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Introduction to Inclusive Teaching

OBJECTIVES

After studying this chapter, you should be able to:

■ Understand federal laws protecting the educational services for students with disabilities.
■ Analyze several important court cases relating to students with disabilities, presenting a progression of increasing rights for students with disabilities.
■ Identify the disability categories served under IDEA (Individuals with Disabilities Education Act).
■ Summarize and describe the legal foundations, litigation, and legislation concerning students with disabilities, such as IDEA, Section 504 (Vocational Rehabilitation Act), and ADA (Americans with Disabilities Act).
■ Describe the continuum of services available to students with special needs and the “least-restrictive environment” concept.
■ Compare and contrast the issues surrounding inclusive instruction for students with disabilities.

In 1975, Congress passed a law that would change the face of public education in the United States. This law, the Education for All Handicapped Children Act (now known as the Individuals with Disabilities Education Act, or IDEA) specified that all children—including those with disabilities formerly excluded from school—were entitled to a free, appropriate public education. This law went far beyond any previous legislation in specifying that, to the greatest extent possible, this “special” education was to be provided in the least restrictive environment. In other words, students with disabilities were to be educated to the greatest extent possible in the general education classroom. This book is dedicated to describing the means by which this “least restrictive environment” can become a reality.

The passage of IDEA, and its subsequent amendments, has largely achieved its purpose. More than ever, students with disabilities now receive free, appropriate public education. Furthermore, this education is being provided more often in the general education classroom.

Before the passage of IDEA, students with disabilities were often denied access to public education (Knowlton, 2004). In some cases, they were placed in institutions. In other cases, the parents were forced to pay for private schools, often in inappropriate settings. Today, all students with disabilities are legally entitled to a free, appropriate education suited to their needs. The following scenarios compare a case from many years ago with a similar case from today. As a result of IDEA and related legislation, society has an increased understanding of individuals with disabilities and is much better able to accommodate individual differences in schools, in workplaces, and in social settings.


HISTORICAL SCENARIOS

Mr. and Mrs. Patterson

In 1960, Mr. and Mrs. Patterson had a brand-new baby girl, Hope. The initial excitement about the successful pregnancy and delivery was soon shrouded by a dark cloud. They were informed by the doctors that their precious infant was retarded. Mrs. Patterson tells their story:

“We felt horrible when the physician informed us that our beautiful baby girl was retarded. I can still hear his words: ‘You probably don’t want to keep her. The state institution is the best place for infants like her. The staff at the institution will be able to take care of her better than you.’ I immediately hated the doctor. How could he be saying this to me about my brand-new baby girl? I felt as if I was having a nightmare and that at any moment I would awake and find that everything was okay.

“At first we were so angry and couldn’t help thinking thoughts like: Why did this happen to us? We didn’t do anything wrong; this is unfair! We looked for someone to blame. We blamed the doctors and the staff at the hospital. It must be their fault—it couldn’t be ours! Then, gradually, we both felt so guilty. We racked our brains for things that we might have done incorrectly during pregnancy. Did I fall? Was I exposed to any harmful substances? We didn’t know who to turn to for help. We felt overwhelmed and lost. The only individuals we knew we could speak with were the doctors and staff at the hospital, who had already expressed their opinions to us.

“We loved our baby and decided to keep her. She was very slow at developing. We were always searching for effective ways to help her. Everything was so hard. Each little thing we did seemed like an enormous journey. When Hope reached kindergarten age she had passed some important developmental milestones. We knew she wasn’t developmentally the same as other children her age, but we hoped that she might begin to catch up once she was in school.

“Unfortunately, however, within the first week of kindergarten we were contacted by the school and asked to remove Hope from the school. We were told that she wasn’t ready for school and that she took too much time away from the other children in the class. If we wanted Hope exposed to any educational program, the only solution available to us was to place Hope in the state institution’s school.

“We were again devastated with this horrible decision. We felt as if we had no educational option. We went through the same grieving process as we did when Hope was born. We were angry and felt guilty for sending her away, but we sincerely believed we had no other options available to us. Although we made the best decision for us at the time, we still feel guilty.”

Mr. and Mrs. Baxter

Now imagine a family in circumstances similar to the Pattersons over 50 years later. Mr. and Mrs. Baxter have a brand-new baby girl, Holly. The excitement turns to dismay when they are informed by the doctors that their precious infant is severely developmentally delayed. This time, however, the Baxters have additional legal guarantees in place that will provide a free and appropriate education for their child in the least restrictive environment, beginning with early intervention services and continuing through supported employment options into adulthood. Some early intervention programs are available in their own community. Some of the program options are center-based, in which the intervention occurs at the school, some are home-based, in which the intervention takes place in the home, and others are a combination of center- and home-based programs. This means that Holly can participate daily in relevant educational programs in a variety of setting options.

Additionally, established networks of organizations provide support to parents and families of children with disabilities. Although the Baxters will still have some of the same painful experiences that the Pattersons had, at least the federal government has mandated services for families with children with severe special needs. Mrs. Baxter tells her story:
“We felt horrible when the physician informed us that our beautiful baby girl would always be severely developmentally delayed. Her words still ring in my ears. ‘Your baby is not normal!’ We barely heard the rest of her statement: ‘We have a staff of early childhood specialists and nurses who will be in contact with you later today.’ We couldn’t believe our ears. The doctor must have us mixed up with someone else. There must be a horrible mistake. How could anything be wrong with our brand-new baby girl? I felt as if I was having a nightmare and that at any moment I would wake up and find that everything was okay.”

The Baxters, like the Pattersons, went through the same questions of “Why us?” and “What happened?” and the associated feelings of denial, anger, guilt, and aloneness. Later on the same day, however, the Baxters felt the support from an early childhood specialist and a nurse. As Mrs. Baxter reported:

“They explained the types of intervention services that were available for our baby and for us. At first everything seemed like a blur, but then as reality sank in we realized that we had hope for Holly again. Specialized services were available, she would receive assistance, and we would receive educational support. Although we still felt the anger and wanted to blame someone, we began to realize there were individuals and support services that would help us begin to adapt and provide appropriate services for our baby with special needs.”

QUESTIONS FOR REFLECTION
1. Describe the various feelings experienced by the Pattersons. In what way were they similar to the feelings expressed by the Baxters? How do you think you would feel as a parent facing these issues?
2. Which of the Baxters’ program options do you think you would have chosen? Why?

What Are the Educational Rights for Individuals with Disabilities?

Before the passage of federal legislation mandating services for students with disabilities, these individuals were routinely and legally excluded from school. Johnson (1986, pp. 1–2) documented several instances across the United States, including the following examples:

- In Massachusetts in 1893, a child with disabilities was excluded by a school committee because “he was so weak in mind as to not derive any marked benefit from instruction and further, that he is troublesome to other children. . . .” (Watson v. City of Cambridge, 1893).
- In Wisconsin in 1919, a 13-year-old with normal intelligence but physical disabilities was excluded for the following reasons:
  His physical condition and ailment produces a depressing and nauseating effect upon the teachers and school children; . . . he takes up an undue proportion of the teacher’s time and attention, distracts attention of other pupils, and interferes generally with discipline and progress of the school. (Beattie v. Board of Education of City of Antigo, 1919)
- In 1963, Nevada excluded any student whose “physical or mental conditions or attitude is such as to prevent or render inadvisable his attendance at school or his application to study” (Nevada Revised Statutes, 1963).
- In 1971, Alaska excluded students with “bodily or mental conditions rendering attendance inadvisable” from school (Alaska Statutes, 1971).

Parents of children with disabilities face awesome responsibilities and challenges, including the need to advocate for the rights of their children.
• Virginia law in 1973 allowed school exclusion for "children physically or mentally incapacitated for school work" (Code of Virginia, 1973).

Today, these laws are no longer applicable. According to federal law, all students, regardless of disability, are entitled to a free and appropriate public education, including access to the general education curriculum. Since 1975, public education has truly become “education for all.”

Along with increased rights of individuals with disabilities from legislation such as IDEA come increased responsibilities for teachers. General education teachers today have more students with disabilities in their classrooms than ever. In fact, only a small proportion of students with disabilities currently receives more than 60% of their education outside the general education classroom (see Table 1.1). Today, therefore, teachers must be especially aware of their responsibilities in providing appropriate instruction for students with disabilities.

Although more responsibilities are placed on the general education teacher, they should not be considered a burden. On the contrary, classroom diversity—whether in the form of gender, race, ethnicity, or ability—is something to be valued in its own right. Diversity provides a more exciting, dynamic classroom and the opportunity for students to learn that all people are not the same. Diversity provides opportunities for students to understand, respect, and value others for their differences. Finally, diversity provides the opportunity for you to use all of your imagination, skills, and resources, to be the best teacher you can be. In the end, effective inclusive teaching is about being the most effective teacher possible and supporting all students to learn in the least restrictive environment.

<table>
<thead>
<tr>
<th>Disabilities</th>
<th>&lt;21% of the Day</th>
<th>21–60% of the Day</th>
<th>&gt;60% of the Day</th>
<th>Separate Environments (e.g., Residential, Separate Facilities, and Home-Bound/Hospital Environments)</th>
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<tbody>
<tr>
<td>Specific learning disabilities</td>
<td>44.8</td>
<td>37.3</td>
<td>13.0</td>
<td>1.0</td>
</tr>
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<td>Speech or language impairments</td>
<td>88.2</td>
<td>6.8</td>
<td>4.6</td>
<td>0.9</td>
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<td>11.7</td>
<td>30.2</td>
<td>51.8</td>
<td>6.1</td>
</tr>
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<td>Emotional disturbance</td>
<td>30.3</td>
<td>22.6</td>
<td>30.2</td>
<td>18.1</td>
</tr>
<tr>
<td>Multiple disabilities</td>
<td>12.1</td>
<td>17.2</td>
<td>45.8</td>
<td>26.4</td>
</tr>
<tr>
<td>Hearing impairments</td>
<td>44.9</td>
<td>19.2</td>
<td>22.2</td>
<td>15.3</td>
</tr>
<tr>
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<td>20.9</td>
<td>26.2</td>
<td>6.0</td>
</tr>
<tr>
<td>Other health impairments</td>
<td>51.1</td>
<td>30.5</td>
<td>15.0</td>
<td>4.4</td>
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<td>54.6</td>
<td>16.9</td>
<td>15.6</td>
<td>13.4</td>
</tr>
<tr>
<td>Autism</td>
<td>26.8</td>
<td>17.7</td>
<td>43.9</td>
<td>14.0</td>
</tr>
<tr>
<td>Deaf-blindness</td>
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<td>13.9</td>
<td>33.6</td>
<td>37.8</td>
</tr>
<tr>
<td>Traumatic brain injury</td>
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<td>29.9</td>
<td>27.1</td>
<td>10.4</td>
</tr>
<tr>
<td>Developmental delay</td>
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<td>28.2</td>
<td>18.6</td>
<td>1.3</td>
</tr>
<tr>
<td>All disabilities</td>
<td>49.9</td>
<td>27.7</td>
<td>18.5</td>
<td>3.9</td>
</tr>
</tbody>
</table>

The Least Restrictive Environment

WHERE ARE STUDENTS WITH DISABILITIES SERVED?

Critical to IDEA legislation is the concept of least restrictive environment. This phrase means that students with disabilities must be educated in the setting least removed from the general education classroom. To the greatest extent possible, students with disabilities are not to be restricted to education in special schools or special classrooms but rather should have access to the same settings to which students without disabilities have access. When students with disabilities are educated, to any extent, in a different setting, there must be a compelling reason that this setting is in the student’s best interest.

MAINSTREAMING AND INCLUSION

Mainstreaming was the first movement devoted to placement of students with disabilities within the general education classroom. Advocates of mainstreaming three or four decades ago did not want to see students with disabilities placed in special classes for the entire school day and argued that more exposure to the general classroom would be in everyone’s best interest. Often, mainstreaming was thought to be something individual special education students could “earn” by demonstrating their skills were adequate to function independently in general education settings. Since then, the term inclusion has been used to describe the education of students with disabilities in general education settings. Although many definitions have been used to describe inclusion, the term is generally taken to mean that students with disabilities are served primarily in the general education classroom, under the responsibility of the general classroom teacher. When necessary and justifiable, students with disabilities may also receive some of their instruction in another setting, such as a resource room. Additional support can also be provided within the general education classroom by paraprofessionals or special education teachers. Although this is a similar concept to mainstreaming, a critical difference of inclusion is the view of the general classroom as the primary placement for the student with disabilities, with other special services regarded as ancillary.

In addition to mainstreaming and inclusion, the term full inclusion is also used, referring to the practice of serving students with disabilities and other special needs entirely within the general classroom. In full-inclusion settings, all students with disabilities are served the entire day in the general classroom, although special education teachers and other personnel may also be present in the general classroom at times (Knowlton, 2004).

WHO IS SERVED UNDER IDEA?

IDEA is intended to provide necessary support services to students with disabilities. To accomplish this goal, students with disabilities are categorized in particular disability groups. It is important to remember, however, that all students served by IDEA are first human beings and individuals, capable of achievement, accomplishment, friendship, affection, and all other attributes of any other individual. Disability status may not be a permanent characteristic of all individuals; in fact, most people can expect to be considered “disabled” at one time or another in their lives. This in no way detracts from their fundamental worth as human beings. In fact, it is this principle of individual worth that has inspired much of today’s special education legislation.

In short, although students served under IDEA have been given a disability “label,” it is important to consider the individual first, and then consider the label as a secondary factor, along with other characteristics that help identify the unique aspects of the individual. For this reason, it has been recommended that “person-first” language be adopted (Blaska, 1993). For
example, we speak of “students with hearing impairments,” rather than “hearing-impaired students.” It is also important to remember that we use these descriptions only when it is directly relevant to a situation. When it is not relevant to list hearing impairment as a characteristic, for example, we speak simply of “Amy,” or “Richard,” or “Ana.”

For example, Margo, as a high school student, was best friends with Carol, a student one year older. They played on the basketball team together and spent much of their after-school time together. After several years of close friendship, Margo expressed surprise that Carol had not gotten her driver’s license, even a year after her 16th birthday. Further, Carol went to a separate setting to take the SAT. When she asked Carol about these things, Carol revealed that she was legally blind. Margo was astonished to hear this—and this situation demonstrated clearly to her that many characteristics of individuals, such as warmth, caring, sincerity, and understanding, can be much more important than disability status. It also demonstrated that important relationships can be developed and maintained that have little or nothing to do with disability status.

GENERAL CHARACTERISTICS  Students served by IDEA are distributed among 13 disability categories. Following is a brief description of each category (see IDEA, 2004; U.S. Department of Education, 2007, pp. 46756–46757). Individual states may use different terminology. These categories are described in more detail in Chapters 3 and 4.

• **Autism:** Autism is a developmental disability generally manifested within the first 3 years of life. Major characteristics can include impairments in communication and reciprocal social interaction, resistance to change, engagement in repetitive activities, and unusual responses to sensory stimuli.

• **Deaf-blindness:** Individuals in this category have moderate to severe impairments in both vision and hearing, causing such severe communication and educational needs that programming solely for children with deafness or children with blindness is not appropriate.

• **Deafness:** Individuals with deafness have hearing impairments so severe that processing linguistic information through hearing is severely limited, with or without amplification, and educational performance is negatively impacted.

• **Emotional disturbance (or serious emotional disturbance):** This category includes individuals with a condition in one or more of the following areas during an extended period of time: (a) inability to learn, not due to intellectual, sensory, or health problems; (b) inability to build and maintain social relationships with peers and teachers; (c) inappropriate behavior and affect; (d) general pervasive depression or unhappiness; (e) tendency to develop fears or physical symptoms associated with school and personal problems; and (f) schizophrenia (a disorder in perception of reality). According to the federal definition, emotional disturbance is not intended to apply to socially maladjusted children unless they are also characterized as having serious emotional disturbance.

• **Hearing impairments:** Hearing impairments, with or without amplification, affect educational performance and developmental progress. The impairment may be permanent or fluctuating, mild to profound, unilateral or bilateral, but includes impairments not included under the definition of deafness.

• **Mental retardation:** Mental retardation or intellectual disability describes significantly below-average intellectual functioning, as well as concurrent deficits in “adaptive behavior” (age-appropriate personal independence and social responsibility). It is manifested between birth and age 18 and negatively affects educational performance.

• **Multiple disabilities:** This category includes any individuals with two or more disabling conditions. However, this category often includes mental
retardation/intellectual disability as one of the categories and is usually used when disorders are serious and interrelated to such an extent that it is difficult to identify the primary area of disability. It does not include deaf-blindness.

- **Orthopedic impairments**: Orthopedic impairments are associated with physical conditions that seriously impair mobility or motor activity. This category includes individuals with cerebral palsy, diseases of the skeleton or muscles (such as poliomyelitis), and accident victims.

- **Other health impairments**: This category includes chronic or acute health-related difficulties that adversely affect educational performance and are manifested by limited strength, vitality, or alertness. It can include such health problems as heart conditions, sickle-cell anemia, lead poisoning, diabetes, and epilepsy.

- **Specific learning disabilities**: This category refers to a disorder in one or more of the basic psychological processes involved in understanding or using spoken or written language, which can result in difficulties in reading, writing, listening, speaking, thinking, spelling, or mathematics. The term learning disabilities does not apply to children with learning problems that are primarily the result of visual, hearing, or physical disabilities; mental retardation/intellectual disability; emotional disturbance; or environmental, cultural, or economic disadvantage.

- **Speech or language impairments**: A disorder of articulation, fluency, voice, or language that adversely affects educational performance.

- **Traumatic brain injury**: Traumatic brain injury is an acquired injury to the brain due to external force resulting in a total or partial disability or psychosocial impairment, or both, which negatively affects educational performance (does not apply to congenital or degenerative injuries, or to brain injuries acquired during birth).

- **Visual impairments including blindness**: A visual impairment is a loss of vision that, even when corrected, affects educational performance. It may be mild to moderate to severe in nature. Students who are blind are unable to read print and usually learn to read and write using Braille. Students with low vision can usually read when the print is enlarged sufficiently.

In addition, children aged 3 to 9 can be classified as experiencing developmental delay if they have developmental delays in one or more of the following areas: physical, cognitive, communication, social or emotional, or adaptive development; such children may need special education and related services (IDEA, 2004).

**OTHER INSTANCES OF CLASSROOM DIVERSITY**

IDEA provides service to most of the recognized disability areas. However, there are other sources of classroom diversity, not associated with disabilities, that you need to consider when planning and implementing classroom instruction. These areas include the following:

- **Culturally and linguistically diverse groups**: These students are culturally or linguistically different from the majority U.S. culture or different from the teacher. Teachers should plan and implement instruction that is considerate of and sensitive to students’ linguistic or cultural differences (Gollnick & Chinn, 2009).

- **At-risk**: Students characterized as “at-risk” exhibit characteristics, live in an environment, or have experiences that make them more likely to fail in school, drop out, or experience lack of success in future life. These factors are many and varied, but they include “slow learners” not served by IDEA categories and individuals who have sociocultural disadvantages, are at risk for suicide, or come from dysfunctional home environments (e.g., marred by drug or alcohol abuse, domestic violence, or child abuse). Such learners may require any of a variety of adaptations to help them succeed in school and later life (Frieman, 2001).

- **Gifted and talented**: These students exhibit skills or abilities substantially above those of their age in areas such as academic achievement in one or more subject areas, visual or performing arts, or athletics. If the abilities of such students greatly exceed
classroom standards or curriculum, special adaptations or accommodations may be appropriate. Although many states have passed laws providing for the identification and education of gifted and talented students, in many cases funding for gifted programs is not provided (Davis & Rimm, 2004).

Legal Foundations

In the years following World War II, political change, litigation, and resulting legislation began to emerge that increased the inclusion of all groups of people in U.S. society. Most significant was the civil rights movement, which primarily addressed the rights of African Americans in U.S. society. This movement influenced the ideas on which much litigation and legislation involving individuals with disabilities are based. In the Brown v. Board of Education (1954) decision, the Supreme Court ruled that it was unlawful to discriminate against any group of people. With respect to school children, the Court ruled that the concept of “separate-but-equal” educational facilities for children of different races was inherently unequal. The justification for this ruling was found in the 14th Amendment to the U.S. Constitution, which states that individuals cannot be deprived of life, liberty, or property without due process of law.

LEGAL PROCEEDINGS AND LEGISLATION

People with disabilities also began to be identified as a group whose rights had been denied. In the years following Brown v. Board of Education, court cases were decided that underlined the rights of individuals with disabilities to a free, appropriate education. Other cases supported nondiscriminatory special education placement of individuals from minority groups in the United States. Some of the important court cases relating to individuals with disabilities demonstrate a progression of increasing rights for individuals with disabilities (see also Murdick, Gartin, & Crabtree, 2002; Wright & Wright, 2007; Yell, 2006):

- 1954: Brown v. Board of Education (Kansas). The Supreme Court determined that “separate-but-equal” education is illegal.
- 1970: Diana v. State Board of Education (California). The court ruled that children cannot be placed in special education based on culturally biased tests.
- 1972: Pennsylvania Association for Retarded Children (PARC) v. Commonwealth of Pennsylvania and Mills v. Board of Education (District of Columbia) established the right to education for students with disabilities and found that denial of education violates the 14th Amendment.
- 1977: Larry P. v. Riles (California). A court ruled that the use of standardized IQ tests for placement into special education classes for students with educable mental retardation was discriminatory.
- 1988: Honig v. Doe (California). This decision was concerned with extensive suspensions of students with emotional disturbances from school for aggressive behavior that the court determined was disability related. The court ruled that a suspension of longer than 10 days was effectively a change in placement, requiring all the necessary procedures governing a change in placement.
- 1992: Oberti v. Board of Education of the Borough of Clementon School District (New Jersey). A federal district court ruled that a self-contained special education class was not the least restrictive environment for a student with Down syndrome. The court ruled that school districts were obligated to first consider regular class placement, with supplementary aids and services, before considering alternative placements.

Along with this litigation, laws began to be passed that provided further support for the rights of students with disabilities. Some of these laws are summarized in Figure 1.1. In the following text, some of the most significant legislation involving individuals with disabilities is described (see also Murdick et al., 2006; Rothstein, 1999; Yell, 2006). This legislation includes Section 504 of the Vocational Rehabilitation Act, the Americans with Disabilities Act, and the most significant law for special education, the Individuals with Disabilities Education Act (PL 94-142).
<table>
<thead>
<tr>
<th>Year</th>
<th>Legislation</th>
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<tbody>
<tr>
<td>1975</td>
<td>Education for All Handicapped Children Act (PL 94-142), 20 U.S.C. Sections 1400–1461: This law requires, and provides support to, states to implement a plan to provide free education and appropriate related services (on an individualized basis) to students with disabilities, including due-process provisions. It requires Individualized Education Programs (IEPs) for each student served under this law. This law was amended in 1983, 1986, 1990, 1997, and 2004. The 1990 amendments also renamed this law the Individuals with Disabilities Education Act (IDEA).</td>
</tr>
<tr>
<td>1977</td>
<td>Final regulations of Education for All Handicapped Children Act are passed.</td>
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<tr>
<td>1978</td>
<td>Gifted and Talented Children’s Education Act: This act provides financial incentives for state and local educational agencies to develop programs for gifted and talented students.</td>
</tr>
<tr>
<td>1983</td>
<td>Amendments to the Education of the Handicapped Act (PL 98-199): These amendments mandate states to collect data on students with disabilities exiting systems and to address transition needs of secondary students with disabilities. In addition, they provide incentives to states to provide services to infants and preschoolers with disabilities.</td>
</tr>
<tr>
<td>1984</td>
<td>Developmental Disabilities Assistance and Bill of Rights Acts (PL 98-527): These acts provide for the development of employment-related training activities for adults with disabilities.</td>
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<td>1984</td>
<td>Perkins Act, 20 U.S.C. 2301, 233–234: This act mandates that 10% of all vocational education funding must be for students with disabilities. Vocational education should be provided in the least-restrictive environment; secondary support is provided for students with disabilities.</td>
</tr>
<tr>
<td>1986</td>
<td>Education for All Handicapped Children Act Amendments (PL 99-457): These amendments encourage states to develop comprehensive services for infants and toddlers (birth through age 2) with disabilities and to expand services for preschool children (ages 3–5). After the 1990–91 school year, all states must provide free and appropriate education to all 3- to 5-year-olds with disabilities or forfeit federal assistance for preschool funding.</td>
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<tr>
<td>1986</td>
<td>Rehabilitation Act Amendments (PL 99-506): These amendments provide for the development of supported employment programs for adults with disabilities.</td>
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**Figure 1.1** History of Relevant Legislation

**SECTION 504**

Section 504 of the Vocational Rehabilitation Act of 1973 (reauthorized as the Carl D. Perkins Career and Technical Education Act of 2006; U.S. Department of Education, 2006) is a civil rights law that prevents discrimination against individuals with disabilities by any institution that receives federal funds and provides for a free, appropriate public education (FAPE). Some private schools that do not receive federal funding may be exempt from Section 504. This law applies both to schools and to the workforce. Section 504 provides for equal opportunities in all aspects of education. Students may not be classified as disabled according to the IDEA guidelines, but they must demonstrate a significant learning problem that affects their ability to function in school. Under Section 504, disability is considered to be an impairment, physical or mental, that substantially limits a major life activity (Smith, 2001; U.S. Department of Education, 2006a). Some students who may not be served under IDEA, because they do not meet the definitional requirements of one of the IDEA disability categories, can still obtain services under Section 504 (deBettencourt, 2002). For example, some students with attention deficit hyperactivity disorder (ADHD), as well as some students who require modifications for their severe allergies or asthma, may
be covered under this law. Other types of disabilities likely covered under Section 504, but not IDEA, might include the following (Smith, 2001):

- Students who had been placed in special education programs but have transitioned out;
- Students thought to be socially maladjusted, or who have a history of alcohol or drug abuse;
- Students who carry infectious diseases such as AIDS.

Students can be referred for Section 504 services by anyone but are usually referred by teachers or parents. If a group of knowledgeable school personnel believes the child is eligible, the school must then conduct an evaluation to determine eligibility and the nature of services needed to ensure a free, appropriate public education. The decision is based on professional judgment rather than test scores and numerical indicators. If a student is considered eligible, the law does not provide funding; however, it does require that school personnel create a written plan that will help accommodate these special needs and provide an accessible environment. Accommodation plans can include a statement of student strengths and weaknesses, a list of accommodations to be implemented, and designation of the person(s) responsible for implementation. Accommodations are usually inexpensive, commonsense modifications intended to provide nondiscrimination and free, appropriate public education (Smith, 2001).

AMERICANS WITH DISABILITIES ACT

The Americans with Disabilities Act (ADA) was signed into law in 1990, and mandated that individuals with disabilities should be provided with “reasonable accommodations” in the workplace, and that such individuals could not be discriminated against. ADA also included protections for individuals enrolled in colleges and universities. Adults with disabilities attending universities are also entitled to appropriate modifications in classes. These modifications, in many ways, parallel those made in public schools in compliance with IDEA. Major components of the ADA are given in Figure 1.2.

The Americans with Disabilities Act is of particular significance because of its aim to maximize the employment potential of millions of Americans with disabilities. It can be considered an important extension of IDEA, in that it provides for reasonable accommodations and nondiscriminatory treatment of individuals with disabilities beyond the high school years.

INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)

This act is the major special education law. Originally signed in 1975 as the Education for All Handicapped Children Act, IDEA has been amended several times since then, most recently in 2004 (IDEA, 2004), as summarized in Figure 1.3. The most important provision in IDEA is that all children, from 3 through 21 years of age, regardless of type or severity of disability, are entitled to a free, appropriate public education. Discretionary assistance is also

![Figure 1.2](Note: From Americans with Disabilities Act Requirements: Fact Sheet, 1990, Washington, DC: U.S. Department of Justice.)
Content of IEPs
- Present level of performance must include the “child’s academic achievement and functional performance.”
- Annual goals must be measurable.
- Short-term objectives are required only for children who take alternative assessments.
- IEPs must describe how progress will be measured and when reports will be issued.

Research-based practice
- Statements supporting special education services must be based on peer-reviewed research.

Accommodations and alternative assessments
- Statements indicating the need for individual accommodations for testing and alternative state-wide assessments must be provided.
- Justification for participation in alternative assessments must be provided.

IEP meetings
- The teacher’s attendance may be waived (1) if the teacher’s curriculum area is not addressed, or (2) if a report based on the curriculum area is submitted prior to the meeting and is approved by the student’s parents and the local education agency (LEA).
- Fifteen states may apply for an optional multi-year IEP pilot program. This means that, in some cases, annual IEP meetings may not be required and may be conducted no less than every 3 years.

Discipline
- If students violate a code of conduct at school, they may be suspended for up to 10 days.
- If the behavior was related to the disability, a functional behavior assessment and behavior intervention plan must be completed for the child.
- If the behavior was unrelated to the disability, students may be suspended for more than 10 days, like any other student in the school.
- If students are suspended for more than 10 days, they must be provided with a free and appropriate education, and the IEP team must identify alternative placements.

Identification of learning disabilities
- Schools can use a Response to Intervention (see Chapter 3) model to determine eligibility for learning disabilities.

Early intervention funding
- LEAs may apply some of its special education funding to develop coordinated early intervention services, which may include students not identified for special education, but in need of academic or behavioral support.

Special education teacher licensure
- A highly qualified teacher is one who holds full teaching credentials required by state in conformance with No Child Left Behind Act. Special education teachers who teach in core subject areas must also hold the full teaching credentials in those subject areas.

Figure 1.3  IDEA 2004 Amendments
Sources: IDEA 2004 (2005), Mandlswitz (2006), and Wright and Wright (2005)

provided to develop interagency programs for all young children with disabilities, from birth to 3 years of age. This provision overrides previous legislation and decisions that limit the attendance of students with disabilities in public schools. Overall, six major principles have remained in the law throughout its amendments (Murdick et al., 2006). These principles are as follows:

1. **Zero reject.** This principle requires that no child with a disability can be excluded from public education.
2. **Nondiscriminatory testing.** Schools are required to use a variety of nondiscriminatory methods to determine whether a student has a disability, and, if so, whether special education is required. Testing must not discriminate on the basis of race, culture, or ethnicity, and must be administered in the student’s native language. A variety of measures is required so that placement decisions are not
made on the basis of a single test score. Further, the law is intended to address multicultural issues, as described in the Diversity in the Classroom feature.

3. Free and appropriate education. Students who have been referred to special education must have an individualized education program (IEP) that details their special learning needs and mandates appropriate services. Short- and long-term goals and objectives for students are listed explicitly on IEPs.

4. Least restrictive environment. Students with disabilities are entitled to be educated with their nondisabled peers to the greatest extent possible.

5. Due process. Due process must be followed in all placement decisions and changes in placement. Records are to be kept confidential, and parents are to be involved in all aspects of the planning and placement process.

6. Parent participation. Schools must collaborate with parents in the design and implementation of special education services (see also Hayden, Takemoto, Anderson, & Chitwood, 2008).

Along with these six common principles, several additions have been made to the original law:

1. Transition services. All 16-year-old students with disabilities must be provided with a statement of transition service needs on their IEP. These services, which must be included in the IEP by age 16, are intended to facilitate the student’s transition from school to community, vocational programs, college, or employment. The transition plan can involve professionals from other agencies, such as social or vocational services. Transition planning conferences are also specified for transition from infant and toddler programs to preschool programs.

2. Early childhood education. Amendments to the Education for All Handicapped Children Act (now IDEA) in 1986 and 1990 provided for services to infants, toddlers, and preschoolers with disabilities. Very young children (younger than 3) are entitled to an individualized family service plan (IFSP, which replaces the IEP), which takes family needs and responsibilities into account. Necessary components of the IFSP include (a) current statement of child’s functioning levels; (b) current statement of the family’s needs and strengths in relation to the child with special needs; (c) statement of the major expected outcomes, including a timeline; (d) statement of the specific services to be provided to meet the special needs of the child and the family; (e) initiation and anticipated duration dates for services; (f) designation of a case manager; and (g) statement of transition steps from infant early intervention services to preschool services. States are required to take action to locate as many young children as possible who may require special education services.

3. Assessments. Students with disabilities must participate in general state- and district-wide assessment programs. If students cannot participate in state- and district-wide assessments, justification must be provided, and they must participate in alternative assessments.

4. Early intervening services. The 2004 amendments to IDEA specify that not more than 15% of the funding the local education authority receives from the federal government can be allocated to programming for students (K–12, with an emphasis on K–3) not currently identified for special education, but who need additional academic and behavioral support to succeed in the general education environment (U.S. Department of Education, 2006b). These services can include those referred to as response-to-intervention (RTI) tiered services, which are described in more detail in subsequent chapters.

NO CHILD LEFT BEHIND ACT OF 2001
The No Child Left Behind Act (NCLB) is a reauthorization of the Elementary and Secondary Education Act and was not written specifically for students with disabilities. However, many
Multicultural Considerations for the Identification of Individuals with Disabilities

Legal Assistance

Federal legislation has provided protections and guidance for the proper identification of individuals with disabilities. These assurances are to guarantee that only the correct individuals become identified as having disabilities. It is especially important that individuals from culturally and linguistically diverse backgrounds are not overrepresented in special education programs. The following protections are part of the Individuals with Disabilities Education Act (IDEA):

- **Disproportionality requirement:** States must devise plans to prevent overidentification and provide data to document whether disproportionality by race is happening with respect to identification and placement of individuals with disabilities.
- **Development, review, and revisions of IEPs:** Consider the language needs as related to the IEP for individuals with limited English proficiency.
- **Evaluation procedures:**
  - Test materials are not to be discriminatory against races or cultures.
  - Tests must be administered in the individual’s native language.
  - Test materials for individuals with limited English proficiency must be used to measure a disability and not the individual’s English skills.
  - Tests must be valid and reliable and administered by trained professionals.
  - No single procedure can be used as a sole criterion for determining whether a disability exists.
- **Eligibility determination:** An individual may not be eligible if the only difficulty appears to be limited English proficiency.

The U.S. Office of Civil Rights also provides guidance and protections and is the compliance monitor for prereferral practices that may also influence overrepresentation of individuals from culturally and linguistically diverse backgrounds. These laws include the following:

- **Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act:** Provide protection against discrimination for individuals with disabilities and those perceived as having disabilities or those who have been misclassified.
- **Title VI of the Civil Rights Act:** Provides protection from discrimination based on national origin, color, or race.

When districts are out of compliance with these federal laws and have an overrepresentation of individuals from culturally or linguistically diverse backgrounds, they may become involved in legal actions and asked to provide a plan to correct the problems.

Aspects of the legislation have important implications for students with disabilities (Simpson, LaCava, & Graner, 2004).

The law requires that all children be tested in grades 3 through 8, in reading and math, by tests developed by the states. Schools must demonstrate adequate yearly progress (AYP) toward the goal of 100% proficiency in reading, math, and science for all students within 12 years. Schools must demonstrate that students make progress in equal increments toward this goal, that is, that they are making steady, equivalent gains from year to year. Schools that fail to make AYP for two consecutive years must offer parents of the students the option to transfer to another public school, and the districts must pay the cost of transportation (if allowed under state law). The school district must provide technical assistance to the school. If schools fail to make AYP for more than two consecutive years, more corrective measures must be taken, including replacing staff, implementing different curricula, or, ultimately, a state take-over, hiring a private management contractor, or converting to a charter school (Council for Exceptional Children, 2002). Other aspects of the law include compensatory education grants (Title I), bilingual and immigrant education programs, and standards and provisions for teacher training and recruitment (Wright, Wright, & Heath, 2004).

The NCLB Act has several important implications for special education. If students with disabilities fail to meet adequate yearly progress toward reaching 100% proficiency in reading and math by 2012, the entire school will face a host of accountability measures, as described...
previously. Further, if students with disabilities receive accommodations for statewide tests, and those accommodations result in the scores being deemed unreliable or invalid, the students will not be considered to have participated in the assessment. If the overall participation rate does not meet the minimum requirement (possibly as high as 95%), the state can be considered out of compliance and subject to sanctions (Council for Exceptional Children, 2002).

Finally, NCLB requires that all teachers hold full state certification or licensure as of 2005. In light of the personnel shortages in special education, meeting these requirements represents a major undertaking (Nougaret, Scruggs, & Mastropieri, 2004; Sindelar, McCray, Kiely, & Kamman, 2008).

One important feature of federal legislation is that it is constantly changing. Some technological approaches for keeping abreast of federal legislation are described in the Technology Highlight feature.

Models of Service Delivery

THE CONTINUUM OF SERVICES

The initial emphasis of legal actions was to provide access to educational services for students with disabilities. Once access was obtained, the focus shifted to the setting and placement of students with disabilities during education. Most placement guidelines emphasized availability of a range of services and programs, commonly referred to as a continuum of services, within the least restrictive environment for students with disabilities (Knowlton, 2004). Least restrictive environment is defined in IDEA as meaning that students with disabilities should be educated in a setting that as closely as possible resembles the general education program while simultaneously meeting the unique special needs for each individual with disabilities. The basic model of a continuum of services ranges from full-time placement in the general education classroom to full-time placement in a nonpublic school facility, on a day or residential basis, based on student need. As the needs of the individual
with disability increase, the least restrictive environment may be further removed from the
general education class on the continuum of services. Figure 1.4 presents a sample of the
range of placement options.

WHERE ARE MOST STUDENTS WITH DISABILITIES SERVED?
Most students with disabilities are served in the public school with their nondisabled peers in Lev-
els 1 through 5. In other words, these students receive their education in their local public school.
Most students with mild disabilities, including those with learning disabilities, mild mental retar-
dation/intellectual disability, speech and language disabilities, and serious emotional disturbance,
are currently served in Levels 1 through 4. That is, these students spend some, if not all, of their
day in the general education classroom along with students without disabilities. The general educa-
tion teacher is responsible for their education for some, if not all, of the day, depending on the
amount of time spent in that general education class. Table 1.1 on page 6 provides a listing of dis-
ability categories and the proportion currently served outside general education classrooms.

WHAT ARE GENERAL EDUCATION CLASSROOM AND
CONSULTATION SERVICES?
In some cases, students may be served in general education classes by general education teach-
ers. Some special services may be provided by a consultant who works with individuals as
needed. Special education teachers frequently provide consultative services to general educa-
tion teachers. This consultation is intended to provide assistance and ideas for how to teach and
work with the students with disabilities who are placed in general education classes. Although
special education teachers may not work directly with identified students, they may meet reg-
ularly with general education teachers, review assessment and progress data, and make specific
recommendations for addressing special learning needs. These students would be receiving
services at Levels 1 or 2 of the continuum of services model.

In other cases, special education teachers and classroom assistants (or paraprofessionals)
may deliver instruction to students with special needs in the general education classroom. In
In these cases, students with disabilities still receive all their instruction in the general education classroom, but it may be delivered by different teachers or para-professionals. Teachers collaborate and share instructional responsibilities in one of several co-teaching models (Dettmer, Thurston, & Dyck, 2005). For example, a special education teacher may lead instruction for small groups of elementary students with special needs during classroom reading instruction. At the secondary level, the special education teacher may co-teach with a general education teacher in a high school biology class. The two teachers share teaching responsibilities, with the special education teacher focusing on strategies for addressing special learning needs. These students would be receiving services at Level 3 of the continuum of services model. Co-teaching models are described further in Chapter 2.

WHAT ARE RESOURCE AND SELF-CONTAINED SERVICES?

Special education teachers also provide instruction in resource and self-contained classrooms within the public schools. In a resource room model, students with disabilities leave the general education class for a designated time period to visit the resource room and receive specialized instruction in areas such as language, reading, and math. For example, Kathi is a sixth-grader who has been classified as having learning disabilities. Kathi is functioning intellectually within the average ability range, but she has reading, spelling, and written language skills at an upper third-grade level. The multidisciplinary team recommended that Kathi receive specialized instruction in reading, written communication, and spelling with a special education teacher 1.5 hours per day in her school's resource room. This means that Kathi would be receiving services at Level 4 of the continuum of services model.

Most of her school day will be spent in the least restrictive environment of her general education class with Mrs. Gomez. Mrs. Gomez will be responsible for Kathi’s instruction for the entire time that she is in the general education class. This might even include making some adaptations in instructional procedures and assignments to accommodate Kathi’s special learning needs in the general education sixth-grade classroom. For example, during content-area classes, Mrs. Gomez will need to provide adapted reading and study materials appropriate to Kathi’s skill levels. During her 1.5 hours in the resource room, Kathi will receive instruction with Mr. Halleran, the special education teacher in the same school. This resource room arrangement represents the least restrictive environment to meet Kathi’s special needs in reading, written communication, and mathematics, while maintaining her placement in her general education class for the majority of the school day.

The resource model is often referred to as a pull-out model, indicating that students with disabilities are pulled out of the general education class for special education instruction. In a self-contained model of instruction (Level 5 of the continuum of services model), students with disabilities receive all or most of their classroom instruction from special education teachers. Even in these models, however, students with disabilities usually have opportunities to interact with their nondisabled peers during such activities as art, music, physical education, recess, lunch, and assemblies.
SPECIAL SCHOOLS AND SPECIAL FACILITIES

In some cases, the need for specialized instruction is considered so significant that a special school or other facility is considered necessary. In some cases, special public schools are established to focus specifically on the special needs of the students. In other cases, students are sent to nonpublic schools, either as special day schools or as residential schools. These students would be receiving services at Level 6 or 7 of the continuum of services model. The numbers of special schools or other facilities have declined since the early years of IDEA, as traditional public schools have accommodated more students with disabilities and other special needs within their educational programs.

WHAT OTHER RELATED SERVICES ARE AVAILABLE?

Students with disabilities are also eligible to receive related services, if it is determined that the students require these services to benefit from special education. According to IDEA, related services may include parent counseling and training, physical therapy, occupational therapy, school health services, or special transportation. This means that in addition to receiving special services along the continuum of services for a primary disability area, some students may also be eligible to receive additional related services. Related services may be delivered to individuals with disabilities in any of the setting options. Although described as “related” services, in many cases these services may be of critical importance in attending to the special needs of individual students (Downing, 2004). For example, Michael, a student with intellectual disabilities, receives physical therapy in addition to his educational program to meet his special needs. Janice requires special transportation services to accommodate her wheelchair, and these are provided as related services.

The continuum of services and related services have been effectively applied throughout the history of IDEA. However, over this same time period, there have been recommendations regarding how all or most students with disabilities could be more easily served entirely within the general education classroom. These movements have been referred to as the Regular Education Initiative and the full-inclusion movement.

THE FULL-INCLUSION MOVEMENT

Over the past decades, the full-inclusion movement came to the forefront (Kauffman & Hallahan, 1995). Full inclusion has been referred to as placing and serving all students with disabilities, regardless of severity or type of disability, entirely within the general education classroom for the entire school day.

Consider the case of Kathi, our sixth-grader with learning disabilities. If Kathi were placed in a full-inclusion classroom, Mrs. Gomez, her general education teacher, would have Kathi in her room all day, every day with all of the other sixth-grade students. Mrs. Gomez would be primarily responsible for all of Kathi’s instruction and for making adaptations appropriate for addressing Kathi’s learning disabilities. In some full-inclusion models, Mr. Halleran, the special education teacher, would consult with Mrs. Gomez and provide ideas for her to use in teaching Kathi in her IEP need areas. In other full-inclusion models, Mr. Halleran might go into Mrs. Gomez’s room and teach Kathi reading, spelling, and writing in that room. In this model, instruction with Mr. Halleran and Kathi may occur at a small table, perhaps with other students with special needs, while other groups of students meet for literacy activities. In still other full-inclusion models, Mr. Halleran may co-teach with Mrs. Gomez for part or all of the school day. During co-teaching, Mr. Halleran and Mrs. Gomez would work collaboratively on planning and implementing instruction for the entire class. In any of these full-inclusion models, however, Kathi remains in the general education class with her nondisabled peers all day, and delivery of services outside the general education class, for any length of time, would not be an option.

As might be expected, considerable debate surrounds the issue of full inclusion. It is important to remember that virtually all educational professionals recommend placement in general education classes for students with disabilities and other special needs; the disagreement usually centers on the extent to which students should be placed in general education settings. Both proponents of full inclusion and proponents of a continuum of services have articulated their positions, which are summarized in Figure 1.5 (see also Fuchs & Fuchs, 1994; Kauffman, 1995; Kauffman & Hallahan, 1995; Lipsky & Gartner, 1997; Scruggs & Mastropieri, 2005; Stainback & Stainback, 1996).
### Proponents of Full Inclusion

1. **Full inclusion is a civil right.** Students with disabilities have a right to be educated alongside their nondisabled peers. Separate educational settings are inherently not equal.
2. **Full inclusion reduces stigma.** Harmful stigmatizing effects may be associated with students attending special schools or special classrooms.
3. **Full inclusion is beneficial.** Students in full-inclusion classrooms improve their interactions with others, learn to communicate better, develop better social skills, and increase their friendships.
4. **Full inclusion is more efficient.** Fully included students avoid the disruptive and time-consuming effects of being “pulled out” of the general education class to receive special services. Full inclusion guarantees access to the general education curriculum.
5. **Full inclusion promotes equality.** Including all students in the same classroom is simply the most fair and equitable solution to the problem of placement. Including all students in the same classroom actively promotes the idea of equality.

### Proponents of a Continuum of Services

1. **A continuum of service options is necessary.** Many services needed by students with disabilities are not usually available in the general education classroom. Court decisions have usually placed more emphasis on “appropriate education” than “least-restrictive” components.
2. **The regular classrooms may also be stigmatizing.** Special services, such as speech therapy, physical therapy, or specialized reading instruction may be stigmatizing when undertaken in the company of general education peers.
3. **General education teachers are not prepared for full inclusion.** Many general education teachers lack the necessary time and training to make full inclusion a success.
4. **General education classrooms may lack appropriate resources.** Students with special needs may require materials at lower reading levels, braille, speech synthesizers, specialized computers, or specialized training materials that general education classrooms lack.
5. **Research evidence does not support the superiority of full inclusion.** Although research data are to some extent equivocal, clear evidence of the superiority of full-inclusion placements is presently lacking.

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**Figure 1.5** Arguments of Proponents of Full Inclusion and Proponents of a Continuum of Services

As can be seen, the issue of full inclusion versus a continuum of services is far from settled. Professional organizations and advocates do not always agree on the best service options (e.g., Lane, 1995; Rimland, 1993). Parents also seem to be divided between those who favor specialized placement and services and those who favor integration in the general education class (Palmer, Fuller, Arora, & Nelson, 2001). The *Research Highlight* feature (see p. 22) describes the diversity of opinion that exists among parents of children with severe disabilities.

### WHAT DOES THIS DEBATE MEAN FOR TEACHERS?

Teachers need to be aware of the arguments for and against full inclusion. As the controversy continues, it is important to keep abreast of recent research documenting the efficacy of such procedures. You also must become familiar with your own legal responsibilities as a teacher. For example, what are general education classroom teachers’ legal responsibilities with respect to the IEP when all instruction is implemented in the general education classroom? Other questions, although not necessarily legal in nature, may be relevant to the spirit of the law.

 Teachers should approach the issue in a practical way, with respect to their own school and district. Specific questions to ask about full inclusion include the following:

- What are the school- and districtwide policies and procedures regarding full inclusion?
- What are my obligations as a general educator with respect to the IEP, IEP meetings, case conferences, assessment procedures, annual review meetings, and meetings with parents?
• What types of modifications are expected, and is there a “reasonableness” standard associated with the number and types of modifications expected?
• Is this the best placement option for the student with special needs?
• How will we evaluate whether or not this placement and this set of accommodations are successful?
• What resources are available to assist me in working with the student with special needs?
• How can I receive necessary training for working with students in specific disability areas?
• What kinds of records and documentation should I maintain?

Answers to questions such as these can help determine the best placement options for students with disabilities and other special needs.

TEACHER ATTITUDES

One of the most important determinants of inclusion success is the attitude of the general education teacher toward accommodating students with disabilities. Although most teachers are positive about inclusion, general education teachers report a need for additional planning time, additional training for inclusive teaching, and additional resources, in the form of personnel and specialized instructional materials (Cook, Tankersley, Cook, & Landrum, 2000; Scruggs & Mastropieri, 1996a; 1996b). Teacher and administrator support for collaborative efforts in schools can also affect attitudes. The two scenarios that follow help illustrate the initial implementation of inclusion in two different schools under very different circumstances.

CLASSROOM SCENARIOS

Volunteerism

In a small rural school, Mrs. Ghardisi, the fourth-grade teacher, volunteered to take all the fourth-grade students with disabilities into her classroom. Because she worked well with Mrs. Rana, the special education teacher, she went to her principal and said, “Next year, I would like to have all five of the fourth-graders who have disabilities in my room. They can still go to the resource room for part of the day, but during science class and other content classes, I would like to have all of them. Also, Mrs. Rana and I would like to team-teach during science class when all five children are included.”

That summer, Mrs. Ghardisi and Mrs. Rana met and discussed curriculum and planning issues for their science class. Mrs. Ghardisi was considered the “content expert,” while Mrs. Rana was the “adaptation expert.” When the school year began, they met at least one day a week after school to co-plan the activities for each science class. Mrs. Ghardisi and Mrs. Rana had a good working relationship that enabled them to solve problems as they arose. Because they planned together, they took turns presenting information and monitoring students during class. They were both enthusiastic and worked hard to design adaptations so the five students with disabilities could be active participants. They viewed science as an opportunity to have fun, and their students appeared to really enjoy science.

Mandated Inclusion

In a suburban middle school, Ms. McDuffie, the special education teacher, was told by her building principal 2 days before school began that she was going to implement inclusive instruction for one period per day during the coming year. She was told she would be going into Mrs. Toro’s sixth-period, seventh-grade history class on a daily basis. She was informed that three students with learning disabilities were in that social studies class.
Unfortunately, Mrs. T oro, the history teacher, had not been informed by the principal that Ms. McDuffie was going to be team-teaching with her. When Ms. McDuffie went to see Mrs. T oro, and explained the situation, Mrs. T oro appeared visibly shaken. Now both teachers, who had never discussed the possibility of working together, felt awkward. Neither had previously thought about team-teaching, although neither was particularly opposed to the idea. Perhaps more important, the teachers did not have the same preparation periods free, which meant that any co-planning would have to take place before or after school. This would mean that Ms. McDuffie and Mrs. T oro now had additional responsibilities they had not requested.

Neither teacher had a good understanding of the principal’s expectations. They were also unsure how to execute the co-teaching. Ms. McDuffie had expertise in special education and in making accommodations, and Mrs. T oro had content expertise in history, but now they had to figure out a way to blend their strengths during one period of instruction per day.

Although both teachers tried to be optimistic, there were so many ambiguities regarding their roles and expectations that they both initially experienced some discomfort with the situation. Mrs. T oro said she would continue to prepare and present information from the social studies textbook to the class and requested that Ms. McDuffie circulate around the room during independent activities to provide assistance to anyone who needed it. Ms. McDuffie agreed to this arrangement but felt uncomfortable during class presentations, as
she was unsure of what to do with herself. Both teachers tried to meet and plan, but something else always seemed to take a priority.

QUESTIONS FOR REFLECTION
1. Compare and contrast the two teaching situations. What differences seem most likely to affect the success of inclusive instruction? What changes can you recommend?
2. In the second case, neither teacher had been given adequate notice, nor had they volunteered for team-teaching. What options are available to Ms. McDuffie and Mrs. Toro? How can they begin to monitor and evaluate their team-teaching? How can they overcome the barriers and make the experience successful for them and the students?

It is clear that many aspects must be considered in order for inclusive placements to be successful. These involve careful planning and attention to the multiple perspectives of general education teachers, special education teachers, parents of students with and without disabilities, and, of course, the students themselves. However, with careful planning and appropriate programming, inclusive instruction can prove to be a successful and rewarding experience for everyone.

1 Summary

- In 1975, Public Law 94-142 (IDEA) was passed. This law, and its subsequent amendments, established the rights of students with disabilities to a free, appropriate public education. It further provided that this education would take place, to the maximum extent possible, in the least restrictive environment. Before the passage of this law, students with special needs were routinely excluded from public school.
- IDEA provides for special services for disability areas including autism, deafness, hearing impairments, mental retardation/intellectual disability, multiple disabilities, orthopedic impairments, other health impairments, emotional disturbance, and deaf-blindness. However, other groups of students may also require special adaptations by general education teachers, including students who are culturally or linguistically diverse, students at-risk for school failure, and students with gifts or talents.
- Other court rulings and federal laws, such as Section 504 and the Americans with Disabilities Act, have provided for nondiscriminatory treatment of individuals with disabilities.
- Six important principles in IDEA are (1) zero reject, (2) nondiscriminatory testing, (3) free and appropriate education, (4) least restrictive environment, (5) due process, and (6) parent participation.
- Current educational practice provides for a continuum of services for students with disabilities, from full-time placement in the regular education classroom to special residential schools. Currently, most students with disabilities are served in regular education classrooms.
- Some controversy exists over the concept of “full inclusion,” the full-time placement of students with disabilities in regular classrooms. Important points have been raised by concerned individuals on both sides of this issue.
- Most teachers favor some form of inclusion for their own classes. However, teachers report a need for sufficient time, training, and resources to teach effectively in inclusive classrooms. When these supports are provided, attitudes toward inclusive teaching also improve.

PROFESSIONAL STANDARDS LINK: Introduction to Inclusive Teaching
Information in this chapter links most directly to:
- CEC Standards: 1 (Foundations), 2 (Development and Characteristics of Learners), 3 (Individual Learning Differences)
- INTASC Standard: Principle 1 (understands central concept of the discipline)
- PRAXIS II™ Content Categories (Knowledge): 1 (Understanding Exceptionalities), 2 (Issues)
- PRAXIS II™ Content Categories (Application): 5 (Professional Roles)

Note: CEC is the Council for Exceptional Children, an organization dedicated to improving educational outcomes for students with disabilities and gifted students. INTASC is the Interstate New Teacher Assessment and Support Consortium, which created standards for licensing new teachers to be compatible with the National Board for Professional Teaching Standards. The PRAXIS Series™ assessments provide tests for states to use as part of their teacher licensure process. The PRAXIS II® assessments for special education measure core knowledge or principles (Knowledge: 0351 and 0353) and application of core principles (Application: 0352) across disability categories.