Supporting Inclusive Classrooms: A Resource

New York City Task Force for Quality Inclusive Schooling

Edited by David J. Connor

**NEW YORK CITY TASK FORCE
ON QUALITY INCLUSIVE SCHOOLING**

MISSION STATEMENT

The mission of the New York City Task Force On Quality Inclusive Schooling (NYCTFQIS) is to support preparation of teachers and related services providers for inclusive urban classrooms by using research based practices and pedagogy; collaboration among Institutes for Higher Education (IHEs), schools, parents/families, and professional organizations; and support professional development efforts in high need schools. The NYCTFQIS recognizes the impact of disability on the classroom and the family; appreciates the willingness and courage of school personnel who undertake inclusive practices, and commitment of schools to receive professional development, implement strategies to improve inclusive practice, and host practicum students and student teachers in inclusive settings.

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New York City Task Force on Quality Inclusive Schooling

Additional copies can be downloaded from www.inclusion-ny.org/region/nyc

Dedication

To families, students, teachers, administrators, and all other members of the community who strive to make inclusive education a success.

Foreword

Gerald M. Mager, Ph.D., Professor
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Moving mountains. I sometimes wonder what it takes to move the education enterprise from where it is to a better place. We have witnessed and enacted some such movements in the past half-century: school desegregation, the reconceptualization of school curricula, reductions in class size, the recognition of the importance of teacher quality and quality teacher preparation. Surely, the emergence of commitment to educating all children and youth – the movement toward inclusive schooling – is another example of the transformations we continue to work on and witness taking place in this most-central societal institution. All these changes have taken time, indeed decades to realize.

But what does it demand of people to move mountains? I know that it takes ***courage***. One has to be courageous to stand up, and sometimes to stand alone, for what one believes. But courage is not enough. It takes ***vision***: vision that comes from rich, first-hand experience; vision that grasps the relevant knowledge base; vision that captures insight; vision that reflects deep understanding of one's common practice; vision that is not bound by that practice, but that may be inspired to be otherwise. Vision provides direction to one's courage.

I think moving mountains also requires ***energy***. Routine work takes most of our energy. Those who have moved the enterprise forward have found extra energy to do the extra work that mountain moving requires. And ***collaboration***, of course. Transforming the education enterprise is not a one-person venture. In fact, a grace of this enterprise is its valuing of collaborative effort and accomplishment. We move mountains together, over time.

Moving the enterprise, not surprisingly, requires ***action***. Without action, nothing gets done. Mountains stay where they are. Action draws on our vision, energy, collaboration, and courage. When we have moved mountains in the past, we have deliberately taken action.

The New York State Higher Education Support Center (NYHESC) for Systems Change and its Task Force on Quality Inclusive Schooling have been acting to create the conditions that would allow dedicated teacher educators, teachers and administrators, policy makers and community agencies to move mountains. We have been inching the education enterprise forward, simultaneously on many fronts in the system, with the goal of a quality education for all learners.

In the HESC, we have committed ourselves to developing high quality inclusive teacher preparation programs in our colleges and universities, so that the next generation of teachers is better able to serve the wide range of learners who enroll in American public schools. Those learners need good teachers if they are to succeed academically and build lives for themselves that are productive and satisfying. We share that different vision of teacher preparation and practice, one that leads to teaching that is inclusive of all learners.

Further, we are committed to partnering with regional schools and districts where learners struggle to achieve. In our partnerships, we collaborate across colleges and universities, and engage local teachers and administrators, community groups, professional development providers, and often our pre-service teachers as well. These schools and districts are the sites where our future teachers will claim their first teaching assignments. Engaging in these schools, working with the dedicated professionals already there, and witnessing success and challenge are

part of their preparation for that first year. Through the partnerships, we, as teacher educators, learn from our field-based colleagues and share in their efforts.

Working in inclusive teacher preparation and working with high-need schools are linked. Our vision is that quality inclusive teaching, at which the next generation of teachers must be adept, will also address the challenge of high-need schools in serving all learners. Being in high-need schools and districts will ground teacher preparation and make it more powerful in addressing the persistent challenges of student learning.

The New York City Task Force on Quality Inclusive Schooling has been moving mountains--developing quality inclusive teacher preparation programs in its colleges and universities and engaging with teachers, administrators, support personnel, and parents in many schools and districts of the city. They have shared their vision, brought their energies to bear on the issues at hand, and collaborated with each other and with their partner schools. They have displayed the courage of their conviction that if all children and adolescents of the city are to be well served by their schools, then inclusive policies and practices must become the standard.

This booklet represents the actions of teachers, administrators, support personnel and parents. In the sections of this booklet, you will come to understand better their vision, and to witness their courage. You will sense the energy that they bring to this work. They invite you, through this booklet, to collaborate with them--in moving mountains.
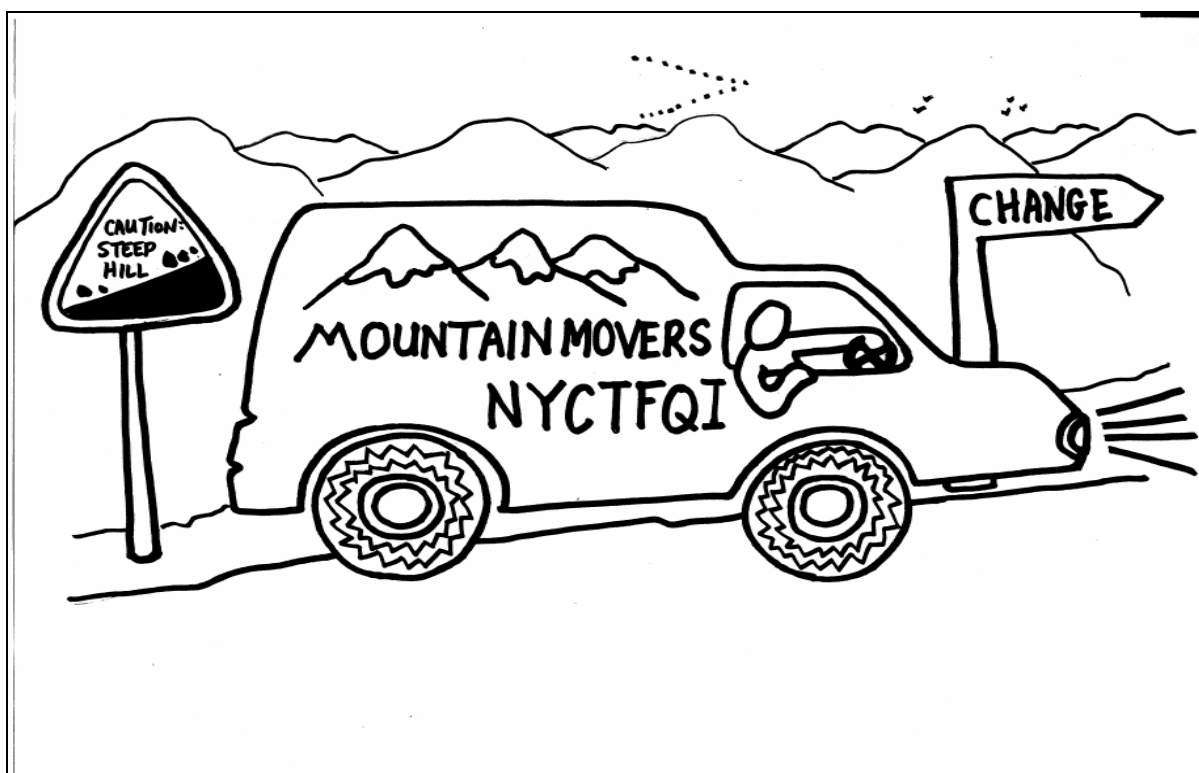
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Section 1: Who We Are and What We Are Trying to Accomplish by this Booklet

David J. Connor, Ed.D.
Hunter College, CUNY

"Those kids don't belong here."
"That's what I'll do for my kids...what about your kids?"
"Whose bright idea was this...someone who's never stepped into a school at all?"
"There's a reason why we have special ed!"
"I can't teach a kid with a disability, I haven't been trained..."
"Those kids will take away all the attention from the other kids. It's not fair."
"I don't want to share a classroom with anybody else."

While inclusive education has come a long way in the last few decades, such comments as those listed above are still commonplace. However, nowadays these sentiments are more likely to be counterbalanced with:

"I believe children with disabilities have a right to be with their non-disabled friends..."
"As a team teacher, I have come to see all kids as 'our' kids..."
"There are many reasons to support inclusion. After all, if children with disabilities are not included in schools, how does that impact their 'perceived place' and value in society--by themselves and by others?"
"Special ed. was intended as a service, not a place..."
"Disability is part of life. 'Special' training is learned as you go along..."
"With flexible approaches to teaching, and the use of differentiated instruction, all kids can learn in classrooms. It does not have to be the same thing, the same way, at the same time..."
"Working with another professional helps me be a more reflective teacher. Having a partner is common in most other professions..."

Clearly, the inclusion of students with disabilities foregrounds multiple issues, raises numerous questions, and provokes many responses. It has done so since the passage of legislation in 1975 (P.L. 94-142) to ensure an education for *all* students…and will continue to do so.

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The intention of this booklet is to provide basic information and share ways of supporting inclusive practices in New York City. The contributors of each section are representatives from New York City who are part of a statewide network called *The Task Force on Quality Inclusive Schooling.* This network is largely composed of university faculty supportive of inclusive education, along with other representatives from a variety of organizations, including the United Federation of Teachers, Parent-to-Parent, and the Department of Education. While the majority of us currently work within a university setting, we have been teachers, professional development specialists, service providers, and administrators in the public school system. We meet as a group six times a year; four times in New York City, and twice in Albany.

What motivates us to come together is our belief in providing quality inclusive education as a valid option for students in New York City. As our time is limited, to date we have focused on projects that allow us to unite and share our resources with educators. In June 2006, we hosted a conference on *Inclusion* at Pace University. In May 2007, we co-hosted a conference on *Autism, Attention Deficit Disorder, and Inclusion* at City College. At these events we met educators hungry for more information, and so we decided to create a booklet that

- Provides a background and context of inclusive education in NYC
- Offers tips, suggestions, and strategies to make inclusion work in the classroom
- Shares information that can spark discussions in schools
- Includes perspectives of teachers and teacher educators
- Lists resources in the form of books, videos, articles, and web pages

The format of the book is straightforward. Each section is based on a question asked, and is purposefully short (between one to four pages) so educators can 'sample' the issues. At the end of most sections are more questions designed to prompt increased reflection and/or stimulate group discussion. Finally, at the end of booklet are sections that provide multiple resources that we have used in our own classrooms.

It is our hope that this booklet will help further attempts at providing quality inclusive classrooms that benefit all students. Whether read as an individual, discussed as a group in school meetings, or sampled in a university classroom, we believe this short text can be helpful in framing inclusion as a worthwhile, complex endeavor that values all children equally.
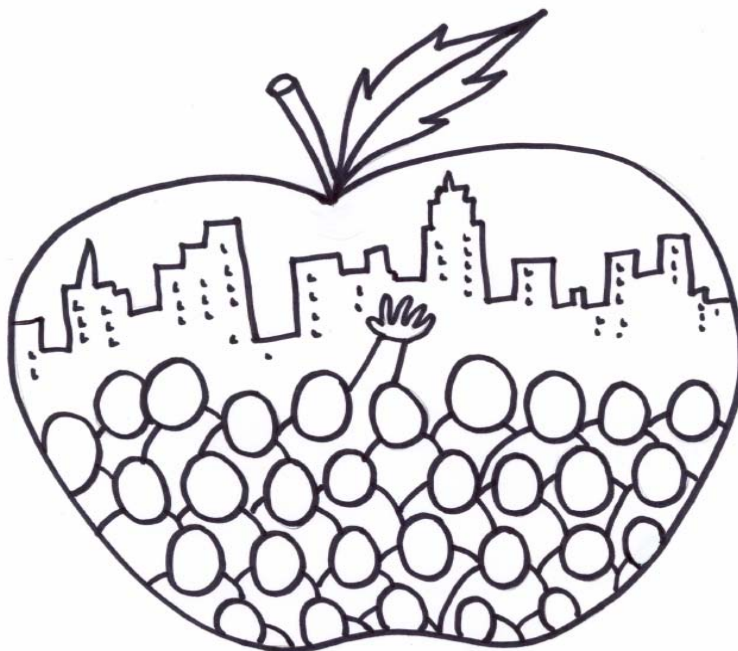
Section 2: Why People Support Inclusion

Task Force Members

"We are all different from one another. Yet, in the diversified classroom all of us belong. Belonging is essential to human nature. Without a feeling of belonging we cannot move on in harmony to accomplish team projects, which is vital in today's ever-changing global environment. Belonging is the foundation for understanding and respect and the building block toward wiping out stereotyping."

Elizabeth Haller

"I value the diversity in the inclusion programs. I support inclusion because it is the moral and right thing to do."

Victoria Rodriguez

"I believe in inclusion because it allows all children the opportunity to see that differences can become similarities. In other words, we are all different and unique individuals"

Nancy S. Maldonado

"Inclusion in community schools is part of our basic commitment to provide all students with the opportunity to actively participate in school and society. It is the responsibility of educators to utilize evidence-based practices and appropriate supports so that all students can be successful learners"

Dianne Zager

"It would be easy to tout inclusive education as a cure all for what ails education. It isn't. It is hard work. It is commitment to a child, not a philosophy. Inclusive education is incremental: one class at a time, one semester at a time, one child at a time. Until, finally, a community dedicated to the education of our children, is suddenly and irrevocably there."

Ellen McHugh

"Inclusion is about everybody's understanding of human difference--who is valued, who belongs. If we are to have a society that is inclusive, then it must start in schools. Inclusion is not about every child doing the same thing, in the same way, at the same time…those committed to inclusive education value and accept human variation as a natural occurrence--not viewing it as abnormality, deviation, and disorder that justifies segregation within education."

David J. Connor

"Diversity is a fact of life. If you carefully look at the whole universe no entity of creation is the same, no species is the same, no two specimens within a species are the same. That fact of endless variation points to a social truth: we need to respect this fact as we look at all who are born human, and who deserve our full attention to reach their full potential. The human table isn't a square or a rectangle or even an oval but a widening circle. We as educators to the best

our abilities are committed to widening the table to fit all who come to its bounty. That's inclusion: a daunting but necessary goal. Every step toward it defines the human condition as it should be lived. Every step away diminishes us and fails to celebrate the diversity within the universe."

Grace Ibanez Friedman

"Inclusion is a philosophy that promotes the equity of access for all people. One's ability to access that which we need and want is a powerful and important human right. Through the inclusion of historically marginalized groups into quality educational settings, we may begin to realize this philosophy."

Susan Mariano-Lapidus

"Inclusion drives democratic education. A commitment to inclusive schooling hallows the listening space within which the spoken and unspoken of the learning community is heard, seen, reflected on. The energy of each student empowers the opportunity to teach inclusively."

Eileen E. Brennan

"I use the following in my signature block...I got it in Albany at the Task Force conference....don't know its attribution, and don't know who distributed it, but it says it all: 'We could learn a lot from crayons; some are sharp, some are pretty, some are dull, some have weird names, and all are different colors....but they all exist very nicely in the same box.'"

Stephen Levy

"This generation has already begun to understand inclusion. They see it in their everyday life, curb cuts, wheelchair lifts on buses, automatic doors, designated parking spots, etc. They see it, they live it, they get it. Why should school be any different?"

Mary Beth Fadelici

"We are in a new push in America--no child left behind--and we all need to remember that no child should be cast aside in a separate room to never experience that very valuable social part of education that occurs when students interact with each other in and out of the classroom. With the exception of extreme cases that pose real safety concerns for the student with special needs, it is incumbent upon us to provide heterogeneous classroom structures that allow all students to develop as they relate to real world experiences and learn that the world is diverse. It requires experience with all, compassion for all, and an ever evolving sense of tolerance, acceptance and inclusion."

T. Shawn Welcome

"Legal support for inclusion is based on Public Law 94-142 and IDEA, which defines the right to education for all children. Inclusive education promotes a sense of belonging, encourages collaboration, advances justice, values diversity and creates opportunity for conflict resolution. Inclusive education values the individual learner and provides an individualized balanced education between academic and social development."

Brenda Dressler

"'When everyone is included, we all learn more,' is the motto of the Cooke Center for Learning and Development where I have worked for almost 20 years. At Cooke, we envision a world where all children and adolescents with special needs are recognized as valued members of their communities and provided with the inclusive education necessary to assume the roles of their choosing. One of the ways we share our vision is by increasing community awareness through our annual celebrations of National Inclusive Schools Week. December 3-7, 2007 was the 7th annual national celebration. The theme was year will be 'Lessons from the World: Including All Children.' Besides holding celebrations in our partner schools, in December 2007 we hosted a conference on international accomplishments and challenges. Get your school involved by going to <www.inclusiveschools.org>. They have a wealth of materials to help each school raise awareness of this important civil right."

Kathy Simic
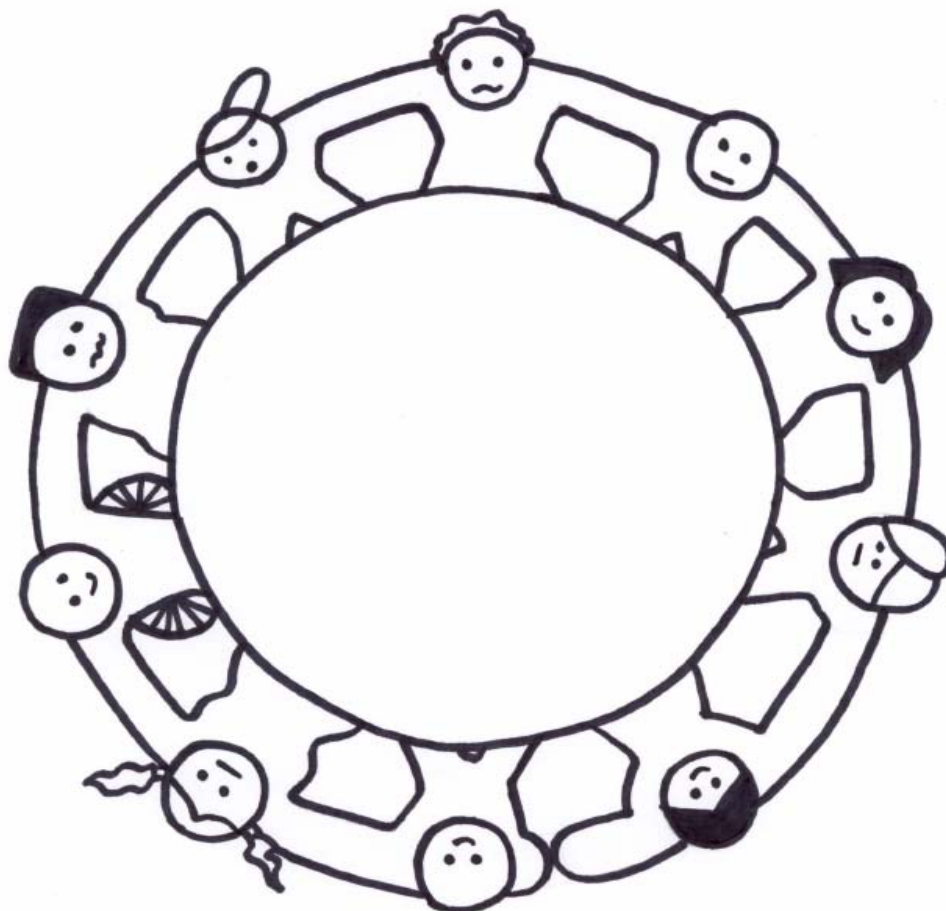
Section 3: A (Brief) History of Inclusion in the USA

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Hunter College, CUNY

The decision of *Brown* v. *Board of Education* (1954) was rooted in the Fourteenth Amendment of the U.S. Constitution: "No state shall make or enforce any law which shall...deny to any person within its jurisdiction the equal protection of the laws" (1868). In other words, "If states have undertaken to provide an education to its citizenry, then they must do so for all its citizens" (Yell, Rogers, & Rogers, 1998, p. 219). This sharply contrasted to educational policies regarding students with disabilities as "laws in most states allowed school districts to refuse to enroll any student they considered 'uneducable,' a term generally defined by local school administrators" (Martin, Martin, & Terman, 1996, p. 26). Parents and advocates of children with disabilities saw the wider implications of *Brown*--the need to have the rights of such children encoded within law. In 1975, their combined efforts resulted in Congress passing the hallmark legislation of P.L. 94-142 mandating a "free and appropriate education for all handicapped children" (FAPE). Contained within this law was the concept of Least Restrictive Environment[1] (LRE). This meant each student had to be individually evaluated and *placed* on a continuum of options including general education classes, separate classes, separate schools, home, or a hospital setting for part or all of the day. Although P.L. 94-142 can be viewed as enormously successful in giving students with disabilities access to public education, the preponderance of decisions that placed students in separate facilities created a largely segregated system, often referred to as "parallel."

The mechanism of LRE has been interpreted as a legal and valid option of not placing a student with a disability in a general education classroom. To disability rights advocates (Lipsky & Gartner, 1997) and activists (Linton, 1998), LRE is a loophole that allows institutions of education to maintain the non-integration of people with disabilities into schools, and society at large. To other scholars (Kauffman & Hallahan, 1995) and parents (Carr, 1993), LRE is a necessary protection that ensures flexibility and individualization of placement for students who are often overlooked and/or overwhelmed in general education. By all accounts, "There is a persistent tension between the requirements of appropriate education and the least restrictive environment" (Martin, Martin, & Terman, 1996, p.35).

Early criticism of placement options outlined in P.L. 94-142 were criticized by Reynolds (1976) who viewed them as *too restrictive* and counterproductive to the intent of the law. Semmel, Gottlieb, and Robinson (1979) concluded that there was no "conclusive body of evidence which confirms that special education services appreciably enhance the academic and/or social accomplishments of handicapped children beyond what can be expected without special education" (p. 267, cited in Reynolds, 1989). Stainback and Stainback (1984) asserted that "the instructional needs of students do not warrant the operation of a dual system" (p. 102), further criticizing expenditure and inefficiencies associated with two systems, classification of disability as a form of tracking, and labeling students as deviant. Challenging the notion of two "types" of students, they called for a merger of both systems that would unite and support all

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[1] The definition of LRE in the Individuals with Disabilities Education Act is: "To the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are [1] educated with children who are not disabled, and [2] special classes, separate schooling, or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of a child is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily."

educators, because, as Lortie points out (1978), the "historical separation of special and regular educators has taken its toll in the relations between them" (p. 236, cited in Stainback & Stainback, p. 104, 1984).

By the mid-1980s, Wang, Reynolds, and Warburg (1986) noticed the growing enrollments of minority students in special education, along with pedagogical inflexibility demonstrated to struggling learners, overreliance on measurement tools used to determine disability (and placement), and "the continuation of segregation of many students in disjointed programs" (p. 26). It was around this time that the Regular Education Initiative (REI) began. Developed by Madeline Will, Assistant Secretary to the U.S. Department of Education in charge of special education and rehabilitation programs, the REI proposed the collaboration between general and special educators. A primary goal was to include students with mild to moderate disabilities because schools had "unwittingly, [created] barriers to their successful education" (Will, 1986, p. 412). Elaboration on these barriers was provided by Gardner and Lipsky (1987) as they described "myriad faults" with the special education system, such as the provision of financial incentives provided to local education authorities when students with disabilities were placed in more restrictive environments. Though this appeared to counteract the spirit of the original legislation, it helped explain why "overall, 74 percent of special education students are in pull-out or separate programs" (p. 374). Sapon-Shevin (1987) also expressed concern over federal data in national reports that omitted statistics on students with disabilities in segregated settings; children that the government literally did not count.

In many ways, the REI was perceived as a special education initiative that had not consulted with general education. Lieberman describes this *faux pas* as tantamount to hosting "a wedding in which we, as special educators, have forgotten to invite the bride" (1985, p. 515). Perceived by critics as non-specific, illogical, and flawed (Kauffman, 1989), and harmful to the needs of students with disabilities (Fuchs & Fuchs, 1995), the REI hit a nerve. It heralded the begining of significant change to supporters and detractors alike. In 1990, Vermont passed extensive legislation to ensure maximum emphasis of placing and supporting students with disabilities in general education (Lipsky & Gardner, 1997), with an emphasis on principals' responsibility to *all* students (Schattman & Benay, 1992). Other states such Kentucky, Colorado, and Pennsylvania made changes at the state and local levels that demonstrated commitment to the integration of students with disabilities. In was in this atmosphere that Reynolds wrote, "The history of special education delivery systems can be summarized in two words: progressive inclusion" (1989, p. 7).

As a result of REI, the debate about where to best educate students with disabilities intensified. The practice of *mainstreaming* had occurred since 1975, but was traditionally only "applicable to those students who were considered to be most like normal" (Lipsky & Gardner, 1997, p. 77). Mainstreaming assumes that a student with a disability can cope independently with the academic and social demands of a general education classroom. In contrast, inclusion signifies that a student with a disability can benefit academically and socially from the general education classroom, even if goals for students with disabilities are different from those for non-disabled students. It must be noted that mainstreaming and inclusion are often used interchangeably in much of the educational literature, whereas they differ significantly in terms of definition and philosophy.

The reauthorization of PL.94-142 as PL 101-476 (1990), or the Individuals with Disabilities Education Act (IDEA), furthered the public's general awareness of people with disabilities and the need to have increased access to all aspects of society. The concept of *full*

inclusion developed, giving rise to in the field of education to a proliferation of journal articles, books, and conferences. Sailor (1991) characterized full inclusion by attendance of students with disabilities in their home-based schools, a zero-reject policy, a "natural proportion" of disabled and non-disabled students together, age-appropriate placements, no self-contained classes, and special education support provided in integrated learning environments. However, Villa and Thousand (1995) argue that inclusion was not merely to be considered a service placement, but rather "...a way of life, a way of living together, based on a belief that each individual is valued and does belong" (1995, p. 11).

In response to the widespread influence--and controversy--of inclusion, most professional organizations and child advocacy groups issued official position statements. The Learning Disabilities Association (LDA) stated that "the placement of ALL children with disabilities in the regular classroom is as great a violation of IDEA as is the placement of ALL children in separate classrooms on the basis or type of their disability" (1993). The National Joint Committee on Learning Disabilities agrees that full inclusion "violates the rights of parents and students with disabilities as mandated by IDEA" (1993). Several organizations supported a moderate stance of fully supported inclusion for most children (National Parent Network on Disabilities, 1993), whereas others desired to maintain the current continuum of services (Council for Exceptional Children, 1993; Council for Learning Disabilities, 1993). Several organizations supported full-inclusion, (The Association for Persons with Severe Handicaps, 1993; The United Cerebral Palsy Association, 1993). It became apparent that various groups differed in relation to the issue of inclusion, often clashing as the idea became more influential.

At the same time, national concern surfaced in the media at the financial cost, and poor academic and social outcomes for students in the special education system. *U.S. News & World Report* expressed concern at the overrepresentation of minority students in special education classes, commenting "nearly 40 years after *Brown v. Board of Education*, the U.S. Supreme Court's landmark school desegregation ruling, Americans continue to pay for and send their children to classrooms that are often separate and unequal" (Shapiro et al., 1993). On television, the Merrow Report asked "*What's So Special About Special Education*?" (May 12, 1996) in which critics talked about "welfare annexes" and "dead ends for many children." Though detractors of "the doctrine of inclusion" were given equal airspace, what lingered was the sobering points made about racial segregation. And, in the world of film, *Educating Peter* (1993) won an Academy Award for Best Achievement in Documentary Short Subjects--chronicling the trials, and ultimate triumph, of an "included" 10-year-old boy with Down syndrome.

As inclusion became virtually synonymous with special education reform, scholars and educators satisfied with the existing special education framework felt that the foundation on which they stood was under attack. Fuchs and Fuchs (1995) wrote "the reformist impulse has been radicalized" (p. 216) and "the field's rhetoric has become increasingly strident and its perspective increasingly insular and disassociated with general education concerns" (p. 215). The authors also charged supporters of inclusion as possessing "unjustified optimism," (p.16) and "doubt[ed] that most teachers will tolerate students more difficult to teach than they currently have" (Fuchs and Fuchs, 1996, p. 16). In the *Illusion of Full Inclusion* (1995) prominent scholars such as Hallahan and Kauffman edited a series of powerful essays by Fuchs and Fuchs, Semel, Gerber, Gallagher, and others, offering a systematic critique of inclusive practices and the professionals who support them. Citing the success of segregated programs for students who are deaf (Bina, 1995) and blind (Lane, 1995), the editors forcefully maintained that a continuation of current practices, in need of refinement, were where the future should lie. In

turn, Brantlinger (1997) analyzed their work, charging that "while marking inclusionists as ideological, traditionalists assume—or attempt to create the impression that their work is non-ideological" (p. 436). Brantlinger claimed such non-recognition of ideological positioning was responsible for "reifying disability and naturalizing special services" (p. 440).

Coinciding with the Reauthorization of IDEA (1997) that stressed increased access to the general education curriculum, including general educators as members of the Individualized Education Plan (IEP) team, Lipsky and Gartner's *Inclusion and School Reform* (1997) offered a comprehensive overview of inclusion in relation to shifting policies and practices within education. Interestingly, the field of gifted education became implicated in debate, as proponents claimed all students could and should benefit from instructional enrichment traditionally earmarked for "gifted" students (Sappon-Shevin, 1996) and their integration would no longer "perpetuate, even exacerbate inequities in our society" (Borland, 1996, p. 132). In a commentary on the current field of special education at that time, Kauffman (1998) stated "Inclusion has become virtually meaningless, a catch-word used to give a patina of legitimacy to whatever program people are trying to sell or defend" (p. 246).

It became apparent that the field of special education had grown divided, often to the point of polarization, on the issue of inclusion. Andrews, et al. (2000) succinctly outlined the conflicting positions in an article titled *Bridging the Special Education Divide*. On the one hand, traditionalists favor a policy of incremental improvement, believing the current model of special education is sound, disability is conceptualized within a medical model (a defect owned by the individual), enhanced academic and social performance should be sought, expected outcomes are tied to post-school adaptive functioning, the knowledge base its theories are built upon as promising, and the need to introduce scientific rigor to teacher preparation programs. On the other hand, substantial reconceptualists argue special education is a flawed system, notions of disability should be recast within a social model, current structures are limiting and deny access for people with disabilities, increased emphasis should be placed on human diversity, and less emphasis on labels and categorzations, a rethinking of the entire system, and educators need to focus on an ethics of caring for all students. As Paul & Paul (1996) have noted, both groups have paradigmatically conflicting stances. The former is interested in asking the question, "Does inclusion work?" whereas the latter wants to know, "What needs to be done to make inclusion work?"

Questions to Ponder/Discuss:

1. In referring to the major ruling of *Brown v. The Board of Education* and the *Individuals with Disabilities Education Act* legislation, in what ways is it useful to analogize segregation within schools according to race and disability?

2. What has been the role of parents in mobilizing for legislation to ensure a public education for children with disabilities?

3. In your opinion, is inclusion a civil right, or is it something to be "earned?" What might be problematic for some advocates about the idea of "earning" the right to be in general education classes?

4. In what ways is the Least Restrictive Environment helpful to students with disabilities? In what ways might it act as an unexpected hindrance to their inclusion?

5. When you hear the term "Special Education," do you think of it as a service or a place? If it is a service or a place, can "separate be equal?"

6. Different disability-related organizations support inclusion to different degrees. Why do you think that is?

7. In what way has the idea of inclusion divided the field of special education? How does inclusion pose a threat in terms of eroding special education--or can it be viewed as reinventing it?

8. "Gifted students" are also part of an inclusive classroom. In what ways does inclusive education benefit them?

9. Self-contained and special classes are sometimes referred to as "segregated classes," by supporters of inclusion. To what degree you think this is a fair and accurate description?

10. In what ways does inclusion challenge the entire education system to change?

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Section 4: Making Inclusion Work

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How to Create a Successful Inclusion Classroom

How can inclusion work? The answer to this question may seem elusive. After all, the scenarios in which inclusive classrooms succeed and fail are as individual as the people in them. This component of the booklet is intended to provide some overarching concepts to aid in creating and maintaining a successful inclusive classroom.

Attitude: Believe it can work!

A belief in your students' ability is contagious. Many teachers do not recognize the impact of their expectations on student achievement outcomes (Logan, Alberto, Kana, & Waylor-Bowen, 1994; Salsbury, Evans, & Plombaro, 1997). A teachers' enthusiasm or apathy affects not only a particular student's perceptions of his or her own ability, but also that of the student's classmates. Furthermore, a teachers' mind-set can impact other professionals' perceptions of student capabilities.

One must closely examine a teacher's emotional responses to students within their classroom and consciously reflect on how their attitude toward a student may have affected that student. However, just as negative attitudes can have a negative impact, positive beliefs that a student belongs and can succeed are as equally contagious!

Collaboration: Know your team!

Many people make up the team that facilitates a successful inclusive classroom. Team members may include general and special educators, paraprofessionals, speech, occupational, and physical therapists. Other school personnel such as the school nurse, guidance counselor, psychologist, social worker and additional teachers are possible resources for providing expert information to guide decision making (Mastropieri & Scruggs, 2007). Administrators may also be considered part of the team. They can provide materials and other supports that the classroom needs.

Often underutilized team members are parents and/or other family members. Not only are they the "experts" on the student, they can provide valuable information on the child's' home environment and his or her likes and dislikes. Additionally, family and caregivers can help with instruction by reinforcing concepts learned in school or assist in classroom management by participating in positive school to home contracts.

Once the team is established, everyone should be encouraged to contribute his or her expertise to the conversations. Additionally, these discussions should be ongoing. By creating a collaborative environment, students' needs can be anticipated and proactive planning can be conducted rather that reacting to problems that arise. One can use these exchanges to identify the roles of each team member and outline expectations for each person for a smoother execution. Additionally, a list of tasks should be created outlining what each team member is responsible for and the date the task is to be completed.

Take Inventory: What resources do you have?

In addition to educational resources such as texts, manipulatives, computers, and educational videos, etc., be sure to take stock of what non-academic resources you may have. Time, expertise, materials, collaboration and student peers may all be valuable assets to an inclusive classroom and should be considered carefully while planning for instruction.

Preparation: Anticipate the needs of your class.

Anticipating the needs of your class is a continuous task. When teaching in an inclusive classroom, meeting student needs, administrative expectations, curricular demands, and parent relationships is no easy task. When including students with special needs into a general education setting, it is easy to lose focus of the class as an entirety, concentrating instead on the needs of individual students. Set aside at least 30 minutes per week to reflect on your class as a whole. What is the culture like? What are the dynamics amongst groups of students? What class management issues are present? Are dyads or working groups working out? What are some successful strategies that were used? Why did they work? Keep a journal of these reflections and be sure to refer back to it. You may be amazed by how dynamic your class can be!

Focus instruction: Teach one student at a time.

Although it is important to keep the class as an entirety in mind, it is critical to deliver instruction one student at a time. When including students with identified disabilities into a classroom, it is important to read and understand his or her IEP. However, providing differentiated instruction does not stop there. A student's cultural background, learning strengths and weaknesses, educational history and preferences must also be considered when planning and executing instruction (Gartin, Murdick, Imbeau, & Perner, 2002).

Differentiated instruction does not mean that you have to teach the student one on one, rather it means that thoughtful planning for each individual student went into preparing lessons. This is no small task when considering increasing class sizes. By planning ahead, however, this task can be made manageable. Schedule 10 minutes at the end of the day two to three times per week to sit and think about your students one by one. Reflect on their strengths, the progress and struggles during the week, note any management issues and techniques that have been successfully implemented and/or those that have not worked as well. Finally, reflect on any assessments that you may have conducted during the past week or two. Do any concepts need to be reinforced or re-presented? What is the best way to go about presenting the information to a particular student? Keep a journal of your thoughts to refer to while lesson planning.

Persistence: plan and execute frequent assessments.

One of the most important components to a successful classroom is assessing student gains frequently. Observations, checklists, mini quizzes, or work samples are some ways that a teacher can make sure that students are meeting expected goals. Perhaps more important, regular assessments can detect the need to review material before moving on. By planning frequent assessments well, teachers can examine the various needs of their students (academic, behavioral, emotional, medical, etc). In this way, it is possible to draw upon the expertise amassed in collaborative team meetings.

Questions to Ponder/Discuss:

1. What inclusive-centered issues make some educators resistant to inclusive classrooms? How can we promote a respectful conversation about these issues?

2. How does teacher attitude affect potential student success or failure?

3. In what ways can parents be allies with teachers? What are some ways teachers can make parents feel at ease to discuss their child? How can genuine dialogue be encouraged?

4. How can teachers maximize their use of time and available resources?

5. What are the benefits of keeping a teacher's notebook or reflective journal to record the daily "ins and outs" of classroom life? In what ways might the notebook or journal help in instructional planning, teaching content and skills, creating activities, and evaluating students?

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Section 5: Working in Inclusive Classrooms

Teacher Voices

Working as a TEAM

Working in an inclusive classroom has been the most rewarding and successful experience in my teaching career thus far. True inclusion classrooms are unique and hard to find as many people are reluctant to engage in the idea because of stories and comments that have been made about them by others. I took a chance and ignored the rumors and found out that they are just that…rumors! There are many positive aspects of teaching in the inclusive setting that are overlooked by the negative. My experience has been only positive and one that I would recommend to others.

Inclusive classrooms allow real and meaningful education to occur. The mixture of the students provides opportunity to be creative, use activities and hands-on learning to drive the instruction. There are a wide variety of learning styles and modalities that need to be attended to through each lesson every day, which allow for differentiated instruction to occur naturally and consistently.

*Having two teachers in the classroom allows for more individual instruction for each of the students, as there is another adult to help make learning exciting and successful. Not only are the adults invested in creating success in the classroom, but the students are as well. Students take on the task of acting as peer mentors, tutors, buddies and friends in the idea of helping each other to achieve success and working together as a team. TEAM is the motto of the classroom, which stands for **T**ogether, **E**veryone **A**chieves **M**ore. Students learning from teachers, students learning from peers, teachers learning from students and teachers learning from teachers, this is how education is conducted in the classroom.*

Teachers have a sounding board to bounce ideas off of each and everyday as they are able to rely on each other and put two minds together in developing lessons, creating routines and procedures, and running the classroom day in and day out. Everything about an inclusive classroom has been positive. Everyone learns from each other and is given an equal opportunity to learn with their peers and are educated according to their own learning style creating personalized education to ensure success. Friendships, differentiated instruction, compassion, acceptance, encouragement, engagement, hard work, happiness, a love for learning and success…what's not to love about working in an inclusion classroom?

- Keriann Martin, Collaborative Team Teacher

CTT is an excellent option for students because the student/teacher ratio is significantly reduced. Looking at any given situation, two minds are greater than one. There is concern for general ed parents that they do not want their kids in CTT for fear of holding them back or not advancing if they were in a classroom filled with all general ed students. According to Rick Lavoie, "All research supports general ed students in a CTT results in positive academic and social achievement." Schools need to make sure that the general ed population is not the behavior problems or borderline special education candidates. During our grade meetings, we discuss

which general ed students should be selected for CTT. We look at work habits, behavior, academic level and character to ensure the balance of the classroom. Planning is critical to ensuring success. My co-teacher (general ed) creates the overall skeleton of the unit and lessons covered. I (special ed) will look for ways to modify and scaffold the lesson for the students. We would take turns teaching the mini lessons to the class so there is no doubt that both are in fact teachers, not to confuse the special education teacher as a paraprofessional.

- Mei Wong, Collaborative Team Teacher

Inclusion is a powerful model of teaching. I have learned and grown so much as an educator and as a person from having worked with my co-teacher for the past three years. I know that we have shaped children to believe that differences are not roadblocks, but open doors. We have taught children to accept and love one another. Both the challenges and sheer joy I have felt as a partner in a CTT classroom are ones that I know I will not encounter in any other job. The seemingly endless, everyday struggles of planning, thinking about each child's needs, dividing work, scheduling trips, and making time to actually speak to the person with whom you spend most of your professional life with *feels impossible at times...Now I know now that it is possible.*

- Colleen Givens, Collaborative Team Teacher

Open communication is the key to a successful, efficient, and enjoyable co-teaching relationship. One of the first things that should be done between new co-teachers is to make a list of "top 10 pet peeves" in the classroom and professional environment. Co-teachers should exchange lists and discuss commonalities, differences, and jointly develop methods to create a compatible partnership. Similarly, this procedure should be repeated for making a list of "most important professional goals."

- Kathy Annette Nguyen, Collaborative Team Teacher

Inclusion was extremely successful in our classroom primarily based on the collaboration of the two teachers. All models of co-teaching were planned and implemented in our class. Co-teachers need to be given ample time for planning in order for the success. For each lesson teachers thought about the needs of their students and what model would work best. Both teachers were flexible, open to different ideas, and respectful of each other. Students were integrated throughout the day through different partnerships, book clubs, table spots, and writing partners. We used a variety of methods of instruction including Wilson Fundations, Balanced Literacy (guided reading, shared reading, interactive writing, etc.), direct vocabulary instruction, and fluency activities. If inclusion is not planned or properly implemented, the class becomes a dumping ground and therefore a failure. Schools should have an organized plan for selecting students for this class. There are so many benefits for students enrolled in an inclusion class.

- Kim Edelmann, Collaborative Team Teacher

The key to successful inclusion (which is the key to successful education) is an advocacy partnership between teachers and parents. The need for responsible, effective, differentiated curricula and alternative methods of assessment is becoming clearer to both factions. By banding together, parents can make sure their children get the free and appropriate education to which they are entitled and teachers can be supported by their districts with appropriate staff development focusing on tools for assessment and strategies for teaching.

- Zoe Stark, Parent (9th grader) and Future Teacher

Co-teachers must respect each other and have open communication. Before school starts, make an effort to meet with your co-teacher and discuss all aspects of the classroom. Subjects such as who teaches what, classroom management and similar topics should be discussed. Also, please talk about expectations of one another. Expectations must be communicated and agreed upon to ensure a successful relationship.

- Margaret Park, Teacher
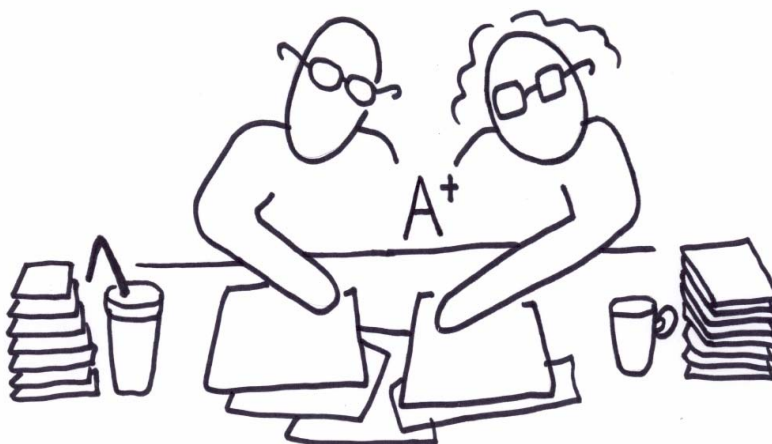
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Questions to Ponder/Discuss:

1. What are approaches that these teachers emphasize in their support of inclusive practices?

2. What are some of the benefits for teachers who collaborate? What may pose the biggest challenges?

3. Why do some teachers make inclusion a priority in their work?

Section 6: Administrative Support of Inclusive Practices

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Successful school administrators have already exhibited skills that support inclusive practices since these are the same skills that support any and all aspects of school administration and supervision. First and foremost, the principal[2] must create an inviting atmosphere. Some key tenets of Invitational Education (Purkey, 1996) include: (1) creating a democratically oriented, positive approach to leadership; (2) educating in a collaborative and cooperative manner; (3) appreciating that all staff and students have untapped potential; and (4) being intentionally inviting, both personally and professionally. A key characteristic for the principal is trust in others and optimism that Purkey calls a "positive vision of human existence: that individuals are valuable and capable." This applies equally to how the principal treats staff and how he or she views students with disabilities. Each student in school should be perceived as a "person of value." When applying this philosophy, an atmosphere of mutual respect and positive regard increases the likelihood of student success. Purkey urges principals to "visit the provinces." That is, in addition to the principal (or assistant principal in a large school) visiting each class every day, he or she should visit the teacher's lounge, gym, cafeteria, labs, shops, grounds, etc. Also, the principal should provide and encourage opportunities to share successful experiences in inclusion that teachers can discuss at faculty meetings and elsewhere.

It is helpful to view inclusion in its broadest perspective. Barbara McKeon, Head of School at the Cooke Center for Learning and Development that serves students with disabilities in inclusive settings throughout New York City writes: "In my experience we are only providing true inclusion if we recognize that inclusive opportunities need to focus on inclusion in life. This means that we should be developing programs that address skills beyond the classroom walls enabling people to be included in the communities of their choosing."   In a study by Klingner et al. (1999), teachers report that "administrative backing" and "principal's support" were significant in breaking down barriers, providing extra in-service opportunities, and developing innovative strategies. The conclusion was that administrators set the tone for a school's acceptance of change.

The principal's participation in a school-based team is often considered key to support for students with disabilities. Zetlin (2000) describes the Resource Coordinating Team (RCT) comprised of the principal, psychologist, nurse, special education specialist, social worker, attendance counselor, and others, as appropriate. Behavior therapists may be involved when developing strategies to support students with emotional or behavioral difficulties. At times, representatives from agencies may be invited to coordinate school and community interventions. Parents and family members may also be included. When addressing the needs of individual included students, the group may discover and address school-wide problems as well. The impact of the principal on the problem-solving consultation team is of utmost importance (Rafoth & Foriska, 2006). Their study examines principal-teacher influence, shared instructional leadership, and administrative support mechanism. In some schools it appeared that the principal's leadership of the team was critical but in others it appeared that the principal did not even have to participate in all meetings as long as he or she provided support at a high level.

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[2] "Principal" may be used interchangeably with school administrator, supervisor or coordinator.

Idol (2002) found that when the principal supports inclusion and is perceived positively by teachers as the instructional leader, programs are more successful. Frequent visits to classrooms by the principal combined with asking teachers what they realistically need were effective.

Administrative support (Yoon & Gilchrist, 2003) can include: (1) support for in-service training for general and special education teachers, paraprofessionals, and other staff; (2) payment for time spent outside regular school hours; (3) credits toward district service requirements; (4) clerical support for recordkeeping; and (5) direct intervention with students' aggressive behaviors.

The principal of an inclusive school may benefit from an "open door policy." Teachers, paraprofessionals, and team members may be confronted with difficult problems. Some require urgent intervention or decisions. Accessibility of a member of the administrative team demonstrates support, empathy, and help in problem solving. Support of common planning time for co-teachers or collaborative teachers is critical. Additionally, allowing staff input into scheduling and student grouping decisions boosts morale and effectiveness. Thorough planning for and preparation of substitute teachers and aides is also a critical role for the principal. The principal should also attend to training of the secretarial staff in responsiveness to staff, students, parents and crises. Additionally, he or she can contribute to planning by being aware of the academic accommodations available and providing essential materials and resources.

As an expert in interpersonal relationships and observer/evaluator of professional competency, the principal can recommend a suitable combination for a co-teaching pair. The relationship between teachers (and paraprofessionals) in the same classroom is critical in enabling successful inclusive classrooms.

The principal searches for ways to provide in-service credit for teachers in planning sessions. He or she plans individual meetings with teachers to review the nature of a student's disability, expectations, and possible outcomes. The principal provides support staff sufficient for each child's needs.

As Dania Cheddie, Principal of P.S. 226 in Manhattan, an expert in education of students with disabilities in New York City's respected District 75 states: "It is important that school administrators be open to the possibilities that inclusive settings can offer. Try it and see! Working together as a team, administrators from special education and general education can make it work."

The following is a summary of recommended practices for administrators:

1. Create an inviting, positive, accepting school climate;
2. Visit and interact frequently in classrooms and around the school;
3. Provide up-to-date information, resources, materials and current IEP data;
4. Offer incentives and credits;
5. Allow input into planning and scheduling;
6. Provide common planning time for co-teachers or collaborative teachers;
7. Manage availability and training of substitutes;
8. Schedule in-service training and encourage professional development;
9. Recommend the selection of colleagues;
10. Lead, serve on, or support the team or CSE (Committee of Special Education);
11. Intervene personally in serious behavior situations;
12. Be knowledgeable about education of students with disabilities.

Suggested Resources

The Cooke Center produced an outstanding video that depicts successful inclusive practices in New York City schools. It would be of value for a faculty meeting.

The principal can reinforce his or her knowledge of special education procedures as well as due process rights by reading *Special Education in New York State—A Parent's Guide* (available on the web).

Questions to Ponder/Discuss:

1. How does a principal's belief about inclusion impact on school attitudes?

2. Given the emphasis on high stakes testing results, to what degree might principals feel under pressure to minimize the number of students with disabilities attending their school?

3. In what ways can the Parent Teacher Association work with the principal to ensure an inclusive environment?

4. What are some ways in which principals can support staff regarding inclusion in terms of time, collaborations, materials, etc.?

5. What are some potential ideas for principal-led professional development around the issue of inclusion in a school? With whom could the principal collaborate? What might be some good resources?

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Section 7: Strategies for Elementary School

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Teachers of successful inclusive elementary school classrooms implement a variety of effective strategies with their students. Effective teaching strategies for inclusive classrooms should be validated by a body of research. Some of the strategies that can be found in a successful elementary-school-age classroom include:

1. Sociocontextual strategies such as
    a. Cooperative learning
    b. Peer mediated strategies
2. Explicit strategies such as
    a. Corrective feedback
    b. Prompts and cues
    c. Graphic organizers
    d. Direct Instruction
3. Technology-based strategies
    a. Assistive technology
    b. Cooperative computer activities

Giangreco, Cloninger, Dennis, and Edelman (2000) stated that inclusive education is in place when the following five features are present:

1. Heterogeneous grouping: in which groups represent in reasonable approximations the natural proportions. More specifically, in a group of 25 students, maybe there is one student with significant disabilities, a few with less significant disabilities, and others without identified disabilities, all working at various levels.
2. A sense of belonging to a group: all students have the same membership level to the groups, some are not considered members while others are simply visitors or conditionally assigned to the group.
3. Shared activities with individualized outcomes: all members of the group are engaged in the same activities; however, their learning outcomes might be different. For example, all students might be engaged in a literacy activity; however, one of the members of the groups has an individualized objective regarding her social skills; therefore her individualized outcomes is related to social skills rather than the subject areas addressed by the activity (literacy).
4. Use of environments frequented by persons without disabilities: all educational experiences occur in settings that are typically utilized by all individuals (with and without disabilities).
5. A balanced educational experience: all aspects of an individual's skills are taken into account. In other words, areas such as social skills and self-management skills are considered as important as mathematic or reading skills.

One important feature to consider in creating an effective inclusive classroom is the curriculum materials used. Mastropieri and Scruggs (2004) have developed the following

Checklist for Curriculum Materials for Inclusive Environment (p.158). Teachers might find it useful to check any potential materials against the checklist, or use the checklist as a reference point when selecting/developing materials to be used in their classrooms:

1. Do the materials provide sufficient opportunity for active student involvement, or do they simply provide verbal information to be recalled?
2. Are the materials written on a level that is most comprehensible to all students or do they include unnecessary complexity or an overabundance of unnecessary vocabulary?
3. Do the materials lend themselves to use by cooperative learning groups or other peer interactive activities?
4. Do the materials allow for sufficient practice of key concepts before moving on to other content?
5. Do the material provide simple means for frequent evaluation of learner progress toward prespecified goals and objectives?
6. Do the materials include examples of individuals from culturally diverse backgrounds, and people of diverse learning abilities?
7. Do the materials provide recommendations for modifications for students with disabilities or other special needs?
8. Do the materials provide validity data that demonstrate that positive learning gains can be realized from use of the materials?

Prior research (Larrivee, 1985) has shown that some specific characteristics seen in effective inclusive classrooms in which the students demonstrated the significant academic achievement are:

1. A teacher who demonstrated an efficient use of time
2. A good relationships between teacher and students
3. Substantial amounts of positive feedback
4. Activities are structured to maintain a high success rate
5. Supportive responses are provided to all students, specially those with low-abilities

Furthermore, Larrivee (1985) notes that the variables that constituted a classroom in which students with disabilities would be successful could be grouped into four categories, and described as follows:

1. Classroom management and discipline: including transitions that were completed in an efficient manner that had high student engagement.
2. Feedback during instruction: including providing positive feedback to students for correct responses to instruction, corrections for incorrect responses, and avoiding criticism.
3. Instructional appropriateness: including planning tasks for the appropriate level of difficulty, maintaining a high rate of students' responses.
4. Supportive environment: including an environment based upon supporting rather than punishing students.

Questions to Ponder/Discuss:

1. Why should cooperative learning in pairs, triads, and small groups be an integral part of inclusive classrooms? What are some factors to consider in creating groups?

2. How fair do you think it is to have activities with different outcomes for different students?

3. What are the social benefits of being part of an inclusive classroom?

4. Which of the eight items on Mastropieri and Scruggs' list (2004) do you already incorporate into your practice? Which "unfamiliar" items might you consider doing?

5. What are some ways in which teachers can create an environment supportive of all students?

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Section 8: Strategies for Junior High School

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The *No Child Left Behind* law challenges educators to make accommodations to fully include special education students. Accommodations might include team teaching, collaborating in planning instruction, peer coaching and tutoring, differentiating instruction to respond to learning styles, cooperative learning and assistive technologies.

In a review of the literature there are many research articles that suggest infrequent use of strategies that can help to promote positive outcomes for all students in inclusive classrooms. DeSimone (2004) investigated middle school general education mathematics teacher beliefs. There was a surprising number (43% of the 228 respondents from 19 different states) who had taken less than three workshops related to teaching students with learning disabilities. In-depth interviews and classroom observations concluded that general education mathematics teachers are not fully aware of their included students' level of attention or skilled at assessing their included students' comprehension of mathematics lessons. There was an inconsistency between general educators' beliefs and knowledge of instructional needs and/or required modifications for students with learning disabilities. DeBettencourt (1999) conducted a study in which approximately one-fifth of the students in each class in three rural middle schools (population of each 500-700 students) were students with disabilities. Results indicated that general educators did not use many of the strategies that research suggests facilitate academic achievement for students with mild disabilities (advanced organizers, learning strategies and self-talk) and that 50% of the general education teachers consulted less than one-hour a week with the special education teachers.

Educators are in a time of rapid changes to the special education system in the schools. General education teachers need to better understand the educational context in which students with learning disabilities learn best. At the same time, special education teachers need to understand their new role within general education. Both sets of teachers need to work as "partners" so that they can maximize their time with each individual student's learning disabilities in order to move students forward to achieving their goals in high school and beyond.

Scruggs and Mastropieri are well-known researchers in the area of cognitive strategies for the student with learning disabilities. They have outlined eight strategies grouped into the categories that include: attention, memory, intellectual abilities, language skills, social/emotional behavioral characteristics, affective and motivational factors, basic academic skills and study/organizational skills.

These eight strategies with accompanying activities for each are listed here. Teachers of inclusion can implement them as a way to being responsive to individual learning needs of included middle school students. These activities have been gleaned from observations and suggestions of middle school and junior high school teachers.

Attention
These strategies/activities help those students who have trouble focusing and sustaining attention on academic tasks:
- Increase proximity of the inattentive student to the teacher. This will allow the teacher to better observe if the student is following along. Seat the inattentive student away from distractible places like the windows or doors.

- Set timers or ring a bell to help students keep track of class assignment time.
- Ask questions to determine if your students are "on track." Ask students to help answer the question or add to the previous answer.
- Use "mini-lessons" of 15 minutes or less and then have student groups work on activities that pertained to that lesson.
- Break tasks down and remind students of task deadlines.
- Allow for break-time, especially if there are block double period schedules.
- Signal inattentive students that they must pay attention without drawing attention to them. This could be achieved by walking around the room and tapping their desk.

Memory
Closely associated with attention is memory.
- Highlight important points by writing them on large chart paper.
- List the agenda and important facts for the lesson on the chart paper.
- Use phrases such as "Do you recall," "Do you remember," etc.
- Use the classroom bulletin board to remind students about such information as rules for group work, accountable talk starters, reward posters, Bloom's Taxonomy.
- Intensify instruction by integrating Internet-based information. Use the computer and other technology with classroom instruction.
- Use the following external memory systems: calculators, index cards with information for easy reference (allow students to make their own deck of information cards), open book tests, study sheets. Use personal web-sites whereby students can contact the teacher or access course-related materials and information. Stress the use of home and school computers. Incorporate school-related links to other Internet sites on your web-site to provide relevant practice and motivations for continued study.
- Use mnemonic instruction to help students remember facts. Eighth grade math classes frequently use the acronym "PEMDAS" to remember the order of operations (parentheses, exponents, multiplication, division, addition and subtraction) or "FOIL" for multiplying a two term polynomial multiplied by another (first, outer, inner, last).
- Enhance the concreteness of teaching your subject by encouraging students to look for "key words." Link new words to the way they sound. Explain the meaning of a word by using other words, drawings, numbers, etc.

Intelligence
Students with learning disabilities frequently have knowledge bases that are narrower than those of their age group. New information may not be meaningful. Teachers need to be aware of the degree to which students understand a new topic before building more abstract concepts.
- A way to check for understanding is to allow for student presentation time. Presentations give teachers time to communicate problems, make connections and challenge students with questions.
- Circulating around the room to conference with groups gives teachers the opportunity to see if the students are "on task" and understanding the directions.
- Give students review sheets. This will allow students to organize their thoughts better.

- Students can summarize what they have learned for that period in a notebook and also write a reflection. This will help teachers to gain insight as to whether the student has understood the lesson.
- Provide concrete examples. For example, if you are teaching a unit on symmetry, have students make snowflakes that are symmetrical. Explain and make connections to the student's world.
- Provide additional time to learn with special tutoring sessions if possible.
- Provide assessments at a later date for inclusion students when content familiarity might play a bigger role in achievement.
- Scruggs and Mastropieri stress direct teaching for the student with learning disabilities because this type of teaching requires less mental effort. They caution that "discovery learning" and other "constructivist" approaches may place excessive demands on this student.
- Vary groups from time to time so that inclusive students get to work with all the general education students in the class.

Language Skills

Language deficits are apparent in students with learning disabilities and can impact learning in the classroom. To help with the development of language skills, it is suggested by Scruggs and Mastropieri that techniques for answering questions, listening, integrating language activities into regular instruction and supporting special services in language be used.

- Allow for sufficient "wait-time" for answers to questions. "Wait time" is the amount of time between the question and a response. Sometimes it is necessary to wait longer than a teacher may think is necessary. Repeat questions several times. Attempt to question inclusion students in every lesson.
- Use questions that come from the higher order thinking skills levels of Bloom's Taxonomy. Lower level questions usually are answered with just one word answers. Refrain from continuing the lesson even though there are no questions from the students. Review questions that could possibly be in the students' minds.
- Give examples of questions and how a question should be worded. Try to avoid closed questions. Examples of these are: "What is a fraction?" "What is a nutrient?"
- When answers to questions are wrong, encourage other class members to give the correct answer and to listen to each other when questions are being asked and answered. Have rubrics for listening posted in the room.
- Integrate language activities into regular instruction by having students write notes for each lesson. Encourage writing narrative procedures and speaking activities. Encourage drawing pictures of problems or situations that will help to organize the student's work and visualize the situation. Many special education students are visual learners. Words can then be put to their pictures more easily.
- Give students a chance to make their own transparencies and then explain their work using the overhead projector.
- Give students a chance to peer edit with understandable rubrics distributed to the class.
- Model "accountable talk" with appropriate prompts and give students an opportunity to practice oral skills.

Social/Emotional Behavior

The adolescent student has trouble staying on task because these are the years that socializing with others becomes increasingly more important. Frequently, misbehavior is encountered by the teacher. Ways that combat this effectively are:

- Appeal directly for better behavior. Speak to disruptive students privately.
- Reinforce positive classroom behavior by giving out rewards, writing positive notes to other teachers about the students or to parents and relating student's good work to the whole class. Have the class establish conduct rules collaboratively.
- Be sure your conduct rules are in agreement with the co-teacher. Collaborate with the co-teacher on consistency in rules and classroom management.
- Use peer mediation to help students control their behavior rather than utilizing deans and administrative support. Use support personnel such as guidance counselors, school psychologists or the special education administrator all of whom may know the inclusion student's history. This will give the teacher better insight into the behavior patterns and reasons for disruptive behavior of the student.
- Model social skills such as friendly greetings to students. Promote character education in the classroom through "Student of the Month" campaigns, newspaper articles, poems, stories and other techniques for teaching virtues.
- Have students assess their own behavior. Monitor behavior with charts and goals.
- Reevaluate room set-ups from time to time. If a student is not getting along with someone in the group or the dynamics are not satisfactory, the student with learning disabilities will have to deal with uncomfortable situations. Any student too shy or fearing bullying from other students may not speak up about uncomfortable situations that could lower self-esteem.

Affect/Motivation

A positive atmosphere may promote motivation to learn.

- Scruggs and Mastropieri recommend positive classroom comments. Try phrases such as "Thanks, I appreciate your trying.", "Great job!", "We are a team.", "Good luck on the tests.," "please don't take offense if I didn't select your work as a model.", and "I'm pleased with your progress." Effort and perseverance should be stressed as part of attribution training.
- Mention goals in reference to setting a good foundation for further study in high school. De-emphasize short term goals such as studying to pass the test.
- Consult with guidance intervention services if you feel that students can't handle the work. Realize that you, the teacher, are part of a collaborative team. Teachers can not do it all.

Basic Skills

 "Basic skills" refers to using strategies such as parents-as-tutors, peer mediation, teacher effective variables, teaching cognitive strategies, de-emphasizing textbooks, modifying class demands as necessary and intensifying any special education as thought necessary.

- Recommend websites to parents. Have a link on your personal school web-site for parents.
- Many times the parents are immigrants and are learning the English language. Teachers could translate homework assignments using a search engine translator and give these translations to the students to bring home.
- Use students to help each other. Usually students receiving help from their peers are attentive to the peer tutor.

- Effective teaching variables include teaching to clearly specified objectives, providing clear directions and guided, independent practice activities, monitoring student progress, timing to ensure relevant academic activites and using active teaching procedures. Model the work with bulletin boards and real life situations.
- Follow up on homework assignments and give students credit for doing them.
- Provide a review of the lesson.
- Build on knowledge with step-by-step procedures.
- Set up "work stations" where different assignments are given and students can self-pace their own work.
- Modify demands of the class by allowing inclusion students to have additional time on tests. Simplify versions of the work for inclusion students of what the general education class is doing.
- Provide opportunities for traditional learning style strengths of visual, kinesthetic or auditory skills as well as teach to the multiple intelligences.
- Review Individualized Education Plans with the special education co-teacher so that effective strategies can be developed to fit the needs of the student.

Study/Organizational Skills

Study and organizational skills have an effect on basic skills and other areas mentioned previously.

- Provide structure with the class period's written agenda for students to follow. Have them copy the agenda into their notebook. Include focus questions on the agenda.
- Provide students with rubrics and other hints for organization. Students should know the criteria for the work.
- Do not give many directions at once.
- Comment on conditions of notebooks and general organization.
- Many schools give students "planners" in which they write assignments. This can give students a sense of organization and to self-monitor their activities.
- Teach effective general study techniques such as note taking, effective highlighting (highlighting tape is a good supply to have on hand and students love using it), ways of preparing for tests, and organizing class notebooks.
- Have students use color-coded folders, enlarged worksheets, broad margins, different color paper, larger text, electronics in the form of spell checkers. Use small whiteboards with markers as are used in elementary grades.
- Be sure that all the desks in the room are arranged so that eye contact can be made with the teacher and students do not have to turn around and rearrange themselves to see the teacher.

Using the suggestions above, individual middle school and junior high school teachers, on their own initiative, can create instructional supports for students that also benefit the entire class.

Questions to Ponder/Discuss:

1. In what ways can the special educator help the general educator to become acquainted with strategies that will benefit many students?

2. How integral should attention, memory, and organization be in academic instruction? What are the benefits of teaching these ideas explicitly?

3. Why is it important to present information in more than one way?

4. What is the difference between utilizing the lower order thinking skills in Bloom's Taxonomy (knowledge, comprehension, and application) and higher order thinking skills (synthesis, analysis, evaluation) in asking questions and planning interactive activities?

5. What are some different ways a middle school classroom could be configured to maximize student learning?

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Section 9: Strategies for Building an Inclusive Culture in Secondary School

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A school that passes over all the students with learning problems, and physical challenges, to a separate special education system undermines its capacity to serve all children well.
(Porter & Richler, 1991)

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  The secondary level is probably one of the most difficult of all settings even in the best of situations. Students are older, hormones are raging and the emerging adult has a million "pressing" things on the mind. Peer pressure is at its greatest at this age and being with the "in crowd" is often most important. Taking the time to include someone with special needs in a group is not a priority for the older teen. Therefore it will be necessary to build an inclusive culture that permeates the entire school in order for inclusion to succeed at this level.

  The goal is a school culture that breaks down barriers, promotes diversity, and teaches tolerance and acceptance. To achieve this, classes are comprised of mixed-ability groupings; most have a combination of gifted students, at-risk students and students with disabilities. This rigorous, individualized approach to student-centered teaching and learning has proven highly successful. Of course this process must start at the top. A principal has to have the vision and commitment to make it happen and follow it through to a successful conclusion. Commitment means generating not only enthusiasm, but following through with all necessary supports and services. One person cannot do it alone. In today's environment where special educators are being blended into the fabric of general education a team approach is necessary. Quality inclusion in a high school setting can only be achieved by the building of an Inclusive Culture throughout the facility. This means, students, teachers, administrators and parents all have to buy into the idea of inclusivity and become members of the team. Team members include everyone that comes into contact with or is responsible for the student's education. Meetings of this team must be held on a regular basis and must be considered important enough that they take precedence over almost all other priorities.

  One of the key factors in building this system is creating a balance among the academic, social and vocational components of the students individualized education programs. A person-centered approach is used in developing each student's program, every semester. Students participate in interviews, assessments, and meetings, where they discuss program and course preferences, career goals and their dreams for the future.

  Secondary level inclusive education programs at PS 811Q's several high school sites, have shown remarkable progress. During the past several years, due to inclusive programming, attendance has improved, curriculum methodologies became uniform and staff decision-making and parent involvement has increased. Transdisciplinary Team Meetings became institutionalized so that all staff working with individual students had input in creating mutual goals and objectives. The parents are grateful for this holistic approach that identifies the most

important areas of focus for their children. The critical components of this program are summarized below:

1. Professional Development: timely, systematic, comprehensive training for all parties, both general ed and special ed, affected by inclusion.
2. Staffing: staff selected with critical collaborative planning skills who utilize various service delivery models based on the individual needs of students.
3. Class Size: flexibility in class size based on individual needs of students with consideration given to optimal proportions of students with and without disabilities.
4. Curriculum: curricular modifications for both the students with and without disabilities that are designed to meet individual needs and to facilitate integration of all students.
5. Phase-in-planning: A plan for increased inclusion of students into the general education program that is systemic in all departments or learning communities.

Models for Staffing

Special Education Teacher Support Services (SETSS): a paraprofessional is usually assigned to classes with students with disabilities. The SETSS provider consults with the general education teacher and paraprofessional to modify curriculum and offer supports for the students with disabilities. The SETSS provider divides his/her time between the various classrooms providing direct service to the student and also tutors the students in areas of need identified by authentic assessments. Previously, in District 75, this was known as the Methods and Resource Teacher model.

Co-teaching or team teaching, CTT: a general education and special education teacher assigned to a class with students with and without disabilities for all or part of the day. (This approach is becoming most prevalent in NYC high schools.)

For inclusion at the secondary level, programs must be developed with respect to student's and parents' wishes, in accordance with long term adult outcomes. Three important considerations have to be addressed in order for these programs to even have a chance to succeed. These are: the needs of the students, the strengths of the teachers, and the teaching styles of those involved.

Inclusion at the high school level is really preparation for transition to the adult world and so the focus should always be, "a full, productive life for all students." Most of us agree that there are six core values that should be taught to every American child: respect, responsibility, trustworthiness, caring, justice and fairness, civic virtue, and citizenship. A culture of inclusiveness at the secondary level goes a long way toward achieving these goals. When we let special education and general education students learn together in high school, the outcomes for all are enhanced. We have observed that students with disabilities are some of the best teachers of core values. They are not part of the problem, they are vital to the solution.

Resource:

A good place to start your exploration of planning in inclusive education at the high school level is to watch a terrific DVD produced by District 75, NYC DOE. This video, titled "Building an Inclusive Culture," depicts the start-up of an inclusive high school. The story of two Principals--a general educator, Nigel Pugh, Queens High School of Teaching, (an Empowerment School) and a Special Educator, Joan Washington, of PS 811Q, District 75. The story shows what can actually be done if the administration is committed to the vision that "All children can learn and all children should have the opportunity to learn together."

Questions to Ponder/Discuss:

1. How much does the success of inclusive classrooms rely upon the collaborative nature of staff?

2. Teaching "tolerance and acceptance" is a phrase that often evokes various responses from different people. How do you interpret this phrase?

3. Mixing "gifted" students with those deemed "at risk" and with disabilities provides an opportunity for all students to benefit. In what ways may this occur?

4. To what degree is the success of inclusive education in a school contingent upon a principal being the "lynchpin" or supporter?

5. Why are ongoing team meetings about students important for their welfare and the culture of the school?

Meeting the Diverse Needs of High School Students with Disabilities

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Varying Instruction

Like any good lesson, an inclusion classroom teacher has to be aware of the students, their needs and how they can benefit each other. It calls for an ability to scaffold groups in ways that mixes the needs and abilities of students so that one person's ability assists with another's need. In other words, groups have to be created in a way that balances need and ability. This is not to imply that group work is the sole way to make it work, it is just one way to solve the needs of a heterogeneous classroom.

- How can group work be a common occurrence and not an exception to the norm?
- How can students be prepared for group work?
- How can teachers support students once group work is set up?
- What are some ways students can be grouped according to choice, interest, ability, and readiness?
- What kind of opportunities can be provided for students to reflect upon and self-evaluate their collaborative work?

Multiple Intelligences

Another way of differentiating instruction can be facilitated using Gardner's Multiple Intelligences. Gardner's theory of multiple intelligences argues that human beings learn in different ways or by different stimuli: verbal-linguistic, visual-spatial, mathematical-logical, bodily-kinesthetic, interpersonal, intrapersonal, musical, and natural. Once given professional development, teachers can have one assignment/project that can be done in different ways. One student may be able to stand and give a verbal report while another may be able to create a Public Service Announcement on the topic and still show that he or she has learned something. Understanding multiple intelligences is essential in differentiating instruction:

- How can the concept of multiple intelligences be discussed and debated with students?
- What are some ways in which they can self-evaluate?
- What are ways that teachers can target two or more ways of reaching students preferred learning style?
- What are ways that students can interact with materials that engage them in their strongest styles?
- What are choices made available to students throughout a lesson in terms of processing information? Can some discuss the issues while others read? Can some watch a short video while others create a mind map?
- In what ways can teachers encourage students to demonstrate their knowledge in a variety of modes (making a list, making a presentation, creating an advertisement, analyzing a document with a partner, etc.)

IEPs

Teachers need to be made aware of the academic and social goals of their students that have an IEP. The teachers will need to receive professional development on how to differentiate

their lessons in ways that challenges the inclusion student without frustrating him/her to a place of not wanting to try at all.

- How can special educators assist in "demystifying" IEPs for general educators?
- How can students be supported by discussing their goals, and making them invested in achieving them?
- How can teachers read IEPs and cull information that is pertinent and useful--and that can be discussed with each high school student?
- How can collaborative teachers keep succinct records of the needs of their students with IEPs--and, more important, use them to benefit their students?

Affective Concerns

How to create a safe learning environment for any inclusion student is an integral part of professional development. We all know that the high school years can be fairly grueling for students without academic or physical challenges, but it can be much more difficult for students with any learning or physical disability. Norms for behavior in the classroom have to be clear and consistent. Insulting others that are more challenged should be understood as a behavior that is not tolerated. Creating a culture of compassion and maintaining it is paramount if you intend to keep the classroom a safe place to learn.

- How can teachers set up the "right amount" of rules and regulations?
- How is taunting and name calling addressed?
- What kind of services can be brought into classrooms to focus on these issues?
- What are some parallels that can be made with other marginalized groups?
- What are some ways in which students can participate in generating rules and class expectations?
- When can teachers build in time for students to respectfully share concerns, thoughts, and feelings?

SETSS teacher

Your SETSS teacher (Special Education Teacher Support Services) is an integral part of the plan. This person can provide professional development to teachers on how to create a successful learning environment for students with IEPs.

- What are some ways in which teachers can interface regularly to share information?
- What kinds of systems can be developed for effective, ongoing communication about supporting students?
- How can effective strategies and methodologies used in the resource room be employed in a larger classroom setting?
- Does staff meet together to case-conference students?
- When do teachers invite each other into their classrooms to observe specific methods and approaches of teaching?

Questions to Ponder/Discuss:

1. How many of the strategies suggested in the middle school section are applicable to high school? Which can be modified, and in what ways?

2. As the grade level increases, the performance "gap" between students also widens. What are some ways to differentiate instruction for students in a multi-level classroom?

3. Given the increase in demands upon high school students, what are some methods that can be used to help students manage time and be organized?

4. What are some ways in which students can prioritize and manage information within the curriculum?

5. What are some ways in which teachers can help students acquire formal test taking skills, and prepare them for exit examinations, and college life?

Section 10: Overcoming Barriers to Inclusion

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Inclusion is not going to work or be effective if it is considered as a *de facto* way of saving money and, as a result, lack of resources and ongoing support to staff, teachers, parents, and students occurs. As educators, parents, and individuals that work with children with special needs, we know that inclusion works when all the parties involved are on the same page. In other words, all individuals involved are valued in terms of ideas, expertise and commitment to the education of <u>all</u> children. The following solutions shed light on how to overcome common barriers that affect the successful implementation of inclusion programs.

Barrier I
Planning and creating a vision for inclusion programs by the individuals involved is poor, erratic or non-existent. Lack of planning that:
- includes all stake holders namely, administrators, staff (teachers, service providers, paraprofessional educators, secretaries, custodians, bus drivers), students, parents and the community.
- leads to clear vision/mission, ongoing assessment and obstructs flexibility in practice.
- recognizes change as a process.

Solution(s)
Planning a Vision
The leadership establishes a planning process that involves all stakeholders, and takes into consideration the skills of the stakeholders and the history, structure, and culture of the school. Planning is crucial for creating and maintaining a vision for the program.

- *Plan meetings with the all the stakeholders, preferably at the beginning of the school year to ensure that all parties know each other and the children involved in the school's inclusion programs.*
- *Establish regularly scheduled meeting times to keep abreast of activities and developments in the program.*
- *Review the existing planned schedules and evaluate their effectiveness.*
- *Negotiate a schedule that works well for your program's practices, the staff, faculty, parents etc. and most important, the children.*
- *Create effective and open communication lines via technology. Emails can be used for updating children's progress, and to share information with all of the stakeholders.*
- *Identify the needs of school personnel in terms of materials, equipment, curriculum (what to teach, and how to teach), people, space, and technology.*
- *Assess resources and support systems available in the school, school district and the community.*

Barrier II
Lack of Support for Inclusive Practices
- Administrators do not schedule time to work and collaborate with all members of the

team.

- Professional development is not ongoing and or does not address the identified needs of the staff, for example: classroom management, collaboration and inclusive instructional approaches.
- The inclusive practices chosen do not take into consideration the input of all stake holders.
- The concerns of all stakeholders are inadequately addressed, for example, knowing who the children with IEPs are, and being supported in addressing the needs of these children.

Solution(s)

Ongoing Professional Development
Professional development needs to be a high priority in all inclusive programs.

- *Assess the beliefs and attitudes toward inclusion of all stake holders (students, parents, teachers, administrators, service providers, support staff, custodian, bus drivers and secretaries).*
- *Make decisions based on the expertise, philosophy, and preferences of the parties involved. For example, co-teaching teams have to be decided with the input of all personnel involved.*
- *In light of the vision, clearly specify the roles and expectations of teachers, parents, students, support staff, related services providers, and administrators within a collaborative partnership. More important, relationships develop through mutual respect, trust, support and the sharing of knowledge regarding children's needs.*
- *Time for preparation, planning and collaboration among all members of the different teams must be scheduled during school time and sustained throughout the school year.*
- *Ask school personnel to identify their needs and respond to the needs with ongoing professional development that draws on the strengths available in the school and brings expertise from outside, for example, consultants, mentors, etc. .*

Barrier III

Lack of Ongoing Assessment and Evaluation

- No ongoing assessment that leads to change/restructuring when needed.
- Emphasis on standardized assessment rather then authentic assessment that guides teaching.

Solution(s)

Systematic Review of the Inclusion Community: Students, Staff, Program.

- *Evaluate the results of the change in program plan/vision.*
- *Incorporate the assessment to ongoing change when needed.*
- *Delegate a plan of action for change involving all stakeholders; for example, when faced with potentially losing funding and not having adequate resources for maintaining program management.*
- *Evaluate the impact on the differentiated flexible instructional approaches, instructional planning, and parents on students' learning.*

A successful inclusive program requires identifying a vision, planning, valuing and including everyone's expertise, launching collaborative partnerships among all of the parties

involved (educators, parents, service personnel, administrators, etc.), designing and implementing systematic professional development for all personnel involved, and committing to the philosophy of inclusion. Collaboration is the adhesive that binds the process of inclusion. Collaborative partnerships are essential for creating and sustaining insight, ideas and strategies that work in inclusion programs. It is highly recommended that the stakeholders involved reach out to one another and share what they can offer to the daily operation of inclusive programs.

Questions to Ponder/Discuss:

1. What are some barriers that stand in the way of increased inclusion in your school? What may be some ways of overcoming those barriers?

2. In your opinion, how important is it to have a clear school statement articulated about embracing student diversity, including students with disabilities?

3. How can a community among staff members be cultivated with a view toward sharing best practices when instructing a diverse body of students?

4. In what ways can professional development be "in the context" of the inclusive classroom?

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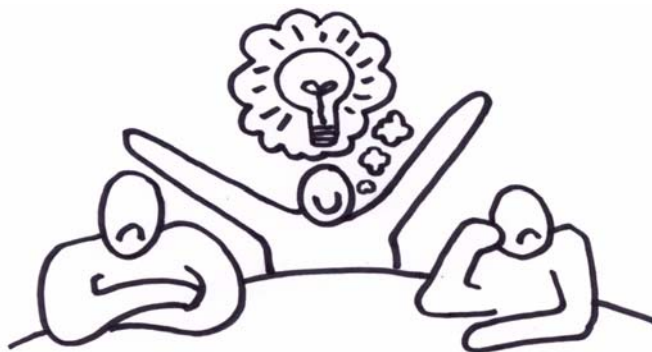
Section 11: How Related Services Can Support Inclusion

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The Provision of Integrated Educational and Related Services

Related services such as speech-language pathology and audiology, psychology and counseling, physical therapy, occupational therapy, and social work are an integral component of an inclusive program. Integrated Educational and Related Services ("Integrated Services") refers to the incorporation of educational and therapeutic techniques employed cooperatively by educators and related services providers to assess, plan, implement, evaluate and report progress on a student's educational needs and goals. The delivery of integrated services requires a high degree of collaboration and sharing of information and skills among families, educators, and related services providers (TASH[3], 1992).

The provision of integrated services is achieved by:

1. Establishing Individual Education Program (IEP) priorities with parents and other team members;
2. Observing and assessing students in natural settings;
3. Collaborating with family and team members to provide intervention strategies and adaptations that optimize student participation in natural settings; and
4. Evaluating the effectiveness of intervention procedures based on student performance in natural settings.
   "Integrated services" refer to the entire spectrum of service delivery. It is different from the popular term "push-in therapy."

Integrated Services is…	*It is not only…*
• Providing services in natural environments	Providing services in the classroom
• Evaluating, planning, and addressing the student's needs in a collaborative team	Telling the teacher about the student's therapeutic experiences
• Addressing the student's needs during ongoing school and classroom activities	Coordinating school-wide and/or classroom activities that address a variety of general goals e.g., sensory-motor groups during gym

The law is very specific about the role of related services in schools. It is *assuring the student's ability to participate in the educational process.* It is NOT about reducing impairments. As legally mandated, related services providers are obligated to provide educationally related services and may treat student's impairments ONLY if those impairments are educationally related.

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[3] TASH is an acronym for The Association for (Persons with) Severe Handicaps, an organization founded in 1975.

The primary responsibility of related services providers is to work collaboratively with other team members to assist students receiving special education to benefit from their educational program. This means that teachers and related services providers must create and put in place supports for students so the students can better participate in school and class activities.

1. Each student's IEP goals should be functional and immediately useful.
2. Instruction and related services supports should be embedded in ongoing classroom routines and activities.
3. Instruction and related services supports should occur in the student's classroom, or other natural environments e.g., bathroom, playground.

Evaluation

Student evaluations should be conducted in the student's natural learning environments, and should focus on the barriers to learning and participation. This means that related services providers must look at how the student's sensory, motor, and perceptual skills, language and communication skills, and adaptive behavior provide a foundation for or impede learning. Related services personnel are responsible for identifying limitations and dysfunctions, but they filter their evaluation findings to address only those areas of deficit that prevent the student from participation in his or her educational activities.

Readers of related services providers' documentation e.g., an evaluation report, consist primarily of parents and educators. For this reason, terminology used in reports should be non-technical, or if technical terms cannot be avoided, they should be carefully explained and clarified in the report. Content of the report should include information that pertains to the student's participation in his or her educational activities.

Instead of…	*Use…*
• ADLs ………………………………….	Personal care use
• BUE AROM …………………………...	Ability to move both arms
• Bilateral motor coordination ………….	Using both hands together
• LUE, RUE ……………………………..	Left arm, right arm
• Tactile defensiveness …………………	Sensitive to touch
• Tongue lateralization ………………….	Tongue movements
• MNL	Normal

Planning the IEP

In collaboration with the family, the team (not the related services provider), selects IEP goals. Decisions are made about which service providers will support each of the educational program components. This includes specific recommendations as to the location, frequency and duration of supports. Best practice is for frequency to be designed as a range, e.g. 2-4 times, and duration in terms of minutes per week, e.g., 45 minutes per week and composed of 15-minute intervals, i.e., 15, 30, 45 or 60. When the frequency is articulated as a range, the needs of the student and the specific goals being addressed during a specific time can be individualized. The following is an example:

Occupational Therapy 1-3 times per week for 45 minutes - This enables the occupational

therapist to work with the student in one 45-minute block (3 x 15 minutes at one session) which may be appropriate for fine motor goals during writing time, or three 15-minute blocks which are appropriate for a goal such as taking off a coat.

Criteria for Selecting IEP Goals
- *IEP goals are functional.* Attainment of the goals allows the student to be independent within his or her daily environments. Functional skills allow the student to perform actions or activities that would otherwise have to be completed by others.
- *Priority goals are generalizable.* Priority goals should address skills and information that can be appropriately used across settings, events, activities, people, and materials.
- *Priority goals are observable and measurable.* Priority goals should address skills that can be seen or heard and, therefore, counted in term of frequency, latency, or duration. Team members should be able to agree that the skill did or did not meet the stated criterion.
- *Priority goals are addressable.* Priority goals address skills that can be easily targeted within the student's daily routines, e.g., during art activities, while eating snack, by teachers, therapists, and caregivers.

Instead of…	*Choose…*
- Learning to label pictures in a book	Learning to request a variety of objects
- Increase motor, social, or communication skills	Learning to self-feed
- Insert pegs into a pegboard, manipulate blocks	Reach, grasp, and move utensils
- Insert puzzle pieces, walking on a balance beam	Learning to open doors, climb steps, and turn faucets

Determining the Need for Related Services
Not all students with disabilities "need therapy." As part of the process for planning a student's educational program, the team determines the intervention strategies that can best achieve the desired outcomes for the student. If the expertise of a related services provider is required, decisions are made about the best methods and styles of interaction for utilizing the related services provider's expertise. The following questions should be answered:
- What is the educational program and curricula for the student? What are their demands on the student? Can the student participate in his or her program?
- What classroom supports are in place, e.g., visuals, environmental cues?
- Are the supports meeting the student's educational needs? If not, is related services provider's expertise required to provide the needed support?
- What strategies and solutions can the related services provider offer the student, the teachers, and others?
- What intensity of services is needed from the related services provider, e.g., time, frequency, duration, location?

Ongoing Intervention and Service Delivery
There are variations in descriptions of *models of service* for related services. McWilliam (1995) recommends the following:
1. *Consultation* – the related services provider provides training and adaptation strategies to teacher to address the student's needs.
2. *Working with individual student during routine activities* – the related services provider addresses the student's needs while the student is engaged in classroom activities.
3. *Group activity* – the related services provider collaborates with the teacher to deliver a group activity that addresses the needs of several students.
4. *One-on-one in the classroom* – the related services provider works with one student in the classroom and addresses the student's needs apart from the classroom activities.
5. *Small-group pull-out* – the related services provider provides a group session to several students in a designated therapy room.
6. *Individual pull-out* – the related services provider conducts a therapeutic session with one student outside of the classroom.

Best practice in inclusion means that consultation, individual student during routine activities, and group activity should be tried first. A one-on-one in a classroom setting should only be used when absolutely necessary. Pull-out should be avoided. When deciding on the type of model, consider the following:
1. How can the student's goals be addressed in classroom routines?
2. How can the specific techniques used by the related services provider be used in classroom routines?
3. What classroom characteristics would enhance or impede the related services provider's intervention?
4. How effective would each model be for the student?

Benefits of providing consultation and "individual-during-routine"
- When providing consultation and "individual-during-routine," the student does not have to generalize from an isolated setting to one with distractions and ongoing activities.
- The activities performed during therapy are accepted as a more normal part of the student's routine rather than an isolated activity that occurs once or twice a week only when the related services provider is present.
- When therapy sessions are conducted in the classroom, teachers and teaching assistants are able to see what the related services provider is doing and will then be better able to incorporate the same goals into classroom activities when the related services provider is not present. This provides a natural teaching session for the related services provider to instruct other team members on special techniques to use with individual students.

All activities requiring professional time, knowledge and experience that also reflect the student IEP goals and/or programs are considered a "treatment session." The following represents examples of such activities on behalf of the student:
- Working with the student directly
- Modifying the home or school environment
- Parent training and consultation
- Working with the teacher and/or other professional to identify or model effective strategies

- Developing routines for daily implementation
- Contacting a physician or outside therapist about a student's physical or mental health
- Reevaluating student needs

Successful implementation of integrated services means that all students in the classroom participate, learn, and thrive. Before you develop, implement, and evaluate a plan for a student remember that there are no hard-and-fast rules. Every plan is dependent on the student, his or her priority goals, and the classroom. Every plan is a team decision. Use collaboration and problem solving skills.

Questions to Ponder/Discuss:

1. Why is the language that we use about disability and related services important? How can we make sure that language is not "professionalized" to the point where it denies access to parents and even our own colleagues?

2. What are some of the benefits of providing related services "in context" instead of in separate settings?

3. How are some students' needs for related services explained to, or discussed with, children who do not need the services?

4. In what ways can classrooms be configured to accommodate students with severe disabilities?

5. What are some deep-rooted fears and attitudes of adults in relation to working with students who have severe disabilities? How can we create an environment in which these issues be openly and honestly discussed?

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Section 12: Parent Perspectives

Mary Beth Fadelici & Ellen McHugh
Parent-to-Parent

If, as the parent of a youngster with a disability, I were to walk up the steps of a school today I would find a very different world than I did 25 years ago. In 1982, when my son was to enter kindergarten we were scared. No school in our neighborhood was educating students who were different. Different kids went to different schools: far away schools; schools that I couldn't reach; schools that clearly didn't want much in the way of parent input. Schools that had different etched into the stone on the building. Schools that shouted DEAF, BLIND, MENTALLY RETARDED. School staff that we talked with told us that communication would occur through a notebook and that school visits were limited. This was my five-year-old son. How could I blindly leave him with people who were strangers to me and to him?

Things have changed; in some ways for the better. Things have stayed the same; in some ways to preserve institutions. In either case, parents of children with disabilities have many more choices than ever before. In New York City parents can be presented with a dizzying array of classroom options: Collaborative Team Teaching, full inclusion, mainstream, self-contained classrooms and related services are regularly offered to parents of students with disabilities. From this array of options parents make choices based on the best available information they can uncover.

This generation of students has been living inclusion for the past decade. Students with disabilities are educated with their peers in general education classrooms. In some schools the inclusion program is a social inclusion programs and students share in assembly productions or musical and art performances. They are accustomed to lower water fountains and accessible bathrooms. Curb cuts, ramps and accessible parking spaces are matter of fact for them, their classmates and their teachers. Today's technology… IMs, computers, text messaging and cell phones…has created unique opportunities for students to communicate. This is the interaction that leads to an invitation to a birthday party, a field trip, a play date. In short, the life we want for all our children.

But questions about inclusive education still bounce around the parent communities. What is inclusion? Who defines inclusion: parents, staff, teams? Where can a parent see an inclusion program? Does my local school have one? Will my child have to travel? Do teachers in this school believe in inclusion? What training do the teachers have? What is the philosophy of the principal, the school leader? Does the parent have a choice within schools? Do I, as a parent, feel my child would benefit from an inclusive program?

So many stereotypes can be broken down by understanding and communication. There are many ways and many people who want to give children the best possible educational experience. It is imperative on our part to provide people with the information that can bring about positive action for a positive benefit.

Why I Chose Inclusion (and Why I Rejected it for My Own Son)

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Teacher, P.S. 333:Manhattan School for Children &
Adjunct Professor, Hunter College, CUNY

I am a special educator in a third grade Collaborative Team Teaching classroom. Of the 21 children in the class, eight have IEPs. Our children have diverse learning needs ranging from mild visual processing and graphomotor deficiencies to dyslexia to cerebral palsy with severe speech and motor impairments.

What I appreciate most about our model of inclusion is that it is largely invisible. Although we are known as the "classroom with the two teachers and the children in wheelchairs," our students have no awareness of who does and who does not have an IEP or that one of their teachers is a special educator. My co-teacher and I work as partners throughout the day. We both plan and teach all subjects and we take turns leading whole class instruction. We both work with all the children in both large and small groups. While I started the year with more expertise in instructional technology and remedial learning strategies and my co-teacher has much more experience in third-grade curriculum, we have learned from each other and continue to train each other so that we both feel comfortable playing multiple roles.

I believe our classroom is successful because each child is a full and authentic participant. We constantly think about the accommodations and modifications that will make the general education curriculum accessible to all children. I have seen that even our children without identified special learning needs benefit from this supportive learning environment.

However, I do believe there are limits to the CTT model. I would never put my own son in such a classroom. Matthew is severely autistic. In order for him to cope with a classroom with typically-developing peers, he would need a one-to-one paraprofessional with him at all times. Each moment of the day would be spent helping him cope with the demands of an ever-changing classroom. There would be little time left for the learning he needs. In my opinion, a CTT classroom should be reserved for children who would benefit from genuine engagement with a general education curriculum. It is not appropriate for children who would need a curriculum that is wholly different from the general education curriculum. In such cases, we would be running a mini-special education class *inside* of a general education classroom where the children with special learning needs work alongside the other children but don't work *with* their classmates. This is not inclusion but rather *insertion* – a "bubble" of special education that happens to be physically located in a general education classroom. Instead, authentic inclusion is a community of engaged learners. The tools and the style of instruction may vary from child to child but at the end of the day when parents ask, "What did you learn in school today?" all children can give the same answer.

Questions to Ponder/Discuss:

1. In your opinion, should inclusive classrooms mean students with disabilities remain "invisible"? Or, on the contrary, should disability be "visible"? What are arguments for each side?

2. What is the benefit of team teaching for collaborating teachers? As professional educators, in what ways can they continue to learn?

3. How much input can/should parents have in deciding the placement of their child with a disability? How might LRE be "in the eye of the beholder"?

4. Sometimes parents of a child with severe autism request that their child be fully included. Other times, parents of a child with a mild learning disability request that their child be educated in a separate setting. How do these situations represent some of the complexities involved in inclusive education?

5. Should all students be able to answer the question "What did you learn in school today?" in a similar manner--or is there room for different responses?
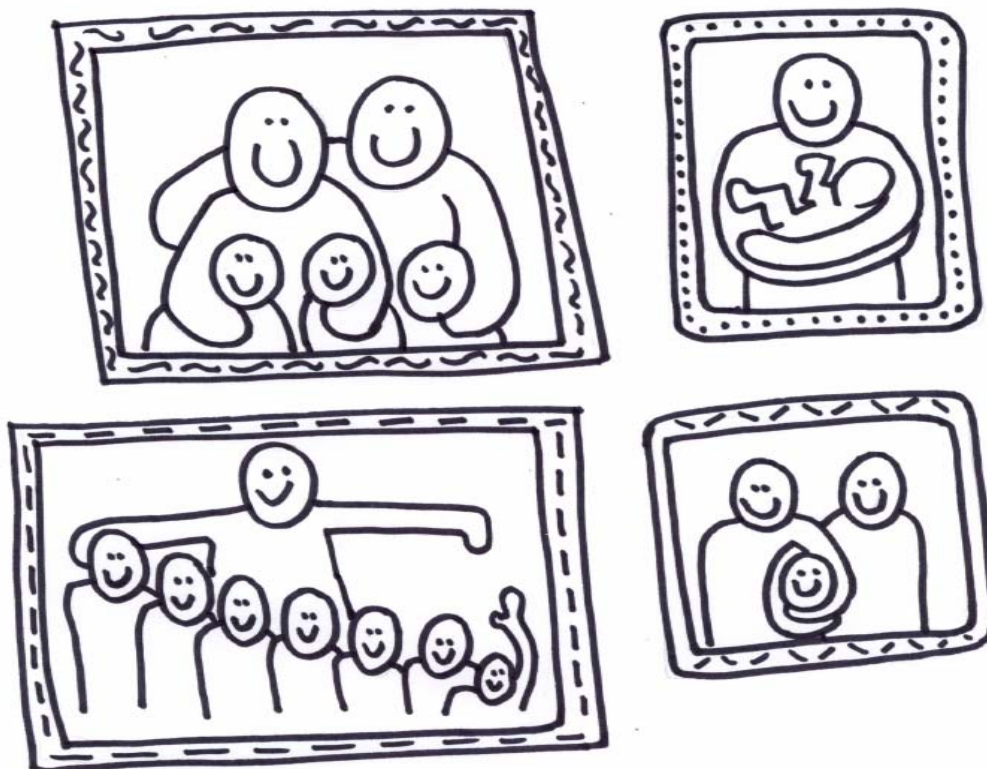
Section 13: Collaborative Team Teaching

Student Voices

* Definition of Collaborative Team Teaching (CTT): Classrooms with collaborative team teachers are organized around the principle of a special and general educator working together to ensure a quality education for all students. It is an option on the New York City's Department of Education's Continuum of Services.

Q. What advice would you give a student going into a CTT classroom?

- *Having two teachers is fun because if one of your teachers is busy, the other teacher comes and helps you out. Oh, and also remember they're like your parents so behave and follow the rules.*

- *The advice I'll give them is behave good, watch out. You need to watch out because if one teacher is teaching, the other teacher is checking if you are paying attention and if you are learning.*

- *It is a good thing to have two teachers because you get more help.*

- *1. Behave good. 2. Listen. 3. Do all of your work. 4. Always come early. 5. Keep the room clean. 6. Do not disrespect teachers or others.*

- *…listen carefully if they're talking to you and pay attention to what you're doing.*

- *I'd tell them to just chill and relax.*

- *Work hard, behave good, don't fight or argue with someone.*

- *Two teachers is better than having one because if you did not understand the question they could go to you and help you. And if you only have one teacher in the classroom and seven students have a question it will be hard for her because she is by herself.*

- *The advice I would give them is to enjoy. Having two teachers is awesome. You learn twice as double.*

- *…not to mess around because they will catch you. And if you need help you can ask any of your teachers. The difference of having two from one is you always have a teacher to look up to and ask a question.*

- *Be good.*

- *1. Try your best at everything (work hard). 2. Listen to the directions that you are given.*

- *It is fun having two teachers because if one is working with a child, the other teacher can go to your desk and help you and then you can keep on doing your work.*

Q. How is having two teachers different from having one teacher?

- *Having both teachers is cool because both teachers can look at you and could teach the students in class. Or, the other teacher could do something in the classroom or help the other teacher. Having one teacher is not good because if the teacher is teaching, the teacher can't look at you to check if you are learning.*

- *It is difficult for one teacher to teach a whole class because all of the students need help so I would say that having two teachers is enough.*

- *For me, two teachers is better…they just could take turns teaching and helping each other.*

- *You have two teachers to help in math, reading, and writing.*

- *When you have two teachers you don't get away with a lot of things because the two teachers can catch you easily. If one teacher is absent, the other teacher is going to be there, and you get the work you were supposed to do, and you get homework.*

- *The difference between having two teachers of having one teacher is that you can get smarter than you think. Another reason it's better to have two teachers is because if one does not understand the problem, maybe the other teacher might get the problem.*

- *The difference is that you learn triple. The two teachers have different strategies to pass or understand something.*

- *One teacher has to plan everything by him or herself, but two teachers don't.*

- *You get more help than the other children that have only one teacher.*

- *Having two teachers is helpful because if you need to use the bathroom or drink water and you can't because the teacher is teaching, you can't interrupt. So you can ask the other teacher.*

- *You get extra help in whatever you need.*

- *Having the other teacher work with a single teacher is the best thing that can happen to a teacher because all that pressure that a single teacher has is awful. But when a new teacher comes to help the other teacher won't have to carry all of the stuff.*

- *It's cool having two because two heads can think of many good fun things.*

- *They could have more team spirit.*

- *One teacher…well when I had one teacher it was hard because the teacher's with a child and then I need to tell her/him something and I can't, so I find it's better to have two teachers. This is my first time with two teachers and it's pretty fun and also you always get into trouble because there's two, and they can find out. Also if you don't understand something, one of them can look at it.*

Q. What advice would you give the teacher?

- *The advice I'll give them is to watch out for your students and make sure your student's paying attention and learning.*

- *If I had two teachers I would say, "Work like a team and help the students."*

- *I would get the two teachers to work hard so the other students could learn more.*

- *I would tell the teacher, "If you have any kind of problem with the other teacher you have to compromise with the other teacher."*

- *I will tell a teacher to be as friendly as possible, for you could become a friend with the teachers and maybe trust them. You may even not think as much as before because you are going to have two brains that could share ideas.*

- *Never be an only teacher because it is too hard. Stay with another teacher because if you don't understand something, the other teacher could help you.*

- *Just don't do anything crazy.*

- *It is good working with a partner because if you need help with something, the other teacher will take over.*

- *1. Get along with each other. 2. Agree with each other. 3. Work with each other as teams.*

- *It could be annoying because they could be talking while you are teaching.*

- *If you are a new teacher you could ask questions to the teacher that has already experienced having two teachers.*

- *My advice for the teachers is to work together. Don't matter what, and to protect their children now that the kids are part of them.*

- *Talk to the other one before you do something.*

- *Work as a team and never quit.*

Section 14: Students with Disabilities and Statewide Tests

Gloria Wolpert, Ed.D.
Manhattan College

Since *No Child Left Behind* (NCLB) (2001), the push for uniform standards has changed the accountability system in education. Instead of examining student-teacher ratios, graduation rates, or per-pupil expenditures, schools are now judged by student performance on city-wide and state-wide assessments. It is no longer a question of where in the school systems the children are going, but what and how they are learning, a philosophy known as the "second generation" of inclusion.

The push for inclusion of diversely-abled children in the general education setting has evolved into inclusion in all assessment data, as mandated by Title 1 of the Elementary and Secondary Education Act (2002). Inclusion in testing is the way to ensure and monitor access to the general education curriculum, and encourage high expectations of students with disabilities. Inclusion in assessments shows how students with disabilities benefit from educational reforms, and documents an accurate portrayal of their inclusion in general education systems. It also enables the federal government to make comparisons of inclusion among districts and states. Previously, from 33% to 87% of students with disabilities in varying states have been excluded from state-wide testing, which resulted in disparity in funding, and fostered "cheating" within districts. Even though labeled "included," some schools would retain students with disabilities in lower grades so that they would not have to take the tests, and many more students were referred to the special education system, which was allowed to take alternative assessments, so that they would not depress district or state scores. More recently, Title 1 set criteria that allowed only 5% of a district's students to take alternative tests. In addition, the National Center on Educational Outcomes suggested that only 2% of students in districts be excused from the city-wide and state-wide testing. However, this is likely to change back to a higher amount (as much as 30%) with the next reauthorization of NCLB. The bottom line is that, to date, there is no other way to monitor, enforce, and evaluate the success of inclusion of students with disabilities in the general education classroom and curricula. Thus the testing process and data serve to support and mandate the philosophy of inclusion.

Questions to Ponder/Discuss:

1. How does a history of having test scores of students with disabilities "not counted" reveal the value placed upon citizens with disabilities?

2. Unintended consequences of *No Child Left Behind* include the holding back of students who do not perform to the specified level and the exclusion of low scoring students to schools. What implications does this have for students with disabilities and inclusive education?

3. What are some of the tensions, paradoxes, and conflicts within *No Child Left Behind* as it relates to students with disabilities?

Section 15: Students with Disabilities Transitioning into College

Matthew Joffe
LaGuardia Community College, CUNY

For teachers and support staff who assist students in the transition from high school to college, here are some tips to help prepare them:

- Unlike high school, there are no special education classes in college. All information about students is kept confidential. It is the student's responsibility to communicate with family members.
- Remind your students that they may receive different services in college than they did in high school. It is essential to meet early with college staff to establish reasonable accommodations.
- Make sure they have copies of all of their CSE diagnostic reports, including the latest triennial evaluation. Documentation should not be more than three years old. If other outside reports exist, make sure they have copies of them.
- It is important to stress to them that an IEP is useful, but it is NOT a substitute for the CSE reports described above.
- Encourage your students to begin "shopping" for a college as soon as their junior year. Have them take advantage of college tours and orientation programs and meet with the disability programs staff. Not all programs are alike. Let them know not to be afraid to ask questions.
- Frequently, there is an entrance exam (ACT), in reading, writing and math to take to determine whether you can start with remedial or college classes. If your students score 75 or better on their Math and English Regents, or, if they get 480 or higher on the Verbal and Math parts of the SAT, they will be exempt from all three (3) tests and they can take credit classes immediately. They must have these scores in writing. Both CUNY and SUNY schools use the ACT and accept ACT or SAT scores.
- Students need to understand that they are responsible for paying their bill and attending courses. No one will call them if they are not going to class.
- Emphasize the importance of filing their financial aid application (TAP and PELL) as soon as January of the year they are they are planning to attend.
- Many colleges have direct admissions. Students who are late in applying or must attend summer school, may still apply directly at the college to save time.
- Reinforce the importance of keeping copies of their immunization records. They are required for admission to college.
- Help your students secure an official copy of their transcript, sealed in an envelope. This must be submitted to the college along with their actual diploma, which will be copied and returned the same day.
- College services offer academic, career and personal counseling as well as readers, note takers or the use of assistive technology. Tutoring services vary based on the college attended.
- Community colleges provide opportunities to study vocationally oriented majors, giving students the choice to work right away after getting their degree or go to a senior college. For many students, beginning at a community college can be quite beneficial. Students can strengthen their basic skills, select a major that is right for them, and develop study habits and strategies that will help them succeed in a senior college.

Inclusion at the College Level

Dianne Zager, Ph.D., PACE University,
in collaboration with
Dania Cheddie, Principal P.S. 226,
Shelly Klainberg, Inclusion Coordinator, and
Teri Buch, Special Education Teacher

Educators agree that, with appropriate supports and planning, students with significant disabilities can succeed in post-secondary inclusive settings. We recognize that all students have the right to attend classes with their nondisabled peers. Yet, we continue to place 18 to 21 year-old students who have severe disabilities in high schools, even after their chronologically age appropriate peers have all exited these settings. With thoughtful collaborative planning, we can expand post-secondary options for students with disabilities, to include college-based programs so that these students can continue to be educated alongside nondisabled students.

Pace University's New York City Campus, in partnership with P 226M of NYC District 75, has developed a campus-based inclusion class (CBIC) for students with autism and cognitive impairment. The students in this class have demonstrated that individuals with severe disabilities can succeed on a college campus, and that they can grow and develop beyond what would have been likely in their high school settings.

In order to prepare students for an inclusive college-based experience, certain skills and behaviors should be developed in inclusive high school programs:

- Travel training: District 75 provided travel training to the students who would be attending the campus class. All of the students in the class are able to use New York City public transportation.
- Self-determination: Students in the CBIC are encouraged to select their own courses, vocational preparation worksites, and recreational activities.
- Communication: The students are able to request assistance and engage in conversation.
- Social interaction: The students are able to work cooperatively (at their particular level) with others.

In addition to focusing on specific student skills that enhance the likelihood of success in a more independent setting, the teacher of a campus-based inclusion class needs to possess certain skills and dispositions as well, especially in the area of collaboration. He or she should be able to supervise paraprofessionals in a variety of locations, guide and direct students in a manner that fosters independence, interact with university personnel to fit into the campus community, and advocate effectively for students in order to identify and obtain desired courses and job training opportunities. Finally, administrators from both the secondary school program and the university need to be flexible and able to work collaboratively.

Questions to Ponder/Discuss:

1. How do the schooling experiences of students with disabilities prepare them for opportunities beyond high school?

2. What kinds of services must colleges provide to students with disabilities?

3. In the words of Syracuse University, why is it important to foster a cultural climate that considers disability as an integral part of human variation, and considers it as something "Beyond Compliance"?

Section 16: New York City: A Snapshot

David J. Connor, Ed.D., Hunter College, City University of New York

Recently Thomas Hehir, former director of the Office of Special Education Programs, U. S. Department of Education, and current director of the School of Leadership Program at the Harvard Graduate School of Education, led a team of researchers to evaluate how well New York City schools provide special education services to students with disabilities (Hehir, et al., 2005). The following is a selection of statistics from 2003-4 that provides a glimpse into a highly complex system, allowing a demographic snapshot.

Number of students
- New York City is the largest school system in the U.S. serving over 1.1 million students
- 11.1% of student population (137, 930) are certified with a disability and receive special education services
- Students labeled LD constitute the largest group with 46%, students labeled Speech and Language Impaired constitute the second largest group with 24%, and students labeled Emotionally Disturbed constitute the third largest group with 13%. Together, these three subjective "soft" categories (more likely to include subjective judgment by professionals) constitute 83% (almost 115, 000) of all students labeled disabled.

Segregation
- 49% of all students with disabilities are educated in general school buildings and spend less than 20% of their school day outside regular class and 40% of students with disabilities are educated in the same buildings but spend 60% or more of their school day pulled out of their regular classroom
- There is a separate citywide district for students with moderate to severe disabilities called District 75 in which 13% of all students with disabilities are placed
- The percentage of students with disabilities in NYC who spend less than 20% of their school day outside of the regular classroom (49%) is similar to state and national averages. However, only 1% of students with disabilities in NYC spend between 21% and 60% of their school day outside of the regular classroom (compared to New York State 12%)
- 41% spend more than 60% of their school day outside the general class (compared to 29 % in Chicago, 33% in Los Angeles, 27% in New York State, and 19% in the rest of the nation).

Graduation and drop out rates
- 45% of students with disabilities do not graduate from high school
- 28% of students with disabilities graduate with a local or Regent's diploma[4]

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[4] There are three types of diploma in New York State. The most prized is a Regents Diploma. A Regents diploma was once seen as an option for a privileged few. It is defined by a specific course of study that results in a series of five rigorous mandated examinations in English, math, social studies, U.S. history and government, and science. However, in the climate of raising standards and increased accountability, nowadays *all* students are required to graduate with a Regents diploma. Formerly, a "local" diploma meant the majority of students took Regent Competency Exams (RCTs), a series of less rigorous exit examinations. Considered inferior and of a much lower standard than Regents exams, RCTs have been maintained *only* for students with disabilities. Therefore, students with disabilities who cannot pass the Regents examinations but can pass the RCT exams are awarded a "local" diploma. The third category is an IEP diploma, for students with disabilities who are completed twelve grades of schooling and a full course of study, but are unable to pass *all* of the RCT exams (reading, writing, math, social

- 27% of students with disabilities graduate with an IEP diploma (1 in 4 graduate with a 'regular' diploma)

  Budget
- New York City spends 25% of its education budget on special education (compared to 14.9% in Chicago and 9% in Los Angeles)
- Students with disabilities in New York City perform slightly better on standardized tests than students in Chicago or Los Angeles. For example, in the 2003 National Assessment of Education Progress (NAEP) 2003 in Reading for fourth grade students, averaged results on a scale of 300 reveal New York scored 181, Chicago 163, and Los Angeles 167. Similarly, in the fourth grade NAEP examination in math, New York City scored 203, Chicago 194, and Los Angeles 198. However, New York City scores are still lower than average for all students with disabilities in the state and the nation (reading 193, 185 respectively; math 227, 225 respectively)

The 116-page report that listed these (and many other) statistics also offered a systematic and constructive critique of the current special education system. At the heart of their findings, Hehir et al. (2005) observed that despite major changes in legislation and the growth of the inclusion movement, there exists continued segregation of students with disabilities and a paucity of inclusive classrooms. In calling attention to this phenomenon, Hehir et. al suggest that the deficit-driven, medical model conceptualizations of disability held by educators and administrators actively contribute to limiting the growth and support of inclusion.

Limitations of the medical model

Hehir et al. (2005) call attention to "…the inordinate reliance on medical model service delivery systems can compromise the interests of children with disabilities" (p. 13). They go so far as to challenge service classifications, and call attention to the limitations of the medical model noting, "The provision of special education related services under the medical model may give the inappropriate impression that the disability is being addressed when in some cases these practices may actually exacerbate the impact of the disability" (p. 14). Hehir et al. note the detrimental effects of using the word "clinical" in many special education procedures and documents, as this "…reinforces the notion of the medical model of disability that is deeply ingrained in special education practices in NYC" (p. 30).

The instruments that form the foundation for decisions to label and place students are also challenged:

> A review of more than 50 diagnostic reports of students with disabilities in NYC clearly shows that standardized tests are at the heart of the progress in NYC, as would be consistent with the medical model. The primary focus of these reports is test scores. Interpretations of what is 'wrong' with students flow from these test scores and seldom give much weight to factors related to opportunity-to-learn, cultural differences, English language proficiency, bilingualism, or current instructional experiences (p. 54).

In this particular finding not only is the medical model challenged, Hehir et al. stress the beneficial aspects of using a team-model of problem solving advocated within the Individuals with Disabilities Education Act (IDEA) rather than leaving decisions to a few special education "specialists." Furthermore, while not explicitly stated as such, Hehir's listing the impact of the

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studies, science, U.S. history and government.) Having three types of diplomas often causes confusion, particularly to students and families who do not realize that an IEP diploma is more of a symbolic certificate of completion.

social, cultural, and environmental factors on learning, strongly suggests the value of a more holistic reframing of disability, compatible with a social model. A social model of understanding disability views disability as natural human variation, *not* as disorders, dysfunctions, and pathologies.

Funding

The cost of special education is very high, responsible for one quarter of the education system's budget. Part of this expense is attributed to funding so many segregated placements. Hehir et al. note that, "This practice of moving large numbers of students with disabilities out of their home schools to receive special education services is not only educationally questionable but it is costly and unnecessary" (p. 13). In addition, over one-third of the special education budget is being spent on related services such as counseling, speech and language services, occupational therapists, as well as on psychological-based evaluations, *more* than on teachers, leaving Hehir et al. to conclude that the system is bureaucracy driven.

Despite services being guaranteed, they are not always available. For example, in September 2004, 41% of students with disabilities waited for related services such as counseling, and this number dropped down to only 24% by December and January 2005 (p. 42). Furthermore, the *Manual of Standard Operating Procedures* serves to illustrate the labyrinth of bureaucratic processes, described as "extremely detailed and not reader friendly" (p. 47), with almost 100 different forms, 9 relating to notice for placement recommendations alone. Thus, the availability of services on paper, but their lack of provision and effectiveness, verify the historically multi-layered and inefficient bureaucratization of special education chronicled by Skrtic (1991a, 1991b, 1995).

Persistently high rates of segregation

Segregation according to disability is still commonplace. Hehir et al. (2005) note that "Students with disabilities are overly segregated in special education classes and programs, despite the existence of a few promising, yet underutilized models of inclusive education" (p. 24). In addition, the research team highlighted a lack of systematic commitment to inclusive education, remarking "…our analysis of students' IEPs found no mention of either 'Team Teaching' or 'inclusionary'" (p. 66) practices. Other observations paint a picture of a system in which the "distribution" (or placement) of students with disabilities did not reflect the ratio of disabled to non-disabled students. There exists a great discrepancy in the number of students with disabilities among schools, ranging from 0% to 38.3% (p. 67). Thus, while the "average" ratio of non-disabled to disabled students is approximately 9:1 (p. 8), it can be a varied as 1:0 or 3:2 suggesting inequitable practices in labeling and admission policies.

The report also shared evidence of a nationwide trend, namely the overrepresentation of African-American students in segregated programs. For example, Hehir et al. report that 44% of African-American students with disability labels are placed in the least restrictive environment (general education), in comparison to 64% of European-American students (p. 71). Other avenues of supporting inclusive practices have been severely stymied by underdeveloped program initiatives such as Consultant Team Teacher (CTT) classes taught by a general and a special educator in which up to 40% of students can have disability labels. However, only 8% of students with disabilities are educated in CTT classes. Within this number, 66% of classes are in elementary school, 22% in middle school, and 12% in high school (p. 76).

High school students are further disadvantaged in that new schools do not have to "accept" students with disabilities who need more than minor support, known as Special Education Teacher Support Services (SETSS), a synonym for "Resource Room." Parents of

students with disabilities, along with community-based activist groups such as *Advocates for Children,* have mobilized against the unfairness of such policies. In their independently produced booklet called *Small Schools, Few Choices: How New York City's High School Reform Effort Left Students with Disabilities Behind* (Sweet, 2006), parents and advocates argue that a more accurate statistic of students with disabilities who graduate with a "regular" high school diploma is 11.84 % (p. 1), and call attention to how fewer than 60% of students in New York City graduate within four years (p. 5). As a group, *Advocates For Children* is challenging a Department of Education policy that severely limits the choice of high schools for students with disabilities. Currently, in existing schools, 5.2% of students with disabilities are in self-contained classes, while new schools have only 0.7% (p. 15).

Overall, the picture painted is one of an enormous system trying to break through its own sense of operationalized business-as-usual approach to placing and educating students with disabilities. While there are some positive changes, they are both small and incremental, approaches that are ultimately ineffective to create meaningful systematic change (Ferri & Connor, 2006). Other signs of an institutional response to inclusion in New York City include a policy that allows up to 40% of CTT class be comprised of students with disabilities. In addition, the word "inclusion" is not written as an option within the cascade of special education services, nor encouraged to appear on IEPs (Hehir et al., 2005, p. 66). While acknowledging that time and careful planning are needed for authentic inclusion, many choices have been made that delay its growth, therefore maintaining the notion of special education as a place.

Questions to Ponder/Discuss:

1. What systematic, structural, bureaucratic barriers exist for effective inclusive practices? What can be done about them?

2. It has been said that inclusive classrooms should reflect the proportions of disabled and non-disabled people with the population, approximately 1 or 2 in every 10. Explain why you agree or disagree.

3. Understanding disability from a social model perspective rather than a medical model perspective casts disability as a natural part of human variation. What implications does this have for teacher education in universities, professional development in schools, and policy makers?

4. "Ableism" is defined as prejudice toward people with disabilities, based on an assumed superiority of non-disabled people. How is this concept analogous to racism and sexism? How can ableism be addressed in schools?

5. What can be done to address the overrepresentation of students of color, in particular African-American and Latino students in special education classes?

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Skirtic, T. (1991b). *Behind special education: A critical analysis of professional culture and school organization.* Denver, CO: Love.

Skrtic, T. M. (1995). Theory/practice and objectivism: The modern view of the professions. In T. M. Skrtic (Ed.), *Disability and democracy* (pp. 2-24). New York: Teachers College Press.

Sweet, K. (2006, October). *Small schools, few choices: How New York City's high school reform effort left students with disabilities behind.* Parents for Inclusive Education, New York: Author.

This section is a modified excerpt from: Connor, D. J. (2008). *Urban narratives: Portraits-in-Progress--Life at the intersections of learning disability, race, and social class.* New York: Peter Lang.

Section 17: Resources to Support Success

Task Force Members

(A) Children's Literature: Characters with Disabilities
Researched by Eileen Brennan, Ph.D., Mercy College
(ISBN numbers included)

Attention Deficit Hyperactivity Disorder (ADHD)

Galvin, M. (2001). *Otto learns about his medicine.* Washington, D.C: American Psychological Association. 1557987718.

Gantos, J. (2002). *What would Joey do?* New York, NY: Harper Trophy. 0060544031.

Gantos, J. *Joey Pigza loses control.* New York, NY: Farrar, Straus and Giroux. 0374399891.

Gantos, J. (2002). Joey *Pigza swallows the key.* New York, NY: Harper Trophy. 0064408337.

Kraus, J. (2005). Cory *Stories: A kid's book about living with ADHD.* Washington, D.C: American Psychological Association. 1591471540.

Moss, D. (2006). *Shelley the hyperactive turtle.* Bethesda, MD: Woodbine House. 1890627755.

Nadeau, K. (2005). *Learning to slow down and pay attention: A book for kids about ADHD.* Washington, D.C: American Psychological Association. 1591471559.

Penn, A. (2006). *A.D.D. not B.A.D.* Terre Haute, IN: Tanglewood Press. 074930377.

Quinn, P. (2001). *Putting on the brakes: Young people's guide to understanding Attention Deficit Hyperactivity Disorder.* Washington, D.C.: American Psychological Association. 1557987955.

Rotner, S. (2000). *The A.D.D. book for kids.* New York, NY: Millbrook Press. 076131722.

Taylor, J. (2006). *The survival guide for kids with ADD or ADHD.* Minneapolis, MN: Free Spirit Publishing. 157542195X.

Tunis, S. (2004). *Why Jimmy Can't Sit Still.* Far Hills, NJ: New Horizon Press. 0882822519.

Zimmet, D. (2001). *Eddie enough.* Bethesda, MD: Woodbine House. 1890627259.

Autistic Spectrum

Band, E. (2001). *Autism through a sister's eyes.* Dixon, IL: Future Horizons. 1885477716.

Barclay, H. (2004). *Nathan's journey: A biographical look inside the world of autism.* New York, NY:HGB Enterprises. 0975541706.

Bleach, F. (2002). *Everybody is different: A book for young people who have brothers or sisters with autism.* Shawnee Mission, KS: Autism Asperger Publishing Company. 1931282064.

Day, A. (2004). *The Flight of a dove.* New York, NY: Farrar, Straus and Giroux (BYR). 0374399522.

Ely, L. (2004). *Looking after Louis.* New York, NY: ZZCFrances Lincoln C. 1845070836.

Edwards, A. (2002). *Taking autism to school.* Plainview, NY: Jayjo Books. 1891383132.

Elder, J. (2006). *Different like me: My book of autism heroes.* Jessica Kingsley Publishers 1843108151.

Haddon, M. (2003). *The curious incident of the dog in the night-time.* Glens Falls, NY: Vintage. 1400032717.

Healey, A. *(2005). Sometimes my brother: Helping kids understand autism through a sibling's eyes*. Dixon, IL: Future Horizons. 1932565310.

Hoopmann, K. (2002). *Lisa and the lacemaker: An asperger adventure*. London, England: Jessica Kingsley Publishers. 1843100711.

Hoopmann, K. (2003). *Haze.* London, England: Jessica Kingsley Publishers. 184310072X.

Hoopmann, K. (2001). *The blue bottle mystery: An asperger's adventure.* London, England: Jessica Kingsley Publishers. 1853029785.

Jackson, L. (2002). *Freaks, geeks & asperger syndrome: A user guide to adolescence.* New York, NY: Taylor & Francis/Routledge. 1843100983.

Keating-Velasco, J. (2007). *A Is for autism F Is for friend: A kid's book for making friends with a child who has autism.* Shawnee Mission, KS: Autism Asperger Publishing Company. 1931282439.

Lord, C. (2006). *Rules.* New York, NY: Scholastic Press. 0439443822.

Martin, A. (2002). *A corner of the universe.* New York, NY*:* Scholastic Inc. 0439771242.

Ogaz, N. (2002). *Buster and the amazing daisy: Adventures with Asperger Syndrome.* London, England: Jessica Kingsley Publishers. 184310721X.

Peralta, S. (2002). *All about my brother.* Shawnee Mission, KS: Autism Asperger Publishing Company. 1931282110.

Welton, J. (2004). *Can I tell you about Asperger Syndrome?: A guide for friends and family.* London, England: Jessica Kingsley Publishers. 1843102064.

Yamanaka, L. (2005). *The heart's language.* New York, NY: Hyperion. 0786818484.

Blindness/Low vision

Alexander , S. (2000). *Do you remember the color blue?* New York, NY: Viking Juvenile. 0670880434.

Benge, J. (2001). *Helen Keller: Facing her challenges, facing the world.* Houston, TX: Advance Publishing, Inc. 1575371057.

Evans, A. (2004). *Color is in the eye of the beholder.* Auburn, Ca: CVD Publishing. 0974352012.

Evans, A. (2003). *Seeing Color: It's my rainbow, too.* Auburn, Ca: CVD Publishing. 0974352004.

Irwin, G. (2007). *Sage's big adventure: living with blindness.* New York, NY: Xlibris Corporation. 1425763529.

Parker, B. (2001). Junie B, *First grader (At last!).* New York, NY*:* Scholastic Inc. 0439326893.

Cultural/Linguistic Diversity

Ada, A. (2002). *I love saturdays y domingo.* New York, NY: Aladdin. 068987409X.

Mobin-Uddin, A. (2005). *My name is Bilal.* Honesdale, PA: Boyds Mills Press. 1590781759.

Recorvits, H. (2003). *My name is Yoon.* Honesdale, PA: Farrar, Straus and Giroux. 0374351147.

Deaf/Hard of hearing

Heelan, J. (2002). *Can you hear a rainbow: The story of a deaf boy named Chris.* Atlanta, GA: Peachtree Publishers. 1561452688.

Millman, I. (2002). *Moses goes to a concert.* Honesdale, PA: Farrar, Straus and Giroux. 374453667.

Millman, I. (2004). *Moses sees a play.* New York, NY: Farrar, Straus and Giroux. 374350663.

Millman, I. (2003). *Moses goes to the circus.* New York, NY: Farrar, Straus and Giroux. 374350647.

Millman, I. (2000). *Moses goes to school.* New York, NY: Farrar, Straus and Giroux. 0374350698

Scheafer, L. (2001). *Some kids are deaf: Understanding Differences.* New York, NY: Pebble Books. 1429617756.

Emotional/Behavioral

Bang, M. (2004). *When Sophie gets angry --Really, really angry.* New York, NY: Scholastic Paperbacks. 439598451.

Carson, J. (2005). *Stop teasing Taylor.* New York, NY: Treasure Bay. 1891327623.

Codell, E. (2004). *Saraha special.* New York, NY: Hyperion. 786816112.

Ditta-Donohue, G. (2003). *Josh's smiley faces: A story about anger.* Washington, DC: Magination Press. 1591470013.

Niner, H. (2004). *Mr. Worry: A story about OCD.* Morton Grove, Il: Albert Whitman & Company. 807551821.

Offill, J. (2007). *17 Things I'm not allowed to do anymore.* New York, NY: Schwartz & Wade. 0375835962.

Shriver, M. (2001). *What's wrong with Timmy?* New York, NY: Little, Brown Young Readers. 0316155489.

Spellman, C. (2000). *When I feel angry.* Morton Grove, Il: Albert Whitman & Company. 807588970.

Spellman, C. (2004). *When I feel sad.* Morton Grove, Il: Albert Whitman & Company. 0807588997.

Vail, R. (2002). *Sometimes I'm bombaloo.* New York, NY: Scholastic Paperbacks. *0*439669413.

Gifted/Talented

Brown, D. (2004). *Odd boy out: Young Albert Einstein.* Boston, Mass. Houghton Mifflin. 0618492984.

Clements, A. (2005). *The report card.* New York, NY: Aladdin. 689845243.

Shultz, R. (2006). *More than a test score: Teens talk about being gifted, talented, or otherwise extra-ordinary.* Minneapolis, MN: Free Spirit Publishing. 1575422212.

Inclusive

Bunnett, R. (2006). *Friends at school.* Long Island City, NY: Star Bright Books. 1595720405.

Dwight, L. (2005). *We can do it.* Long Island City, NY: Star Bright Books. 1595720332.

Hames, A. (2005). *Special brothers and sisters: Stories and tips for siblings of children with special needs, disability or serious illness.* London, England: Jessica Kingsley Publishers. 1843103834.

Maguire, A. (2000). *Special people, special ways.* Future Horizons. 1885477651.

Sabin, E. (2007). *The special needs acceptance book: Being a friend to someone with special needs.* New York, NY: Watering Can Press. 0975986856.

Learning Disability

Janover, C. (2000). *How many days until tomorrow?* Topeka, KS: Tandem Library. 613445244.

Janover, C. (2000). *The worst speller in jr. high.* Backinprint.Com. 0595153283.

Robb, D. (2004). *The alphabet war, A story about dyslexia.* Morton Grove, Il: Albert Whitman & Company. 807503029.

Winkler, H. (2005). *The night I flunked my field trip: The world's greatest underachiever: Hank Zipzer.* New York, NY: Grosset & Dunlap. 448435020.

Winkler, H. (2003). *Zippety Zinger: Hank Zipzer.* New York, NY: Grosset & Dunlap. 448431939.

Winkler, H. (2005). *The secret life of a ping-pong wizard #9: Hank Zipzer the world's greatest underachiever.* New York, NY: Grosset & Dunlap. 044843749X.

Cognitive Impairment/Developmental Delay

Bouwkamp, J. (2006). *Hi my name is Ben...And I've got a secret.* Rochester Hills, MI: Band Of Angels. 1930868111.

Flynn, D. (2004). *A very special athlete.* Sacramento, CA: Pearl Press. 0974133213.

Lambke, B. (2006). *I just am.* Chandler, AZ: Five Star Publications, Inc. 1589850203.

Pitzer, M. (2004). *I can, can you?* Bethesda, MD: Woodbine House. 1890627577.

Stuve-Bodeen, S. (2005). *The best worst brother.* Bethesda, MD: Woodbine House. 1890627682.

Woloson, E. (2003). *My friend Isabelle.* Bethesda, MD: Woodbine House. 189062750X.

Physical/Health

Anderson, P. (2004). *We go in a circle.* Boston, MA. Houghton Mifflin/Walter Lorraine Books. 618447563.

Debear, K. (2001). *Be quiet, Marina!* Long Island City, NY: Star Bright Books. 1887734791.

Heelan, J. (2000). *Rolling along: The story of Taylor and his wheel chair.* Atlanta, GA: Peachtree Publishers. 156145219X.

Heyman, A. (2003). *Gretchen the bicycle dog.* Dutton Juvenile. 0525470662

Kroll, V. (2005). *Brianna breathes easy, A story about asthma.* Morton Grove, Il: Albert Whitman & Company. 0807508802.

Lears, L. (2002). *Becky the brave: Story about epilepsy.* Morton Grove, Il: Albert Whitman & Company. 080750601X.

Lears, L. (2005). *Nathan's wish, a story about cerebral palsy.* Morton Grove, Il: Albert Whitman & Company. 0807571016.

Smith, N. (2006). *Allie the allergic elephant: A children's story of peanut allergies.* New York, NY: Allergic Child Publishing Group. 1586280538.

Thomas, P. (2001). *Don't call me special: A first look at disabilities.* Hauppauge, NY: Barron's Educational Series. 0764121189.

Willis, J. (2001). *Susan laughs.* Glens Falls, NY: Red Fox Books. 0099407566.

Speech/Language Impairments

Fusco, K. (2004). *Tending to Grace.* New York, NY: Laurel Leaf. 553494236.

Lears, L. (2000). *Ben has something to say, A story about stuttering.* Fremont, CA: Shen's Books. 807506338.

Vettiger, S. (2005). *Basghetti spaghetti.* San Francisco, CA: North-South. 735819920.

Very Low Incidence
Fetty, M. (2007). *Helen Keller: Break down the walls.* New York: Bearport Publishing.
        159716271X.
Halpern, S. (2005). *Introducing Sasha Abramowitz.* Honesdale, PA: Farrar, Straus and Giroux.
        0374384320.
Keller, H. (2000). *Light in my darkness.* Wilmington, NC: Chrysalis Books. 877853983.
MacLeod, E. (2004). *Helen Keller: A determined life.* Toronto, ON: Kids Can Press, Ltd.
        1553375084.
Niner, H. (2005). *I can't stop. A story about Tourette Syndrome.* Morton Grove, Il: Albert
        Whitman & Company. 0807536202.
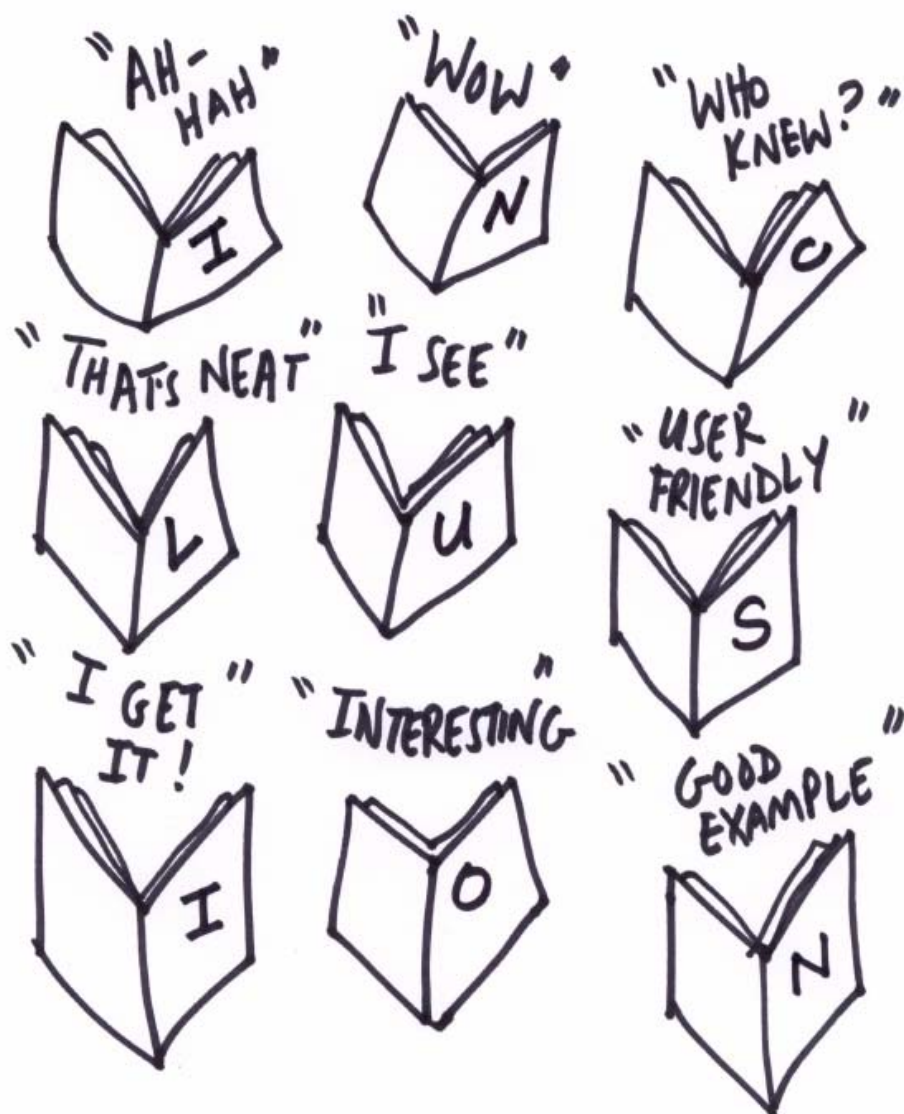
(B) Videotapes/DVDs

Hand-in-Hand-: Supporting children with play problems: (1999)
A comprehensive seven module play problem intervention series for individuals who work with young children.
Educational Productions Inc. 1-800-950-4949, 36 minutes each.

Mental Health in Head Start: A Partner for Families (1993)
Georgetown University, Head Start Mental Health Project,
Washington, DC 28 minutes

Collaborating for Change: Instructional Strategies for all students (1997)
TS Media Inc. 1-800-876-6334, 20 minutes

60 Minutes - Diagnosis: Autism (February 18, 2007)
CBS Television, New York New York, 13 minutes

Family to Family: A Guide to Living Life When a Child is Diagnosed with an Autism Spectrum Disorder (2004)
Starfish Productions, 36 minutes

Children in Crisis (2004): Autism and its affect on family life
Discovery Channel Production
Films for the Humanities and Sciences, www.films.com, 46minutes

Inclusion: Issues for Educators.
Comforty Media Concepts. Phone: 630-778-4508

Multiple Intelligences. Other Styles of Learning
Films for the Humanities and Sciences, www.films.com, 46minutes

Sean's Story: A Lesson in Life
Films for the Humanities and Sciences, www.films.com, 45minutes

Step by Step: Heather's Story
Comfort Media Concepts. Phone: 630-778-4508

Living with ADHD (2004)
BBCCW Productions
Films for the Humanities and Sciences, www.film.com, 50minutes

Tourette's Syndrome: New Hope for a Cure (2000)
BBCW Productions
Films for the Humanities and Sciences, www.film.com, 50minutes

Educating Peter (1991)
HBO Productions
Films for the Humanities and Sciences, www.film.com, 32 minutes

Graduating Peter (2001)
HBO Productions
Films for the Humanities and Sciences, www.film.com, 76 minutes

Dyslexia: A Different Kind of Mind (1997)
Dartmouth-Hitchcock Production
Films for the Humanities and Sciences, www.film.com, 29 minutes

Refrigerator Moms (2002)
Independent Television Service, with funding provided by the Corporation for Public Broadcasting.
Fanlight Films, 1-800-937-4113; 53 minutes

In Our Midst: The Long-Term Impact of Neonatal Intensive Care (2002)
Ethics Institute at Dartmouth College and Dartmouth-Hitchcock Medical Center
Fanlight Films, 1-800-937-411; 56 minutes

The Power of 2 (Co-Teaching) (2005) (2nd ed.).
Forum on Education, 64 minutes.

Standards & Inclusion: Can We Have Both? (1998)
Presented by Dorothey Kerzner Lipsky & Alan Gartner
National Professional Resources, *www.nprin.com, 40 minutes*

ADHD & LD: Powerful Teaching Strategies and Accommodations (2004)
National Professional Resources, www.nprin.com, 52 minutes

Daniel Goleman, Emotional Intelligence: A New Vision for Educators
National Professional Resources, www.nprin.com, 40 minutes

Through Deaf Eyes (2007)
A look at deaf culture from the 19th century to the present.
PBS Home Video. Call 1-800-PLAY- PBS. 90 Minutes

Autism is a World (2006)
Program Development Associates
P.O. Box 2038, Syracuse, NY 13220-2038, info@pdassoc.com

The Center for Teaching and Research at Pace University has developed the first draft of a video demonstrating a successful college-based inclusion program for students with autism and developmental disabilities. Two NYC Task Force members, Dr. Dianne Zager and Dr. Grace Ibanez Friedman, were involved in the production of this video. It will be available late spring 2007. Those interested in more information about the video can contact Dianne Zager at dzager@pace.edu.

(C) Books on Education, Teacher Texts, and Relevant Reads

Allan, J. (1999). *Actively seeking inclusion: Pupils with special needs in mainstream schools.* Philadelphia, PA: Falmer Press.

Choate, J. S. (Ed.) (2004). *Successful inclusive teaching.* (4th ed.) New York: Pearson.

Ferri, B. A., & Connor, D. J. (2006). *Reading resistance: Discourses of exclusion in the desegregation and inclusion debates.* New York: Peter Lang.

Friend, M., & Bursuck, W. D. (2002). *Including students with special needs: A practical guide for classroom teachers.* Boston, MA: Allyn & Bacon.

Goodman, G. (1996). *Inclusive classrooms from A to Z: A handbook for educators.* Peterborough, NH: Crystal Springs.

Gould, P. & Sullivan, J. (1999). *The inclusive early childhood classroom. Easy ways to adapt learning centers for all children.* Beltsville, MD: Gryphon House.

Grenot-Scheyer, M., Bishop, K. D., Jubala, K. A., & Coots, J. J. (1996). *The inclusive classroom.* Westminster, CA: Teacher Created Materials, Inc.

Hammeken, P. A. (1995). *450 strategies for success: A practical guide for all educators who teach students with disabilities.* Minnetonka, MN: Petrayal Publications.

Levine, M. (1990). *Keeping a head in school.* Cambridge, MA: Educators Publishing Service.

Levine, M. (1993). *All Kinds of Minds.* Cambridge, MA: Educators Publishing Service.

Levine, M. (1994). *Educational care: A system for understanding and helping children with learning problems at home and in school.* Cambridge, MA: Educators Publishing Service.

Levine, M. (2002). *A mind at a time.* New York. Simon & Schuster.

Lewis, R. B., & Doorlag, D. H. (2006). *Teaching special students in general education classrooms.* (7th ed.). Upper Saddle River, NJ: Pearson.

Lipsky, D. K., & Gartner, A. (1997). *Inclusion and School Reform: Transforming America's classrooms.* Baltimore, MD: Paul H. Brookes.

Mastropieri, M. A. & Scruggs, T. E. (2007). *The inclusive classroom.* New Jersey: Pearson Education.

Salend, S.J. (2005). *Creating inclusive classrooms.* New Jersey: Pearson-Prentice Hall.

Schwartz, D. (2005). *Including children with special needs. A handbook for educators and parents*. Westport, CT: Greenwood Press.

Schwartz, P. (2006). *From disability to possibility: The power of inclusive classrooms.* Portsmouth, NH: Heinemann.

Shapiro, A. (1999). *Everybody belongs: Changing negative attitudes toward classmates with disabilities*. New York: Routledge.

Shapiro, J. P. (1993). *No Pity*. New York: Three Rivers Press.

Thomas, G., & Loxley, A. (2001). *Deconstructing special education and constructing inclusion*. Buckingham, England: Open University Press.

Tomlinson, C. A. (1999). *The Differentiated Classroom: Responding to the Needs of All Learners*. Alexandria, VA: ASCD.

Tomlinson, C. A. (2001). *How to differentiate instruction in mixed ability classrooms* (2nd ed.). Alexandria, VA: ACSD.

Tomlinson, C. A., & McTighe, J. (2006). *Integrating differentiated instruction and understanding by design.* Alexandria, VA: ASCD.

Villa, R. A., & Thousand, J. (1995). *Creating an inclusive school*. Alexandria, VA: Council for Supervision and Curriculum Development.

Williams, G. J. & Reisberg, L. (2003). Successful Inclusion: Teaching Social Skills Through Curriculum Integration. *Intervention in School & Clinic, 38*(4), 205-211.

Wood, J. W. (2002). *Teaching students in inclusive settings: Adapting and accommodating instruction.* Upper Saddle River, NJ: Pearson.

Yesseldyke, J.E., Algozzine, B. & Thurlow M. (2000). *Critical issues in special education*. Boston, MA: Houghton Mifflin.

(D) Selected Journals

Disability & Society
Disability Studies Quarterly
Educational Leadership
Exceptional Children
International Journal of Inclusion
International Journal of Special Education
Journal of Autism and Developmental Disorders
Journal of Invitational Theory & Practice
Journal of Learning Disabilities
Journal of Special Education
Learning Disabilities Quarterly
Remedial and Special Education
Review of Disability Studies
Teaching Exceptional Children
Young Exceptional Children

(E) Selected Articles

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(F) Useful and Interesting Web Pages

www.inclusion-ny.org/region/nyc
New York City Task Force for Quality Inclusive Schooling

http://www.resourcesnycdatabase.org/
Resources for Children with Special Needs in New York City

http://www.inclusion-ny.org
Resources and Information: SystemsChange Federal Grant to New York State

http://www.nysed.gov
New York State Education Department

http://www.ed.gov
United States Department of Education

http://projectchoices.org/
Illinois's response to inclusion in LRE

http://kidstogether.org/
Pennsylvania-based organization on LRE issues

http://teachingld.org/about/
Teachers of students with learning disabilities

www.kotb.com
Kids on the Block. Disability awareness life-size puppet presentations for elementary schools.

www.casel.org
Social and emotional learning for students preschool to high school.

www.autismspeaks.org
Videos and information about issues including parent support for students with autism.

http://iris.peabody.vanderbilt.edu/onlinemodules.html
A wealth of information on all aspects of special education

http://www.powerof2.org/
Focus on teacher collaboration.

http://www.civilrightsproject.harvard.edu/research/specialed/specialed_gen.php
Special education and civil rights

http://www.cldinternational.org/
Council for learning disabilities

http://www.disabilityfilms.co.uk/
Disability related films (commercial and documentary)

http://www.cds.hawaii.edu/
Review of Disability Studies

http://www.outside-centre.com/
Home page of disability studies scholar, writer, and activist

http://www.columbia.edu/cu/seminars/seminars/cultural-studies/seminar-folder/disability-studies.html
Disability Studies seminars at Columbia University, open to the public

http://www.dsq-sds.org/
Disability Studies quarterly electronic journal

http://www.bioethicsanddisability.org/abuseofdisabledpeople.htm
Issues of abuse of disabled people

http://www.disabilitystudiesforteachers.org/
Disability studies for teachers (curricula and materials)

http://www.uic.edu/orgs/sds/links.html
Society for Disability Studies

http://www.disabilityisnatural.com/
Disability is natural

http://www.inclusion.com/inclusionpress.html
Inclusion Press

http://thechp.syr.edu//Disability_Studies_2003_current.html
Disability studies information and resources

http://www.lrecoalition.org/
Least Restrictive Environment Coalition of NYC

http://steinhardt.nyu.edu/metrocenter/Chapter405.html
Technical assistance center on disproportionality of students of color in special education

http://www.cookecenter.org/index.html
Cooke Center for Learning and Development

http://www.inclusiondaily.com/
International Disability Rights New Service

http://www.drc.org.uk/
Disability Rights Commission (UK)

http://www.ragged-edge-mag.com/0903/0903ft1.html
Alternatives to disability simulations

http://idea.ed.gov/
Building the legacy of IDEA

http://www.disabilityworld.org/
Disability World webzine

http://www.jonathanmooney.com/
Author and Public Speaker/LD and ADHD

http://www.ncld.org/content/view/752/456/
National Center for Learning Disabilities

http://www.wholeschooling.net/
Whole schooling consortium

http://dha.osu.edu/
Disability History Association

http://www.museumofdisability.org/
Museum of Disability

http://www.cec.sped.org//AM/Template.cfm?Section=Home
Council for Exceptional Children

http://aera.net/Default.aspx?menu_id=162&id=1297
American Education Research Association/Disability Studies in Education

Section 18: Awareness Days: Some Alternatives to Simulation Exercises

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A staple of 'Awareness Days' is the simulation exercise: Put a nondisabled person in a wheelchair. Tie on a blindfold. But these tactics are often criticized as sending the wrong message. What are the alternatives?

1. Talk about doing simulations -- without doing them. What are the kinds of experiences that only a nondisabled person simulating a disabled one would have? What are simulations designed to do? Is that a desirable objective? Do they really accomplish that objective? Why, or why not?

2. Listen to a disabled person -- one in your neighborhood, your class, around school Ask them about their life -- not about medical aspects of the disability. When we compare what we've found out, we'll have heard not from a couple of "experts" but from enough people to realize that there are differences and similarities. Then compare the findings with information about disabled people in the U.S. from the U.S. Census and Harris surveys done for the National Organization on Disability.

3. Read a book or watch a video about a person with a disability. John Hockenberry's Moving Violations is a good book; When Billy Broke his Head is a good video, so is Kiss My Wheels. Consider whether the experiences depicted are typical or atypical and why.

4. Try *not* doing something: If a restaurant isn't accessible, try not going there. If a restroom isn't accessible, don't use it. If there's space to do so, see a movie from the "wheelchair section." If you go with friends, don't suggest or restrict where they sit.

5. Some people with disabilities insist that there are many positive aspects to the experience of being disabled. Discuss why they say this.

6. Survey neighborhoods: cars parked over driveways, unleashed dogs, sidewalks and curb-cuts, color contrast on stairs (people with low vision need this), branches that can hit a blind person. Note audible cues (such as horns honking).

- Find a curb cut. Is the "cut" flush with the street at the bottom, or is there still a lip? Is the curb cut broken? Would it be easy or hard to use it in a wheelchair? Are cars parked in front of it, making it unusable?
- Look at the entrance to your favorite coffee shop or bookstore. Is it flat? Is there a small step? Are there lots of steps? What would need to be altered to make it accessible? Sometimes there's a loading ramp in back a disabled person can use. What do you think about having to enter that way?
- Go to a local clothing shop in the mall. Notice how much space there is between racks of clothes. What would this be like for someone who is blind or who has a mobility disability?

7. Find out what confronts a family traveling and living in motels or hotels. Visit a local hotel. Find out where TDD/TTY (the telecommunication devices for the deaf/teletypewriter) phones are and how you would find one if you were deaf. Find out what choices you'd have if you needed to get a wheelchair accessible room for a family of 6. If you were a wheelchair user, would you be able to use the bathroom in the room? Or the shower?

8. Search for a personal assistant. Find out what the job entails. Local newspapers will contain ads. The local center for independent living is a source of other leads. Some people work through companies listed in the Yellow Pages. Without misrepresenting yourself, find out what they charge and what they pay. Would you take such a job? Why or why not?

9. Doing the things above may reinforce your idea of just of how bad it is being disabled.. Using a 5x8 card, anonymously write down reactions you'd have if you were to wake up as a member of the other gender. How would you react? How would your family, your friends and your neighbors react? Now share this with the others in your group doing this exercise. Did it turn out that a lot of your preconceptions were just plain silly?

10. Even obviously artificial pretending can be lots of fun. There are three exercises you may want to do. Try these at home:

- Bob Cummings, who used to be executive director of the Center for Independent Living in Orange Co., CA., would ask his audiences to shut their eyes. He'd then ask if they'd stopped thinking about their next meal, their appointments with friends, or what they'd be doing an hour from now. Of course they hadn't! His point was that an awful lot remains the same whether you are blind (as he was) or not. The example he liked to give of what he couldn't do was skeet shooting -- which he'd never done (nor had any desire to do) before he was blind, either.
- "Stuffing your mouths with marshmallows will produce speech like mine," Blaser tells his students. "Does that then mean you will then know how I think, too? If so, then I can go home. You could, too, but you wouldn't do well in the class."
- A simulation with practical effect is the closed fist that can't open round door hardware, but can open lever type door handles. The open hand will open either type.

Questions to Discuss from Art Blaser:

1. In the exercises above, some disabilities are covered more than others. Why might that be?

2. People will often talk about disability in terms of what people cannot do. When might this lead to dubious conclusions?

Section 19: Glossary of Terms

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Accessibility: Modification of buildings and other physical structures to allow unrestricted movement and unlimited admittance to people whose mobility may be limited by motor or sensory impairments and who may or may not use a wheelchair. Accessibility of all public and private facilities is now mandated by PL 101-336 the Americans with Disabilities Act of 1990. This might include special ramps and additional elevators for those with motor impairments, and special Braille and sound adaptations for those with visual impairments. Accessibility also requires modification of services for persons who speak another language, who have hearing impairment, and who have other cognitive or learning problems.

Accommodations: Changes to instruction, goals and objectives, curriculum, classroom environment or materials to help ensure the success of students with disabilities. Examples include: providing a word bank, simplified language, use of a calculator, or additional time for particular tasks.

Americans with Disabilities Act (ADA)--Begun as the Rehabilitation Act of 1973: The Americans with Disabilities Act (1990) gives civil rights protections to individuals with disabilities similar to those provided to individuals on the basis of race, color, sex, national origin, age, and religion. It guarantees equal opportunity for individuals with disabilities in public accommodations, employment, transportation, state and local government services, and telecommunications.

Aphasia: Diminished ability to correctly use and comprehend language. In developmental pediatrics, aphasia is usually limited to a profound lack of language. Children with a less severe disorder are diagnosed with a language disorder. Aphasia may be due to damage to the cortex (outer part) of the left hemisphere of the brain.

Asperger Syndrome: Developmental disorder characterized by normal cognitive and language development with impairments in all social areas, repetitive and stereotyped behaviors, preoccupation with atypical activities or items, pedantic speech patterns, and motor clumsiness; included in autism spectrum disorder.

Assistive technology device: Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of a student with a disability**.** Such term does not include a medical device that is surgically implanted, or the replacement of such a device.

Attention Deficit Disorders (ADD): A physiological, neurological problem characterized by the inability to pay attention and impulsiveness; some students generate much energy, are frequently restless, fidgety, and easily distracted. Others may be underactive and sluggish. Occurs two to four times more frequently in boys than girls. Many of these students have been accommodated in the general classroom without being declared as a special education exceptionality category.

Attention Deficit Hyperactive Disorder (ADHD): For a diagnosis of ADHD, a child, adolescent, or adult must demonstrate eight of the following symptoms that have been coded as to whether they are indicative of inattention, impulsivity, or hyperactivity

CODE: A = Inattention, B = Impulsivity, and C = Hyperactivity

C 1. Often fidgets with hands or feet or squirms in seat

C 2. Has difficulty remaining seated when required to do so

A 3. Is easily distracted by extraneous stimuli

B 4. Has difficulty awaiting turn in games or group situations

B 5. Often blurts out answers to questions before they have been completed

A 6. Has difficulty following through on instructions from others (not due to oppositional behavior or
        failure of comprehension); e.g., fails to finish tasks or chores

A 7. Has difficulty sustaining attention in tasks or play activities

B 8. Often shifts from one uncompleted activity to another

C 9. Has difficulty playing quietly

C 10 . Often talks excessively

B 11. Often interrupts or intrudes on others; e.g., butts into other children's games

A 12. Often does not seem to listen to what is being said about him or her

B. 13. Often loses things necessary for talks or activities at school or at home; e.g., toys, pencils, books,
        assignments

C 14. Often engages in physically dangerous activities without considering possible consequences (not
        for the purpose of thrill-seeking), e.g., runs into street without looking.

Autism spectrum disorders: Group of five related developmental disorders that share common core deficits or difficulties in social relationships, communication, and ritualistic behaviors; differentiated from one another primarily by the age of onset and severity of various systems; includes autistic disorder, Asperger syndrome, Rett's syndrome, childhood disintegrative disorder, and pervasive developmental disorder not otherwise specified (PDD-NOS).

Autistic disorder: A pervasive developmental disorder marked by three defining features with onset prior to age 3: (1) impairment of social interaction, (2) impairment of communication, and (3) restricted, repetitive and stereotyped patterns of behavior, interests, and activities.

Childhood Autism Rating Scale (CARS): A 15-factor diagnostic instrument for autism that rates children's behavior in the presence of an adult and during independent play.

Classifications: The categories under which special education services may be rendered. There are 13 categories: autism, deafness, deaf-blindness, emotional disturbance, hearing impairment, learning disability, mental retardation, multiple disabilities, orthopedic impairment, other health impairment, speech or language impairment, traumatic brain injury, and visual impairment including blindness.

Committee on Special Education (CSE) Team: The CSE Team includes the child's parent, an additional parent of a child with a disability from the school district, special education and general education teachers, school psychologist (and evaluator), committee chairperson (and program administrator) related service providers, and others, who meet regularly or *ad hoc* to determine and direct the educational program of a student with special needs.

Comprehensive System for Professional Development (CSPD): Federal regulation, a plan designed and developed by school districts to ensure that adequate resources exist to deliver IEP services, to provide for continuing education, and to track and analyze data regarding students with disabilities and their present and projected needs.

Consultant Teacher: A professional responsible for the purpose of providing direct and/or indirect services to students with disabilities enrolled in regular education classes, including career and technical education.

Continuum of Services: The range of different placement and instructional options that a school district can use to serve children with disabilities. Typically depicted as a pyramid, ranging from the least restrictive placement (regular classroom) at the bottom to the most restrictive placement (residential school or hospital) at the top.

Disability Etiquette: Preferred word usage and behavior when writing about, meeting socializing with, or assisting people with disabilities. Although some specific terminology is still debated among group of people with disabilities and their advocates, agreement has been reached regarding some general rules. These include empathizing abilities, not limitations; avoiding words with negative or judgmental connotations; demonstrating patience; and asking if assistance is needed before giving it. The goal of enlightened language usage and treatment is to more integrate people with disabilities into society and to lessen misunderstanding and ignorance among the population without disabilities.

Dyslexia- Dyslexia is a language-based learning disability. Dyslexia refers to a cluster of symptoms, which result in people having difficulties with specific language skills, particularly reading. Students with dyslexia may experience difficulties in other language skills such as spelling, writing, and speaking. Dyslexia is a life-long status; however, its impact, however, can change at different stages in a person's life. It is referred to as a learning disability because dyslexia can make it very difficult for a student to succeed academically in the typical instructional environment. The exact causes of dyslexia are still not completely clear, but anatomical and brain imagery studies show differences in the way the brain of a dyslexic person develops and functions. Moreover, people with dyslexia have been found to have problems with discriminating sounds within a word, a key factor in their reading difficulties. Dyslexia is not due to either lack of intelligence or a desire to learn; with appropriate teaching methods dyslexics can learn successfully (from International Dyslexia Association http://www.interdys.org/).

Fragile *X* syndrome Martin-Bell syndrome, Marker X syndrome, Escalante syndrome: A genetic syndrome with the familial occurrence of moderate mental retardation, predominantly in males who also have fragiIe X syndrome demonstrate a long narrow face with thick features, prognathism (a prominent jaw), blue eyes, and, early in life, macro-somia (large body size), and later in life macro-orchidism (large testicles). This is an X-linked disorder with a fragile sire (FMR—1 gene) on the long arm of the X chromosome (Xq 27). The 30% of female carriers who are affected appear to be more mildly involved, with shyness, anxiety, and panic attacks. The syndrome accounts for approximately *5%* of mental retardation in males, but has also been reported with learning disabilities, autism, speech and language disorders, and mathematics and motor disabilities. A carrier female has a 38% risk of producing a son with mental retardation and a 16% chance of producing a daughter with mental retardation.

IDEA: Originally enacted in 1975, Public Law 94-142 was designed to support states and localities in protecting the rights of, meeting the individual needs of, and improving the results for infants, toddlers, children, and youth with disabilities and their families. This landmark law is currently enacted as the *Individuals with Disabilities Education Act* (IDEA), as amended in 1997 and again in 2004.

Individualized Education Plan (IEP): The legally binding document, reviewed, currently, at least annually, developed by the CSE, for the purpose of constructing the means whereby a student with a disability has access to the curriculum, the school, and ultimately, success, considering the student's unique educational needs. The document includes, among other important information, the student's present level of performance, how the disability affects performance, the classification of the student's disability, and measurable annual goals and short-term instructional objectives and benchmarks for the student's progress and when periodic reports on the progress the student is making toward the annual goals are provided to the student's parents and recommended special education programs and services to be based on peer-reviewed research and a statement of the student's transitions needs, measurable postsecondary goals, transition service needs, needed activities to facilitate student's movement from school to post-school activities and statement of responsibilities of the school district and when applicable, participating agencies for the provision of transition services. The IDEA requires that the IEP team consider placement in the regular education classroom as the starting point in determining the appropriate placement for the child. If the IEP team determines that the "least restrictive environment" appropriate for a particular child is not the regular education classroom for all or part of the IEP, the IEP team must include an explanation in the IEP as to why the regular education classroom is not appropriate.

Inclusion: "The provision of services to students with disabilities, including those with severe impairments, in the neighborhood school, in age-appropriate general education classes, with the necessary support services and supplementary aids (for the child and teacher) both to assure the child's success-academic, behavioral and social –and to prepare the child to participate as a full contributing member of the society" (Lipsky & Gartner, 1996, p.763). "Inclusion" is a term which expresses commitment to educate each child, to the maximum extent appropriate, in the school and classroom, he or she would otherwise attend. Inclusion involves bringing the support services to the child (rather than moving the child to the services) and requires only that the child will benefit from being in the class (rather than having to keep up with the other students). Proponents of inclusion generally favor newer forms of education service delivery. Two federal laws governing education of children with disabilities, the IDEA and Section 504 of the Rehabilitation Act of 1973 do not require inclusion but both require that a significant effort be made to find an inclusive placement.

Individualized Family Service Plan (IFSP): A statement of child and family needs, outcomes to be achieved, and a plan of services necessary to meet these needs, including frequency, intensity, location, method of delivery, and payment arrangement. Family centered services view the family rather than only the child with developmental disabilities, as the unit of intervention, incorporating concepts that encourage family decision making and empower families to take advantage of the service model. Thus, an IFSP recognizes all family needs and all family members as equally important in developing and implementing an intervention plan. Such an approach was codified in Part H of PL *99-457,* the Education of the Handicapped Act Amendments of 1986 (which was reauthorized in 1991 as PL 102-119, the Individuals with Disabilities Education Act Amendments), which required an IFSP that: (1) meets the developmental needs of children with special needs, and (2) meets the needs of the family in terms of enhancing the child's development, including communication, social, emotional, adaptive, or developmental needs.

Intervention: Any effort made on behalf of children and adults with disabilities; may be preventive (keeping possible problems from becoming a serious disability), remedial (overcoming disability through training or education), or compensatory (giving the individual new ways to deal with the disability).

Impartial Due Process Hearing: A procedure for settling disputes between parents of a child with disabilities and the school system.

Least Restricted Environment (LRE): The least restricted environment is one that allows the child to participate in general education programs as much as possible while meeting his or her special needs. Used appropriately, the term stresses the need to find an optimal placement for each child within a continuum of services. The placement of an individual student with a disability in the least restrictive environment shall: (1) provide the special education needed by the student; (2) provide for education of the student to the maximum extent appropriate to the needs of the student with other students who do not have disabilities; and (3) be as close as possible to the student's home.

Lead Poisoning-Plumbism: A heavy metal found in old interior paint (made before 1950) and in exhaust from leaded gasoline that is toxic to the nervous system. Lead poison is commonly found in children one to six years of age who live in old, deteriorating, inner-city buildings. Any level of lead toxicity can probably cause permanent brain damage. The entire range of developmental disorders has been described as symptomatic of lead poisoning, including mental retardation, language disorders, learning disabilities, autism, and attention–deficit/hyperactivity disorder (ADHD).

Learning Disability (LD): A disorder in one or more of the basic psychological processes involved in understanding or using language, spoken or spoken written; the disorder may manifest itself in imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations. Learning disabilities include such conditions as perceptual disability, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia loss of language skills.

Metacognition: Knowledge about one's thought processes and how to regulate strategies for thought or learning. Knowledge about cognition develops during adolescence. Regulation of learning is generally acquired early (in preschool) and includes planning, monitoring one's activities and checking outcomes. Some students with learning disabilities and many students with attention-deficit/hyperactivity disorder (ADHD) have difficulty with one or more aspects of metacognition.

Music Therapy: A treatment approach that utilizes music and movement in a variety of forms to modify nonmusical behavior and to promote mental health, social development, emotional adjustment, and motor coordination. Used as a therapeutic tool in rehabilitation to meet recreational or educational goals, music therapy includes playing instruments, moving to music, creating music, singing, and listening to music. Music therapy is utilized in a variety of applications in hospitals, schools, institutions, and private settings through both individual and group approaches, often in conjunction with other types of therapy and/or rehabilitation. Both music education and music therapy contribute to special education by promoting learning and self-growth through enjoyable activity.

Obsessive-Compulsive Disorder: Compulsive neurosis; persistent, unremitting, unrelenting, and irrational thoughts, feelings, or "driven" behaviors e.g., worries about germ contamination with accompanying excessive hand washing that are refractory to ordinary coping and change methods. These rare obsessions and compulsions may be viewed as maladaptive coping mechanisms for unconscious conflicts and anxieties. Treatment usually requires a multimodal approach including medication, psychotherapy, and long-term support.

Occupational Therapy (OT): The functional evaluation of the student and the planning and use of a program of purposeful activities to develop and maintain adaptive skills, designed to achieve maximal physical and mental functioning of the student in his or her daily life tasks.

Oppositional Defiant Disorder (ODD): A pattern of negativistic, hostile, and defiant behavior more pronounced than usually seen in children of similar mental age. ODD includes such symptoms as anger, argumentativeness, resentment, swearing, deliberate rule breaking, and annoying others. It needs to be distinguished from the attention-deficit hyperactivity disorder (ADHD) that it frequently accompanies; ODD can evolve into a conduct disorder.

Paraprofessionals (in education): Trained classroom aides who assist teachers; may include parents.

Pervasive Developmental Disorder (PDD): A poorly defined category of disability that involves problems in social interaction and verbal and nonverbal communication. PDD includes autism as its major diagnostic entity; *PDD not otherwise specified* refers to children who have autistic features but do not formally qualify for that diagnosis. In the past, the major differential point between the two diagnoses was age of onset, so that autism referred to early infantile autism (before 30 months), whereas PDD had a childhood onset (after 30 months of age). PDD is a pattern of atypical development that can coexist with mental retardation.

Physical Therapy (PT): The functional evaluation and the planning and use of a program of purposeful activities to develop and maintain large muscle strength, endurance, coordination, and control.

Positive Reinforcement: Presentation of a stimulus or event immediately after a behavior has been emitted that has the effect of increasing the occurrence of that behavior in the future.

Positive Behavioral Supports (PBS): A proactive, problem-solving, and data-based approach to enhancing students' successful behavioral outcomes. PBS derives support from applied behavioral analysis and behavior management but is a more comprehensive approach because it focuses not just on remediating a student's impending behaviors but also on rearranging environments and changing systems to prevent students from having impeding problems in the first place. PBS has been particularly effective with students with autism; likewise, it is a highly effective strategy for all students with impeding behavior, whether or not they have autism or any other disability.

Related Services: Developmental, corrective, and other supportive services as are required to assist a student with a disability and includes speech-language pathology, audiology services, psychological services, physical therapy, occupational therapy, counseling services, including rehabilitation counseling services, orientation and mobility services, medical services as defined in this section, parent counseling and training, school health services, school social work, assistive technology services, other appropriate developmental or corrective support services, appropriate access to recreation and other appropriate support services.

Response to Intervention (RTI): Under the reauthorization of IDEA (2004), a process for use on its own or in tandem with traditional discrepancy data by which a child who is struggling academically in school is evaluated for his/her qualification for special education services by using a structured, observational, and data-driven approach of large group, smaller group, and individual assessments.

Self-contained Class: A special classroom, usually located within a regular public school building, that includes only exceptional children.

Sensory Integration: The neurological process that organizes sensation from one's own body and from the environment and enables one to use the body effectively within the environment. The spatial and temporal aspects of inputs from different sensory modalities are interpreted, associated, and unified. The

brain selects, enhances, inhibits, compares, and associates sensory information in a flexible, constantly changing pattern.

Student with a Disability: Defined in section 4401(1) of Education Law is a student who has not attained the age of 21 prior to September 1st and who is entitled to attend public schools pursuant to section 3202 of the Education Law and who, because of mental, physical or emotional reasons, has been identified as having a disability and who requires special services and programs approved by the department. The terms used in this definition are defined as follows:

(1) *Autism* means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects a student's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a student's educational performance is adversely affected primarily because the student has an emotional disturbance as defined in paragraph 4 of this subdivision. A student who manifests the characteristics of autism after age three could be diagnosed as having autism if the criteria in this paragraph are otherwise satisfied.

(2) *Deafness* means a hearing impairment that is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification, and that adversely affects a student's educational performance.

(3) *Deaf-blindness* means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for students with deafness or students with blindness.

(4) *Emotional disturbance* means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a student's educational performance: (a) an inability to learn that cannot be explained by intellectual, sensory, or health factors; (b) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (c) inappropriate types of behavior or feelings under normal circumstances; (d) a generally pervasive mood of unhappiness or depression; or (e) a tendency to develop physical symptoms or fears associated with personal or school problems; (f) the term includes schizophrenia. The term does not apply to students who are socially maladjusted**,** unless it is determined that they have an emotional disturbance.

(5) *Hearing impairment* means an impairment in hearing, whether permanent or fluctuating**,** that adversely affects the child's educational performance but that is not included under the definition of *deafness* in this section.

(6) *Learning disability* means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations as determined in accordance with section 200.4(c)(6) of federal regulations. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural or economic disadvantage.

(7) *Mental retardation* means significantly subaverage general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a student's educational performance**.**

(8) *Multiple disabilities* means concomitant impairments (such as mental retardation-blindness, mental retardation-orthopedic impairment, etc.), the combination of which cause such severe educational needs

that they cannot be accommodated in a special education program solely for one of the impairments. The term does not include *deaf-blindness*.

(9) *Orthopedic impairment* means a severe orthopedic impairment that adversely affects a student's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputation, and fractures or burns that cause contractures).

(10) *Other health-impairment* means having limited strength, vitality or alertness**,** including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that is due to chronic or acute health problems, including but not limited to a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, attention deficit disorder or attention deficit hyperactivity disorder or Tourette syndrome, which adversely affects a student's educational performance.

(11) *Speech or language impairment* means a communication disorder, such as stuttering, impaired articulation; a language impairment or a voice impairment that adversely affects a student's educational performance.

(12) *Traumatic brain injury* means an acquired injury to the brain caused by an external physical force or by certain medical conditions such as stroke, encephalitis, aneurysm, anoxia or brain tumors with resulting impairments that adversely affect educational performance. The term includes open or closed head injuries or brain injuries from certain medical conditions resulting in mild, moderate or severe impairments in one or more areas, including cognition, language, memory, attention, reasoning, abstract thinking, judgment, problem solving, sensory, perceptual and motor abilities, psychosocial behavior, physical functions, information processing, and speech. The term does not include injuries that are congenital or caused by birth trauma.

(13) *Visual impairment including blindness* means an impairment in vision that, even with correction, adversely affects a student's educational performance. The term includes both partial sight and blindness.

Universal Design for Learning (UDL): A system of instruction whereby learners are assured of *multiple means of representation,* giving them various ways of acquiring information and knowledge, *multiple means of expression,* providing them alternatives for demonstrating what they know, and *multiple means of engagement,* tapping into their interests, offering appropriate challenges, and increasing motivation.

References:

Modified excerpts from :

Accardo, P. J. & Whitman, B. Y..(1996). *Dictionary of developmental disabilities terminology.* New York: Paul H. Brookes.

Amendments to Parts 200 of the regulations of the Commissioner of Education to Implement IDEA 2004- December 2005 Section 200.1 Definitions. As used in Part 200 (Students with Disabilities) retrieved from h ttp://www.vesid.nysed.gov/specialed/publications/lawsandregs/part200.htm#200.1

TEMPLATE: PLANNING TO CO-TEACH

CLASS / SUBJECT AREA / SEMESTER _____

GENERAL EDUCATION TEAM MEMBER _____

SPECIAL EDUCATION TEAM MEMBER _____

WHEN IS YOUR WEEKLY PLANNING TIME SCHEDULED?

Monday   Tuesday   Wednesday   Thursday   Friday / From _____ to _____

Notes:

HOW WILL TEACHER EQUITY BE ESTABLISHED IN CLASS?

_____

TEXTBOOK(S)   _____
_____
_____

INSTRUCTIONAL   _____
MATERIALS   _____
_____

STUDENT   _____
RESPONSIBILITIES   _____
_____
_____

CLASSROOM   _____
RULES   _____
_____
_____
_____
_____
_____

DISCIPLINE   _____
PLAN   _____
_____

PREFERRED TEAM TEACHING MODEL(S)	One teach, one observe Station Teaching Alternative Teaching Other: One teach, one drift Parallel Teaching Tag Team Teaching _____

Primary Responsibilities of General Educator	Primary Responsibilities of Special Educator

Joint Responsibilities

INSTRUCTIONAL
FORMATS   _____
_____
_____
_____

STUDENT
EVALUATION   _____
_____
_____
_____

ARRANGEMENT
OF ROOM   _____
_____

PEER FEEDBACK   _____
This agreement should be reviewed periodically for necessary adjustments on a mutually agreed upon basis.

TEMPLATE: SAMPLE LESSON PLAN

Responsibility

DATE/DAY/CLASS _____

STANDARD(S) _____

WHICH TEAM TEACHING MODEL?

1 teach, 1 observe   1 teach, 1 drift   Station teaching   Parallel teaching   Alternative teaching   Tag team teaching   Other: _____

OBJECTIVE(S)
A. INSTRUCTIONAL _____

_____

B. SOCIAL _____
C. BEHAVIORAL _____

AIM (Question form, starting with "How" or "Why") _____

_____

DO NOW _____

_____

MOTIVATION _____
MATERIALS _____
PROCEDURE
1.
2.
3.
4.
5.
6.

TYPE OF QUESTIONS?

Knowledge	Analysis
Comprehension	Synthesis
Application	Evaluation

GROUPING & ACTIVITIES?

Individual	Small Group
Pairs	Large Group
Triads	Whole Class

INCORPORATION OF SEVERAL MULTIPLE INTELLIGENCES

LING.   MATH/LOGIC   VIS-SPATIAL   BODILY KIN.   MUSICAL   NATURAL   INTER-PERS   INTRA-PERS

SUMMARY/MAJOR POINTS _____

_____

INDIV. MODIFICATIONS _____

_____

HOMEWORK _____
NOTES _____

New York City Task Force for Quality Inclusive Schooling

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