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

We’ve written this text with two primary audiences in mind: those who are preparing to be special educators and those who are preparing to be general educators. Given the federal legislative mandates, as well as ethical concerns, for including students with disabilities in general education classrooms whenever possible, general educators must be prepared to understand exceptional learners. And they must be ready to work with special educators to provide appropriate educational programming for students with disabilities. This book also is appropriate for professionals in other fields who work with exceptional learners (e.g., speech-language pathologists, audiologists, physical therapists, occupational therapists, adapted physical educators, counselors, and school psychologists).

We believe we’ve written a text that reaches both the heart and the mind. Feedback we’ve received from students and instructors on previous editions strengthens our confidence that we’ve done so. Our conviction is that professionals working with exceptional learners need to develop not only a solid base of knowledge, but also a healthy attitude toward their work and the people whom they serve. Professionals must constantly challenge themselves to acquire a solid understanding of current theory, research, and practice in special education and to develop an ever more sensitive understanding of exceptional learners and their families.

The Pearson eText for this title is an affordable, interactive version of the print text that includes videos in every chapter, an interactive chapter self-check quiz, and an opportunity for students to get feedback on their answers to the questions posed in interactive features. Look for the play button to see where video and interactive assessment is available.

To learn more about the enhanced Pearson eText, go to www.pearsonhighered.com/etextbooks.

What’s New in This Edition?

As with all of our previous revisions, we’ve approached this one with an eye toward providing the reader with the latest, cutting-edge information on research and best practices in special education. The most obvious innovation is that this edition is available as FULLY DIGITAL, with over 200 interactive elements (primarily videos) hot-linked throughout the text. After careful consideration, we as well as the publisher, Pearson, are convinced that the electronic format offers multiple benefits for students, instructors, and us, the authors. For students it offers a much more affordable learning resource than the traditional text. For instructors it offers a way of engaging students and opening up myriad possibilities for class discussions and lectures. For us, the authors, it offers a way to bring to life teaching practices, to portray the human side of disabilities, to go into more depth on critical topics. Excuse the cliché, but “a picture is worth a thousand words” comes to mind.
### New Features

<table>
<thead>
<tr>
<th>New Feature</th>
<th>Benefit</th>
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<tr>
<td><strong>Up Close With . . .</strong></td>
<td>Features individuals who, in various ways, serve as inspirational models for all people, whether disabled or not. Each is accompanied by a video that brings to life the person's accomplishments.</td>
<td>Every chapter; good example; Nick Vucijic, Chapter 1</td>
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<tr>
<td><strong>End of Chapter Questions (15 per chapter)</strong></td>
<td>End of chapter questions allow students to monitor their understanding of the material and prepare for evaluations.</td>
<td>End of each chapter</td>
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<td><strong>Interactive Elements</strong></td>
<td>Over 200 electronic links to videos and websites of key concepts, recent scientific discoveries, human interest stories, cutting-edge technologies, teaching techniques. The student is able to delve deeper into the content by linking directly to research and related content, such as teaching methods, on the Internet that has been vetted for quality.</td>
<td>Throughout every chapter with a minimum of 10 links per chapter; good example—Chapter 2: tongue-in-cheek depiction of special education referral: <a href="http://www.youtube.com/watch?v=KrapFXnZIDE">http://www.youtube.com/watch?v=KrapFXnZIDE</a></td>
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<td><strong>Responsive Instruction Features: 1–2 Video Models of Teaching Techniques in 12 of the 15 chapters</strong></td>
<td>The existing Responsive Instruction features have been updated and enhanced with video examples of the techniques described in the feature. Plus four new Responsive Instruction features have been added—Chapter 8: Bullying; Chapter 9: Video Modeling; Chapter 12: Technology for Writing in Braille; Chapter 15: Twice Exceptional.</td>
<td>In all categorical chapters and multicultural chapter; good example, Chapter 5: Class-wide Peer Tutoring: <a href="http://mediaplayer.pearsoncmg.com/_blue-top_640x360_ccv2/ab/streaming/myeducationlab/heward/12.ClassPeerTutSci_iPad.mp4">http://mediaplayer.pearsoncmg.com/_blue-top_640x360_ccv2/ab/streaming/myeducationlab/heward/12.ClassPeerTutSci_iPad.mp4</a></td>
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<td><strong>Hot links to pertinent organizations</strong></td>
<td>Students should be familiar with the pertinent organizations in their field. The links to the major organizations in the field of special education are provided at the end of each chapter. This feature helps to promote professionalism of the next generation of teachers. Additionally, students can count on these links being trustworthy sources.</td>
<td>At the end of every chapter; example, Chapter 1: <a href="http://www.cec.sped.org">www.cec.sped.org</a></td>
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<td><strong>Dozens of new or updated Focus On . . . features (with links)</strong></td>
<td>Highlights important concepts, hot new topics, humorous anecdotes; helps reader delve deeper into the content by linking directly to research and related content on the Internet that has been vetted for quality. Engages readers' attention.</td>
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This hot topic has been in the media for the last several years. Recent medical advances have indicated that concussions, while they seem mild, are significant injuries. As a result, many states have passed laws related to youth sports and concussion. It is critical that awareness increases as to the magnitude of concussive injuries and the laws that protect students. Future teachers should be aware of the legislation in their states (provided in an active link) and the seriousness of any head injury.

**Thoroughly Updated Feature**

**Updated Feature:** How Can I Help Students With ____________ in the General Education Classroom?  
(Updated, streamlined, retitled the Making It Work feature from previous editions)

**Benefit:** Authored by Dr. Margaret Weiss, these provide examples of how special education and general education teachers can work together to benefit students with disabilities.

**Location in text:** One in most of the 11 categorical chapters.

**New or Thoroughly Updated Content within Chapters**

- **Chapters 6, 7, 8, 9:** Inclusion of new definitions of Specific Learning Disorder, Attention Deficit Hyperactivity Disorder (ADHD), Emotional and Behavioral Disorders, and Autism Spectrum Disorders (ASD), from the American Psychiatric Association’s *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (DSM-5, 2013)
- **Chapter 1—Exceptionality and Special Education:** More emphasis on abilities, rather than disabilities, of students in special education
- **Chapter 2—Current Practices for Meeting the Needs of Exceptional Learners:** Updated and expanded coverage of special education in the context of the Common Core State Standards Initiative
- **Chapter 3—Multicultural and Bilingual Aspects of Special Education:** Updated percentages of students of various ethnic groups receiving special education
- **Chapter 4—Parents and Families:** Greater emphasis on importance of family resiliency in the face of having a child with a disability
- **Chapter 5—Learners with Intellectual and Developmental Disabilities:** More succinct and clear-cut explanation of the critical role of systematic instruction for students with intellectual disabilities
- **Chapter 6—Learners with Learning Disabilities:** Expanded and more in-depth discussion of literacy instruction and learning disabilities
- **Chapter 7—Learners with Attention Deficit Hyperactivity Disorder:** More emphasis on importance of executive functioning and behavioral inhibition
- **Chapter 8—Learners with Emotional or Behavioral Disorders:** A new Figure 8.1 depicting the process of early identification of emotional and behavioral disorders
- **Chapter 9—Learners with Autism Spectrum Disorders:** Importance of neuronal underconnectivity between the front and back of the brain in people with autism spectrum disorders
- **Chapter 10—Learners with Communication Disorders:** More streamlined coverage for definitions of speech and language disabilities
Retained Special Features

PEER CONNECTIONS
We believe that students reading this book will have a better understanding of exceptionality if they read about the lives of exceptional learners who are young adults. The Peer Connections features, based on interviews conducted by Mira Cole, highlight individuals with a disability between the ages of 18 and 25. (Note the Chapter 9 feature, Learners with Autism Spectrum Disorders, has been updated.) Students reading the textbook will get to know individuals with disabilities through their personal stories and realize that their peers with disabilities are very much like themselves.

SUCCESS STORIES: SPECIAL EDUCATORS AT WORK
Special educators work in a variety of settings, ranging from general education classrooms to residential institutions. Although their main function involves teaching, these professionals also engage in a variety of activities, such as counseling, collaborating, and consulting. To illustrate this variety, each of the 11 categorical chapters (Chapters 5–15) includes an example of a special educator at work. (Note the Chapter 5 feature, Learners with Intellectual Disabilities, has been updated.) Written by Dr. Jean B. Crockett of the University of Florida, an experienced special education administrator and teacher educator, each story focuses on a special educator’s work with an individual student and shows readers the wide range of challenges special educators face, the dynamic nature of their positions, and the competent, hopeful practice of special education. This feature emphasizes the importance of education for students with special needs that is intensive, relentless, and specific, and includes questions for students that relate to CEC Standards.

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

Support Materials for Instructors

Thoroughly Updated Online Instructors’ Manual, with Over 150 New Electronic Resources for Instructors

Instructor’s Resource Manual and Test Bank
The Online Instructor’s Manual and Test Bank synchronize all of the resources available for each chapter and can be used for traditional courses as well as online,
or online-supported, courses. The Test Bank provides hundreds of multiple-choice, short-answer, and essay questions, all with answer keys. The manual now features OVER 150 ELECTRONIC RESOURCES.

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<td>Benefit:</td>
<td>Over 150 links to videos and websites of key concepts, recent scientific discoveries, human interest stories, cutting-edge technologies, teaching techniques. The instructor is able to delve deeper into the content with students by linking directly to research and related content on the Internet that has been vetted for quality. These differ from the links in the text in that some of them may be longer or provide more detailed information. This allows the instructor to select additional multimedia material for lectures and presentations or to develop a deeper background knowledge. These links may also provide additional material for the graduate-level courses.</td>
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| Location in text: | Every chapter  
Example: Chapter 6, video link on working memory, a difficult topic to understand/teach: http://www.youtube.com/watch?v=S65D2oazf8M |

New Test Bank

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<tr>
<td>Benefit:</td>
<td>Based on user feedback, we have developed a new test bank. Instructors can now rely on accurate and fair questions on the most important concepts in each chapter.</td>
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**PowerPoint™ Slides**

The PowerPoint slides include key concept summarizations, diagrams, and other graphic aids to enhance learning. They are designed to help students understand, organize, and remember core concepts and theories.

**TestGen**

Test Gen is a powerful test generator available exclusively from Pearson Education publishers. You install TestGen on your personal computer (Windows or Macintosh) and create your own tests for classroom testing and for other specialized delivery options, such as over a local area network or on the Web. A test bank, which is also called a Test Item File (TIF), typically contains a large set of test items, organized by chapter and ready for your use in creating a test, based on the associated textbook material. Assessments—including equations, graphs, and scientific notation—may be created for both print and online testing.

The tests can be downloaded in the following formats:

- TestGen TestBank file—PC
- TestGen TestBank file—MAC
- TestGen TestBank—Blackboard 9 TIF
- TestGen TestBank—Blackboard CE/Vista (WebCT) TIF
- Angel Test Bank (zip)
- D2L Test Bank (zip)
- Moodle Test Bank
- Sakai Test Bank (zip)
Acknowledgments

We are grateful to those individuals who provided valuable comments on the Thirteenth Edition: Mary Bailey Estes, University of North Texas; Lenna Ojure, Washington and Lee University; and Marilyn Scheffler, University of Nebraska-Lincoln.

We are once again thankful for the wonderful support and assistance we received from the folks at Pearson. Alicia Reilly, our Development Editor. No superlatives are strong enough to praise Alicia’s work. We simply can’t thank her enough for all she does for us. She is a gem. Ann Davis, Executive Editor, is a genius of the textbook publishing industry. She is a consummate professional—a perfect blend of cheerleader and taskmaster. We also are grateful for her extensive knowledge of fine restaurants.

Kerry Rubadue, Project Manager for this edition, brought all the complex pieces of the project to completion flawlessly. Our copy editor, Carey Lange, did a terrific job of keeping us stylistically and grammatically correct. Chris Boyer has made proving information for the Marketing Questionnaire a pleasant experience. And that’s saying something.

Some Final Thoughts

Given that this is the thirteenth edition, some readers might legitimately be wondering whether we have lost any enthusiasm for the at times tedious tasks required to produce a thorough, up-to-date revision. We assure you that we didn’t approach this edition any differently than we did the first. In fact, if anything, we were energized by the freedom of expression that came with changing to digital format.

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

DPH
JMK
PCP
CHAPTER 1

Exceptionality and Special Education

QUESTIONS to guide your reading of this chapter...

• How can we get oriented to exceptionality and special education?
• What is the educational definition of exceptional learners?
• What is the prevalence of exceptional learners?
• What is the definition of special education?
• What are the history and origins of special education?
• What legislation and litigation have affected special education?
• What is our perspective on the reasons for optimism regarding special education?
The study of exceptional learners is the study of both differences and similarities. The exceptional learner differs in some way from the average. In very simple terms, such a person might have problems or special talents in thinking, seeing, hearing, speaking, socializing, or moving. More often than not, she has a combination of special abilities or disabilities. Today, more than 6 million learners with these differences have been identified in public schools throughout the United States. At least 2 of every 10 school-age students in the United States is considered exceptional. The fact that even many so-called normal students have school-related problems makes the study of exceptionality very demanding.

The study of exceptional learners is also the study of similarities. Exceptional individuals are not different from the average in every way. In fact, most exceptional learners are average in more ways than they are not. See, for example, the video (http://www.youtube.com/watch?v=_rUIvXl9c0) about several children who highlight the fact that their disability doesn’t make them different in many aspects of their life. And although not all individuals with Down syndrome are high functioning, the following feature demonstrates how many of these individuals aspire to and attain similar life goals as the typical adolescent or young adult (http://www.youtube.com/watch?v=VMoZhgN0V5o). Until recently, professionals—and laypeople as well—tended to focus on the differences between exceptional and nonexceptional learners, almost to the exclusion of the ways in which all individuals are alike. Today, we give more attention to what exceptional and nonexceptional learners have in common—to similarities in their characteristics,
needs, and ways of learning. As a result, the study of exceptional learners has become more complex, and many so-called facts about children and youths with disabilities and those who have special gifts or talents have been challenged.

Getting Oriented to Exceptional Learners and Special Education

Students of one of the hard sciences might boast about the difficulty of the subject matter because of the many facts they must remember and piece together. Students of special education face quite different problems. To be sure, they study facts, but the facts they must master are relatively few compared to the unanswered questions or ambiguities within their mind. Any study of human beings must take into account inherent ambiguities, inconsistencies, and unknowns. In the case of the individual who deviates from the norm, we must multiply all the mysteries of normal human behavior and development by those pertaining to the person’s exceptionalities. Because no single theory of normal development is universally accepted, it is not at all surprising that relatively few definite statements can be made about exceptional learners and that many controversies remain (Kauffman, 2008; Kauffman & Hallahan, 2011).

The Importance of Abilities

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

Consider Nick Vujicic, a Serbian-Australian who was born with a rare disorder called tetra-amelia, which results in the absence of all four limbs. In this video about Nick, (http://www.youtube.com/watch?v=Gc4HGQHgeFE) you will see that despite Nick’s physical disabilities he is more like than unlike people without disabilities. He has similar life goals—aspirations for meaningful relationships, gainful employment, and participation in athletics—but he is different in that he has no arms or legs. As educators, we need to focus on both similarities and differences. Moreover, we should be inspired by individuals such as Nick Vujicic to help individuals move beyond their disabilities to reach their maximum potential (http://www.youtube.com/watch?v=bQ0UFbU2tF4).

Disability Versus Handicap

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

Disability Versus Inability

Another important distinction is that between inability and disability. All disabilities are an inability to do something. However, not every inability to do something is a disability. That is, disability is a subset of inability: “A disability is an inability to do something that most people, with typical maturation, opportunity, or instruction, can do” (Kauffman & Hallahan, 2005a, p. 30; see also Stichter, Conroy, & Kauffman, 2008). Consider age and ability. Most 6-month-old infants cannot walk or talk, but they are not thought of as having a disability because their inability is age appropriate. However, if that inability extends well past the time when most children learn to walk and talk, then we consider their inability a disability. Consider the role of instruction. An adult’s inability to read is not a reading disability if she or he has not had reading instruction. Weigh the factor of typical adult human abilities. A typical adult male might not be able to lift 400 pounds, but this isn’t considered a disability, because most men simply can’t lift 400 pounds. Judging inability in the context of old age, the average 70-year-old can’t run 10 miles, but most 70-year-olds can walk a considerable distance. Not being able to run 10 miles is not considered a disability for a 70-year-old, but being unable to walk at all is. The point is, simply, that disability is a significant difference from what we expect most people to be able to do, given their age, opportunities, and instruction.

Educational Definition of Exceptional Learners

For purposes of education, exceptional learners are those who require special education and related services if they are to realize their full human potential (Kauffman & Hallahan, 2005a). They require special education because they differ markedly from most students in one or more of the following ways: They may have intellectual disabilities, learning or attention disabilities, emotional or behavioral disorders, physical disabilities, disorders of communication, autism, traumatic brain injury, impaired hearing, impaired sight, or special gifts or talents. The chapters that follow define as exactly as possible what it means to have an exceptionality.

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

Consider the case of Doug Landis, a successful artist who is gifted at drawing but is paralyzed from the neck down. Doug is an example of how the focus on persons with disabilities must be on what they can do rather than how they are limited. (To learn more about this successful artist, see Up Close with Doug Landis).

Sometimes seemingly obvious disabilities are never identified, and the consequences for the person and her family, as well as for the larger society, are tragic (Kauffman & Brigham, 2009). Sometimes disabilities are identified but special education is not provided, and opportunities for the child's development are thus squandered. Although early identification and intervention hold the promise of preventing many disabilities from becoming worse, preventive action often is not taken (Kauffman, 2005; Kauffman & Brigham, 2009; Stichter et al., 2008). In fact, the Centers for Disease Control and Prevention (CDC) (http://www.cdc.gov/) began a campaign to encourage the early identification of autism and developmental disabilities (http://www.youtube.com/watch?v=KrUNBfylBzk).

Special education does not always work as it should, but when it does, educators identify a student's disability early and provide effective special education in the least restrictive environment. The student's parents are involved in the decision about how to address the student's needs, and the outcome of special education is the student's improved achievement and behavior.

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

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

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

UP close with Doug Landis

Doug Landis became quadriplegic (all four limbs are affected) in high school as a result of a wrestling accident. After Doug’s accident, his brother thought he was watching too much television and challenged him to start drawing by putting a pencil in his mouth. Using a pencil attached to a mouth stick, Doug has become a major member of the organization Mouth and Foot Painting Artists (http://www.mfpausa.com), which assists artists with disabilities to meet their financial needs. Doug Landis’s exquisite drawings and paintings of wildlife (http://www.youtube.com/watch?v=55AFFtP2pSA) illustrate how the focus on persons with disabilities must be on what they can do rather than on how they are limited. You may see Doug’s art on his website (http://www.mouthart.com).
Prevalence of Exceptional Learners

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

The task of determining the number of students with exceptionalities might appear simple enough, yet the prevalence of most exceptionalities is uncertain and a matter of considerable controversy. Multiple factors make it hard to state the number of exceptional individuals with great accuracy and confidence. These factors include vagueness in definitions, frequent changes in definitions, and the role of schools in determining exceptionality—matters that we discuss in later chapters (see also Kauffman & Hallahan, 2011).

Government figures indicate that over 6.5 million students (8.5%) receive special education services in schools today (Data Accountability Center, 2013). It's important to keep in mind that the number of students served in special education is not necessarily equal to the number of students who actually have the disability. The latter is much more difficult to calculate than the former, because the federal government requires school districts to report each year the number of students with disabilities they are serving. Beginning in the mid-1970s, the number of students served by special education grew steadily, from about 3.75 million in 1976 to more than 6 million in the early 21st century. Most of the children and youths who are served by special education are between the ages of 6 and 17. Although preschoolers and youths ages 18 to 21 are being identified with increasing frequency as having disabilities, school-age children and youths in their early teens make up the bulk of the identified population.

The percentage of the special education population identified as having certain disabilities has changed considerably over several decades. For example, the number of students identified as having learning disabilities has more than doubled since the mid-1970s; these students now make up about half of the number of students receiving special education. In contrast, the percentage of students whose primary disability is speech or language impairments declined substantially (but is growing again), and the percentage identified as having intellectual disabilities is now about half of what it was in 1976. No one has an entirely satisfactory explanation of these changes. However, they might in part reflect alterations in definitions and diagnostic criteria for certain disabilities and the social acceptability of the “learning disability” label. In subsequent chapters, we discuss the prevalence of specific categories of exceptionality.

High-Incidence and Low-Incidence Categories

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

Although the rates of occurrence of most of the high-incidence disabilities have remained relatively stable in the early 21st century, some of the low-incidence categories have increased dramatically. For example, the identification of **autism** or **autistic spectrum disorder** has increased dramatically since about 1995 (discussed further in Chapter 9; see also Stichter et al., 2008). In fact, some professionals speculate that it will eventually be considered a high-incidence disability. Other low-incidence categories showing a substantial increase in numbers include **traumatic brain injury (TBI)** and orthopedic impairments; much of this is due
to increases in spinal cord injury and in survival of severe physical trauma owing to better medical care.

Much of the increase in diagnosis of autism probably represents improved identification procedures and identification of milder cases of autism, not an epidemic (National Research Council, 2001). Although some of the increase in TBI might represent better diagnosis, it might also reflect actual increases in brain injuries, as we will discuss in Chapter 13. Increases in orthopedic impairments might reflect the increasing survival rates of infants born with significant physical anomalies and of children involved in accidents. Increases in hearing and vision impairments might represent better diagnosis of these disabilities, too.

**Definition of Special Education**

Special education means specially designed instruction that meets the unusual needs of an exceptional student and that might require special materials, teaching techniques, or equipment and/or facilities. Students with visual impairments might require reading materials in large print or braille; students with hearing impairments might require hearing aids and/or instruction in sign language; those with physical disabilities might need special equipment; those with emotional or behavioral disorders might need smaller and more highly structured classes; and students with special gifts or talents might require access to working professionals. Related services—special transportation, psychological assessment, physical and occupational therapy, medical treatment, and counseling—might be necessary if special education is to be effective. The single most important goal of special education is finding and capitalizing on exceptional students’ abilities.

The best general education cannot replace special education for those who need it; special education is more precisely controlled in pace or rate, intensity, relentlessness, structure, reinforcement, teacher–pupil ratio, curriculum, and monitoring or assessment (Hallahan & Pullen, 2014). We think it’s a good idea to improve the education of all children, an objective of the federal education laws of the early 21st century; however, good or reformed general education does not and cannot replace special education for those students at the extremes of the range of disabilities (Hallahan & Pullen, 2014; Kauffman & Konold, 2007; Zigmond, 2007; Zigmond & Kloo, 2011; Zigmond, Kloo, & Volonino, 2009).

**History and Origins of Special Education**

There have always been exceptional learners, but there haven’t always been special educational services to address their needs (see Holmes, 2004; Metzler, 2006). During the closing years of the 18th century, following the American and French Revolutions, effective procedures were devised for teaching children with sensory impairments (i.e., those who were blind or deaf; Winzer, 1993). In 1829, Samuel Gridley Howe created the first residential school for students who were blind; the curriculum focused on both traditional reading, writing, and mathematics and students’ individual interests and abilities (Sapp & Hatlen, 2010). Early in
the 19th century, the first systematic attempts were made to educate “idiotic” and “insane” children—those who today are said to have intellectual disabilities and emotional or behavioral disorders (or emotional disturbance; Kauffman & Landrum, 2006; Stichter et al., 2008).

In the prerevolutionary era, the best that society offered most children with disabilities was protection—asylum from a cruel world into which they didn’t fit and in which they couldn’t survive with dignity, if they could survive at all. But as the ideas of democracy, individual freedom, and egalitarianism swept across America and France, a change in attitude occurred. Political reformers and leaders in medicine and education began to champion the cause of children and adults with disabilities, urging that these “imperfect” or “incomplete” individuals be taught skills that would allow them to become independent, productive citizens. These humanitarian sentiments surpassed a desire to protect and defend people with disabilities. The early leaders sought to normalize exceptional people to the greatest extent possible and confer on them the human dignity they presumably lacked.

Contemporary educational methods for exceptional children can be traced directly to techniques pioneered during the early 1800s. Many (perhaps most) of today’s vital, controversial issues have been issues ever since the dawn of special education. Some contemporary writers believe that the history of special education is critically important to understanding today’s issues and should receive more attention because of the lessons we can learn from our past (e.g., Gerber, 2011; Kauffman & Landrum, 2006). In our discussion of major historical events and trends since 1800, we comment briefly on the history of people and ideas, the growth of the discipline, professional and parent organizations, and legislation.

People and Ideas

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

Most historians trace the beginning of special education as we know it today to Jean-Marc-Gaspard Itard (1774–1838), a French physician who was an authority on diseases of the ear and on the education of students who are deaf. In the early 19th century, this young doctor began to educate a boy of about 12 years of age who had been found roaming naked and wild in the forests of France (sometimes referred to as the “wild child” or the “wild boy of Aveyron”). Itard’s mentor, Philippe Pinel (1745–1826), a prominent French physician who was an early advocate of humane treatment of “insane” people, advised Itard that his efforts would be unsuccessful because the boy, Victor, was a “hopeless idiot.” But Itard persevered. He did not eliminate Victor’s disabilities, but he did dramatically improve the wild child’s behavior through patient, systematic educative procedures (Itard, 1962). Recently, Mary Losure (2013) published a nonfiction book for children and adolescents that provides the history of the wild boy of Aveyron (http://www.youtube.com/watch?v=77j6O1X66C0). Cases such as the wild boy of Aveyron bring into question the role of nature and nurture in human development (see the Focus on . . . The Nature–Nurture Controversy).

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

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

**FOCUS ON …**

**THE NATURE–NURTURE CONTROVERSY**

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

For many years, theoreticians tended to view the nature–nurture issue from an either/or perspective: Either you believed that heredity held the key to determining intellectual development or you believed that the environment was the all-important factor. Today, however, most authorities believe that both heredity and the environment are critical determinants of intelligence. Some scientists have tried to discover how much of intelligence is determined by heredity and how much by the environment, but many view this quest as futile. They assert that heredity and environment do not combine in an additive fashion to produce intelligence. Instead, the interaction between genes and environment results in intelligence. Laurence Steinberg of Temple University explains the interaction of genetics and the environment and its role in human behavior; he highlights the need to break down the false dichotomy between genes and the environment (http://www.youtube.com/watch?v=jnnJpV1iuE).

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

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

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

The early years of special education were vibrant with the pulse of new ideas. It isn’t possible to read the words of Itard, Séguin, Howe, and their contemporaries without being captivated by the romance, idealism, and excitement of their exploits. The results they achieved were truly remarkable for their era. Today, special education remains a vibrant field in which innovations, excitement, idealism, and controversies are the norm. Teachers of exceptional children—and that includes all teachers—must understand how and why special education emerged as a discipline (see Gerber, 2011).

Normalization, Deinstitutionalization, and Inclusion

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

Normalization continues to be a goal in special education and all other aspects of responding to disability. Breaking down barriers to participation of people with disabilities in activities with nonhandicapped individuals was one of the ideas leading to the deinstitutionalization movement of the late 20th century. At one time, it was common to place nearly all children and adults with intellectual disability (mental retardation) and/or mental illness in residential institutions. In the 1960s and 1970s, systematic efforts were made to move people out of institutions and back into closer contact with the community. This led to more children with disabilities being raised by their families and resulted in the closure of many institutions regardless of the nature of the problems of the people involved. Today, smaller facilities within local neighborhoods are common. Halfway houses exist for individuals with emotional difficulties, who no longer are thought to need the more isolated environment of a large institution. However, much still needs to be done to improve the quality of life for some people with disabilities who, in the past, may have been in institutions. In fact, many people who formerly would have been in institutions are now homeless or in jail (see Earley, 2006; Goin, 2007; Nomani, 2007). Increasing numbers of individuals are homeless in the United States, and cognitive and mental health disabilities are significant risk factors for homelessness (Edens, Kasprow, Tsai, & Rosenheck, 2011; Mercier & Picard, 2011).

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

At the unfolding of the 21st century, the inclusion controversy was sharpened, especially by the higher standards expected of all students. The direction the controversy will take is anyone's guess (see Bateman, 2011; Kauffman & Hung, 2009; Kauffman & Landrum, 2009; Zigmond & Kloo, 2011). We can't overemphasize the importance of intensive instruction in meeting the needs of exceptional learners. In our opinion, exceptional children should be placed where such instruction is most likely to be provided, even if that place is somewhere other than the general education classroom.

**Council for Exceptional Children and Development of the Profession**

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

As the education profession itself matured and as compulsory school attendance laws became a reality, there was a growing realization among teachers and school administrators that a large number of students must be given something beyond the ordinary classroom experience. Elizabeth Farrell, a teacher in New York City in the early 20th century, was highly instrumental in the development of special education as a profession. She and the New York City superintendent of schools attempted to use information about child development, social work, mental testing, and instruction to address the needs of children and youths who were being ill served in or excluded from general education classes and schools. Farrell was a great advocate for services for students with special needs. Her motives and those of the teachers and administrators who worked with her were to see that every student—including every exceptional child or youth—had an appropriate education and received the related health and social services necessary for optimum learning in school (Gerber, 2011). In 1922, Farrell and a group of other special educators from across the United States and Canada founded the Council for Exceptional Children (CEC) (http://www.youtube.com/watch?v=QAiwwlyXT74&feature=c4-overview&playnext=1&list=TLZcuAElOx3Ss), which is still the primary professional organization of special educators.

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

**Individuals, Parents, and Organizations**

Individuals and ideas have played crucial roles in the history of special education, but it’s accurate to say that much of the progress that has been made over
the years has been achieved primarily by the collective efforts of parents and professionals. Professional groups were organized first, beginning in the 19th century. Effective national parent organizations have existed in the United States only since about 1950.

Many people who were or are influential in the development of special education or other opportunities for individuals with disabilities could be named. Among them is the late Eunice Kennedy Shriver whose sister had an intellectual disability and who originated the Special Olympics. Having sports competitions in which individuals with disabilities could compete no doubt enriched the lives of many. Even though the Special Olympics has generated criticism, it stands as an example of advocacy for caring and fair treatment of individuals with disabilities. Ms. Shriver (http://www.youtube.com/watch?v=OCukBoFytFY) undeniably changed the self-perception of many people with disabilities and the perceptions of disabilities by the general public—that is, changed these perceptions for the better and improved the quality of life for many.

Parent organizations, though offering membership to individuals who don't have exceptional children, primarily comprise parents who do have such children and concentrate on issues that are of special concern to them. Parent organizations have typically served three essential functions: (1) provide an informal group for parents who understand one another's problems and needs and help one another deal with anxieties and frustrations, (2) provide information regarding services and potential resources, and (3) provide the structure for obtaining needed services for their children. Some of the organizations that came about primarily as the result of parents' efforts include the ARC (formerly the Association for Retarded Citizens), the National Association for Gifted Children, the Learning Disabilities Association of America, the Autism Society of America, and the Federation of Families for Children's Mental Health. (See the links to these organizations at the end of this chapter.)

Legislation and Litigation

Legislation (lawmaking) and litigation (defending one's rights under law) have played major roles in how students with disabilities are identified and educated; and these roles have often been reciprocal, with one influencing the other and vice versa.

**LEGISLATION** Much of the progress in meeting the educational needs of children and youths with disabilities is attributable to laws requiring states and localities to include students with special needs in the public education system (Bateman, 2007, 2011; Bateman & Linden, 2006; Huefner, 2006). We focus here on significant legislation that represents a culmination of decades of legislative history. However, litigation (lawsuits or court decisions) has also played a major role in special education (see Rozalski, Miller, & Stewart, 2011; Yell, Katsiyannis, & Bradley, 2011).

A landmark federal law was passed in 1975: the **Education for All Handicapped Children Act**, commonly known as PL 94-142.* In 1990, this law was amended to become the **Individuals with Disabilities Education Act** (IDEA). In 1997, the law was amended again, but its name was not changed (see Bateman & Linden (2006) and Yell (2006) for details). The law was reauthorized again in 2004, as the **Individuals with Disabilities Education Improvement Act** (IDEIA); see Huefner (2006) for details. The 2004 reauthorization is sometimes referred to as IDEA 2004 (Stichter et al., 2008), but for the sake of simplicity we refer to it more simply as IDEA, as the basic requirements of the law have not changed. The federal law known as IDEA ensures that all children and youths with disabilities have the right to a free, appropriate public education.

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

THE MAJOR PROVISIONS OF IDEA

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

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

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

Another landmark federal law, enacted in 1990, is the Americans with Disabilities Act (ADA). ADA ensures the right of individuals with disabilities to nondiscriminatory treatment in other aspects of their lives; it provides protections of civil rights in the specific areas of employment, transportation, public accommodations, state and local government, and telecommunications. For information about the provisions for students under Section 504 of the ADA, you can go to www.ed.gov and in the Search Box, type in “Americans with Disabilities Act Section 504.”

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

The federal law we now know as IDEA was revolutionary because it was the first federal law mandating free appropriate public education for all children with disabilities. Its basic provisions are described in the Focus on the Major Provisions of IDEA on page 14. "Celebrating 35 Years of IDEA" (http://www.youtube.com/watch?v=DUn6luZQaXE) provides a history of the legislation of the federal special education law.

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

Some have characterized the legal history of special education as a “long, strange trip” (Yell, Rogers, & Rogers, 1998, p. 219). Special education law is highly controversial, and battles over IDEA are ongoing. The amendment and continuation of IDEA in 1997 and 2004 represented a sustained commitment to require schools, employers, and government agencies to recognize the abilities of people with disabilities, but the extent to which the 2004 revision of the law represents actual improvement is debatable (Turnbull, 2007; Vitello, 2007). IDEA and ADA require reasonable accommodations that will allow those who have disabilities to participate to the fullest extent possible in all the activities of daily living that individuals without disabilities take for granted. The requirements of ADA are intended to grant equal opportunities to people with disabilities in employment, transportation, public accommodations, state and local government, and telecommunications.

In the early 21st century, under the administration of President George W. Bush, the federal No Child Left Behind Act (NCLB) became a major factor in the focus of public schooling, including special education (see Huefner, 2006; Yell & Drasgow, 2005). NCLB was an attempt to improve the academic performance of all students, including those with disabilities. In fact, under NCLB and IDEA, most students with disabilities are expected to take standard tests of academic achievement and to achieve at a level equal to that of students without disabilities. Moreover, NCLB included the requirement that eventually all teachers be “highly qualified.”
qualified,” a designation that leaves much to interpretation (Gelman, Pullen, & Kauffman, 2004). Some have noted that core requirements of NCLB are neither reasonable nor achievable, particularly with reference to special education (Kauffman, 2010; Kauffman & Konold, 2007; Rothstein, Jacobsen, & Wilder, 2006).

**LITIGATION** Laws often have little or no effect on the lives of individuals with disabilities until courts interpret exactly what the laws require in practice. Exceptional children, primarily through the actions of parent and professional organizations, have been getting their day in court more frequently since IDEA and related federal and state laws were passed. Therefore, we must examine litigation to complete the picture of how the U.S. legal system may safeguard or undermine appropriate education for exceptional children.

Zelder (1953) noted that in the early days of public education, school attendance was seen as a privilege that could be awarded to or withheld from an individual child at the discretion of local school officials. During the late 19th and early 20th centuries, the courts typically found that disruptive children or those with mental retardation (intellectual disabilities) could be excluded from school for the sake of preserving order, protecting the teacher’s time from excessive demands, and sparing children the discomfort of seeing others who are disabled. In the first half of the 20th century, the courts tended to defend the majority of schoolchildren from a disabled minority. But now the old excuses for excluding students with disabilities from school are no longer thought to be valid.

Today, the courts must interpret laws that define school attendance as the right of every child, regardless of her disability. Litigation is now focused on ensuring that every child receives an education that is appropriate for her individual needs. As some legal scholars have pointed out, this doesn’t mean that laws or litigation support full inclusion of all children with disabilities in general education (Bateman, 2011).

Litigation may involve legal suits filed for either of two reasons: (1) because special education services aren’t being provided for students whose parents want them or (2) because students are being assigned to special education when their parents believe that they shouldn’t be. Suits for special education have been brought primarily by parents whose children are unquestionably disabled and are being denied any education at all or are being given very meager special services. The parents who file these suits believe that the advantages of their children’s identification for special education services clearly outweigh the disadvantages. Suits against special education have been brought primarily by parents of students who have mild or questionable disabilities and who are already attending school. These parents believe that their children are being stigmatized and discriminated against rather than helped by special education. Thus, the courts today are asked to make decisions in which individual students’ characteristics are weighed against specific educational programs.

Parents want their children with disabilities to have a free public education that meets their needs but doesn’t stigmatize them unnecessarily and that permits them to be taught in the general education classroom as much as possible. The laws governing education recognize parents’ and students’ rights to such an education. In the courts today, the burden of proof is ultimately on local and state education specialists, who must show in every instance that the student’s abilities and disabilities have been completely and accurately assessed and that appropriate educational procedures are being employed. Much of the special education litigation has involved controversy over the use of intelligence (IQ) and other standardized testing to determine students’ eligibility for special education. Although the debate about IQ tests has been acrimonious, some scholars have found that IQ scores themselves haven’t been the primary means of classifying children as eligible for special education (MacMillan & Forness, 1998).
One historic court case of the 1980s deserves particular consideration. In 1982, the U.S. Supreme Court made its first interpretation of PL 94-142 (now IDEA) in *Hudson v. Rowley*, a case involving Amy Rowley, a child who was deaf (*Board of Education of Hendrick Hudson v. Rowley*, 1982). The Court’s decision was that appropriate education for a deaf child with a disability does not necessarily mean education that will produce the maximum possible achievement. Amy’s parents had contended that she might be able to learn more in school if she were provided with a sign language interpreter. But the Court decided that because the school had designed an individualized program of special services for Amy and she was achieving at or above the level of her nondisabled classmates, the school system had met its obligation under the law to provide an appropriate education. In fact, Amy’s education proved to be successful in that she went on to coordinate the American Sign Language Program at California State University East Bay, where she is currently an associate professor in Modern Languages and Literature.

Future cases will undoubtedly help to clarify what the law means by “appropriate education” and “least restrictive environment” (Bateman, 2007; Huefner, 2006; Yell, 2006). In Chapter 2, we go into more detail about the law and what it requires. We pay particular attention to writing individualized education programs (IEPs) and to the meaning of least restrictive environment (LRE).

### Reasons for Optimism

In this chapter, we’ve not presented a pollyannaish view of exceptionality and special education. The field faces many challenges. It's these very challenges, however, that make special education a dynamic field—a field not only worth studying but also one of critical importance to millions of students with disabilities. We remain optimistic for these students’ future because we know of so many teachers and other professionals who care, and because of the never ending scientific advances pertaining to disabilities.

### Scientific Advances on Causal Factors of Disability

In the vast majority of cases, professionals are unable to identify the exact reason why a person is exceptional but are making progress in determining the causes of some disabilities. In Chapter 5, for example, we discuss the detection of causal factors in Down syndrome, a condition that results in the largest number of children classified as having moderate intellectual and developmental disabilities (mental retardation, which is now called either intellectual disability (ID) or intellectual and developmental disability (IDD)). Likewise, the incidence of retinopathy of prematurity, at one time a leading cause of blindness, has been greatly reduced since the discovery of its cause. The metabolic disorder phenylketonuria (PKU) was discovered decades ago, and now infants are routinely tested for PKU soon after birth, so that this type of intellectual disability can be prevented. More recently, the gene responsible for cystic fibrosis—an inherited condition characterized by chronic respiratory and digestive problems—has been identified. Advances in drug treatments appear to hold the potential for a cure for muscular dystrophy, another inherited disorder characterized by progressive degeneration of muscles (Zordan et al., 2013). In the future, the specific genes governing many other diseases and disorders will also likely be found. Scientific advances raise the possibility of medications or gene therapies to prevent or correct many disabling conditions. Physicians can now perform surgery to correct some identifiable defects on a fetus before birth (in utero), completely avoiding some conditions, such as hydrocephalus (an accumulation of fluid around the brain that can cause mental or physical disabilities if not corrected). And before long, research might lead to the ability to grow new organs from tissues taken...
from a person or from stem cells, perhaps allowing replacement of a poorly functioning lung, pancreas, or other internal organ and avoidance of the associated physical disabilities. Advances in reproductive technology also hold promise for preventing many disabilities (Kauffman & Hallahan, 2009).

Scientific Advances in Learning and Teaching

Besides these and other medical breakthroughs, research is enhancing understanding of the ways in which the individual's psychological, social, and educational environments are related to learning. For example, special educators, psychologists, and pediatricians are increasingly able to identify environmental conditions that increase the likelihood that a child will have learning or behavior problems (see Kauffman & Landrum, 2009; Landrigan, Lambertini, & Birnbaum, 2012; Rauch & Lanphear, 2012).

Educational methodology has also made strides. In fact, compared to current knowledge about causes, the knowledge about how exceptional learners can be taught and managed effectively in the classroom is much more complete. Although special educators lament that not all the questions have been answered, considerably more is known today about how to educate exceptional learners than was the case years ago (see, for example, Kauffman & Hallahan, 2011).

One final point: We all must certainly learn to live with disabling exception- alities, but we must never accept them. We prefer to think there is hope for the eventual eradication of many of the disabling forms of exceptionality. In addition, we believe that it is of paramount importance to realize that even individuals whose exceptionalities are extreme can be helped to lead fuller lives than they would without appropriate education.

CHAPTER 1

Summary

How can we get oriented to exceptionality and special education?

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

What is the educational definition of exceptional learners?

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

What is the prevalence of exceptional learners?

- About 8 students in every 100 (about 8% of the student population) are identified as exceptional for special education purposes.
- Some categories of disability are considered high incidence because they are found relatively frequently (e.g., learning disabilities, communication disorders, emotional or behavioral disorders).
- Some categories of disability are considered low incidence because they occur relatively rarely (e.g., blindness, deafness, deaf-blindness).

What is the definition of special education?

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

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

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

**What is our perspective on the progress of special education?**
- Special education has made great progress, but making it better is a continuing struggle.

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**Addressing CEC Standards**

Council for Exception Children (CEC) Initial Level Special Educator Preparation Standards: Chapter 1 – 1.2, 6.2, 6.3
Appendix: Provides a full listing of the CEC Standards with description and supporting explanation.

**Internet Resources**

**PERTINENT ORGANIZATIONS**
- The major professional organization for practitioners, policymakers, researchers in special education, with about 40,000 members is the Council for Exceptional Children (CEC) (http://www.cec.sped.org). CEC is made up of 17 divisions, each covering a different aspect of special education, for example, the Division for Learning Disabilities (http://teachingld.org), Division on Autism and Developmental Disabilities (http://daddcec.org), Council of Administrators of Special Education (http://www.casecec.org), Division for Culturally and Linguistically Diverse Exceptional Learners (http://www.ddelcec.org).
- CEC provides numerous member benefits: http://www.youtube.com/watch?v=QA4wwIyXT74&feature=c4-overview&playnext=1&list=TLZcuAELOx3Ss.

**Assessment**

Check your understanding of the chapter’s concepts by taking this chapter self-check.
QUESTIONS to guide your reading of this chapter...

- How are students with exceptionalities evaluated and identified for special education services in school settings?
- How is the intent of special education law implemented in individualized education for students with disabilities?
- What are the various placement options for exceptional learners?
- What are some ways that teachers implement inclusionary practices?
- What are the current practices in collaboration between general and special educators?
- What are the roles of general and special educators in providing exceptional learners an individualized education program?
- What impact do standards-based reform and the Common Core State Standards (CCSS) have on special education?
- What are our concluding thoughts about providing services to exceptional learners?
MISCONCEPTIONS ABOUT

Learners with Disabilities

MYTH There is now a universally accepted model of response to intervention (RTI), which research has shown to be effective.
FACT Much variability exists in how RTI is implemented. This variation has contributed to the fact that there is little research on the effectiveness of RTI.

MYTH The concept of least restrictive environment (LRE) demands that all students with disabilities be educated in the general education classroom.
FACT LRE means that students are to be educated in the least separate setting given the student’s individual learning, behavioral, and physical needs.

MYTH Research has established beyond a doubt that special classes are ineffective and that inclusion is effective.
FACT Research comparing special versus general education placement is inconclusive because most of these studies have been methodologically flawed. Researchers are now focusing on finding ways to make inclusion work more effectively.

MYTH Co-teaching (special education and general education teachers working together in the general education classroom) has a strong research base.
FACT Co-teaching can be successful, but it’s a complicated model, and much research still needs to be done to determine how best to make it generally effective.

MYTH All professionals agree that technology should be used to its fullest to aid people with disabilities.
FACT Some believe that technology should be used cautiously because it can lead people with disabilities to become too dependent on it. Some professionals believe that people with disabilities can be tempted to rely on technology instead of developing their own abilities.

MYTH All students with disabilities must now be included in standardized testing associated with the Common Core State Standards (CCSS), just like students without disabilities.
FACT Most students with disabilities will be included in standardized tests used in CCSS, but some students will require adaptations of the testing procedure to accommodate their specific disabilities. Students with disabilities, however, can no longer be automatically excluded from participating in standardized assessment procedures.

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

Dramatic changes have occurred in the first decade of the 21st century, and more changes will undoubtedly follow. One critically important issue in special education today is the identification of students for special education services, particularly in the area of learning disabilities. The long-term debate over methods of identification has resulted in response to intervention, an approach to identifying students with learning disabilities, which has captured the attention of researchers and practitioners alike. The movement toward multicultural special education—the subject of Chapter 3—has also been in the forefront of the special education field. In this chapter we explore the major trends in providing
services to exceptional learners as well as the significant issues in responding to the needs of individuals with disabilities.

**Evaluation and Identification of Exceptional Learners**

Although the landscape of special education has changed dramatically since the passage of PL 94-142: The Education for All Handicapped Children Act, one issue has remained constant. In 1975, the intent of the original law was the same as the intent today, to ensure that all children with disabilities receive a free appropriate public education (FAPE) (Yell & Crockett, 2011). To provide students with disabilities the appropriate educational services in the setting that maximizes their potential (the least restrictive environment), schools must employ effective practices in identifying exceptional learners. A longstanding debate continues on how to best identify students who are exceptional learners. Regardless of the specific method of identification, the federal law requires that specific steps be followed in the process.

**FOCUS ON …**

**IDEA REQUIREMENTS FOR SPECIAL EDUCATION IDENTIFICATION**

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

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

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

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

**Prereferral Interventions and Multidisciplinary Teams**

The determination of eligibility for special education services has life-long implications for students with disabilities. Consider the consequences for a student who is not provided appropriate, thoughtful interventions before a full evaluation is conducted (http://www.youtube.com/watch?v=KrapFXnZIDE).

Prereferral interventions developed by a multidisciplinary team may help prevent an inaccurate placement in special education. The purpose of prereferral interventions is to ensure that students receive evidence-based instruction before they are evaluated for special education. Typically, when a teacher observes that a child is struggling in school, a multidisciplinary team (e.g., the student’s parents or guardian, a special education teacher, the student’s general education teacher, counselor, administrators, school psychologist) is convened to identify alternative,
evidence-based educational strategies for the student before making a referral for special education evaluation. The team reviews the information about a student and develops a plan for prereferral interventions that are implemented before a formal evaluation is conducted. If the student continues to struggle, he is referred for a full evaluation to determine eligibility for special education.

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

Response to Intervention

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

WHAT IS RTI? Response to intervention refers to a student's change (or lack of change) in academic performance or behavior as a result of instruction (Duhon, Messmer, Atkins, Greguson, & Olinger, 2009; Fuchs, Mock, Morgan, & Young, 2003; O'Connor & Sanchez, 2011). In an RTI identification model, a student must first receive quality instruction in the general education classroom before a formal evaluation for special education services. Teachers gather data to determine whether the student is benefiting from that instruction. Only after educators determine that a student is nonresponsive to quality, research-based instruction by a general educator would a formal evaluation to special education occur. In this video clip, Jan Hasbrouck describes four core principles of RTI (http://www.youtube.com/watch?v=YNxQnc2uaU).

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

MULTITIERED MODEL FOR IDENTIFICATION The RTI approach is based on a multitiered model of prevention (http://www.youtube.com/watch?v=a2zySJuuiuE). No model is universally accepted; however, RTI typically provides for three progressively more intensive tiers of instruction for students who are experiencing difficulties (Mercer, Mercer, & Pullen, 2011; O'Connor & Sanchez, 2011). Generally, the first tier includes universal screening to identify students who may be at risk of academic failure; implementation of quality, research-based instruction; and weekly monitoring of student progress (Fuchs, Fuchs, & Stecker, 2010). The teacher monitors the student's progress in the curriculum and in relation to peers and provides differentiated instruction. If the student's achievement improves, no other action is taken. If the student’s performance doesn’t improve, the student moves to Tier 2. In Tier 2, the student usually receives small-group instruction by a teacher or highly trained assistant three to four times per week with a research-validated program in the areas of difficulty (e.g., reading or writing).
Tier 2 interventions should take place for approximately 6 to 8 weeks. If the student's performance doesn't improve at this level, a multidisciplinary team is convened to determine whether a student has a disability and therefore qualifies for Tier 3, which is special education. Tier 3 includes more intensive intervention provided by a special educator in an appropriate placement to be determined by the student's individualized education program (discussed later in this chapter). Figure 2.1 illustrates how instruction and possible placement in special education is facilitated in an RTI framework.

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

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

**Progress monitoring** assessments are frequent, quick-and-easy measures that teachers administer at regular intervals and that provide information on whether a student is learning as expected. The purpose of administering

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**FIGURE 2.1** Three-tiered response-to-intervention model

- **Tier 1**
  - All students are screened to identify students at risk for school failure.
  - All students receive excellent, research-based instruction in the general education classroom.
  - The progress of students identified as at risk is monitored weekly.
  - All students are screened fall, winter, and spring to ensure adequate progress.

- **Tier 2**
  - Students receive instruction that is more intensive than Tier 1 (e.g., increase of frequency; duration).
  - Instruction occurs in small-group format in the general education classroom by a teacher or highly trained assistant.
  - Teacher/Assistant monitors student progress regularly (frequency increases from Tier 1).

- **Tier 3**
  - Students receive the most intensive intervention by a special education professional.
  - Placement for service delivery and the specific interventions are based on the IEP.
  - Students progress is monitored frequently.

- **Multidisciplinary Team Convenes**
  - Full evaluation is conducted to document eligibility.
  - An Individualized Education Program is developed.

- **For students responsive to Tier 1, Tier 2 instruction return to Tier 1.**
- **Students responsive to Tier 2 instruction return to Tier 1.**
- **Students unresponsive to Tier 1 move to Tier 2.**
- **Students unresponsive to Tier 2 referred for special education.**
- **For students responsive to Tier 3, multidisciplinary team determine best placement (e.g., Tier 1 or Tier 2).**
progress-monitoring instruments is to determine whether current instructional practices are appropriate for individual students and to identify instructional needs. One common form of progress monitoring is curriculum-based measurement (CBM). CBM involves students' responses to their usual instructional materials; it entails direct and frequent samples of performance from the students' curriculum. CBM measures are commonly used as a way to determine students' responsiveness to RTI (Fuchs et al., 2007). We discuss CBM in more detail throughout the text as it relates to the assessment and instruction of students with various exceptionalities.

**SUPPORT FOR RTI IDENTIFICATION MODELS**

Advocates of an RTI identification model claim that it will reduce the number of students referred to special education. The argument is that as a result of high-quality instruction provided at every level, RTI helps to determine whether a student is truly a student with a disability and not a student who has been subjected to poor or missing instruction (see Boardman & Vaughn, 2007). Another benefit of RTI is the implementation of early intervening services. In the 2004 IDEA reauthorization, along with the addition of RTI, the law provides for states to use up to 15% of special education funding to be used for early intervening services. These funds may be used “to develop and implement coordinated, early intervening services, which may include interagency financing structures, for students in kindergarten through grade 12 (with a particular emphasis on students in kindergarten through grade three) who are not currently identified as needing special education or related services, but who need additional academic and behavioral support to succeed in a general education environment’ (34 CFR 300.226(a)) (20 U.S.C. 1413(f)(1)).

**HOW EFFECTIVE ARE RTI IDENTIFICATION MODELS?**

Unfortunately, little research evidence is available to determine whether RTI is effective. Only a few school districts in the country have used it on a wide scale (Fuchs et al., 2003) and few large-scale systematic studies have been conducted (see Hughes & Dexter, 2011). Furthermore, the variability in RTI models makes it difficult to study its efficacy. In some school districts, students are remaining in Tier-2 interventions beyond a reasonable time period and are not being provided full evaluations in a timely manner. Nevertheless, IDEA gives schools the option of using RTI for identification of learning disabilities, as well as a means of improving instruction for all students. Recently, some have argued that although RTI is defensible as a way of improving early intervention and instruction for struggling learners, its use as a means of identifying disabilities is questionable (Boardman & Vaughn, 2007; Kavale, Kauffman, & Bachmeier, 2007). We discuss these issues further in Chapter 6, on learning disabilities. RTI is much more complex than it appears on the surface, and more research is needed to determine how it should be implemented in schools.

The Intent of Special Education Law: Individualized Education for Students with Disabilities

The primary intent of the special education law passed in 1975 and the subsequent reauthorizations has been to require educators to focus on the needs of individual students with disabilities to ensure that they receive appropriate educational services. A multidisciplinary team that includes school or agency personnel as well as the parents and the individual, when appropriate, determines the services that an individual receives. The individualized education program is the primary aspect of this focus; it spells out how a school plans to meet an exceptional student’s needs. In addition to the IEP, the individualized family
service plan (IFSP) for young children and the transition plan for adolescents are important aspects of providing appropriate individualized services to children and youth with disabilities.

**Individualized Education Programs**

The *individualized education program* (IEP) is the legal document that describes the educational services a student receives. IEPs vary greatly in format and detail from one child to another and from one school district to another. Table 2.1 provides a summary of the legal requirements of the IEP. Today, most schools, states, and districts have an online IEP management system. In addition, states typically have sample IEP documents that cover the federal and state guidelines. Check your state's department of education website for resources specific to your state. See, for example, the Commonwealth of Virginia's IEP resources (http://www.doe.virginia.gov/special_ed/iep_instruct_svcs/iep/).

Federal and state regulations don't specify exactly how much detail must be included in an IEP, only that it must be a written statement developed in a meeting of a representative of the local school district, the teacher, the parents or guardian, and (whenever appropriate) the child, and that it must include certain elements. The IEP that is written in most schools contains much information related to the technical requirements of IDEA in addition to the heart of the plan: its instructional components.

When writing an IEP, the team should develop a document that is clear, useful, and legally defensible. The relationships among IEP components must be

<table>
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<tr>
<th>TABLE 2.1</th>
<th>Legal requirements of the Individualized Education Program (IEP)</th>
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<td>According to the Individuals with Disabilities Education Act (IDEA) 2004, the required contents of an IEP include the following:</td>
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<tr>
<td>1. A statement of the child's present levels of academic achievement and functional performance. On many IEP forms, this is called the PLOP (present level of performance). In some cases the PLOP is now listed as the PLAAFP (present level of academic achievement and functional performance).</td>
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<td>2. A statement of measurable annual goals, including academic and functional goals. The law states clearly that the goals should enable the child to access the general education curriculum.</td>
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<td>3. A description of how the child’s progress toward meeting the annual goals will be measured and when periodic reports on the progress the child is making toward meeting the annual goals will be provided.</td>
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<td>4. A statement of the special education and related services and supplementary aids and services the child will receive. The services must be based on peer-reviewed research.</td>
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<td>5. A statement of any individual appropriate accommodations that are necessary to measure the academic achievement and functional performance of the child on standardized achievement assessments. If the child is to take an alternate assessment instead of a particular regular state or districtwide assessment, a statement of why the child cannot participate in the regular assessment and why the particular alternate assessment selected is appropriate for the child.</td>
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The IEP also requires the following related-to-transition services for students at age 16:

1. Appropriate measurable postsecondary goals based on age-appropriate transition assessments related to training, education, employment, and independent living skills (if appropriate).
2. The transition services (including courses of study) needed to assist the child in reaching those goals.

The law also stipulates the make-up of the IEP team. The following individuals must be a part of the IEP team:

1. The parents of a child with a disability.
2. A minimum of one regular education teacher.
3. A minimum of one special education teacher or special education provider of the child.
4. A representative of the local educational agency. This individual should be qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with disabilities, knowledgeable about the general education curriculum, and knowledgeable about the availability of resources.
5. An individual who can interpret the instructional implications of evaluation results.
6. Other individuals who have knowledge or special expertise regarding the child, including related services personnel as appropriate. The parents or the local education agency (LEA, i.e., school) may appoint these individuals as they see appropriate.
7. The child with a disability, whenever appropriate.

Source: Individuals with Disabilities Education Act, U.S. Department of Education.
clear and explicit in order to maintain the focus of the individualized program—special, individually tailored instruction to meet unique needs. The process of writing an IEP and the document itself are perhaps the most important features of compliance with the spirit and letter of IDEA. Bateman and Linden (2006) summarize this compliance; when the IEP is prepared as intended by the law:

- The student’s needs have been carefully assessed.
- A team of professionals and the parents have worked together to design a program of education to best meet the student’s needs.
- Goals and objectives are stated clearly so that progress in reaching them can be evaluated.

Although compliance with the law is critical, what is of more importance is that the decisions that are made regarding the child’s IEP determine his ultimate outcomes. Consider this mom’s perspective in the slideshow she prepared for her son’s IEP meeting (http://www.youtube.com/watch?v=8G-R5arIR7w).

A major problem is that the IEP is often written at the wrong time and for the wrong reason (Bateman & Linden, 2006). As Figure 2.2 illustrates, the legal IEP is written after evaluation and identification of the student’s disabilities and before a placement decision is made: Educators first determine what the student needs and then make a decision about placement in the least restrictive environment in which the needed services can be provided. Too often, we see the educationally wrong (and illegal) practice of basing the IEP on an available placement; that is, a student’s IEP is written after available placements and services have been considered.

Another common error in writing the IEP is a reliance on state standards. A “standards-based” IEP is one that focuses on outcomes based on state standards rather than on individual student needs (Bateman, 2011). Clearly, state standards and access to the general education curriculum are important; however, a student’s individualized education program should be based on outcomes appropriate for the child and not on dictated state standards.

**Individualized Family Service Plan**

Federal laws now require that a variety of early intervention services be available to all infants and toddlers who are identified as having disabilities. Such services include special education instruction, physical therapy, speech and language therapy, and medical diagnostic services. As with school-age children with disabilities, a legal document, the individualized family service plan (IFSP), describes the services that the child will receive. An IFSP is similar to an IEP for older children, but it broadens the focus to include the family as well as the child. In fact, federal regulations stipulate that the family be involved
in the development of the IFSP. Table 2.2 describes the legal requirements of an IFSP. As Noonan and McCormick (2006) note, an IFSP may be written for children up to 6 years of age, but usually an IFSP is written for infants and children up to 3 years of age, with the IEP being more common for children age 3 years and older.

### Transition Plans for Adolescents with Disabilities

Most students complete high school and find jobs, enter a vocational training program, or go to college without experiencing major adjustment difficulties. We know that dropout and unemployment rates are far too high for all youths, especially in economically depressed communities, but the outlook for students with disabilities is perhaps even worse. We must view published figures on dropout rates with caution because there are many different ways of defining the term and computing the statistics. Studies strongly suggest, however, that a higher percentage of students with disabilities, compared to students without disabilities, have difficulty in making the transition from adolescence to adulthood and from school to work. As a result, many individuals with disabilities do not achieve postsecondary degrees, are unemployed or underemployed, and have lower quality of life outcomes (Everson & Trowbridge, 2011; Moon, 2011; Scanlon, 2011). Thus, transition to adulthood—which includes employment, postsecondary education, independent living, and community engagement—is an ongoing issue of great importance.

Federal laws, including IDEA, require attention to transition plans for older students, and these must be incorporated in students’ IEPs. Transition services include a coordinated set of outcome-oriented activities that promote movement from school to postsecondary education, vocational training, integrated employment (including supported employment), continuing adult education, adult services, independent living, or community participation.

IDEA requires that each student’s IEP contain a statement of needed transition services, when the student is 16 years of age and annually thereafter. (For students for whom it is appropriate or who are deemed at risk of failure, the transition statement must be included in the IEP at a younger age.) In addition, the IEP must include a statement of the linkages and/or responsibilities of each participating agency before the student leaves the school setting.
Providing Special Education: Placement Issues for Exceptional Learners

Several administrative plans are available for the education of exceptional learners, ranging from a few special provisions made by the student’s general education teacher to 24-hour residential care in a special facility. Administrative plans for education vary according to the degree of physical integration—the extent to which exceptional and nondisabled students are taught in the same place by the same teachers.

Beginning with the least specialized environment, the general education teacher who is aware of the individual needs of students and is skilled at meeting them may be able to acquire appropriate materials, equipment, and/or instructional methods. This level might not require the direct services of specialists; the expertise of the general education teacher might meet the student’s needs. Some students with disabilities can be accommodated without special education.

Alternatively, the general education teacher might need to consult with a special educator or other professional (e.g., the school psychologist) in addition to acquiring the special materials, equipment, or methods. The special educator might train or coach the general education teacher, refer the teacher to other resources, or demonstrate the use of materials, equipment, or methods. Alternatively, the general and special educators might co-teach, with each providing instruction and the special educator emphasizing instruction of the exceptional student(s).

A resource teacher provides services for students and teachers in a single school. The students served are enrolled in the general education classroom and work with the specially trained teacher for a length of time and at a frequency determined by the nature and severity of their particular problems. The resource teacher continually assesses the needs of the students and their teachers and usually works with students individually or in small groups in a special resource room, where special materials and equipment are available. Typically, the resource teacher also serves as a consultant to the classroom teacher, advising on how to instruct and manage the student in the classroom and perhaps demonstrating instructional techniques. The flexibility of the plan and the fact that the student remains with nondisabled peers most of the time have traditionally made this a particularly attractive and popular alternative.

One of the most visible—and, in recent years, controversial—service alternatives is the special self-contained class. Such a class typically enrolls 15 or fewer exceptional students with particular characteristics or needs. The teacher ordinarily has been trained as a special educator and provides all or most of the instruction, assisted by a paraeducator. The students assigned to such classes usually spend most or all of the school day separated from their nondisabled peers. Often, students with disabilities are included with nondisabled students during part of the day (perhaps for physical education, music, or some other activity in which they can participate well).

Special day schools provide an all-day special placement for exceptional learners who need this level of specialization or dedication to their needs. The day school usually is organized for a specific category of exceptional students and may contain special equipment necessary for their care and education. These students return to their homes during nonschool hours.

Hospital or homebound instruction is most often required by students who have physical disabilities, although it’s sometimes an option for those with emotional or behavioral disorders or other disabilities when no alternative is readily available.

General education teachers often consult with a special educator or other professional who can provide resources and advice about specialized methods of instruction for students with disabilities in inclusive classrooms.
typically, the youngster is confined to the hospital or the home for a relatively short time, and the hospital or homebound teacher maintains contact with the general classroom teacher.

in a residential school, exceptional students receive 24-hour care away from home, often at a distance from their communities. this is the highest level of specialization or dedication on the continuum of alternative placements required by IDEA. these students might make periodic visits home or return each weekend, but during the week, they are residents of the institution, where they receive academic instruction in addition to management of their daily living environment.

 figura 2.3 illustrates the idea of variation in the separation of children from their general education classrooms and peers. it also illustrates the increasing specialization of environments. the degree to which education is “special” is a continuum. that is, education can be “sort of” special or very, very specialized.

focus on …

reality vs. what might be best for the student

in practice, who educates exceptional students and where they receive their education depend on two factors: (1) in what ways and how much the student differs from typical students, and (2) what resources are available in the school and community. as we noted above, in the process of trying to find effective and economical ways of serving exceptional students, many school systems combine or modify these alternatives and the roles special educators and other professionals play in service delivery. School systems vary widely in the kinds of placements made for particular kinds of students.

it’s important to point out that the second factor above (placement based on resources available) is based on reality, not law. in fact, according to federal law (IDEA), placement should be based on the needs of the student and not on what the schools can deliver. although it’s not a common occurrence, parents sometimes insist on a placement the school doesn’t offer (e.g., a separate class) or a private school specializing, for example, in learning disabilities, behavior disorders, or autism. if the school district doesn’t agree, which is almost always the case, the parents can go to court; and if they win their case, the school must provide the appropriate placement and cover the costs.

here are a couple of pertinent examples of placements for which parents sometimes sue:

• Some students have reading disabilities so severe that they need extensive and intensive instruction every day. Some schools don’t provide that level of extensive and intensive instruction.
Some students have such severe behavioral disabilities and/or autistic behaviors (e.g., aggression, extreme withdrawal), that they need a greater degree of supervision than school districts can provide.

Least Restrictive Environment

As we noted in Chapter 1, special education law requires placement of the student in the least restrictive environment (LRE), which usually means that the student should be separated from nondisabled classmates and from home, family, and community as little as possible (see Rozalski & Miller, 2011). That is, the student's life should be as normal as possible, and the intervention should be consistent with individual needs and not interfere with individual freedom any more than is absolutely necessary. For example, students should not be placed in special classes if they can be served adequately by resource teachers, and they should not be placed in a residential school if a special class will serve their needs just as well.

Although placement of exceptional students in the LRE is laudable, the definition of least restrictive is not as simple as it seems. Years ago, Cruickshank (1977), a pioneer in special education, pointed out that greater restriction of the physical environment does not necessarily mean greater restriction of psychological freedom or human potential (see also Bateman, 2007; Crockett & Kauffman, 1999, 2001). In fact, it is conceivable that some students could be more restricted in the long run in a general education class where they are rejected by others and fail to learn necessary skills than in a special class or day school where they learn happily and well (Gliona, Gonzales, & Jacobson, 2005; Kauffman, Bantz, & McCullough, 2002; Warnock, 2005).

It is important to keep our ultimate goals for the students in mind and to avoid letting the term least restrictive become a hollow slogan (http://www.youtube.com/watch?v=S5FrDXirSII) that results in shortchanging them in their education (Crockett & Kauffman, 1999, 2001; Huefner, 2006; Kauffman, 1995; Kauffman, McGee, & Brigham, 2004). Mercer and colleagues suggest that the least restrictive environment may be better termed the most enabling environment (Mercer et al., 2011).

Since the late 1980s, data have shown a steady trend toward placing more students with disabilities in general education classes and a corresponding trend toward placing fewer students with disabilities in resource rooms, separate classes, and separate facilities (U.S. Department of Education, 1995, 2005, 2009). Considerable variation exists in the placement of students with disabilities from state to state and among school systems within a given state. However, most exceptional students are now educated in general education classes. Nationwide, more than 50% of exceptional children and youths are now served primarily in general education classes. Relatively few students with disabilities are placed outside of regular schools. Figure 2.4 shows the approximate percentage of students served in each type of placement in the early 21st century.

Because children younger than 6 are usually only identified if they have relatively obvious or severe disabilities, they are less likely to receive education in general education classes and more often attend separate schools than do school-age children. Older teenagers and young adults more often attend special classes, separate schools, and other environments such as homebound instruction than do students in elementary and high schools because work-related educational programs for older teens with disabilities are frequently offered off the campuses of general education high schools.

Inclusion in Schools

Educators often use the term inclusion to describe teaching students with disabilities in the same environment as their age peers who don't have disabilities.
Inclusion is now an issue in education worldwide (e.g., Anastasiou & Keller, 2011; Simpson & Kauffman, 2007; Warnock, 2005). Regardless of one’s views, the controversy about the relationship between special and general education has made teachers more aware of the problems of deciding just which students should be taught specific curricula, which students should receive special attention or services, and where and by whom these services should be provided (Crockett & Kauffman, 1999, 2001; Kauffman & Hallahan, 1997, 2005b; Kauffman, Mock, Tankersley, & Landrum, 2008; Mock & Kauffman, 2005; Zigmond & Kloo, 2011).

Implementing Inclusive Teaching Practices

Whether or not one supports the concept of full inclusion, the fact is that most educators favor some degree of integration of students with disabilities with nondisabled students. Schools generally use four methods to help students with disabilities participate in the general education classroom:

1. Collaborative consultation
2. Co-teaching and other team arrangements
3. Curricula and instructional strategies
4. Accommodations and adaptations

The current trend is toward a variety of collaborative arrangements. All are intended to increase the cooperation between general and special education for the benefit of students with disabilities.

**COLLABORATIVE CONSULTATION** Once the IEP team has determined that a student is in fact a student with a disability, the student may receive special education services within the general education classroom through collaborative consultation. In collaborative consultation, the special education teacher or psychologist acts as an expert who provides advice to the general education teacher. The special educator might suggest changes to instruction or additional supports, such as behavior plans or school–home notes.

**CO-TEACHING** Sometimes referred to as cooperative (or collaborative) teaching, co-teaching takes mutuality and reciprocity in collaborative consultation one step further (see Cook, McDuffie, Oshita, & Cook, 2011;
Scruggs, Mastropieri, & McDuffie, 2007; Walsh & Jones, 2004). **Co-teaching** between general and special educators means “two or more professionals delivering substantive instruction to a diverse, or blended, group of students in a single physical space” (Cook & Friend, 1998, p. 454).

Schools use many forms of co-teaching, but the most common appears to be for one teacher to instruct and the other to assist in some way (Scruggs et al., 2007). Sometimes, teachers find it very effective and workable. Other times, co-teaching can present incredible challenges to teachers and to students.

Unfortunately, research on how to ensure that co-teaching works is scarce. Zigmond (2007) argues that the popular co-teaching model of collaboration can’t provide the kind of intensive instruction that students with learning disabilities and behavior disorders (and, presumably, many students with other disabilities as well) require if they are to make adequate progress. Moreover, she argues that special education teachers need special expertise in teaching specialized and individualized curricula. General education teachers are content specialists and should be trained by the “special education coach” to address a wider range of instructional needs than they otherwise would have, but they can’t take the place of special education teachers (Zigmond & Klo, 2011).

Although there are no pat answers to the questions about how special and general education should work together to ensure that every student receives an appropriate education, it’s clear that the relationship must be one of cooperation and collaboration. Despite their differing roles, general and special educators should not function on independent or mutually exclusive educational tracks. In Chapters 5 through 15, a special feature called “How Can I Help Students with . . . in the General Education Classroom” will address specific issues of inclusion for each disability area.

**CURRICULA AND INSTRUCTIONAL STRATEGIES** In addition to teacher cooperation, specific curricula and instructional strategies can help students with disabilities succeed in the general education classroom. **Cooperative learning** is an instructional strategy that many proponents of inclusion believe is an effective way to integrate students with disabilities into groups of nondisabled peers. In cooperative learning, students work together in heterogeneous small groups to solve problems or practice responses.

Another research-based instructional strategy to enhance the integration of students with disabilities is **peer-mediated instruction** (Fuchs et al., 2001; Gardner et al., 2001; Maheady, Harper, & Mallette, 2001; see also Fulk & King, 2001, and the websites they list). Peer-mediated instruction may refer to **peer tutoring**, the use of **peer confederates** in managing behavior problems, or any other arrangement in which teachers deliberately recruit and train peers to help teach an academic or social skill to a classmate (Falk & Wehby, 2001).

When the whole class is involved, the strategy is referred to as **classwide peer tutoring (CWPT)**; all students in the general education classroom routinely engage in peer tutoring for particular subject matter, such as reading or math (Greenwood, Arrega-Mayer, Utley, Gavin, & Terry, 2001; Kourea, Cartledge, & Musti-Rao, 2007). CWPT doesn’t mean that the teacher provides no instruction. On the contrary, teachers must provide instruction in how to do peer tutoring.
and in the content of the tutoring sessions. Peers tutor each other to provide drill and practice of skills they already have.

**Partial participation**, another instructional strategy, means having students with disabilities participate, on a reduced basis, in virtually all activities experienced by all students in the general education classroom. It questions the assumption that including students with severe intellectual or physical limitations is a waste of time because they cannot benefit from the activities in the same way as nondisabled students. Whether partial participation actually achieves these goals to the benefit of students is an open question.

**INSTRUCTIONAL ACCOMMODATIONS AND ADAPTATIONS** Instruction may be modified for learners with disabilities. **Modifications** usually take the form of amended materials or assignments and differ from changes in curricula or instructional strategies. **Accommodations** include changes in instruction that don't significantly change the content or conceptual difficulty level of the curriculum. Alternatively, **adaptations** generally involve more significant modifications of instruction than accommodations (Miller, 2002).

**Tiered assignments** (Tomlinson, 2001) are an example of adaptations, wherein teachers provide choices for assignments on a single topic that vary in difficulty. For example, when studying a novel, some students might write paragraphs that identify and describe the characters; others might write paragraphs or papers that analyze the traits of each character, using examples.

**Teachers’ Roles in Providing Special Education**

We have noted that most students in public schools who have been identified as exceptional are placed in general education classrooms for at least part of the school day. Furthermore, there is good reason to believe that a large number of public school students who have not been identified as disabled or gifted share many of the characteristics of those who are exceptional. Thus, all teachers must be prepared to deal with exceptional students, although it's unreasonable to expect all teachers to teach all exceptional students (Kauffman & Hallahan, 2005a; Mock & Kauffman, 2002; Zigmond, 2007; Zigmond & Kloo, 2011).

The roles of general and special education teachers are not always clear in a given case. Sometimes, uncertainty about the division of responsibility can be extremely stressful; teachers may feel uneasy because it's not clear whose job it is to make special adaptations for a pupil or just what they are expected to do in cooperating with other teachers.

**Relationship Between General and Special Education**

During the 1980s, radical reformers began recommending that special education be eliminated as a separate, identifiable part of education, calling for a single, unified educational system in which all students are viewed as unique, special, and entitled to the same quality of education. Although many of the suggested reforms have great appeal and some could produce benefits for exceptional students, the basis for integration of special and general education and the ultimate consequences this might bring have been questioned (e.g., Bateman, 2007; Crockett & Kauffman, 1999, 2001; Fuchs & Fuchs, 1994; Hockenbury, Kauffman, & Hallahan, 1999–2000; Kauffman, 1995, 1999–2000; Kauffman & Hallahan, 2005a,
These questions have no ready answers. Regardless of where one draws the line separating students who are considered to be at risk from students with disabilities, the line is arbitrary and leads to doubts about some students. In other words, no entirely clear distinction exists between at risk and disability because educational achievement and social competence can vary from a little to a lot, and no sudden, dramatic break exists in students' level of attainment (Boardman & Vaughn, 2007; Kauffman & Hallahan, 2005a; Kauffman & Konold, 2007).

Expectations for All Educators

One limitation of all teachers is that they can’t accomplish the miracles portrayed in the popular media, even if they are very good at what they do (Moore, 2007). Real teachers can’t be as perky, self-sacrificing, idealistic, and influential as those shown in films, and most teachers can’t achieve the same results as those who win awards for exceptional performance. However, competent teachers can make a significant difference in the lives of the children with whom they work, but the expectations set up by media portrayals—and too often by government or the general public—are unrealistic. Teachers, like those employed in other lines of work, must do the best they can with the resources at their disposal. Striving for excellence is admirable, but recognizing one’s real-world limitations, keeping one’s duties and accomplishments in perspective, and being happy with the best one can do, even if it’s less than perfection, is as important for teachers as it is for students.

Regardless of whether teachers are specifically trained in special education, they may be expected to participate in educating exceptional students in any one of the following ways:

1. Make maximum effort to accommodate individual students’ needs: Teaching in public schools requires dealing with diverse students in every class. All teachers must participate in the RTI process, making an effort to meet the needs of individuals who might differ in some way from the average or typical student. RTI requires the implementation of evidence-based instruction that increases in intensity as necessary. Flexibility, adaptation, accommodation, and special attention are expected of every teacher. Special education should be considered necessary only when a teacher’s best efforts to meet a student’s individual needs aren’t successful.

2. Evaluate academic abilities and disabilities: Although a psychologist or other special school personnel might administer a student formal standardized tests in academic areas, adequate evaluation requires the teacher’s assessment of the student’s performance in the classroom. Teachers must be able to report specifically and precisely how students can and cannot perform in all academic areas for which they are responsible as part of the RTI process.

3. Refer for evaluation: By law, all public school systems must make extensive efforts to screen and identify all children and youth of school age who have disabilities. A student shouldn’t be referred for special education unless teachers have made extensive and unsuccessful
efforts to accommodate the student's needs in general education classes. Before referral, school personnel must document the strategies that have been used to teach and manage the student in general education. Referral is justified only if these strategies have failed. This is typically facilitated through the RTI process.

4. **Participate in eligibility conferences**: Before a student is provided special education, an interdisciplinary team must determine the student's eligibility. Therefore, teachers must be ready to work with other teachers and with professionals from other disciplines (e.g., psychology, medicine, or social work) in determining a student's eligibility for special education.

5. **Participate in writing individualized education programs**: Every student identified with a disability and receiving special education must have a written IEP. Teachers must be ready to participate in a meeting (possibly including the student and/or parents as well as other professionals) to develop the program.

6. **Communicate with parents or guardians**: Educators must consult parents (sometimes surrogate parents) or guardians during the evaluation of the child's eligibility for special education, formulation of the IEP, and reassessment of any special program that may be designed. Teachers must contribute to the school's communication with parents about the child's problems, placement, and progress.

7. **Participate in due process hearings and negotiations**: Parents, guardians, or students with disabilities themselves who are dissatisfied with the school's response to educational needs may request a due process hearing or negotiations regarding appropriate services. Teachers might be called on to offer observations, opinions, or suggestions in such hearings or negotiations.

8. **Collaborate with other professionals in identifying and making maximum use of exceptional students' abilities**: General and special education teachers are expected to share responsibility for educating students with special needs. In addition, teachers might need to collaborate with other professionals, depending on the given student's exceptionality (e.g., psychologists, counselors, physicians, physical therapists).

A high level of professional competence and ethical judgment is required to conform to these expectations. Teaching demands a thorough knowledge of child development and expertise in instruction. Furthermore, teachers are sometimes faced with serious professional and ethical dilemmas in trying to serve the needs of students and their parents, on the one hand, and in attempting to conform to legal or administrative pressures, on the other (Crockett & Kauffman, 1999; Kauffman & Hallahan, 2009). For example, when a teacher observes indications that a student might have a disability, should the teacher refer the student for evaluation and possible placement in special education, knowing that her school offers only inadequate or inappropriate services? Should a teacher who believes strongly that teenage students with mild intellectual disabilities need sex education refrain from giving students any information because sex education isn't part of the prescribed curriculum and is frowned on by the school board?

### Expectations for Special Educators

In addition to being competent enough to meet the expectations for all teachers, special education teachers must attain further expertise in the following areas of skill and knowledge:

1. **Instructing students with learning problems, using evidence-based practices**: The majority of students with disabilities have more difficulty learning academic skills than do those without disabilities. This is true for all
categories of disabling conditions because sensory impairments, physical disabilities, and intellectual or emotional disabilities all tend to make academic learning more difficult. Often, the difficulty is slight; sometimes it is extreme. Special education teachers must have more than patience and hope, though they do need these qualities; they must also have the technical skill to present academic tasks so that students with disabilities will understand and respond appropriately. Exceptional instruction is the key to improving special education (Kauffman & Hallahan, 2005a; Kauffman & Landrum, 2007). Table 2.3 lists eight dimensions of instruction that make special education special, although these dimensions are not unique to special education. That is, they are not dimensions of instruction that only special educators know about or use. They are modifications or alterations of instructional processes that all teachers use in some way. What makes special education special is not the instruction alone but instruction that is altered to meet the needs of exceptional learners.

2. Managing serious behavior problems: Many students with disabilities have behavior problems in addition to their other exceptionalities. Some, in fact, require special education primarily because of their inappropriate or disruptive behavior. Special education teachers must be able to deal effectively with more than the usual troublesome behavior of students. Besides having understanding and empathy, special education teachers must master techniques to draw out particularly withdrawn students, control those who are hyperaggressive and persistently disruptive, and teach critical social skills. Positive, proactive behavior intervention plans are essential for all students who receive special education and exhibit serious behavior problems, regardless of their diagnostic label or classification (Kauffman, Mostert, Trent, & Pullen, 2006; Landrum & Kauffman, 2006).

3. Evaluating technological advances: Technology is increasingly applied to the problems of teaching exceptional students and improving their daily lives. Special education teachers must be able to evaluate its advantages and disadvantages for teaching the exceptional children and youths with whom they work.

<table>
<thead>
<tr>
<th>TABLE 2.3</th>
<th>Dimensions of special education that can make it truly special</th>
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</thead>
<tbody>
<tr>
<td>Dimension of Instruction</td>
<td>Definition</td>
</tr>
<tr>
<td>1. Pace (Rate)</td>
<td>Speed of lesson; speed of introducing new concepts</td>
</tr>
<tr>
<td>2. Intensity</td>
<td>Demandingness; difficulty; complexity</td>
</tr>
<tr>
<td>3. Relentlessness or Persistence</td>
<td>Insistence; tenacity; stick-to-it-iveness</td>
</tr>
<tr>
<td>4. Structure</td>
<td>Explicitness, predictability, teacher direction, tolerance, immediacy of consequences</td>
</tr>
<tr>
<td>5. Reinforcement</td>
<td>Reward for desired behavior</td>
</tr>
<tr>
<td>6. Pupil/Teacher Ratio (Class Size)</td>
<td>Number of students per teacher</td>
</tr>
<tr>
<td>7. Curriculum</td>
<td>Content of instruction, purpose of activity</td>
</tr>
<tr>
<td>8. Monitoring (Assessment)</td>
<td>Keeping track of progress</td>
</tr>
</tbody>
</table>
4. **knowing special education law**: For good or ill, special education today involves many details of law. The rights of students with disabilities are spelled out in considerable detail in federal and state legislation. These laws, as well as the rules and regulations that accompany them, are constantly being interpreted by new court decisions. Special education teachers don’t need to be lawyers, but they do need to be aware of legal requirements and prohibitions if they are to be adequate advocates for students with disabilities (Bateman, 2007; Huefner, 2006; Yell, 2006).

The knowledge and skills that every special education teacher is expected to master have been detailed by the primary professional organization of special educators, the Council for Exceptional Children (1998). These are general expectations and areas of competence with which every special educator will necessarily be concerned; however, special educators have a responsibility to offer not just good instruction but instruction that is highly individualized, intensive, relentless, urgent, and goal directed (Hallahan, 2007; Kauffman & Hallahan, 2005a; Kauffman & Landrum, 2007; Zigmond, 2003, 2007). To this end, the special feature “Responsive Instruction: Meeting the Needs of Students,” in Chapters 3 to 15, provides information about research-based practices to help make instruction intensive, relentless, and goal directed.

For a more “in the trenches” picture of what it’s like to be a special educator, see Up Close with First-Year Special Education Teacher, Emily Luedtke.

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**Universal Design and Universal Design for Learning**

Based on the architectural principles of **universal design**, **universal design for learning (UDL)** serves the general purpose of making learning accessible to more students in inclusionary programs. The idea is that with modifications of **representation** (materials), **expression** (methods of communication), and **engagement** (how students respond to curriculum), teachers can include a much wider range of students in typical classroom instruction (Spooner, Baker, Harris, Ahlgrim-Delzell, & Browder, 2007).

**Making things usable by more people**

Access to the World Wide Web by people with disabilities is a current trend with significant implications for design. Section 508 of the Rehabilitation Act requires that federal agencies must ensure equal access by those with and without disabilities to new electronic and information technology as well as information and services. Furthermore, IDEA urges educators to consider the use of assistive technology in servicing students with disabilities, to allow a greater diversity of students to be accommodated in typical classrooms (Spooner et al., 2007).

**Does Universal Design Eliminate the Need for Custom Design?**

One continuing issue is when to assume that the limits of universal design have been reached and go ahead with production. Inventors and designers may do their best to be “smart from the start” (Pisha & Coyne, 2001), but perhaps no one can be certain that no potential user’s needs have been overlooked. At some point, someone decides to put a gadget or technology into production under the assumption that the design is as universal as it can be made at that time.

Modifications of instruction used in UDL can make lessons appropriate for a wider range of students than has typically been the case. Thus, teachers must not overlook the possibility that they could be designing lesson plans that are appropriate for a greater variety of students.
Perhaps the term *universal*, like the term *all*, should not be taken too literally, or it becomes self-defeating. Very likely, the need to “customize” for individuals will always exist. Even in instruction, some special education researchers note that students with disabilities need individualized instruction that is not most appropriate for students without disabilities (e.g., Zigmond, 2007).

**Use of New Technologies**

As technology becomes ever more sophisticated, the issue of independence will become ever more important. One general guideline might be that if the technology allows people with disabilities to do something they couldn’t do without it, then the technology is in their best interest. However, if it allows them to do something new or better but at the same time imposes new limitations, then one might need to rethink the technology’s benefits.

Technological advances of all types can have implications for people with disabilities. Advances in three technologies stand out as particularly important: (1) medical treatment, (2) human reproduction, and (3) communication. Some of these advances, particularly those in medical treatment and human reproduction, are highly controversial. The controversy is typically about whether something can be done should be done, and it may involve two or three of the technologies we discuss. For example, should *cochlear implantations*, artificial inner ears (discussed further in Chapter 11), be used to allow deaf children to hear whenever possible? This issue involves both medical treatment and communication, and it could involve human reproduction as well. Should disabilities be corrected surgically before birth (in utero), if that is possible? Should the findings of fetal stem cell research be applied to cure or correct physical disabilities if possible? What characteristics of their children should parents be allowed to choose? These are some of the controversial ethical issues that we discuss in later chapters.

**The Upside and the Downside of Technology**

As the pace of technology quickens, so do applications of these technologies to the daily lives of people with disabilities. In many ways, technologies expand the abilities of people with or without disabilities to access information, communicate, travel, and accomplish many other everyday tasks. Technological applications can also allow some people with disabilities to function like those without disabilities.

Some downsides are dependence on technology and the problem of reliability. People tend to rely on whatever technology they use rather than learn how to do things in alternative ways, so they have no idea how to do things the “old-fashioned” way when a gadget malfunctions.

**Should We Do Something Because We Can?**

An issue that is likely to become more controversial is whether we *should* do all the things that we *can* with new technologies. The moral and ethical dilemmas created by the availability of means to eliminate limitations such as being unable to hear, see, walk, or communicate—whether they are considered disabilities or not—will increase in years to come. Particularly troubling will be the issue of whether we *should* allow parents to create “designer babies” to any extent that we *can*. For example, should we allow parents to create children with or without what most people consider disabilities? The ability to select embryos (or create them) with or without certain characteristics (e.g., deafness, dwarfism, diabetes, tendency toward schizophrenia or depression), in addition to presenting ethical dilemmas, raises difficult issues about the definition and meaning of disability (Kauffman & Hallahan, 2009).
Special Education in the Context of the Common Core State Standards Initiative

Since the late 20th century, state and federal policymakers have been concerned about what they perceive as a general decline in students' educational achievement and, as a result, have emphasized “standards-based” reforms. These reforms involve setting standards of learning that are measured by standardized tests. The reformers believed that teachers’ expectations have been too low and that all students should be held to higher standards (see Finn, Rotherham, & Hokanson, 2001; Hoover & Patton, 2004; Pugach & Warger, 2001; Thurlow, 2000; Thurlow, Nelson, Teelucksingh, & Draper, 2001). The curriculum for students with disabilities has sometimes differed from the curriculum in general education. Failure to teach students with disabilities the same things that are taught in general education has been interpreted to mean that the expectations for these students are lower, resulting in their low achievement and failure to make a successful transition to adult life.

In the early stages of this standards-based reform movement, states began to develop standards of their own and benchmark tests usually dependent on grade levels. For example, a state might have a certain level of proficiency expected of fourth-grade students, or they might have a high-stakes test whereby the student needed to pass in order to obtain a high school diploma.

More recently, a strong movement, the Common Core State Standards Initiative (2012), calls for all states to accept a common set of standards. The National Governors Association (NGA) and the Council of Chief State School Officers (CCSSO) have led the development of the Common Core State Standards, and in 2010 published a document delineating the standards (National Governors Association Center for Best Practices, Council of Chief State School Officers, 2010).

The Common Core State Standards (CCSS) cover English language arts and math for K–12. That is, the standards cover the competencies that students are expected to have at each grade in these areas. At this point, all but a handful of states have signed on to the Common Core Standards Initiative. Also, states have formed the Smarter Balanced Assessment Consortium (SBAC) to work on adopting a common set of tests, which they are aiming to publish in 2014–2015.

With respect to students with disabilities, the Common Core State Standards Initiative has put forth a statement, “Application to Students with Disabilities.” Essentially, the Initiative promotes the idea that students with disabilities should be held accountable regarding the general education curriculum. However, it notes that these students might need to have instructional supports, engaging students by presenting material in multiple ways and allowing for multiple modes of expression and accommodations, such as changing materials and procedures that do not alter the content of the general education curriculum. The CCSS mentions that students with severe cognitive deficits will need substantial supports and accommodations in order to access certain standards.

Concerns about the CCSS have been raised by several practitioners, researchers, and policymakers in the special education community. Although the Initiative has involved special educators in the development of the standards and the assessments (Thurlow, 2012), some are fearful that the standards will not be in the best interests of many students with disabilities. The standards-based reform movement and the CCSS have brought with them a heavy emphasis on access to the general education curriculum for students with disabilities. However, some special educators have questioned whether too much emphasis on the general education curriculum is at the expense of students learning skills such
as study skills, daily living skills, and intensive reading instruction (Hoover & Patton, 2004; Pierangelo & Giuliani, 2006; Thurlow & Quenemoen, 2011; Zigmond, 2007). Also, what should be given up in music, art, poetry, physical education, and other areas to ensure progress on standardized tests in core curriculum areas of reading and math?

For many special educators, “the devil is in the details.” Numerous questions arise: Should all standards apply to all students, regardless of disability? Under what circumstances are alternative standards appropriate? Under what circumstances should special accommodations be made in assessing progress toward a standard? Answering questions like these requires professional judgment in the individual case, and such judgment is required by law (see Bateman, 2007, 2011; Huefner, 2006; Johns, 2003; Kauffman & Hallahan, 2005a; Yell, 2006). Moreover, expecting all students with disabilities to score the same, on average, as students without disabilities is expecting the impossible (Kauffman, 2004; Kauffman & Konold, 2007; Kauffman & Wiley, 2004).

**Assessment Issues in the Age of Accountability**

The intent of the laws discussed previously (NCLB and IDEA 1997, 2004) was to improve the instruction of students with disabilities to ensure that these students are included in the assessments of educational progress demanded of all students. Although assessment has always been an important factor in special education, it has taken the spotlight in the era of standards-based reform. NCLB required that the average scores of various subgroups of students be reported and that all groups, including students with disabilities, show progress. The assessments in which students with disabilities are expected to participate in order for these comparisons to be made are considered outcome measures.

**OUTCOME MEASURES** Outcome measures differ from the screening and progress monitoring measures described earlier in the context of RTI. Educators use screening and progress measures to identify students who may be at risk for disability and to provide ongoing data to assist in program planning and typically administer these measures in group settings. Outcome measures compare a student’s performance with other students, or compare a state’s or district’s performance with other states or districts.

**TESTING ACCOMMODATIONS** Some students with disabilities who are included in standardized measures of achievement are entitled to receive testing accommodations. Testing accommodations are procedures that ensure equitable assessment access for students with disabilities (Thurlow, 2010). Although testing accommodation may involve altering the administration procedure or format of a test, the construct that is being measured does not change (Lazarus, Thurlow, Lail, & Christensen, 2009).

Accommodations for evaluation procedures might involve altering setting, the presentation format, or the
response format. The nature of the accommodation is based on the specific need of the student. Setting or scheduling accommodations alter the setting or time of the assessment, such as small-group administration and extended time. Presentation accommodations alter the way the assessment is presented to the student, such as having problems and directions read aloud. Response accommodations alter the way in which the student answers questions on the assessment, such as oral or typed responses.

Can We Solve the Dilemma of Standards and Disability?

Some consider it cruel to both students and teachers to require all students with disabilities, and those for whom the tests are inappropriate for other reasons, to take state exams (Kauffman, 2002, 2004; Kauffman & Konold, 2007; Kauffman & Wiley, 2004). However, testing to determine outcomes is necessary if we want to know whether programs for students with disabilities are “working” (Kauffman & Konold, 2007). Standardized tests have a legitimate place in assessing outcomes, and demonizing the tests themselves is not helpful. However, it’s important to understand that "testing is useful only if you make the right comparisons for the right reasons" (Kauffman, 2002, p. 240). When it comes to special education, it’s wrong to compare outcomes for students with disabilities to outcomes for students without disabilities. The right comparisons are contrasting students with disabilities who receive special education (or any given treatment) to those who don’t receive it, or comparing students with disabilities before and after they receive special education (Kauffman, 2004; Kauffman & Hallahan, 2005a).

Concluding Thoughts Regarding Special Education

It is understandable to feel overwhelmed by the controversial nature of special education; a number of unanswered questions face our field. It seems that just as we find what we think are the right answers to a certain set of questions about how to educate students with disabilities, more challenging questions emerge.

It would be easy to view this inability to reach definitive conclusions as indicative of a field in chaos. We disagree. This constant state of questioning is a sign of health and vigor, an indication that special education is based on scientific understanding, not on philosophy or mere speculation. Far from seeking and providing final answers, science thrives on the unknown and on controversy. True, there are rules for inquiry: Science is all about examining the most reliable information (see Kauffman & Sasso, 2006a, 2006b; Mostert, Kavale, & Kauffman, 2008; Sasso, 2001, 2007).

The controversial nature of special education makes it exciting and challenging. We would be worried (and we believe people with disabilities and their families would be worried, too) if professionals in special education were suddenly in complete agreement on all important issues in the field. We should constantly strive to find better ways to provide education and related services for people with disabilities based on the best evidence we can obtain (Lloyd & Hallahan, 2007). In this endeavor, differences of opinion are inevitable.
How are exceptional learners evaluated and identified to receive special education services?

- Prereferral teams have a long history in the special education identification process.
- **Response to intervention** refers to students’ response to scientific, research-based instruction.
- Although response to intervention has been suggested as a means of identifying students with learning disabilities, some question its usefulness as an identification tool.

How is the intent of special education law implemented in individualized education for students with disabilities?

- The primary concern of the law (IDEA) is that every child with a disability be given a free appropriate public education (FAPE).
- The IEP is an attempt to make certain an individualized program has been written for each child with a disability and that:
  - The student’s needs have been carefully assessed.
  - A team of professionals and the parents have worked together to design a program of education to best meet the student’s needs.
  - Goals and objectives are stated clearly so that progress in reaching them can be evaluated.
- The IEPs of students with disabilities must, by law, incorporate transition plans at a minimum by age 16.
- Early intervention is mandated by law; a cornerstone of early intervention is the individualized family service plan (IFSP).

What are the various placement options for students with disabilities?

- Special education may range from a few special provisions made by the student’s general education teacher to 24-hour residential care in a special facility.
- Different placement options include the following, including combinations:
  - General education placement with the teacher making accommodations
  - General education with consultation with a special education teacher or co-teaching
  - Itinerant services from a specialist
  - Resource room services
  - Special self-contained class
  - Special day school
  - Hospital or homebound instruction
  - Residential school
- Federal law (IDEA) calls for placement in the least restrictive environment (LRE) that is compatible with the student’s needs

What are some ways that teachers implement inclusionary practices?

- Collaborative consultation
- Co-teaching and other team arrangements
- Curricula and instructional strategies
- Accommodations and adaptations

What are the current practices in collaboration between general and special educators?

- **Collaboration** with general education means that special educators and general educators work together in arrangements such as prereferral teams, consultation, and co-teaching.
- Some educators question the effectiveness of popular forms of collaboration such as co-teaching and recommend that special education teachers be involved either in training general education teachers to accommodate a wider range of students or in actually teaching students with disabilities.

What are the trends and issues in universal design?

- **Universal design** refers to the principle that a device or program should be workable for as many potential users as possible.
- Although devices and programs may be designed for a wide variety of users, few can be made usable by literally all, and custom designs will probably always be necessary for some users.
What are the current strategies in the use of technologies?

- The major technologies that are controversial for people with disabilities involve medical advances, human reproduction, and communications.
- There is controversy about whether we should do something just because we can.

What are the roles of general and special educators in providing exceptional learners an individualized education program?

- All educators are expected to:
  - Make maximum effort to accommodate individual students' needs.
  - Refer students who need evaluation.
  - Participate in eligibility conferences.
  - Participate in writing individualized education programs.
  - Communicate with parents and guardians.
  - Participate in due process hearings and negotiations.
  - Collaborate with other professionals in identifying and making maximum use of exceptional students' abilities.
- Special educators are expected to:
  - Instruct students with learning problems, using evidence-based practices.
  - Manage serious behavior problems.
  - Evaluate technological advances.
  - Know special education law.

What impact do standards-based reform and the Common Core State Standards (CCSS) have on special education?

- Students with disabilities are expected to participate in the CCSS.
- Proponents of participation suggest that special education has not been held accountable for students' progress.
- The CCSS states that students with disabilities should be held accountable regarding the general education curriculum, but some will need instructional supports and accommodations.
- Some educators argue that some students with disabilities should not be expected to live up to the same standards as their nondisabled peers and that too much emphasis on the general education curriculum is at the expense of students learning skills such as study skills, daily living skills, and intensive reading instruction.

What are our concluding thoughts about current practices in special education?

- We believe controversy indicates that the field of special education is alive and well.
- We should constantly strive to make special education better.

Addressing CEC Standards

Council for Exception Children (CEC) Initial Level Special Educator Preparation Standards: Chapter 2 – 3.0, 4.0, 4.2, 4.4, 5.0, 5.2, 5.5, 6.1, 6.2, 7.0

Appendix: Provides a full listing of the CEC Standards with description and supporting explanation.
Internet Resources

PERTINENT ORGANIZATIONS

• The United States Office of Special Education and Rehabilitative Services (http://www2.ed.gov/about/offices/list/osers/index.html) provides many links to resources and programs for exceptional children and their teachers.

• The major professional organization for practitioners, policymakers, researchers in special education, with about 40,000 members, is the Council for Exceptional Children (CEC) (http://www.cec.sped.org). CEC is made up of 17 divisions, each covering a different aspect of special education, for example, the Division for Learning Disabilities (http://teachingld.org), Division on Autism and Developmental Disabilities (http://daddcecc.org), Council of Administrators of Special Education (http://www.casecec.org), Division for Culturally and Linguistically Diverse Exceptional Learners (http://www.ddelcecc.org).

• CEC provides numerous member benefits: http://www.youtube.com/watch?v=QA4wwyXT74&feature=c4-overview&playnext=1&list=TLZcuAELOx3s.

• National Association of Special Education Teachers (http://www.naset.org) focuses on providing resources for special education teachers.

Assessment

Check your understanding of the chapter’s concepts by taking this chapter self-check.