEA that have the most relevance for teachers are Part B and Part C. Part B includes guidelines and funding for providing special education for students ages 3 to 21, although if a state does not provide public education for children without disabilities ages 3 to 5 and/or 18 to 21, it is not required to provide services for students with disabilities in those age groups. Part C provides funding and guidelines for early intervention services for infants and toddlers with disabilities or who are at risk for developing a disability from birth through age 2 and their families. IDEA stipulates several requirements and provisions that serve as its backbone. Many of these evolved from the six principles first noted in PL 94-142. Others are the result of litigation and philosophical changes. We will discuss the provisions of IDEA that have the most relevance to you as a future teacher: free appropriate public education, Child Find, individualized education programs, the least restrictive environment, procedural guidelines, evaluation procedures, transition from Part C to preschool programs, and participation in assessments. How these requirements and provisions fit into the overall special education process is discussed in greater depth in Chapter 2.

Provisions and Requirements of IDEA

Free Appropriate Public Education (FAPE). Originally mandated in PL 94-142, free appropriate public education means that all children with disabilities between the ages of 3 and 21, including children with disabilities who have been suspended or expelled from school, must receive a free appropriate public education. The issue of FAPE was addressed by the Supreme Court in the *Rowley* case (see Table 1.6), specifically asking the question, "Does *appropriate* education mean *optimal* education?" The Court found that it does not. Let's consider this issue with an example. Parents of most students with disabilities would probably argue that their children would benefit from having their own laptop computer. Does this mean that all those students must be provided with one? The decision is based on the unique needs of each individual student. If a student could participate in the educational program without a computer, even though the educational

program might be enhanced by the addition of a computer, the answer is probably no. If, however, a student with a severe writing disability needed the computer to participate in the educational program, then the answer would probably be yes.

In a sense, IDEA requires that the school district "level the playing field" so the student with a disability is not put at a disadvantage and an "appropriate" education is provided. In an interesting analogy, Bateman and Linden (1998) described this situation as follows: "The IDEA sets a Chevrolet standard, not a Cadillac standard. Be careful, though, not to mistake this for a Yugo standard. An IEP need not provide a superior education, but it must offer real educational benefit" (p. 145). In other words, every attempt must be made to give students everything they require based on their unique educational needs. In fact, many states have laws that require schools to provide programs that exceed the standards set by federal law. IDEA also specifically states that educators must maintain high expectations for students with disabilities, implying that more than minimal educational programs should be provided.

Child Find. This mandate of IDEA requires that all children with disabilities, including those who are homeless, wards of the state, and who attend private schools, be identified and evaluated to determine if they need special education services. This has been accomplished through community awareness efforts advertising that special education programs exist and resulting in many large-scale screening programs. Child Find applies to children who have all levels of disabilities and those who are at risk for having a disability.

The Individualized Education Program (IEP). IDEA states that all children identified with a disability must have an individualized education program (IEP). An IEP is a statement of the student's specific educational program written by a multidisciplinary team that includes, among other things, the student's goals, any related services necessary, and how the student will participate in accountability assessments. An IEP must be developed for all students with a disability beginning at age 3. Recently, the U.S. Supreme Court in the *Endrew F. v. Douglas County School District* ruled that a child's IEP must be designed to make appropriate, not minimal, progress. For infants and toddlers, an individualized family service plan (IFSP) must be developed, reviewed, and revised. An IFSP is also a written statement of the child's educational program, but includes the role of the family as well.

The Least Restrictive Environment (LRE). The least restrictive environment mandate requires that students with disabilities be educated with children without disabilities to the maximum extent appropriate. In other words, students with disabilities should be segregated from their peers without disabilities to the least extent appropriate. In addition, it states that students should be removed from the general education environment only when the nature or the severity of the disability is such that education in that setting with the use of supplementary aids and services cannot be achieved satisfactorily. This means that the students should be taught in the general education classroom unless their disability is significant enough that they need more intensive instruction that cannot be delivered in that setting (e.g., a student with profound intellectual disabilities who needs to work on independent living skills).

Procedural Guidelines. A considerable number of procedural safeguards are built into IDEA that specify the rights and responsibilities of both the parents of the child with the disability and the local educational agency (LEA). For example, parents have the opportunity to:

- Examine all records relating to their child.
- Participate in meetings involving the identification, evaluation, and educational placement of their child.
- Obtain an independent educational evaluation if they so choose.

due process A safeguard system to ensure that decisions regarding a student's educational program are fair and just.

A safeguard system, **due process** procedures, provides a mechanism to ensure that decisions regarding the educational program for a student with a disability are fair and just. If there is a disagreement between the parents and the LEA, a due process hearing can be called. This brings in a neutral third party (called a hearing officer) who mediates and determines if procedural errors resulted in (1) the student not receiving FAPE, (2) the

parents not being able to participate in decision making regarding their child's FAPE, or (3) deprivation of the student's educational benefits. Because of the costly and time-consuming nature of due process hearings, additional safeguards have been included in IDEA that are designed to avoid due process hearings if possible. These include the option of requesting mediation prior to filing a due process complaint and the addition of a dispute resolution process called a "resolution session." This session must be convened prior to a due process hearing unless both the LEA and the parents agree to waive it. The intent is to develop a written, binding settlement to the dispute in question.

Evaluation Procedures. Several guidelines relating to evaluation are included in the most recent reauthorization of IDEA. An initial evaluation is required within 60 days, or within a state's established time frame, of receiving parental consent for the evaluation to determine if a child has a disability. The evaluation should also determine the educational needs of the student. The law specifies that a reevaluation must be conducted if the LEA determines that it is necessary or if the parents or teacher requests one. However, a reevaluation *cannot* be conducted more frequently than once a year unless the parent and the LEA agree, and it *must* be conducted at least once every 3 years unless both the parent and the LEA agree that it is not necessary. IDEA also outlines appropriate guidelines that should be followed when assessing students including the following:

- Use of a variety of assessment tools and strategies to determine whether the child has a disability.
- Determine the content of the IEP, including information showing how the student will be involved in the general education curriculum.
- The evaluation cannot be a single measure or assessment. In other words, multiple measures or procedures must be used in determining eligibility and IEP content. Technically sound instruments also must be used.

Nondiscriminatory evaluation procedures first specified in PL 94-142 are embedded in this section of the law as well. These include the requirement that assessments and other evaluation materials (1) are selected and administered so as not to be discriminatory on a racial or cultural basis, (2) are provided and administered in the language and form most likely to yield accurate information on what the child knows and can do academically, developmentally, and functionally, unless it is not feasible to do so, (3) are used for purposes for which the assessments or measures are valid and reliable, (4) are administered by trained and knowledgeable personnel, and (5) are administered in accordance with any instructions provided by the producer of such assessments. Students must also be assessed in all areas of suspected disability.

Transition from Part C to Preschool Programs. IDEA ensures that infants and toddlers from birth through age 2 participating in early intervention programs (covered under Part C) have a smooth and effective transition to preschool programs (covered under Part B). For example, the Part C service coordinator or other professional working with the infant or toddler and family members will also be on the child's initial IEP team when the transition occurs at age 3. This provision is discussed in depth later in this chapter.

Participation in Assessments. Originally mandated in 1997, the participation in assessments provision requires that all children with disabilities be included in all general, state, and districtwide assessments. If possible, students with disabilities should participate in the same required assessment program designed for all students, although accommodations can be provided. Accommodations might include increased time to take the assessment, a different setting, different response type (such as oral vs. written), or revised formats (such as enlarged print). In some instances, it might not be appropriate for a student to participate in the assessment, even with accommodations. For example, if a student's disability is severe enough that the assessment would not provide meaningful information regarding educational progress, the student would not need to participate in the required assessment. In this situation, an alternate assessment must be administered that more appropriately measures the content of the

educational program. However, the ESSA includes that only 1% of students should receive alternate assessments.

Controversial Issues Addressed by IDEA

The 2004 reauthorization of IDEA addressed two controversial areas that have implications for both students with disabilities and the teachers who work with them. The first issue has to do with the procedural guidelines involving the discipline of students with disabilities. The second has to do with the concept of "highly qualified" when considering the credentials of special education teachers.

Discipline of Students with Disabilities. The issue of discipline, initially addressed in 1997, has to do with change of educational placement. Regardless of the behavioral incident requiring discipline, the student must continue to receive educational services that address IEP goals. Several interrelated factors are involved in decisions regarding the change of placement. These are (1) the nature of the incident requiring disciplinary action, (2) the determination of whether the incident was caused by or was related to the student's disability, and (3) the authority and rights of both the parents and the LEA. Let's look at each of these factors separately.

1. *Nature of the incident*. If the incident requiring discipline involves weapons or drugs, or results in serious bodily injury to others at school, on school premises, or at a school function, the student may automatically be placed in an interim educational placement, not to exceed 45 school days. These incidents involve what is known as **zero tolerance,** meaning that the infraction automatically results in the disciplinary action without considering extenuating circumstances. Zero tolerance policies have received criticism by some when they are used with students with disabilities. Is it fair never to consider the circumstances? What if an elementary student with an intellectual disability brings a knife in his lunch box that his mother accidentally left when she was cutting his apple that morning? The National Association of School Psychologists (2002) noted that "rather than increasing school safety, zero tolerance often leads to indiscriminate suspensions and expulsions for both serious and mild infractions. Studies have shown that minorities and students with disabilities constitute a disproportionately large percentage of expulsions and suspensions. Yet 95% of students in special education suspended and expelled did not exhibit the violent or aggressive behaviors that are the intended targets of zero tolerance policies" (p. 2).
2. *Relationship of incident to student's disability*. If a decision is made to change a student's placement, a **manifestation determination** must be conducted within 10 school days to determine if the incident was caused by, or related to, the student's disability or if the incident was caused by the LEA's failure to implement the IEP. If either of these two criteria is met, the LEA must conduct a **functional behavior assessment (FBA)** and develop a **behavior intervention plan (BIP),** if they have not already been implemented. An FBA involves the determination of the function or purpose that a negative behavior serves and leads to the development of a BIP, which emphasizes the development of positive behaviors that will serve the same purpose as the negative behavior. The LEA must also modify the BIP if one has already been developed and return the student to the original placement (unless the LEA and parents agree otherwise). A manifestation determination is not necessary if the incident in question meets the criteria of the zero tolerance policy described in item 1.
3. *Authority of the LEA*. The LEA is given considerable latitude under IDEA. For example, the LEA can consider unique circumstances on a case-by-case basis when making a decision about changing a student's placement. The LEA also has the authority to change placement on an interim basis for no more than 10 school days. Finally, if the incident is found *not* to be related to the student's disability, the LEA can use the same disciplinary procedures used with students without disabilities (although FAPE must still be provided).

zero tolerance Disciplinary action taken without considering extenuating circumstances.

manifestation determination Procedures used to determine if a behavior requiring disciplinary action is caused by, or related to, the student's disability.

functional behavior assessment The determination of the function or purpose that a behavior serves.

behavior intervention plan An educational program that emphasizes the development of positive behaviors that will serve the same purpose as a negative behavior.

Highly Qualified Teachers. The second controversial issue in IDEA has to do with the criteria of highly qualified teachers, a requirement that all teachers must meet per the legislation. This requirement was first outlined in the No Child Left Behind Act for general education teachers, although IDEA identified the criteria for highly qualified special education teachers. There were three requirements for public elementary or secondary special education teachers to be considered highly qualified under IDEA:

1. Full state certification as a special education teacher (including certification through alternative routes) or have passed the state special education teacher licensing examination. Teachers in charter schools must meet the requirements of the state's public charter school law.
2. The special education certification or licensure requirements have not been waived on an emergency, temporary, or provisional basis.
3. At least a bachelor's degree.

Requirements for special education teachers working with students meeting alternate achievement standards, as well as for those teaching multiple subjects, are also specified. The ESSA removed the federal requirements for who is a qualified teacher. However, states will still specify requirements for certification/licensure.

Any relaxation of standards for becoming a qualified special education teacher has led to some controversy. Because states may set their own criteria (e.g., pass the state certification test in special education), some fear teachers may be qualified as special educators with limited knowledge and skills in the field. The passage of the Every Student Succeeds Act has not alleviated these concerns.

Check Your Understanding

1. What are three early court cases that had an impact on the field of special education?
2. What are the six principles of PL 94-142 that are still relevant in IDEA?
3. What court cases focused on the interpretation of PL 94-142? Which principles did they address?
4. What are the requirements of the Americans with Disabilities Act?
5. Describe the eight provisions of IDEA that are most relevant to teachers.
6. What are two controversial issues addressed by IDEA?

What Are Some Current and Future Issues in Special Education?

Philosophical movements, historical events, and the impact of litigation and legislation have all resulted in issues in special education that are important today and will undoubtedly remain so in the future. Three of these issues in particular are the overrepresentation of students from culturally and linguistically diverse (CLD) backgrounds, the emphasis on education and transition of infants and toddlers with disabilities, and the important role of the general education teacher.

Overrepresentation of Students from Culturally or Linguistically Diverse Backgrounds

One of the significant concerns of professionals in the special education field is the overrepresentation of students from culturally or linguistically diverse backgrounds in certain categories of disabilities, particularly intellectual disabilities and emotional/behavioral disorders. **Culturally diverse students** are those who come from backgrounds

culturally diverse students Those students who come from backgrounds that are not primarily western European.

that are not primarily western European. This population of students is rapidly growing. Based on several sources, Sadker et al. (2008) reported these statistics:

- About 6 million Americans claim multiracial heritage with two or more races indicated on Census 2000.
- By 2030 the number of U.S. residents who are nonwhite or Hispanic will be about 140 million or about 40% of the U.S. population.

linguistically diverse students
Those students whose primary language is not English. Sometimes referred to as English language learners or as having limited English proficiency.

Linguistically diverse students are those whose primary language is not English. They are sometimes referred to as English learners (ELs) or as having limited English proficiency (LEP). The LEP population is the most rapidly growing population in our nation. In some states, such as Florida, Texas, and California, students from non-European or non-English-speaking backgrounds already comprise more than 50% of the school population. In some areas, these students may simply be referred to as English learners.

In IDEA, Congress acknowledged the significance, yet difficulty, of addressing the educational needs of students from culturally and linguistically diverse backgrounds, citing the following information:

- In 2000, one of every three persons in the United States was a member of a minority group or had limited English proficiency. In the 2010 Census, approximately 40% of the population was nonwhite.
- Studies have documented apparent discrepancies in the level of referral and placement of limited English proficient children in special education.
- More minority children continue to be served in special education than would be expected from the percentage of minority students in the general school population.

The issue is complicated further when one considers that many students from culturally or linguistically diverse backgrounds come from low socioeconomic backgrounds. Poverty is considered a demographic variable associated with academic achievement (Lacour & Tissington, 2011).

In response to the data that indicate the overrepresentation of students from CLD backgrounds in certain categories of special education, IDEA acknowledged that greater efforts are needed to prevent the intensification of problems connected with mislabeling and high dropout rates among minority children with disabilities. It also encouraged recruitment efforts for increasing the number of teachers from minority backgrounds to act as appropriate role models, provided funding for training personnel in effective teaching strategies and positive behavior interventions, and provided supports to prevent overidentification and misidentification of students. In the chapters in Parts 2 through 4, overidentification, or underidentification in the case of gifts and talents, of CLD students is discussed when it occurs. Additionally, specific concerns or conditions related to identification, instruction, and working with families of CLD students are addressed. It is worth noting that the term "minority children" may not even be applicable or appropriate in the future as the diversity of the population continues to increase.

Education and Transition of Infants and Toddlers

Part C of IDEA focuses on the education and transition of infants and toddlers, including the role of the family in their child's educational program. Recent available data indicate that the number of infants and toddlers with disabilities served under Part C in 50 states and the District of Columbia in 2008 was near 338,000, or 2.8% of the population of children birth through age 2 years. The number of children served in 2017 was over 386,000, or 3.2% (USDOE, 2019). Responding to this increase, IDEA made several recommendations and suggestions for improving Part C.

Part C now requires that the state provide a "statewide, comprehensive, coordinated, multidisciplinary, interagency" system that provides early intervention services for infants and toddlers with disabilities and their families. Among the services required by the state are (1) a rigorous definition of "developmental delay," (2) a comprehensive, multidisciplinary evaluation of the infant or toddler and an identification of the needs of the family, and (3) an individualized family service plan (IFSP) that also identifies the service coordinator who will be primarily responsible for the delivery of the IFSP. The service coordinator is a professional from the discipline most immediately relevant to the content of the IFSP.

Several mandates are included in Part C that affect children from birth to age 5. Many of these have to do with ensuring that there is a smooth transition for infants and toddlers served under Part C into Part B (beginning at age 3). Two points regarding transition are worth noting. First, the IFSP must indicate the steps to be taken to support the transition of the toddler to preschool or other appropriate services. Second, if the toddler is transitioned to a Part B program, the service coordinator or other representative from the Part C program is invited to the initial IEP meeting to assist with the transition from the IFSP to an IEP.

Another option may be available for parents when their child reaches age 3. IDEA now includes a new, optional state program. This program, if developed by a state, allows the toddler to continue to receive Part C services until he or she enters kindergarten. The program must include an educational component that promotes school readiness and that incorporates preliteracy, language, and number skills. Parents would be given the option to receive these services or to transition to Part B. Although this seems like a nice option, there are some concerns regarding its implementation because no additional funding was appropriated for this program.

An important addition to IDEA Part C requirements is that states that are applying for funding must include a description of the policies and procedures in place to ensure compliance with the Child Abuse Prevention and Treatment Act (CAPTA). Specifically, the state must show that a child under 3 will be referred for early intervention if (1) he or she is involved in a substantiated case of child abuse or neglect or (2) is affected by illegal substance abuse or has withdrawal symptoms from prenatal drug exposure.

Chapter 13 includes in-depth information on infants and toddlers including those who have disabilities or are at risk for developing a disability. Each chapter in Parts 2 to 4 includes discussion of early childhood considerations, particularly for children ages 3 to 5. Due to the importance of early intervention for many disabilities, it is important that special education teachers have strong knowledge of this area. Although most general classroom teachers will not be involved in early intervention, understanding its components and how to best transition children from early intervention programs into elementary school classrooms is important. In addition to including the preceding information on the transition from early childhood to elementary programs, this text also provides integrated coverage of transition from high school into higher education, employment, or simply adulthood.

It is important to ensure that toddlers have a smooth transition from Part C services to Part B services.

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Role of the General Education Teacher

An important issue in special education today is the increasingly important role of the general education teacher. When PL 94-142 was passed, stating that education for students with disabilities should occur in the least restrictive environment, the general education teacher became, in a way, an unsuspecting, and in some cases unwilling, participant in special education. For the most part, general education teachers were given neither appropriate training nor support that would help them in their new role of being a part of the special education process. Even knowing what their exact role should be was unclear. Misunderstandings of the term *LRE* worsened the situation. In a certain sense, however, general education teachers' fears of what might happen were worse than the eventual reality. For whatever reasons, the years following passage of the law created some dissonance between general and special educators. Many general education teachers resented being asked to teach students they were not trained to teach. Many special education teachers thought movements such as full inclusion might be an attempt to limit the number of special educators and their roles in delivering services. Today, both sides have moved toward the realization that each has a very important role in the process of educating exceptional students. It is imperative that general education teachers are prepared to teach exceptional students in their classrooms, both through creating a positive and supportive classroom and through collaboration.

At the core of this text is the concept that both general and special education teachers need to be thoroughly prepared to teach and support all students. To do this as effectively as possible, they must work together. Chapter 3 specifically addresses different collaborative models. In summary, the field of special education has been, and continues

to be, affected by a number of factors, including philosophical, historical, and legal factors. As a future educator, it is important for you to acknowledge these factors and continue to monitor changes that will affect your role in the classroom.

Check Your Understanding

1. Who are culturally and linguistically diverse students? What are the existing and projected demographics for these groups in the United States?
2. What recommendations or provisions does IDEA include to address the problem of overrepresentation of culturally and linguistically diverse students in special education?
3. What provisions does Part C of IDEA make for serving infants and toddlers? What steps are taken to help transition toddlers from Part C to Part B?
4. What initial concerns did general education teachers have after the passage of PL 94-142?

Chapter Summary

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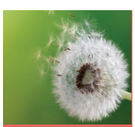

SUMMARY

Who Are Exceptional Students?

- An exceptional student is one whose educational needs are not being met by a traditional program so that a special education program is necessary.
- An exceptional student can have a disability or have significant gifts and talents.
- The terms *handicap, impairment,* and *disability* are not synonymous. Disability is the term most widely used in schools.

How Many Exceptional Students Are There?

- Prevalence refers to the number of individuals who are in a particular category at a specific point in time and is expressed as a percentage. Incidence refers to the number of individuals identified in a particular category within a specific time frame (generally a year).
- The prevalence rate for exceptional students was approximately 9.2% in 2017. This prevalence figure does not include gifted and talented students.
- The largest disability categories are other health impairments, specific learning disabilities, and speech or language impairments. The percentage of students birth through 2 years served increased from 2.8% in 2008 to 3.2% in 2017.

What Are Special Education and Related Services?

- Special education refers to instruction specifically designed to meet the needs of exceptional students.
- Special education involves four components: instructional content, instructional procedures, the instructional environment, and instructional technology.
- Each component should emphasize the concept of Universal Design for Learning.
- Related services are those activities or services that enable a child with a disability to receive a free appropriate public education and to benefit from the special education program.

What Is the History of Special Education?

- Documentation of the existence of exceptional individuals has been provided since the beginning of recorded history.
- Attempts to provide humane treatment were not made until the 18th and 19th centuries, primarily by European physicians such as Jean Marc Itard.
- In the mid-1800s, attempts to educate individuals with visual impairments, hearing impairments, and intellectual disabilities began in the United States.
- In the 1900s, parent advocates, professionals, and eventually litigation and legislation furthered the cause of individuals with disabilities.

How Have Litigation and Legislation Affected Special Education?

- Important early court cases related to special education include *PARC v. Pennsylvania* and *Mills v. Board of Education of District of Columbia*.
- Important legislation includes PL 94-142 and its various amendments and reauthorizations.
- The Americans with Disabilities Act and the Every Student Succeeds Act of 2015 have had impacts on adults and students with disabilities respectively.
- The special education law that guides current practice is the Individuals with Disabilities Education Improvement Act of 2004 (IDEA).
- Key provisions of IDEA are free appropriate public education, Child Find, individualized education programs, the least restrictive environment, procedural guidelines, evaluation procedures, transition from Part C to preschool programs, and participation in assessments.

What Are Some Current and Future Issues in Special Education?

- Issues in special education include the overidentification of students from culturally and linguistically diverse backgrounds, the emphasis on the education and transition of infants and toddlers with disabilities, and the important role of general education teachers.

Reflection Topics and Application Activities

1. Why do you think terms such as handicap and mental retardation are used less now than in 1975 when PL 94-142 was passed?
2. If you were a parent of a child with a disability, how much would you want to be involved in developing your child's education program?
3. If you were a parent of a toddler with a disability, would you want to transition your child to Part B at age 3 or wait until he or she was age 6? What do you think are the pros and cons of each decision?
4. Determine what accommodations your university provides to comply with the Americans with Disabilities Act. Review what services and accommodations are available to university students with disabilities.
5. Research Itard's work with Victor. What teaching procedures did he use? How effective were they?
6. Visit an inclusion classroom. Interview both the general education teacher and special education teacher and make a list of (1) their roles and responsibilities performed individually and (2) their roles and responsibilities performed collaboratively.

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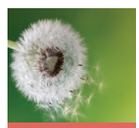

SUMMARY

CHAPTER 2

The Special Education Process: From Initial Identification to the Delivery of Services

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CHAPTER OUTLINE

INTRODUCING SAMMY

Sammy is a 7-year-old boy who just started second grade in a new school. His teacher, Ms. Gonzalez, noticed that Sammy is struggling academically, particularly in the areas of reading and language arts. He is having difficulty with his phonics skills, and both his handwriting and spelling are below the level expected for his age. He is considerably slower completing assignments than his peers and often has to have individual help because he can't keep up. He has to go at his own pace, even when Ms. Gonzalez works with him in a small group.

Sammy is absent from school quite often and misses valuable instructional time, which affects his academic progress. In addition, Sammy is starting to display some behavior problems. He is occasionally overly aggressive with his peers, pushing and shoving his classmates and calling them names. Ms. Gonzalez describes Sammy's behavior as "explosive" and "unpredictable." Attempts by Ms. Gonzalez to have a parent conference have been unsuccessful because Sammy's parents have not responded to her messages. She requested to see the records and files from his previous school. Although the records were incomplete, they did indicate that Sammy had some of the same problems the previous year in first grade. His attendance was very sporadic, and he barely passed his academic subjects to allow promotion to second grade. Ms. Gonzalez noted that in the first academic screening tests in the Fall, Sammy's performance indicated he was lagging behind his peers, not meeting his academic benchmarks in language arts or math.

Take a moment to think about Sammy. Throughout this chapter, we'll ask you questions as you consider Sammy's situation in relation to the special education process. Similar cases and revisit questions are included in all subsequent chapters. ■

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Ms. Gonzalez is very concerned about Sammy's lack of progress in her classroom. Sammy persistently struggles in academic areas such as reading and language arts, and displays behavior problems, such as aggression, that warrant attention. Based on her observations, Ms. Gonzalez thinks it is possible that Sammy has some type of disability that would require special education. In their

careers, general education teachers will see a variety of indicators that may make them suspect that special education is needed for some of their students. Exceptional students are those whose educational needs are not being met in general education so that some type of "special" education program is necessary. In this chapter, we discuss the steps that ultimately result in the determination of which students receive special education. We also discuss the process of developing special education programs once students are identified. The steps in the special education process are initial identification, the prereferral process (including the response to intervention [RTI] process), the referral process, the determination of eligibility for special education, and the development of the student's special education program.

Although parents or physicians usually identify children with severe disabilities prior to their reaching school age, children with mild disabilities are often not identified until they are in the general education classroom. The general education teacher often makes the initial identification of a potential problem and is responsible for instituting a prereferral intervention program to provide immediate assistance and to determine whether the problem can be successfully addressed in the general education classroom, thereby avoiding a referral to special education. This might also involve use of a multitiered system of supports (MTSS) that may include the response to intervention (RTI) model. The MTSS is used to address academic, social, behavioral, and emotional needs as well as absenteeism (Rosen, n.d.). What has been referred to as RTI is included under the MTSS umbrella of services and is focused on academic and behavioral concerns. If a referral is needed, it is usually the general education teacher who initiates it or a student assistance team that works through the MTSS and RTI processes. During this time, the student is still a full-time general education student participating to the maximum extent appropriate in the general education curriculum.

The special education teacher and/or a student assistance team may assist the general education teacher in developing a prereferral intervention program that may also be implemented during one of the tiers in the MTSS/RTI model, and definitely will become involved if the student is referred for evaluation for special education. If the student is identified as having a disability, the special education teacher will play an important role in developing the student's individualized education program (IEP) and ultimately delivering instruction.

This special education process is used for the majority of individuals who fall into an IDEA disability category (those described in Parts 2 and 3 of this text). For the other exceptionalities discussed in this text (those in Part 4), similar processes unique to these exceptionalities are used.

How Are Exceptional Students Initially Identified as Having a Possible Exceptionality?

The first step in the special education process is to identify an individual as having a potential exceptionality. A number of individuals, including physicians, parents, and teachers, could be involved in this identification process. A variety of methods, from informal observation to formal screening tests, are used to identify a child who may need special education.

Initial Identification of Infants, Toddlers, and Preschool Children

Most individuals with severe intellectual disabilities or physical or sensory impairments are initially identified as needing a special education program early in life by their parents or physicians. In fact, this realization might even occur before the birth of the child based on prenatal testing. All infants, toddlers, and preschool children who have a disability or are at risk for developing a disability are entitled to special education services. This early identification of all children with disabilities is consistent with the Child Find provision of IDEA. Some parents might begin to notice that their preschool child's developmental skills, such

as speech or language skills, seem to be lagging behind those of other children of the same age. Teachers of young children may also notice those who appear to be developmentally behind their same age peers.

Many school districts have large screening programs to determine whether further evaluation is needed. One screening test used in such programs is the Developmental Indicators for the Assessment of Learning–4 (DIAL–4) (Mardell & Goldenberg, 2011). The DIAL–4 consists of items measuring the areas of language, concepts, motor skills, self-help development, and social development. Cutoff scores determine whether additional evaluation is needed. If a potential problem is identified through the screening tests, the child is referred for further evaluation. Similarly, the DIAL–4 could be used to identify young children who might be gifted. The MTSS/RTI process also involves screening of all students (e.g., in language arts and math skills), and different school districts will use any number of valid and reliable instruments for this purpose.

Initial Identification of School-Aged Students

Most children with mild disabilities are not identified as having a potential disability until they start school and begin to fall behind their classmates academically in areas such as reading or math, or demonstrate behavior problems such as withdrawal, aggression, or lack of compliance. The general education teacher frequently makes the determination that a significant difference is evident based on classroom performance. Another means of identifying potential problems is through the results of routine districtwide or statewide testing administered for accountability purposes and for monitoring student academic performance. One approach has been the use of the previously mentioned RTI model, in which the entire class (or school) is screened to see who is at risk of having a disability and needs additional help. These universal screening assessments are typically administered in fall, and again later in the year at least once or twice more (Frank et al., 2019).

SAMMY REVISITED What about Sammy first drew Ms. Gonzalez's attention? Were some aspects of Sammy's behavior more troubling to her than others?

With the RTI model of academic interventions, a team of educators (and parents/guardians) determine specific learning objectives for a student based on universal screening results, actual classroom performance, prior efforts used, and regular progress monitoring. If a student does not make adequate progress in response to the classroom interventions at the various tiers of intervention (usually three tiers of progressively intensive and individual interventions), the team may decide that a referral for special education is needed. The philosophy behind the MTSS/RTI model is to mediate student learning issues in the general education environment. The RTI model also provides prereferral assessment and intervention data through the regular progress monitoring. These data are helpful to the team who will assess the student for eligibility for special education services (Frank et al., 2019).

Check Your Understanding

1. Which types of disabilities are frequently identified early in an individual's life?
2. When are most students with mild disabilities identified?
3. What is the MTSS/RTI model?

What Are the Prereferral Process and the Referral Process?

When a student is initially identified as potentially having a need for special education, a decision must be made concerning whether or not to refer him for evaluation and consideration for special education services. If the student has a severe problem, the referral is usually made immediately. As just mentioned, if the problem is mild in nature, the student usually will go through the prereferral process. Based on information obtained in the prereferral process, a decision is made whether or not a referral for