CHAPTER ONE

Teaching Every Student: A Mandate for Today

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Chapter Objectives

- to examine special education in schools today;
- to provide an overview of the characteristics and special needs of students with disabilities;
- to discuss the diversity in today's public schools and its relevance in the identification of students who need special education services;
- to explore the controversy of labeling and the impact it can have on students and teachers;
- to examine the history of special education and how society's attitudes have changed toward individuals with disabilities;
- to present the educational options and service delivery models used in today's schools to meet the special needs of students; and
- to provide an overview of the impact of Individuals with Disabilities Education Act (IDEA) and Every Student Succeeds Act (ESSA) in today's classrooms and schools.

Key Terms

education • special education • accommodations • modifications • related services • cognitive disabilities • behavior disorders • emotional disturbances • communications disorders • sensory disabilities • physical disabilities • normalization • free, appropriate, public education (FAPE) • least restrictive environment (LRE) • mainstreamed • inclusion • Response to Intervention (RTI) • Every Student Succeeds Act (ESSA)

■oday's classrooms are a reflection of our society and its diversity, and we have come to expect 🖶 full participation in our educational system for all students. Classrooms in schools today are more diverse than ever. Students come to school with unique personalities, abilities, attitudes, and values, not to mention the diversity found in gender, sexual orientation, race, religion, culture, language, ethnic background, and socioeconomic status. Three events have drastically changed the educational system in the United States and created great diversity in our schools. In 1954, the U.S. Supreme Court ruled that the policy of separate but equal schools was unconstitutional ($Brown \ v$. Topeka, Kansas, Board of Education, 1954). This ruling began the integration of classrooms in the United States. In 1974 President Gerald Ford signed into law the Education of All Handicapped Children Act, which is known today as the Individuals with Disabilities Education Improvement Act (IDEA). IDEA, first enacted in 1975, mandates that children and youth aged 3 to 21 with disabilities be provided a free and appropriate public school education. This law marked the beginning of a mandated public education for children with disabilities. In addition, America's racial and ethnic profile is rapidly changing. Based on 2010 U.S. Census data, 27.6% of the U.S. population is from a racial group other than white and 16.3% is of Hispanic or Latino origin (U.S. Census Bureau, 2010). It is projected that by 2020,35% of the U.S. population will be racial or ethnic minorities (U.S. Census Bureau, 2007).

The sentiments behind the laws that have been passed reflect American values and beliefs that all individuals should have an equal opportunity for an appropriate education. Some students in our schools today need specialized instruction, or special education, if they are to have that equal opportunity for learning. In this chapter, we examine special education and the rationale for its existence, as well as its history and current status. In addition, we explore the issues of diversity and labeling as they relate to the provision of special education services.

Today's teachers will find students with many types of disabilities in their classrooms. These students may be from different races and ethnic backgrounds. Students with disabilities come from every cultural, socioeconomic, and linguistic group, and many do not fit into neat categories. As you will see in this chapter, the education of students with disabilities is the responsibility of everyone affiliated with the school: classroom teachers, special educators, administrators, and parents. Today's educators must understand how children learn and develop and must be able to provide learning opportunities to support these diverse students.

Defining Special Education

Education is the process of learning and developing as a result of schooling and other experiences. Through education we promote literacy, personal autonomy, and economic self-sufficiency. For a variety of reasons (cognitive, behavioral, communicative, or physical), students with disabilities or special needs may need special education to ensure that they have the opportunity to participate fully in the educational process. Special education is defined in IDEA as "specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability, including instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and instruction in physical education" (IDEA, 2004). As Kaplan (1996) stated, "Special education is not a place, but a group of services tailored to the special needs of an individual student" (p. 36).

The National Center for Educational Statistics (2008) defines special education as:

Direct instructional activities or special learning experiences designed primarily for students having exceptionalities in one or more aspects of the cognitive process or as being underachievers in relation to general level or model of their overall abilities. Such services usually are directed at students with the following conditions: (1) physically handicapped; (2) emotionally handicapped; (3) culturally different, including compensatory education; (4) mentally retarded; and (5) learning disabled. Programs for the mentally gifted and talented are also included in some special education programs.

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Today, there are 13 categories of disabilities in special education. According to IDEA, the students in need of special education services have one or more of these 13 conditions which include: specific learning disability, speech or language impairment, mental retardation (intellectual disability1), emotional disturbance, multiple disabilities, hearing impairment (including deafness), orthopedic impairment, other health impairments, visual impairment (including blindness), autism, deaf-blindness, traumatic brain injury, developmental delay.



The general education classroom is just one of many places special

education services can be provided.

As you can see from these categories, there is a wide range of disabilities and needs among students, and since the 1970s, schools have been required to provide specialized education services to all students with disabilities. Special education services can be provided in many different places or environments: the general education classroom, a special classroom, or even at home. The decisions regarding when, where, what, and how special education services occur are made according to what is appropriate for the individual student. For example, students with emotional or behavioral disabilities may need more structured, smaller classes, whereas students with physical disabilities may need special equipment. Other students may need special teaching strategies or a revised curriculum.

Some students with mild disabilities may only require accommodations to be successful in school. Accommodations are any changes made to the instruction or materials that do not change the curriculum expectations. Students with disabilities receiving accommodations would be held to the same curriculum standards as general education students. Some students with more significant disabilities may require modifications to achieve their educational goals. Modifications are significant changes made to instruction or materials that result in the student no longer meeting the standards of the general education curriculum. Adapting the curriculum might allow students with significant disabilities to access the general education curriculum and classroom.

Students who have been evaluated and identified as having a disability and are determined eligible for special education services may also need additional services. These are known as related services and may be required to assist a student in benefiting from special education. Related services fall into such categories as transportation, both to and from school as well as within the school, or developmental, corrective, and other supportive services. Other examples of related services are special services such as speech-language therapy, audiology services, interpreting services, psychological services, physical and occupational therapy, and counseling services.

Students with disabilities have the same needs as their peers, as well as different needs specific to their disabilities. As we look more closely at these students throughout this book, you will discover that they have some similarities, but you will also find that they are a heterogeneous group. Students who have physical disabilities may require special desks and communication

¹The term "mental retardation" is used in the federal law; however, the professional community is now using the preferred term intellectual disability. The national professional organization, formerly the American Association on Mental Retardation, has changed its name to the American Association on Intellectual and Developmental Disabilities. The term "intellectual disability" is used throughout this textbook.

devices but may not need any modification of the general education academic curriculum. In contrast, students with learning disabilities may not require any physical adaptations of the classroom but may need accommodations to the curriculum or instructional strategies. Students usually are targeted to receive special education because they exhibit cognitive, behavioral, communication, sensory, or physical differences from their peers. These differences are examined briefly in this chapter. Chapters 6, 8, 10, 11, and 12 explore the causes of these differences and more fully describe the characteristics and educational needs of students with specific disabilities.

Cognitive Differences

Cognitive disabilities affect the student's ability to acquire and/or express knowledge and may be demonstrated by difficulties with attention, perception, memory, and the generalization of knowledge and skills. Cognitive differences may be exhibited in students with intellectual disability, learning disabilities, or traumatic brain injuries. These students typically develop academic skills at a slower rate than other students do, taking longer to perform academic tasks and requiring more practice and repetition. For example, if the typical student can complete a worksheet of math problems in 20 minutes, the student with a cognitive disability may need twice that time to complete it. These students may not reach a developmental level that allows for abstract thinking and will need concrete objects and experiences to understand and remember concepts and skills.

To ensure that students with cognitive differences participate as fully as possible in general education classrooms, some modifications or adaptations of curriculum, materials, and/or instructional methods will be needed. Without this special education, these students generally experience steadily decreasing performance in all subjects. Many academic skills must be learned in a specific sequence. If students do not master one step in a sequence, or a prerequisite skill, they will not be able to acquire the ones which follow. A student who cannot recognize and remember the letters of the alphabet will not be able to read. These skill deficits are compounded as new skills continue to be taught and new tasks become more difficult. Students get behind academically and never catch up.

Behavioral Differences

Although behavioral differences among people are expected, some students, those with behavior disorders or emotional disturbances, will act in a way that is chronically and significantly different from their peers. We are all unique individuals who act and react according to our personalities, our cultural backgrounds, and our life experiences. As long as our behavior is acceptable according to social standards, it is considered normal. Yet everyone has exhibited unacceptable or inappropriate behavior at some time. Teachers know that their students will not act in an acceptable manner at all times. Effective teachers use a variety of strategies to encourage appropriate behavior and prevent misbehavior in the classroom. However, some students may exhibit significant behavior problems. Their inappropriate behaviors are so severe as to interfere with their own learning and the learning of other students in the classroom. For example, a student who constantly bullies other students or steals and destroys classmates' belongings will be a serious problem for the teacher. Other students with disabilities also may demonstrate mannerisms or behaviors that are considered unacceptable. For example, students who are blind may rock back and forth; students who have intellectual disability may display affection inappropriately; students who have experienced traumatic brain injury may act impulsively. All of these students need intervention programs, or special education, to learn new and acceptable behaviors. Students with serious behavior disorders who are not provided with assistance will be unable to function in the classroom and will be a constant disruption to both their teachers and their classmates.

Communication Differences

Communication disorders are any disruption in an individual's ability to understand or express thoughts, feelings, and ideas. Most individuals take the ability to communicate for granted. Although communication styles, voices, and dialects may vary, we express our thoughts and listen to others with ease on a daily basis. We use oral and written communication to exchange ideas, to learn, and to build relationships. These skills are the basis of interpersonal interactions as well as the foundation of academic instruction in the classroom.

Speech and language impairments, or communication disorders, can have a significant impact on a student's academic performance and social interaction. Individuals with speech or language impairments may have difficulty producing speech sounds accurately and fluently. They may be unable to express their thoughts in a way others understand, or they may fail to understand the communication of others. They may have trouble learning to read and write. In some students, a communication disorder may accompany another disability; for example, students with learning disabilities, intellectual disability, or hearing impairments often have language processing problems. These problems affect their ability to perform required school tasks such as reading and writing. Other students may exhibit communication disorders with no additional disability; they will have the same cognitive, behavioral, and physical abilities as their peers. Students with communication disorders need special services provided by speechlanguage pathologists to improve and facilitate their communication abilities. This special education assists students in their academic learning and in developing positive social interactions.

Sensory and Physical Differences

Sensory disabilities occur whenever any sensory system (vision, hearing, taste, touch, etc.) is impaired. Physical disabilities result from diseases or disorders that affect normal physical development or functioning. The most common sensory disabilities are vision and hearing impairments. Such sensory impairments may impose certain restrictions on students. For example, a visual impairment may prohibit the use of a standard print textbook. Large-print textbooks, exams written in Braille, raised maps, and other materials may be needed for students with impaired vision. Students with a hearing loss may need amplification devices, sign language interpreters, note takers, and other assistance to succeed in the classroom. Without these forms of special education, students with sensory disabilities would not be able to reach their full academic potential.

All students have varying levels of physical abilities, strength, and stamina. Some are better coordinated than others. Although certain students may tire quickly, others never seem to run out of energy. Students with physical disabilities (orthopedic impairments or health problems) may have special needs with regard to their ability to function fully in the general education classroom setting. Students who use braces or wheelchairs require changes in the school's physical environment to allow access to classes and activities. Other accommodations that students with physical disabilities might require include augmentative communication devices, lap boards, oral examinations, adapted physical education activities, and accessible restrooms.

When Ms. McDonnell reported to preplanning for her new job of teaching middle-school language arts, she found that she would be paired with a "co-teacher" for the students with disabilities who were placed in her classroom. She wondered how she should approach her co-teacher. Should she suggest ideas about how to divide up the work that needed to be done, or should she assume that she was the "regular" teacher and let her co-teacher know what she expected? If you were Ms. McDonnell, what approach would you take?

Defining Disability

When is a difference, a disorder, or a condition considered a disability? Currently schools define disabilities according to the guidelines and regulations established by their state. These state regulations are based on the federal law that defines disabilities and provides states with funding for students who qualify for special education services. As shown in Table 1.1, the federal law, Public Law 108-446, the Individuals with Disabilities Education Improvement Act of 2004 (IDEA, 2004), defines students with disabilities as those with specific learning disabilities, speech or language impairments, mental retardation (intellectual disability), emotional disturbance (behavior disorders), multiple disabilities, hearing impairments (including deafness), orthopedic impairments, other health impairments, visual impairments (including blindness), autism, deaf-blindness, or traumatic brain injury who need special education or related services as a result of the disability.

Other students who do not meet the eligibility criteria specified in IDEA still may qualify for special education services under Section 504 of the Rehabilitation Act of 1973. For example, attention deficit/hyperactivity disorder (ADHD) is not listed as a specific category of disability under IDEA. This could mean that these students would not be eligible for special education services and the federal government would not provide funds to serve them. However, the impact of ADHD on the ability of students to learn is widely recognized, and these students may be eligible for services under Section 504. Students who are gifted and talented also may receive special services in schools, but they are not protected by the same laws that mandate services to students with disabilities. The federal laws that mandate special education services are discussed in more detail in Chapter 2.

Prevalence of Disabilities

Prevalence refers to the number or percentage of the population that have been identified as having a particular disability or exceptionality. The percentage of special education students who are identified as having disabilities has changed considerably over the last 40 to 50 years. In 1976 3.7 million children received special education services. Currently in the United States, over 6.5 million children receive special education services according to the U.S. Department of Education (2011).

Table 1.2 shows that over 8% of children and youth age 6 through 21 in the total public school enrollment were served under IDEA in 2015. The number and percentage of children and youth age 6 to 21 receiving special education services in each disability category also are shown in Table 1.2.

As can be seen in Table 1.2, the highest percentage of students receiving special services in schools in 2015 had specific learning disabilities (3.47%). A specific learning disability is a disorder of one or more of the basic psychological processes involved in understanding or in using spoken or written language that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. This includes conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, and dyslexia.

TABLE 1.1 Disability Categories Specified in Public Law 108-446 (IDEA, 2004)

- Specific learning disabilities
- Speech or language impairments
- Mental retardation
- Emotional disturbance
- Multiple disabilities
- Hearing impairments (including deafness)

- Orthopedic impairments
- Other health impairments
- Visual impairments (including blindness)
- Autism
- Deaf-blindness
- Traumatic brain injury

TABLE 1.2 Number of Students Age 6 through 21 Served Under IDEA, Part B, and Percentage of Students as a Percentage of Population Age 6 through 21, by Disability Category, for Fall 2015

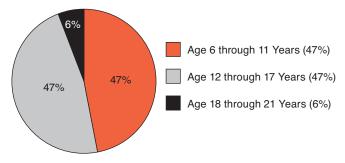
Disability Category	Number of Students	Percentage of Population
All disabilities	5,944,241	8.85
Specific learning disabilities	2,328,530	3.47
Speech or language impairments	1,047,589	1.56
Intellectual disability	415,335	0.62
Emotional disturbance	347,752	0.52
Multiple disabilities	125,532	0.19
Hearing impairments	69,884	0.10
Orthopedic impairments	46,268	0.07
Other health impairments	857,544	1.28
Visual impairments	25,567	0.04
Autism	513,688	0.76
Deaf-blindness	1,243	0.00
Traumatic brain injury	25,419	0.04
Developmental delay	141,887	0.21

U.S. Department of Education (2015). Office of Special Education Programs, Data Analysis System (DANS), OMB #1820-0043: Children with Disabilities Receiving Special Education Under Part B of the Individuals with Disabilities Education Act, 2015. Data updated as of Nov. 11, 2015. From: https://www.ideadata.org/

In addition to specific learning disabilities, there are other categories of disabilities that are considered high prevalence, or high incidence, due to the large numbers of students requiring services. These include speech or language impairments, intellectual disability, emotional disturbances, and autism. The remaining categories specified under IDEA often are described as low incidence, due to the limited number of students exhibiting those types of disabilities. Based on the prevalence figures, general education teachers certainly will find students with learning disabilities, speech or language impairments, intellectual disability, behavior disorders, and autism in their classrooms. Due to their lower incidence, students with physical or sensory disabilities, or traumatic brain injury will be encountered in the general education classrooms less frequently. In addition, some of these students (i.e., those with physical disabilities, health impairments, or sensory impairments) may function quite well in the general education classroom and can perform in academic areas at a level equal to their peers without disabilities.

The number of students who receive special education services is not equally distributed across the ages of 6 through 21 years. As seen in Figure 1.1, equal percentages of students age

FIGURE 1.1 Percentage of Students Served by IDEA, by Age Group, for Fall 2015



From U.S. Department of Education. (2015). Data Accountability Center. From https://www.ideadata.org.

6 through 11 years and 12 through 17 years receive services, whereas a significantly smaller percentage of students age 18 through 21 years receive them. There are also gender differences in the number of students receiving special education services: approximately 67% of students are male and 33% are female.

The Issue of Diversity

A major focus of this book is diversity: the diversity of students with disabilities and other students with special needs bring to the learning environment. These students may exhibit differences from (and similarities to) their peers in the classroom in their cognitive and learning abilities, behavior, communication styles, or physical and sensory capabilities. However, those with disabilities also bring their own unique competencies, attitudes, and learning styles to the classroom. For students with disabilities, the issue of diversity can become a complex one. In addition to the differences associated with their disabilities, these students may exhibit differences due to their ethnic, racial, cultural, or linguistic backgrounds.

Diversity is an issue that has been prominent in special education from its very beginning and remains in the forefront today. As a group, individuals with disabilities were considered different (or diverse) and were segregated from the mainstream of education in the past. They were placed in institutions, special schools, and self-contained classes. These segregated options still may be appropriate educational placements for some individuals, if these options are selected on an individual basis. However, when an entire group is segregated as a means of avoidance due to prejudice, then it is discrimination against a diverse group. The issue of diversity in relation to race, ethnicity, culture, and language also has played a role in special education. The number of minority students in special education is disproportionate to the general school population (Artiles, Rueda, Salazar, & Higareda, 2005; Artiles & Trent, 1994; Aud, Fox, & Kewal Ramani, 2010; Cavendish, Artiles, & Harry, 2014; National Research Council, 2002). If students belong to a minority group, they may be at risk for inappropriate placement in special education.

Cultural Diversity

Over time, educators have come to understand that students need a multicultural education to succeed in a nation and a world rich in cultural diversity. Today's classrooms reflect the variation in gender, race, religion, sexual orientation, language, socioeconomic status, family structure, motivation, talents, and abilities found in the community at large. Based on U.S. Census data, it is



Multicultural education is based on the premise that all students benefit from exposure to different people, beliefs, and ideas.

predicted that by the year 2020, the U.S. population will be more than 35% racial and ethnic minorities and by 2050 what is now the majority will be the minority (U.S. Census Bureau, 2007). To be effective in the classroom, teachers will need to be prepared to consider the cultural values, lifestyle, and language of each student in their classes.

Culture can be defined as "a complex frame of reference that consists of patterns or traditions, beliefs, values, norms, and meanings that are shared in varying degrees by interacting members of a community" (Ting-Toomey, 1999, p.10). Culture pervades every aspect of our lives. It influences the way we view life, the way we think, and the way we behave. The values and beliefs we acquire from our cultural group guide us in social interactions, which affect family and interpersonal relationships and the expectations we have of others.

Cultural pluralism is the belief that cultural differences and the contributions of various groups can strengthen and enrich society. Multicultural education is based on the premise that all students benefit from exposure to different people, beliefs, and ideas. It promotes the strength and value of cultural diversity as well as human rights and respect for those who are different from oneself.

Cultural differences may be mistaken for abnormality when one's own cultural group is viewed as setting the standard for all others. The dominant cultural group in a community or a nation generally considers itself the standard and views other groups as deviations. Cultural groups may vary markedly in their use of eye contact, physical proximity and contact, nonverbal communication, or verbal interaction with persons in positions of authority. If a teacher is speaking to a student who avoids eye contact with her, does she assume the student is ignoring her or doesn't care what she is saying, or is showing disrespect? In some cultures, direct eye contact with adults in positions of authority is considered disrespectful. Teachers and students must realize that what they consider inappropriate or unacceptable behavior based on their own cultural beliefs and actions may be normal and standard in another cultural group.

Some cultures highly value group success and therefore encourage cooperative behavior over competitive behavior whereas other cultures value and foster individual success and achievement. One culture might encourage spontaneity and creativity in children, and another may teach the importance of restraint in all behaviors. This disparity in values can result in differences in behavior that are viewed and judged as appropriate or inappropriate based on the viewer's cultural perspective.

Appreciation of one's own cultural heritage and acceptance of others is the key to success in multicultural classrooms and communities. Appreciation and acceptance of differences do not develop spontaneously. Some people fear and avoid what is different and unknown to them. Teachers must provide students with experiences that foster an acceptance and appreciation of diversity. The school curriculum and instructional materials must reflect the contributions of diverse individuals and groups to our world. With knowledge and understanding, differences due to culture or disability become less frightening and easier to accept. See Chapter 5 for additional information on issues of cultural and linguistic diversity.

Diversity and Disability

The percentage of students in special education from minority groups is disproportionately high given their percentage in the school-age population at large (Aud, Fox, & Kewal Ramani, 2010; Cavendish, Artiles, & Harry, 2014; National Research Council, 2002). According to Harry and Klingner (2007),

Those categories with the highest incidence of disproportionate minority-group placement are also those categories whose criteria are based on clinical judgment: educable mental retardation, emotional/behavior disorders, and learning disability. The categories whose criteria are based on biologically verifiable conditions—such as deafness or visual impairment—do not show disproportionality by ethnicity. (p. 17)

Students' cultural values or customs, their linguistic abilities, or their experiential backgrounds may set them apart from their peers. This diversity presents a unique challenge for educators in the areas of assessment, instruction, and socialization. If differences in culture or language are not considered when selecting assessment tools, instructional strategies, and social activities, the result may be academic failure, social isolation, and inappropriate referral to special education for students who are culturally or linguistically different.

As cultural and linguistic diversity increase in the population at large, it also increases in the population of individuals with disabilities. It can be difficult for any family to accept and adjust to having a child with special needs. The family's attitude toward disabilities and their resultant behavior can be a major factor in the identification of the disability and the implementation of an intervention program. Families from diverse cultural backgrounds may have beliefs about disabilities that differ significantly from the beliefs of the majority culture. Language differences between the family and school personnel may inhibit the communication of test results and recommendations as well as the expression of parental questions and concerns. Students from diverse cultural and linguistic groups are at greater risk for being mislabeled and receiving inappropriate or inadequate services.

Other Sources of Diversity

The differences associated with cultural background and with disability are not the only sources of classroom diversity. The social and domestic issues of family structure, poverty, malnutrition, inadequate health care, drug abuse, homelessness, and child abuse or neglect also contribute to the diverse needs of students in today's schools. All of these conditions can affect school attendance, motivation, and academic performance, placing many students at risk for school failure.

Educators are expected to provide effective instruction to all students in spite of the diversity of their needs, learning styles, and other characteristics. If the goal of meeting the educational needs of today's students is to be met, instructional practices must change to accommodate diversity, no matter what the source of that diversity. However, special education cannot be used to serve the needs of students from diverse backgrounds by labeling them disordered when, in fact, they are simply different. The instructional strategies presented throughout this book are strategies not only for students with disabilities. They are strategies that teachers can implement in their classrooms to meet the unique learning styles and needs of all students.

The Controversy of Labeling

When it is determined that a student needs and is eligible for special education services, a label is placed on that individual: intellectual disability, physical impairment, behavior disorder, etc. Unfortunately, most of the labels used to identify and categorize students for special education services have negative connotations. Labels can change the way a student is viewed by teachers, peers, and even family. Suddenly, the biases, myths, and misperceptions associated with certain labels become attached to the student. We look for and expect certain behaviors (or misbehaviors) with certain labels. We become focused on the disability and not the ability of the individual. The actions and reactions of teachers, peers, and parents to these students can have a significant impact on the students' attitudes toward their own behavior and self-concept, as well as their attitudes toward school, their academic goals, and performance.

Educators have argued for many years about whether we must label students in order to provide them with appropriate educational services. Opponents of labeling point to such problems as the potential mislabeling of students, the negative stereotypes associated with labels, the effects of labels on self-esteem, and lowered teacher expectations as reasons not to assign labels (Hardman & Nagle, 2004). Proponents of labeling counter that without labels students would not get the special services they need. The federal government provides special funds to the states for the education of students with disabilities. Labeling students allows schools to receive those additional funds to offer the special programs and services. In addition, categorizing and labeling students provides opportunities for research in both medicine and education. Finally, using labels can assist professionals in communicating about students with disabilities.

As teachers recognize the unique educational needs of all students in their classrooms, not just those with disabilities, the importance of labels becomes minimized. However, since an individualized

approach to education is not yet the norm in all schools and classrooms, it is important to examine the impact of disabilities and labeling on teachers and students. How does a teacher react to students who have been labeled "special" or "different"? What do peers think of their classmates who are different?

Teacher Expectations

Teachers' expectations of their students can be influenced by a variety of factors. A student's gender, race, physical appearance, or performance in other classes, even comments from parents or fellow teachers, can impact a teacher's expectations of academic performance and behavior. If teachers are told that a student is gifted, they assume outstanding ability and expect performance at a level above others in the class. If teachers are told a student has an intellectual disability, they assume limited ability and expect performance below others in the class. These teacher attitudes and expectations can have a profound impact on teacher-student interaction which in turn influences the students' own attitudes, expectations, and behaviors (Ferguson, 1998; Mizala, Martínez, & Martínez, 2015). This may result in positive outcomes when teachers' expectations are high for students; however, it is not difficult to envision the disastrous outcomes when teachers' expectations are low.

Peer Expectations

The attitudes of students toward their peers with disabilities or other differences have been examined by many researchers (de Boer, Pijl, & Minnaert, 2012; Jenkins & O'Connor, 2003; Frederickson & Furnham, 2004; Horne, 1985; Woolfolk, 2004). Such studies have reported conflicting results with some suggesting that students view their peers with disabilities in a positive way and others showing that students view these peers negatively. Students may enter school with misperceptions and stereotypic views of individuals who are different from the norm. This may be due to limited interaction with individuals who are different from them in any way (language, race, culture, sexual orientation, disability, etc.) as well as the result of the influence of negative portrayals of persons with disabilities often seen in the media. It can be difficult for students without disabilities to get beyond labels and their negative connotations. The acceptance or rejection of students with disabilities may have more to do with their labels than with the students as individuals.

Mr. Grant has been informed by one of the special education teachers in his school that he will have a new student who is blind in his classroom this year. This student will, of course, be using special equipment, including recording devices. Mr. Grant wonders how he can help this student feel and be a part of the class with the other students. Mr. Grant is also a little concerned about the student using recording devices because he has never worked with a student who has a visual impairment before. If you were Mr. Grant, where would you go for answers to your questions and for additional information?

The attitudes and behaviors of school personnel exert a powerful influence on the attitudes of students toward their peers (Pazey & Cole, 2013). Students imitate the attitudes and behaviors they observe on a daily basis. Successful integration and acceptance of students with disabilities or other differences into general education requires the support of the entire educational system. Schools and classrooms that have a positive, inclusive culture will be models for the inclusion and acceptance of all individuals regardless of differences.

The Beginnings of Special Education Services

The attitudes of society toward individuals with disabilities have changed drastically over the centuries. Reviewing the history of these attitudes and the options that have or have not been available to individuals with disabilities provides a perspective for us to view the approaches used today to identify and provide services to these individuals. As our society has evolved, so have our social consciousness and our treatment of those who are perceived as different from the majority of society. Students with special needs, who today receive the full benefit of our educational system, would have been willfully ignored or abused in earlier times. Federal laws not only prevent discrimination in education, housing, and employment based on disabilities but also mandate a free, appropriate education for all students, no matter how severe their disabilities or how limited their abilities.

History of Special Education

Prior to the late 1700s, disabilities and differences were viewed with fear and superstition. Physical disabilities and mental incompetence were thought to be curses from the gods. Emotional problems and seizures were believed to be the result of possession by demons or evil spirits. Adults with disabilities were ignored, abused, or exploited. Large institutions or asylums were built to house individuals who were considered different or deviant. The asylums generally provided overcrowded, unsanitary living conditions and the residents often received little care. These asylums kept persons whom society viewed as undesirable or physically unattractive out of the community at large (Kanner, 1964; Carlson, 1990).

In the United States, the history of special education as described by Cruickshank (1958) begins in the nineteenth century. Physicians, ministers, educators, and social activists were instrumental in establishing the first schools for children who were blind, intellectually disabled, or deaf. However, the provision of the special services was relegated to isolated facilities, segregated from the mainstream of education and the community. Special services or classrooms in local public schools were virtually nonexistent at this time.

Public school programs for students with special needs began early in the 1900s and grew gradually until the middle of the century. As the country's population increased and people congregated in large cities, cities began to establish day-school programs for these special children, particularly those with the most common disorder, mild or moderate intellectual disability. These special education schools for the "educable mentally retarded" often were the sole source of special services in the local community.

Later, special education classes were established in the local schools. It was not uncommon to find students who had disabilities other than intellectual disability (e.g., learning disabilities, emotional disorders, hearing impairment, etc.) placed in these classes, although the services provided were neither appropriate nor adequate. Sailor and Roger (2005) stated that "in its early days, special education embraced the diagnostic/prescriptive model characteristic of modern medicine, and disability was viewed as pathology.... Students referred by teachers and parents were diagnosed in one of the categories of disability and tagged for separate, highly differentiated treatment" (p. 504).

Because students who were deaf or blind were fewer in number than students with other disabilities, public school programs were not commonly available for these children until later in the 1900s. The residential and day-school programs operated by states or private schools typically were the only educational options for these students. Parents of children with severe physical and/or cognitive disabilities were encouraged to place them in residential care facilities, state institutions, or to care for them at home, because the prevailing attitude was that these children could not be educated.

Changing Attitudes

During the 1940s and 1950s, the attitudes of society toward disabilities went through a dramatic change. World Wars I and II left thousands of individuals injured and disabled. Prior to their injuries, these people were respected and accepted members of their families and communities. When they returned home from these wars, their families and communities generally welcomed them back with continued respect and acceptance. Disabilities were viewed in a more favorable light than ever before. This attitude of acceptance began to extend to children and others whose disabilities were

not related to war injuries. Head traumas incurred during military service led to research and a better understanding of the brain and its relationship to learning. As medical explanations were discovered for epilepsy, cerebral palsy, and other conditions, the attitudes of society began to change, and some of the myths and misperceptions about individuals with these disorders were dispelled (Cruickshank, 1958).

A powerful force in the evolution of educational services for students with disabilities has been parental concern and its resultant action. During the 1900s, parents began to form local, state, and eventually national and international organizations (Cruickshank, 1958; McCleary, Hardman, & Thomas, 1990). Initially these groups served as a forum for parents to discuss common problems and find sources for services. As they grew, these organizations became effective advocates for individuals with disabilities. Parent and professional groups such as the Association for Retarded Citizens of the United States (ARC) and the Learning Disabilities Association of America (LDA) had significant influence on the actions of local school boards, state legislatures, and even Congress in providing educational services to individuals with disabilities.

Moving into the Mainstream

Programs developed during the 1960s generally followed the model of segregating students with disabilities in separate, or self-contained, classrooms. There was little or no interaction between the students and teachers in these classrooms and the students and teachers in general education classrooms. Some schools during this period still did not offer any special education services. Parents were told to send their children to private schools at their own personal expense or to state-operated schools or institutions.

Countering this common practice of segregated services, some parents and professional organizations were espousing the philosophy of normalization, one of the steps leading to current practices in special education. Normalization (Nirje, 1979) is the belief that individuals with disabilities should be integrated into the mainstream of society. They should live, learn, and work in environments as similar to the norm as possible, having full access to the programs and services available to the community at large. In the schools, this meant that students with disabilities should have appropriate classrooms and access to the cafeteria, gym, etc.

The Office of Special Education Programs (OSEP), originally the Bureau of Education for the Handicapped, was established in 1965 as part of the Elementary and Secondary Education Act. Although education of children with disabilities was not mandated by law, the establishment of such a national bureau was the first sign of special education in national policy (National Information Center for Children and Youth with Disabilities, 1996). By 1972, the Supreme Court ruled in two separate class action lawsuits that children with disabilities have an equal right to publicly funded education like their nondisabled counterparts (National Information Center for Children and Youth with Disabilities, 1996).

With the passage in 1975 of Public Law 94-142, the Education for All Handicapped Children Act, states were required to provide a free, appropriate, public education (FAPE) to all students with disabilities. The law further mandated that the education of these students take place in the least restrictive environment (LRE). The principle of least restrictive environment requires that students with disabilities be educated with their peers who do not have disabilities to the maximum extent appropriate or, in other words, in the mainstream of the general education setting. This led to widespread use of the resource room as the model for educating students with disabilities. In this model, students received their special education in a separate class for the majority of the school day and were mainstreamed, or participated in the same learning and social activities as their peers, for the remainder of the day. Although this model is still used today, the current trend is for the full inclusion of students with disabilities in the general education classroom or schools, with appropriate accommodations and modifications being used. As you will see in Chapter 2, legislation and litigation were used to enhance the rights of individuals with disabilities and to achieve access to programs and services.

The Delivery of Special Education Services in Today's Schools

Classroom teachers play an important role in the identification of students with disabilities. A student does not receive special education services, however, simply because the classroom teacher thinks the student has a disability. Special education services can only be provided following a comprehensive assessment by a team of professionals who have determined the student is eligible for special education. Prior to referral for special education evaluation, students would have participated in the Response to Intervention (RTI) process. RTI is a process initiated by teachers when a student is struggling with academic or behavior issues. The process ensures that students have received appropriate instruction prior to being referred for special education. This approach is designed to provide research-based strategies and high-quality instruction to stu-



Throughout the school year, classroom teachers will encounter students who experience difficulty in learning, behaving, or communicating. Not all of these students have disabilities.

dents. Data are analyzed to determine if students respond to the instruction. Students who continue to exhibit deficits in achievement will referred for a special education evaluation. The RTI process is discussed in detail in Chapter 3. Throughout the school year, classroom teachers will encounter students who experience difficulty in learning, behaving, or communicating. Not all of these students have disabilities. A student may have difficulty learning a new math concept, not due to a learning disability, but because the earlier prerequisite skills were not taught. A student may refuse to speak in class, not due to a communication disorder, but out of fear of being teased by peers.

Another student may talk back to the teacher or pick fights with classmates, not because of a behavior disorder, but as the result of a temporary conflict at home.

When a teacher encounters a student who is having difficulty in the classroom, the teacher makes whatever adjustments seem appropriate given the individual student's needs. Such strategies as meeting with the student to discuss the problem, providing additional instruction and practice, or speaking with the parents might help to resolve the problem. If the problem persists, additional steps will be taken. Typically the RTI process is the next source for assistance.

Placement Options

As defined earlier, special education is instruction designed to meet the unique learning needs of students with disabilities. The form that the special education takes—adaptations in curriculum or materials, specific instructional methods, or specialized equipment—will vary for each student. The environment in which the special education occurs also will vary. Some students' special needs can be met while the student remains in the general education classroom on a full-time basis. For other students, their needs may be best met by full-time placement in a special education classroom. Still others may benefit from a combination of general education classroom instruction and special education services. For example, some students will remain in the classroom for their academic instruction and receive additional tutoring or instruction in a resource

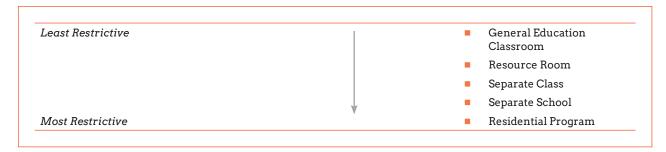
room. The specific special education services and the environment in which they are provided will vary based on the nature of the disability and what is appropriate for the individual student. No two students are the same in abilities and in needs, even though they may share the same disability label. No label can fully describe a student's educational, social, psychological, or physical abilities and disabilities.

Inherent in the requirement of the least restrictive environment is the provision of a variety of educational placement options. States and school districts must offer a variety of educational settings for students with disabilities, including residential programs, separate schools, separate or self-contained classrooms, and resource rooms, as well as the general education classroom. Homebound/hospital programs are additional settings that may be a required placement for some students with disabilities who cannot be in other school settings due to the nature of their disability. Federal law (IDEA) defines all of the possible educational settings as shown in Figure 1.2. The appropriate placement for any one student is determined by the multidisciplinary team and is based on the student's needs. The first choice of placement is always to be the least restrictive setting in which the student's educational needs can be met with the option of moving to a more restrictive setting if needed. Figure 1.3 shows the typical placement options on a scale from least restrictive to most restrictive.

FIGURE 1.2 Definitions of Educational Placement Settings

General Classroom	Students receive services in programs designed primarily for students without disabilities, for 80% or more of the school day.	
Resource Room	Students receive services in programs designed primarily for students without disabilities, for 40% to 79% of the school day.	
Separate Class	Students receive services in programs designed primarily for students without disabilities for less than 40% of the school day.	
Separate School	Students receive services in publicly or privately operated programs designed primarily for students with disabilities, that are not housed in a facility with programs for students without disabilities. Students receive special education and related services in the separate day school for greater than 50% of the school day.	
Residential Program	Students are served in publicly or privately operated programs in which they receive care for 24 hours a day. This includes placement in public nursing home care facilities or public or private residential schools.	
Homebound/Hospital Program	Students are served in either a home or hospital setting.	

FIGURE 1.3 Educational Placement Options from Least Restrictive to Most Restrictive



When students with disabilities are placed in the general education classroom, special education teachers consult with the classroom teacher to provide support and assistance to ensure appropriate educational strategies and interventions are implemented. Most students with disabilities are being educated in regular school buildings, and nearly 80% are in general education classrooms for 40% or more of the school day (see **Figure 1.4**). Some students with disabilities may leave the general education classroom during the school day to receive ancillary or support services, which are services other than academic instruction. Examples of support services are physical therapy for students with physical disabilities, mobility training for students with visual impairment, or speech and language therapy for students with communication disorders.

Some students whose instructional needs are significantly different from their peers may spend the majority of the school day in special classes or, in some cases, in special schools. Figure 1.4 shows that 13.5% of students with disabilities were served in separate classes (they spent less than 40% of the school day in the general education classroom), and only 2.9% were in separate schools. Although some students are being educated in separate classes, they will participate in instructional and social activities with the other students in the school whenever appropriate. Such inclusion might be instruction in selected academic subjects; instruction in nonacademic subjects such as art, music, or physical education; or participation in school sports, clubs, and extracurricular activities. The extent of participation will differ from student to student, according to each individual's needs and abilities.

The educational placements for students with disabilities vary according to the disability category (see **Table 1.3**). Students with speech or language impairments typically spend the least amount of time outside the general education classroom, followed by students with specific learning disabilities. Given that these are high-incidence disabilities and these students will spend the majority of their school day in the general education classroom, teachers need to be particularly knowledgeable about these disability categories and the appropriate educational strategies for these students. Students with multiple disabilities, deaf-blindness, and severe intellectual disability will spend the least amount of time in the general education classroom and are more likely to be educated in separate facilities (separate schools, residential facilities, or homebound or hospital environments) than students with other types of disabilities.

The educational placement of students with disabilities has changed over the years with more students being served in less restrictive environments. Students with disabilities are spending more

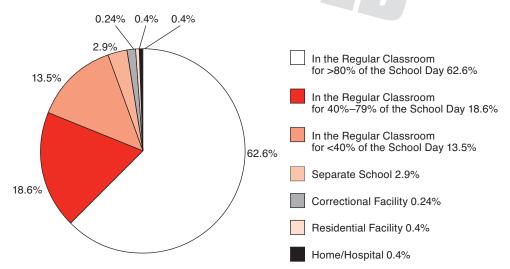


FIGURE 1.4 Educational Placements of Students with Disabilities Ages 6 through 21, for Fall 2015

From U.S. Department of Education (2015). Data Accountability Center. From https://www.ideadata.org.

TABLE 1.3 Percentage of Students Ages 6 through 21 by Disability in Educational Placements, Fall 2015

Disability	>80% of School Day	Served in the General Education Class40%–79% of School Day	<40% of School Day
Specific learning disability	69.2%	23.7%	5.7%
Speech-language impairments	86.7	5.1	4.2
Intellectual disability	16.9	26.3	49.2
Emotional disturbance	46.2	17.5	18.7
Multiple disabilities	13.3	16.3	45.9
Hearing impairments	60.1	15.5	11.5
Orthopedic impairments	54.4	15.86	21.8
Other health impairments	65.4	20.9	9.3
Visual impairments	66.3	12.3	10.2
Autism	39.9	18.0	32.8
Deaf-blindness	23.1	13.3	34.4
Traumatic brain injury	49.8	22.1	19.6
Developmental delay	63.6	19.1	15.6

From U.S. Department of Education (2015). Data Accountability Center. From https://www.ideadata.org

time in general education classrooms and less time in all of the other placement settings today. This reinforces the importance of general education classroom teachers having the knowledge and skills needed to teach students with disabilities.

Inclusive Classrooms

The term inclusion is used to describe the process of educating students with disabilities in the general education setting. Advocates for what is labeled full inclusion believe that the general education classroom is the appropriate educational placement for all students with disabilities, not just those with mild disabilities. They believe that students should not leave the classroom to receive special services, but that the special services needed should be provided in the general education classroom through the collaboration and cooperation of the classroom teacher and special education professionals. Proponents of inclusion argue that pulling students from the classroom to receive special services fragments their education and inhibits communication and collaboration between the classroom teacher and the special educator. There are benefits and drawbacks to inclusion as can be seen in Figure 1.5. Both proponents and opponents of inclusion recognize that there are problems with the current delivery of special education services, and their common goal is to improve those services.

The full inclusion movement seeks the elimination of a dual system of education: general education versus special education. Supporters cite the cost of maintaining a dual educational system, the negative result of labeling some students as disabled, and the benefits of individualized instruction for all students (with and without disabilities) as reasons for full inclusion. Full inclusion is a controversial issue among general and special educators and parents. Not all special education professionals and parents believe that full inclusion, or a full-time placement in the general education classroom, will meet the educational needs of all students with disabilities. These educators generally support full inclusion as a placement option when it is appropriate for a student, but they are skeptical that it is the best model of service delivery for all students. Researchers have only recently begun to examine the academic progress of students in full inclusion classrooms.

FIGURE 1.5 Arguments For and Against Full Inclusion

Proponents of Full Inclusion Arque:

- Labeling is de-emphasized.
- Stigma of leaving class for special instruction is decreased.
- Students remain with their peers full-time.
- Social skills are improved.
- Self-esteem is increased.
- General education students benefit from interaction.
- Interaction and cooperation among all school personnel is enhanced.
- The realities of our society are faced.

Opponents of Full Inclusion Argue:

- Classroom teachers, parents, and students are not prepared.
- Class sizes are too large to allow teachers to meet all students' needs.
- Quality of education to all students will decrease.
- School personnel do not have the necessary collaborative skills.
- Some students need instructional strategies and technology not available in the classroom.



The push for inclusion came with the No Child Left Behind rule that 95% of all students had to participate in state assessments for accountability.

Many classroom teachers are concerned about their ability to meet the diverse needs of the students currently in their classrooms. Many teachers, in both general and special education, fear that students with disabilities will be placed in general education classrooms on a full-time basis without adequate support, ensuring frustration and failure for both students and the teachers. Some parents and professionals are concerned that full inclusion will hurt the students it is proposed to help by eliminating placement options. However, Sailor and Roger (2005) state, "The sum of available evidence overwhelmingly sup-

ports integrated instructional approaches over those that are categorically segregated, regardless of the categorical label or severity of the disability" (p. 504). They continue by noting that, "Special education has designed instructional enhancements that can facilitate this outcome, but for these research-based enhancements to benefit all students, special education needs to be integrated with general education" (p. 505).

The real push for inclusion came with the **No Child Left Behind (NCLB)** rule that 95% of all students had to participate in state assessments for accountability. Schools and districts must now pay attention to the performance of all students, which means students with disabilities are getting attention they did not have before. Because of the assessment requirements of NCLB, educators are promoting and practicing instructional differentiation, adaptations of curricula, and universal design for successful student learning (Schwarz, 2007).

Impact of Federal Legislation

Major changes in the area of special education came into effect as we entered the early 2000s with the passage of the 2001 No Child Left Behind (NCLB) legislation and the 2004 reauthorization of IDEA. As discussed with placement options, the IDEA legislation ensures that all students receive a free

appropriate public education, or FAPE, in the least restrictive environment (LRE) and special services to assist in meeting their educational needs. "The reauthorization of IDEA both increased the number of individuals eligible to receive special services and extended the range of services available" (Nichols et al., 2008). These laws are discussed in detail in Chapter 2.

Prior to the passage of IDEA, most school districts provided minimal services to students with disabilities, but with the passage by Congress of the 2001 NCLB legislation, education took a new direction as schools were required to provide effective instruction for all students, including students with disabilities. The power of NCLB was in the fact that schools in all states were required to demonstrate the effectiveness of instruction by assessing and measuring the progress of all students, including those with disabilities, in major content areas such as reading and math each academic year.

New administration in Washington generally leads to new federal education law. The Every Student Succeeds Act (ESSA) became the current federal education law on Dec. 10, 2015. ESSA continues to require that states have assessment and accountability systems in place to monitor the achievement of all students including students with disabilities in reading and math in grades 2 through 8 and once per subject area in high school. States can develop alternative testing procedures for those students with the most significant intellectual disability. States will now have more flexibility in developing and implementing required assessments. Chapter 2 will discuss the impact of ESSA for students with disabilities in more detail.

In addition to changes for students with disabilities, ESSA directly addresses the needs of gifted students. The needs of students with the potential to be high achievers in school have rarely been addressed through federal law. Currently, ESSA requires each local school system and state to produce an annual report card that not only delineates subgroups such as students with disabilities but also students who are gifted. This law provides flexibility on the use of funding to support identification and training of teachers for students who are gifted. Chapter 13 provides additional details of the impact ESSA has on gifted students.

The Council for Exceptional Children (CEC), the major professional organization in special education, supported the assessment of special education students as part of each state's accountability for student achievement under NCLB and continues to support the assessment and reporting of student achievement required by ESSA. CEC stated that federal regulations requiring annual evaluation enable educators to better assess the academic progress of students with disabilities while still maintaining high standards for them.

Special Education Across the Life Span

Although the discussion of special education services in this chapter has focused on students in elementary, middle, and secondary schools, it is important to note that many disabilities will affect individuals throughout their lifetimes, not only during their school years. For example, intellectual disability, deafness, or severe physical disabilities can have a significant impact on children's cognitive, physical, communicative, or social/emotional development long before they enter school. These disabilities and others also may affect an individual's ability to obtain employment or live independently in adulthood.

Educators and providers of social services have recognized the importance of providing services as early as a disability can be identified, in infancy if possible, and extending services beyond the typical age for completion of secondary school, 18 years. The federal laws that mandate special education services target infants and toddlers with disabilities and their families for early intervention services. Providing both direct services to the young child and support services to the family can minimize the effect the disability will have on the child's early development and later learning. These laws also target adolescents and young adults through age 21 for transition services. Transition

services are designed to assist students with disabilities in making the transition from living at home and attending school to independent living, employment, and community involvement. The laws that require early identification and mandate the provision of transition services are discussed in Chapter 2.

Summary

This chapter examined the role that special education plays and the students it serves in today's educational system. Teachers face a challenging task: to ensure that all students have the opportunity to learn and develop to their potential. When students in general education classrooms exhibit cognitive, behavioral, communicative, sensory, or physical differences from their peers, this task can appear overwhelming. It is only through the cooperation and collaboration of classroom teachers, special education professionals, parents, and school administrators that the goal of full participation in the educational process to the extent that is most appropriate for each student will be met.



Classroom Application Activities

1. Interview a teacher who has an inclusive classroom. Focus your questions on how the teacher makes accommodations and modifications for students in the classroom and on the types of support he receives from the special education teachers for these students.

2. Contact a local school system and make arrangements to observe a self-contained special education classroom. Discuss with classmates why this classroom is self-contained, the disabilities of the students in the classroom, and how the teacher works with these students.



3. Discuss how general education teachers can encourage a multicultural education in their classrooms and in their schools.

4. Check the websites of five schools in your area to determine if there are more self-contained classrooms or inclusive classrooms. Do you think that area is moving toward more inclusive settings or not? Discuss your findings with a classmate.

5. Interview a friend or family member who attended elementary or secondary school prior to 1965. Focus your questions on issues involving the education and placement of students with disabilities. Ask about the types of disabilities of students in their schools and the services that were or were not provided to these students. Discuss these topics with classmates.

PESERVED

Internet Resources

Council for Exceptional Children (CEC) www.cec.sped.org

National Center for Culturally Responsible Educational Systems www.nccrest.org

National Dissemination Center for Children with Disabilities (NICHCY) www.nichcy.org

Office of Special Education and Rehabilitative Services www.ed.gov/about/offices/list/osers/osep/index.html

Special Education Resources on the Internet (SERI) www.seriweb.com

The National Institute on Disability and Rehabilitation Research www.abledata.com

IDEA

www.ideadata.org/links.asp

National Association of State Directors of Special Education www.nasde.org

National Center for Educational Statistics (Institute of Education Sciences), U.S. Department of Education

http://nces.ed.gov/programs/coe/2008

New Horizons for Learning

www.newhorizons.org/spneeds/improvement/jewel.htm

The National Early Childhood Technical Assistance Center www.nectac.org

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