FIFTH EDITION

Learners *with* Mild Disabilities
A Characteristics Approach

Eileen B. Raymond

Learners with Mild Disabilities

A CHARACTERISTICS APPROACH

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ABOUT THE AUTHOR

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In 2009–2010, Dr. Raymond served as a Fulbright Scholar at Nelson Mandela Metropolitan University (NMMU) in Port Elizabeth, South Africa, where she taught in their teacher preparation program and helped revise their programs related to inclusive education. She continues to work with NMMU colleagues as a Research Associate on curriculum for preservice teachers. She recently completed a short-term Fulbright Specialist project related to barriers to learning at the university level. Her current research focuses on issues relating to serving diverse learners with disabilities and other vulnerable children in inclusive settings, with special interests in universal design for learning, global inclusive education initiatives, and language diversity. In addition to *Learners with Mild Disabilities,* she recently completed another book, *Making Inclusive Education Work in Classrooms* (Pearson SA), with five South African colleagues. She frequently presents on topics of inclusive practice in the United States and internationally. She is an active member of the Council for Exceptional Children, serving as president of CEC's Division for International Special Education and Services from (DISES) from 2015 to 2017.

PREFACE

Learners with Mild Disabilities is designed for use at the undergraduate and graduate levels as the main text in courses addressing disabilities in the milder range of impairment, including intellectual disabilities, learning disabilities, attention-deficit/hyperactivity disorders, emotional and behavioral disorders, and autism spectrum disorders. Such courses are typically among the first specialized courses in a special educator preparation program. This text should be especially useful to students preparing for careers in non-categorical settings.

NEW TO THIS EDITION

This fifth edition of *Learners with Mild Disabilities* retains many of the distinctive features found in the previous editions, but with significantly updated content throughout:

- In this edition, the book has been changed to an electronic book format. This change allows the book to be more accessible to readers globally. It also allows the inclusion of new interactive features such as the *Video Links* and links to Glossary definitions.
- *Video Links* have been added to each chapter to extend the learning of the reader.
- The *On the Web* references have been updated and integrated within the text to allow readers to more easily pursue in more depth topics they encounter within the text.
- New case studies have been added to Chapters 1, 4, 5, and 10. The case studies at the end of each chapter provide current material for enhancing reader engagement.
- All data tables and figures have been updated with the most recent information from the *31st Annual Report to Congress on the IDEA* and other federal databases.
- The publication of the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (2013)* by the American Psychiatric Association made significant changes to the material related to autism spectrum disorders as well as other developmental disorders. These changes have been incorporated in the relevant chapters of this book.
- New material related to international policies and practices for serving children with disabilities and other vulnerable children has been added to Chapter 1. This global context helps expand the reader's understanding of concepts like inclusive education.
- References cited throughout the text have been updated. These current resources provide readers with options for further study of particular topics.

FEATURES OF THIS EDITION

This edition retains a number of features from previous editions that are designed to facilitate the active learning of readers. The juxtaposition of the traditional categorical approaches to mild disability with non-categorical approaches helps highlight the complexity of determining student needs. The text provides current and potential special educators with the knowledge needed to understand both approaches and then challenges them to synthesize these perspectives into a functional approach to identification, planning, and instruction. It also challenges the simplistic notion that merely determining the correct label or finding the perfect definition is the most important task in designing interventions and supports. Throughout, the text does not avoid conflicting philosophical perspectives but rather uses such apparent discontinuities to stimulate readers' analytical skills.

    Learners with Mild Disabilities includes extended case studies drawn from the experiences of real children and teachers, thereby providing practice material that is both realistic and relevant. These cases are longer and more complex than is common in books of this type. Because they are composites based on actual experiences, they are realistically messy and unfinished. They present challenges to readers' analytical skills and provide the basis for interesting class discussions, promoting the disequilibrium necessary for learning as Piaget theorized. Discussions based on the questions accompanying each case provide opportunities for significant active learning in cooperative learning groups and whole-class instruction.

Learners with Mild Disabilities provides a variety of approaches to thinking about disabilities. In addition to the IDEA disability definitions, Unit II also discusses alternative definitions of high-prevalence or mild disabilities, including:

- The 2010 AAIDD definition of intellectual disabilities
- The NJCLD definition of learning disabilities
- The 2013 *DSM 5* definitions of ADHD and autism spectrum disorders
- The Mental Health and Special Education Coalition definition of emotional or behavioral disorders

Throughout *Learners with Mild Disabilities*, the following structural features are used to highlight the chapter topic and assist student learning:

- *Learning Outcomes,* which serve as advance organizers.
- *Opening vignettes,* accompanied by challenging discussion starters, set the stage for the content in the chapter.
- *Spotlight on History* boxes present adapted original texts as contextual elements (Chapters 1, 4, and 6).
- *In the Classroom* boxes help illustrate key concepts with realistic short stories of learners with disabilities (Chapters 3, 9, 10, 11, and 12).
- *Universal Design for Learning in Action* boxes provide examples of teacher actions that can be used to support student learning more flexibly (Chapters 2, 9, 10, 11, and 12).
- *Diversity in Focus* sections within each chapter highlight issues related to relevant to diversity and chapter content. Rather than isolating this discussion within a single chapter, *Learners with Mild Disabilities* infuses the entire text with discussion of linguistic and cultural diversity. These Focus sections within each chapter highlight the most significant issues of language and culture relative to chapter content.
- *On the Web* marginal notes throughout each chapter provide access to a variety of current websites to extend readers' consideration of chapter content.
- *Video Links* marginal notes are integrated throughout the text to provide audio and visual materials that enhance critical concepts and developments.
- *Extended Case Studies* at the end of each chapter challenge readers to apply the concepts presented in the chapter.

ORGANIZATION OF THIS EDITION

As noted previously, *Learners with Mild Disabilities* departs from the exclusively categorical approaches to disability found in other texts. This text is based on the awareness that the notion of discrete disabilities has not been well supported by recent experience and philosophical discussions in special education, and especially at the milder level. Consequently, the text develops an alternative model to prepare special educators for careers in the complex world of mild disabilities, while still equipping them to discuss categorical issues intelligently. *Learners with Mild Disabilities* looks first at the high-prevalence disabilities from the conventional, categorical perspective, followed by presenting readers with a variety of alternative conceptual frameworks for looking at these learners from the perspective of individual learner strengths and needs. *Learners with Mild Disabilities* also uses person-first language throughout the book when referring to individuals with disabilities, modeling for readers the use of appropriate and accurate language. The principles and rationale for person-first language are presented in Chapter 1.

Unit I provides a concise and focused context for the study of disability and issues of classification, assessment, identification, curriculum, instruction, and placement of students with mild disabilities, as well as providing a summary of key IDEA provisions.

Unit II describes learners with high-prevalence learning and behavioral conditions—intellectual disabilities, learning disabilities, emotional or behavioral disorders, autism spectrum disorders, and other conditions, including attention-deficit/hyperactivity disorders. Each chapter explains the development of the definitions for these conditions as currently found in IDEA, as well as others proposed by organizations such as the American Association on Individuals with Intellectual Disabilities and the American Psychiatric Association. Each chapter identifies a variety of concerns

about the adequacy of the IDEA and other definitions, as well as information on the prevalence and signature characteristics of each disability. Readers are given the opportunity to apply the current disability definitions through the extended case studies that are designed to help them identify critical issues related to the application of the definitions of these conditions.

In Unit III, readers consider the functional characteristics of learners with mild disabilities—their cognitive, linguistic, academic learning, and social–emotional characteristics. *Learners with Mild Disabilities* develops conceptual frameworks related to learner functioning, illustrating the use of these frameworks to analyze a particular child's difficulties and strengths rather than a disability label. Moving beyond the categorical perspective, *Learners with Mild Disabilities* focuses on the learner characteristics that may be related to a learner's particular difficulties. Readers are guided in applying these conceptual frameworks to analyze any learner's skills and deficit areas, regardless of the labeled condition. Extensive use of short vignettes in Unit III and the extended case studies help readers apply the frameworks to individual learners as an aid to more appropriate diagnosis and instructional planning.

Learners with Mild Disabilities develops the current knowledge base needed to serve all learners, including those from varying cultural and linguistic backgrounds. Given an increasingly diverse school population, educators are expected to provide instruction that is culturally sensitive. *Learners with Mild Disabilities* highlights the need to focus on the learner, rather than on a category or a particular language or ethnic group. By becoming sensitive to the variability of characteristics found in individual learners, educators will be better able to identify the needs of students with unique cultural and linguistic backgrounds, as well as those with a variety of disabilities. Readers will then be able to use this information to design more effective and relevant instruction for all students.

PHILOSOPHICAL BACKGROUND FOR THE STUDY OF MILD DISABILITIES

Throughout history, disability has been conceptualized primarily as deviance. Individuals with disabilities have been diagnosed, labeled, and treated in accordance with that perceived deviance. Disability services have been justified by first determining that an individual met the criteria for one of the established disability categories and therefore was in need of special treatment. For those disabilities with medical etiologies and a profound effect on the functional ability of the individual, this approach may have been appropriate.

However, as society began to demand higher levels of literacy and reasoning, increasing numbers of children began to struggle in school. These learners presented milder and more diverse cognitive and emotional disabilities, compromising their success in school. As local communities began to serve learners with an increasing variety of mild disabilities under the terms of the IDEA, it became increasingly apparent that it was difficult to identify many youngsters as belonging to one and only one category. The cost of evaluating youngsters for eligibility escalated over the years, while the utility of the diagnoses themselves was increasingly called into question.

Based on these trends, schools investigated alternatives to categorical service delivery models, particularly for the significant group of learners with milder forms of disability. Special education teachers now frequently serve students in a variety of categories, students who share a variety of common needs. In the years to come, special educators will need to be able to accurately and comprehensively describe students' strengths and needs, rather than just applying diagnostic criteria to categorize learners. *Learners with Mild Disabilities* provides the special educator of the future with an understanding of the definitions currently in use and a variety of alternative definitions, as well as the limitations of these categorical processes. This book also develops the conceptual frameworks needed by educators as they identify and interpret a broad range of student behaviors from a non-categorical perspective.

ACKNOWLEDGMENTS

been possible without the stories that students and fellow educators have shared with me over the years. The vignettes and case studies are fictional composites, but they are based on the collective experiences of real learners and real teachers in real school settings. This basis in reality provides readers with many useful application experiences, and I appreciate everyone who has shared a story with me.

As with any writing project, editorial assistance is critical. I thank the following peer reviewers, who read and commented on the manuscript: Dr. William Blackwell, Lewis University; Morgan Chitiyo, Duquesne University; Therese Hogan, Dominican University; and Dr. Michael W. Borders, Gordon State University. My appreciation also goes to Ann Davis, Joe Sweeney, Kerry Rubadue, and Sridhar Annadurai for their assistance in producing this edition. Their support, encouragement, and feedback have been critical to completing this project.

Finally, I want to thank my family and friends for their encouragement and forbearance during this long and continuing project. I am especially grateful to Donna for her support and understanding during the completion of this revision.

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SPOTLIGHT ON HISTORY

DIVERSITY IN FOCUS

UNIVERSAL DESIGN FOR LEARNING IN ACTION

IN THE CLASSROOM

Setting the Stage

Educators in contemporary society face many challenges. Schools are expected to provide solutions to myriad social problems by preparing the next generation of citizens to assume their adult roles more competently than previous generations have. Schools are charged with the task of educating all children, and we give voice to the philosophy that all children can learn. We recognize that our classrooms are filled with learners representing significant diversity, including students who differ from one another with respect to gender, race, ethnic background, home language, socioeconomic class, religion, sexual orientation, and abilities. It is the specific issue of diversity in learning ability that this book addresses.

To develop an understanding of classification, diagnosis, and interventions for children who differ from others in their age group, we need to gain a perspective on the nature of ability and disability as well as on the historical development of our attention to persons with disabilities. A visit to any classroom will confirm that in every group of children, no two learners are alike. They differ from one another on a wide variety of variables, and this diversity presents challenges to instructional staff seeking to help each learner master critical skills and knowledge.

The concept of disability itself is based on the determination by various persons within society, and finally by the community itself, that the degree to which a particular individual's behavioral characteristics differ from those of others in the group is unacceptable, that the behavior is deviant to the extent that special attention is warranted (Speece & Harry, 1997). By extension, the individual is then seen as being significantly different so that differential treatment is needed; frequently, this leads to the identification of the individual as having a disability.

Chapter 1 considers the meaning of disability and some reasons for focusing on mild disability. The chapter first considers contemporary responses to schoolchildren with disabilities, both

by the U.S. Congress and courts and in the international community. It looks back at the way in which individuals with disabilities have been viewed and treated during certain periods of history, with a specific focus on U.S. history. The chapter also discusses the process by which some students become classified as learners with disabilities, and it explores some of the ramifications of such classifications. Finally, it considers the impact of a disability determination on an individual's life.

Chapters 2 and 3 explore some of the implications of the 2004 reauthorization of the *Individuals with Disabilities Education Act (IDEA)* for assessment, identification, curriculum, instruction, and placement of learners with disabilities. Specifically, the following issues are considered, questions that will continue to be discussed and answered by special educators in the future:

- How can we best assess student learning, especially when that learning may be hindered or obscured by a mild disability?
- Is categorical identification the most useful process for understanding a learner's needs and for guiding programming decisions?
- How do students with disabilities relate most appropriately to the general education curriculum?
- Are there instructional practices that are equally effective for those students with and without disabilities? Are there practices that are effective only with students with disabilities?
- What accommodations are appropriate and useful in providing access to the general education curriculum?
- What do we really mean by *inclusion*? Is it appropriate for all learners? Why might the definition of inclusion be dependent on the societal context?

It is important to note that Unit I identifies a number of issues important to the field of education today. All of them are beyond the scope of this book to address fully. The reader is encouraged to continue to acquire information about such issues, practices, and strategies by reading widely in the current research in the field.

Perspectives on Disability

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Learning Outcomes

- Provide examples of the difference between the words *disability* and *handicap*.
- Explain the rationale for studying mild disabilities as a group.
- Describe what high-prevalence disabilities have in common.
- Identify the uses and problems with using categories for classifying students with disabilities.
- List the major requirements of IDEA.
- Discuss ways in which attitudes and values of a society or a time in history have impacted the way people with disabilities have been viewed and treated.
- Discuss ways in which international perspectives on inclusive education may differ from U.S. perspectives.
- Describe major historical trends in the provision of services for students with disabilities.

Meet Benny

Benny is the youngest child in a family of 10. He comes from a poverty background in a small rural community. Neither of his parents works outside the home on a regular basis. They are hard working, growing most of their own food. They don't have a lot of money, but they take pride in working for what they have. Benny's brothers and sisters and many of his cousins have been served in special education over the years. They are the family in town that teachers talk about.

In kindergarten, Benny was tested for a possible disability. He was slower than his peers from the start, lacking readiness skills for academic work. The school team considered the possibility of mild intellectual disability, but they classified him instead as "speech and language impaired" for his first two years, changing to "learning disabled" in third grade. Mr. Brown, his fourth-grade teacher, says, "I try not to get stuck on labels. As long as Benny gets the help he needs, the label really doesn't matter. Labeling is such a negative action."

Benny always seems to be in some kind of trouble. He is very active and lacks many social skills. Mr. Brown wonders, "Is this maybe a result of cultural differences, of not having the experiences other kids have?" Benny is always wondering about things, asking questions, like "What's this?" or "How does this work?" He gets into trouble for not staying in his seat and is constantly in need of redirection to stay on task. Considering his home environment, this

is not hard to understand. He lives in a small home for such a large family. There were only three bedrooms, and there was really no place for everyone to sit down and eat all at one time. Doing something with others all at the same time is simply not a part of Benny's experience.

In school, it frequently seems that he has his own agenda within the group. It isn't that his behavior is really bad, but everything seems new to him. He doesn't always know how to act in a large group of children, all the same age. After all, he is used to being the youngest, home with his mother without any interaction with peers of his own age.

Mr. Brown thought that Benny frequently appeared to be a bright child. He knows a lot about the woods. By the time he was six or seven, he could identify about 20 different kinds of trees. He knew how to look for signs of animals, and he can identify their tracks. He is often out in the woods cutting wood with his father. He has a lot of knowledge; it just isn't school knowledge. But he does have problems in reading. He had no knowledge of the alphabet when he entered first grade. When the students are put in reading groups, Benny always ends up in the lowest group.

However, Benny is a very happy child. He doesn't seem to know what he lacks. He loves his parents dearly. He has his bicycle and a fishing pole. To him, that is everything. To him, school is not a positive experience. It seems that every time he does something, somebody tells him not to do it. He told Mr. Brown, "I can't do anything. Everyone is telling me not to do this or that. Do it this way. Why can't I do it the way I want to do it?"

Mr. Brown continues to struggle with the question of labeling, with having to identify this child as having special needs. Is this a disability or a cultural difference that brought Benny, his brothers, sisters, and cousins into special education? Benny did have speech problems and his language skills are poor, but it seems like it is his behavior and difference in his family background that really cause his problems with other school personnel.

THINKING QUESTIONS

What have you learned about Benny from this story?

If you were his teacher, what else do you think you would need to know to decide what actions to take to help Benny?

Have you met Benny or a student like him? Our focus in this book will be on students with milder forms of disability. Schools and teachers are increasingly called upon to serve children and youth with mild disabilities, students with difficulties in learning, thinking, and behavior—students like Benny.

Historically, special education and services for people with disabilities in general have dealt almost exclusively with more severe levels of disability. As a result, vocabulary and practices over the years have focused on the significant differences that these individuals exhibited when compared to typical individuals (Council for Exceptional Children, 1997b). These children and adults called attention to themselves because of their physical and behavioral differences, and the resulting *classification* system solidified these differences into categories and labels.

This system based on difference failed to consider students who differed less dramatically from typical learners. Those with milder physical, learning, or behavioral problems were either overlooked entirely or counseled into less demanding academic and vocational pursuits. In societies that needed a large supply of unskilled labor to work in fields and factories, unschooled labor had value. Milder levels of disability did not restrict people from performing productive work. For much of history and in many countries today, mild levels of disability were not identified or considered to be problematic.

As schools and society began demanding higher levels of academic functioning and skills in the 20th century, the classification system was steadily extended upward to include individuals with milder problems. Children who fell outside the "typical" mold found themselves identified with classifications indicating their dysfunction. The words *defective, retarded, impaired, disadvantaged, disturbed, disabled, handicapped*, and *disordered* were used to describe increasing numbers of learners who "just didn't fit in."

With the advent of universal special education services in the United States in 1975, students with milder levels of disability, as defined by the schools, began to account for a significant majority of students receiving special services. MacMillan, Keogh, and Jones (1986) described these students as "inefficient school learners," students who were characterized by problems in
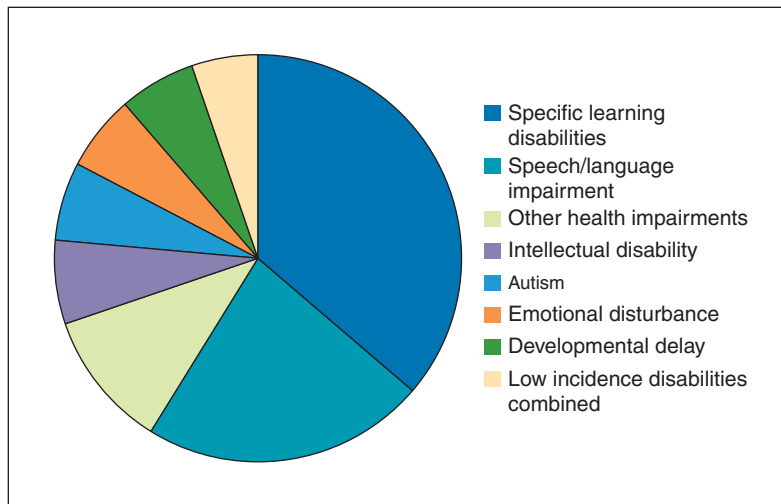
FIGURE 1.1 Percentage of Disability by Category
Based on Data From U.S. Department Of Education, National Center For Education Statistics (http://Nces.Ed.Gov). (2012a). *Digest Of Educational Statistics 2012*: Table 48: Children 3–21 Years Old Served under Individuals with Disabilities Education Act, Part B, by Type of Disability: Selected Years 1976–77 through 2010–11. Retrieved From http://Nces.Ed.Gov/ Programs/Digest/D12/Tables/Dt12_048.Asp

school achievement and social adjustment that differed enough from their peers and for whom specialized interventions were deemed necessary. Typically these learners were unremarkable in appearance and lacked obvious physical manifestations of disability; in short, they looked much like all the other students. Depending on the accounting method used, students identified as having *mild disabilities* now account for 70–95 percent of all learners receiving special education services (Gartner & Lipsky, 1987; Reynolds & Heistad, 1997; Salend, 2001; U.S. Department of Education, 2012a). (See Figure 1.1.)

Since the mid-1980s, increased awareness of and concern for learners who fail to successfully complete the minimum educational program spawned a new category of learners, the *at-risk students*, those perceived to be potential school dropouts. In the tradition of social concern that gave us students with *economic and cultural disadvantage* in the 1960s and 1970s, schools began to set up new assessment procedures and special programs for these students, many of whom test and perform just above the cutoff for eligibility for special education services. When the learning and behavioral characteristics and needs of these students are enumerated, it is apparent that they often are very similar to those of students with mild disabilities (Reynolds & Heistad, 1997).

For the following reasons, it seems useful to focus on the needs of all such students, those with mild disabilities as well as those who remain unclassified but who nevertheless exhibit significant problems in school:

- The majority of students being served by special education today display milder impairments.
- The classification system used to categorize learners with mild disabilities evolved upward from the terminology developed to connote more severe disabilities; however, this system often does not adequately describe these learners and their capabilities, making study of this population by itself more useful (MacMillan, Siperstein, & Gresham, 1996).
- Students with mild disabilities are often similar to others who have other problems learning, so understanding the life experiences of those with milder levels of disability may help us also serve not-yet-classified learners with similar needs.

STUDYING HIGH-PREVALENCE DISABILITIES

The primary focus of study in this book will be on the *high-prevalence disabilities* covered by the Individuals with Disabilities Education Act (e.g., learning disabilities, mild intellectual disability, emotional or behavioral disorders, autism spectrum disorders, communication disorders), as well as on other disorders such as attention-deficit/hyperactivity disorder (ADHD). It is important to note that although ADHD is not specifically identified as a service category

under IDEA, children with ADHD are frequently found in special education programs because they qualify for another disability. (See Chapter 7 for more discussion of this seeming paradox.) Together these conditions account for about 90 percent of all children served under the provisions of IDEA, depending on the degree of overlap among and between these categories and the category of speech and language impairments (see Figure 1.1 and Table 1.1). Students with learning disabilities comprise the largest single group, accounting for 37 percent of all students in special education, whereas intellectual disabilities, autism, and emotional disorders each account for 6–7 percent of all students with disabilities (U.S. Department of Education, 2012a).

The definitions for these disabilities are not now and never have been distinct enough to establish sharp boundaries among and between the categories (Truscott, Catanese, & Abrams, 2005). These learners may all exhibit learning and academic difficulties, problems with cognitive processing of information that includes attention deficits, problems in social–emotional adjustment, and language-related deficits. As was noted by the President's Commission on Excellence in Special Education (2002), these high-prevalence disabilities present significant identification challenges due to the subjectivity of evaluation along a continuum of human variation. As Hobbs (1975a) predicted, we are learning from our experience in serving youngsters with mild disabilities that knowledge of the classification alone rarely, if ever, provides enough information to plan programs effectively. Given this awareness, it is reasonable to consider the usefulness of looking at the specific characteristics of individual learners as an alternative to categorical services and as a means of achieving more effective program development.

The overlap in characteristics among and between these categories has resulted in many school systems and states serving these learners with milder levels of disability together in noncategorical or cross-categorical programs, with instructional strategies selected to meet a particular learner's needs. From the 1970s to the present, there has been a steady movement from categorical to noncategorical/multicategorical teacher certification (Cranston-Gingras & Mauser, 1992; Geiger, 2002, 2006; Reynolds & Heistad, 1997). Since 2000, a significant number of states have adopted some form of noncategorical certification, with remaining categorical certifications primarily for teachers of students with hearing and visual impairments (Hardman & McDonnell, 2008).

Table 1.1 Students Served in Special Education in the United States, by Disability Category (2010–2011)

Type of Disability	Students Served in IDEA (rounded to thousands)	Percentage of All IDEA Students	Percentage of Total Population
Specific learning disabilities	2,357,000	36.7	4.9
Speech/language impairment	1,390,000	21.7	2.8
Other health impairments	714,000	11.1	1.4
Intellectual disability	447,000	7.0	0.9
Autism	417,000	6.5	0.8
Emotional disturbance	389,000	6.1	0.8
Developmental delay	381,000	5.9	0.8
Multiple disabilities	130,000	2.0	0.3
Hearing impairments	78,000	1.2	0.2
Orthopedic impairments	63,000	1.0	0.1
Visual impairments	28,000	0.4	0.1
Traumatic brain injury	26,000	0.4	0.1
Deaf-blindness	1,000	0.02	~0.0
All disabilities	6,419,000	100.0	13.0

Source: Data from U.S. Department of Education, National Center for Education Statistics (http://nces.ed.gov). (2012a). *Digest of Educational Statistics 2012: Table 48: Children 3–21 years old served under Individuals with Disabilities Education Act, Part B, by type of disability: Selected years 1976–77 through 2010–11.* Retrieved from http://nces.ed.gov/programs/digest/d12/tables/dt12_048.asp

MILD DOES *NOT* MEAN "NOT SERIOUS"

Describing the degree of disability as mild, moderate, or severe generally indicates the extent to which the person differs from others. The more similar a student is to typical students, the fewer the modifications needed to accommodate them in the standard curriculum (Hoover & Patton, 2005). The word *mild* is commonly interpreted as meaning "not a lot." By extension, it is often interpreted as meaning "not serious." A mild cold means you have the sniffles, but basically you are expected to go about your day as usual; it's "not serious." A learner with a mild disability is frequently perceived to require few or minor accommodations to facilitate access to the general education program.

However, before we conclude that a mild disability is less serious than a more severe one, we must consider the effect of being "almost like everyone else." When students look and act similarly to their age peers, parents and teachers tend to have similar academic and behavioral expectations of them. For the most part, milder disabilities tend to be invisible. These students bear none of the physical characteristics that elicit understanding, assistance, or empathy from others. Physically they appear as if they should be able to learn and behave like typical students. These students can approximate age-appropriate behaviors, but their disabilities may cause them to be enough "off the pace" to compromise their success. When a disability even slightly impairs this ability to function, it can lead to failure in ordinary activities and have disastrous effects on self-esteem and sense of competence (AAIDD, 2010; Snell et al., 2009). Let's consider some examples:

Meet John and Jim

John is a student with a severe behavioral disorder. His aggressive behaviors are so severe that he has been placed in a restrictive residential program. There he is served in a structured behavior program and receives counseling and social skills training. No one expects him to function in an ordinary classroom. In fact, no teachers will have him in their classrooms.

Jim, on the other hand, has a mild behavioral disorder. He has problems with impulse control. Most of the time, he functions like the others in his sixth-grade class. When frustrated, however, he is apt to lash out without thinking about the consequences. His teacher tends to respond to him as if his behaviors are volitional and so reacts to these outbursts with punishment. Since Jim looks like the other students, his teacher feels justified in treating him like the others and doesn't believe he needs help with his impulse control disorder. Jim has come to internalize this "bad boy" image.

Meet Jane and Jamie

Jane's birth was a difficult one, resulting in a period of anoxia that left her with cerebral palsy and a severe intellectual disability. As a 16-year-old, she must have all her personal needs met by others. Her special program is designed to increase muscle control and teach her basic daily living skills like self-feeding. Rightly or wrongly, expectations for Jane are low because of her intellectual disability.

Jamie, on the other hand, looks like any other 16-year-old girl. Her mild level of intellectual disability has made learning academic tasks difficult. She can read at about the fourth-grade level and is served in a vocational education program. Because she looks like everyone else and can carry out basic tasks, her parents, teachers, and peers expect her to be able to exercise the social judgment required of a teenager. They were all astonished when she allowed a group of boys to have sex with her, resulting in her becoming pregnant.

When we think of mild disabilities, we must consider the problems of these students as serious and worthy of our understanding and assistance. We must understand that constantly being *almost* able to compete credibly in common activities is very difficult to accept. Not being able to do what everyone else finds easy (and not knowing why) can have a significant effect on a student's self-esteem as a learner (AAIDD, 2010). We must seek to understand the effect on a student's ability to function when it is not easily apparent what can be done to change the situation. This awareness should result in an appreciation of the reason so many learners with mild disabilities develop learned

helplessness or other inappropriate social behaviors (e.g., noncompliance) when faced day in and day out with expectations that they can't meet and aren't helped to meet. Being "just a little different" can indeed be very serious.

THE POWER OF LANGUAGE

Human beings are distinguished from other animals by our use of a complex symbol system (i.e., language) to communicate with one another. Through language we exchange information, and we communicate our ideas, emotions, feelings, and even our prejudices. As Christensen (2004) observed, "Language reflects our perceptions, beliefs, and understandings of our world. It also helps shape those perceptions. Thus language can exert a powerful influence on social processes which help shape human lives" (p. 17). The language used to categorize individuals often tends to stigmatize those groups of people. For example, the use of terms like *retarded* to refer to an entire group of people makes it easier to lose sight of their unique characteristics and to think of them in a devalued way. Because words can mean different things in different contexts, we need to be aware of the effect our words can have.

In this book we will pay special attention to the effect of the words we use to describe these learners, with particular attention to the difference between a disability and a handicap. A *disability* is a condition that a person possesses; it is, however, only one characteristic of that individual. A disability exists when an expected, specific human ability is curtailed or absent. Quite simply, it is the lack or reduction of an ability, and it is a describable, measurable condition. By itself, it implies absolutely nothing about the ability of the individual to carry out desired life functions.

A *handicap*, on the other hand, results from the interaction of that condition with the environment. Handicaps result when the environment cannot or will not be modified to permit the individual to carry out certain functions. It is this problematic interaction that results in interference with the individual's ability to carry out a desired function (American Psychological Association, 2010; Russell, 2008).

For an example of the difference in these two terms, consider Ellen who has myopia, a condition that results in a measurable lack of distance vision. In fact, her unaided visual acuity is over 20/200 in both eyes, a criterion commonly used to identify blindness. We would be accurate in saying that she has a visual disability since she lacks the visual ability we expect people to have. However, since her vision is amenable to correction and she has been provided with glasses, she is not handicapped in tasks such as acquiring information from text or in mobility (e.g., driving a car). If she broke her glasses or if her vision was uncorrectable with glasses, she would be handicapped in acquiring information from text or in moving around—unless she or her friends or family were able to find another way for her to carry out those functions. Environmental accommodations that eliminate such handicaps might include listening to books on tape or riding to school with a sighted driver. When we think about Ellen, it is quite apparent that the lack of an ability (i.e., having a disability) does not necessarily mean the lack of a function nor a resulting handicap.

A related term, *handicapism*, refers to the beliefs and practices that promote differential, unjust, or unequal treatment of a person based solely on an apparent or presumed disability. It involves taking actions on behalf of an individual based on the assumption that the presence of a disability necessarily implies a handicap. Handicapist attitudes or actions include viewing persons with disabilities as victims, as afflicted with their disabilities. We need to avoid pitying persons with disabilities, seeing only the disability and not the person, avoiding people with disabilities, seeing people with disabilities as automatically valiant and brave, and speaking *about* individuals with disabilities in their presence rather than speaking *to* them.

As we work with learners with disabilities of various kinds, we should always use language thoughtfully, communicate accurately, and avoid reinforcing the stereotypes of helplessness and victimization. Some suggestions for more appropriate use of language include these:

- Avoid using shorthand terms like "*the* handicapped" or "*the* disabled" to refer to a group of people with disabilities; these terms imply incorrectly that all individuals with that characteristic are alike, that all members of the group are identical in their abilities and needs.