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ABSTRACT

This study examined the literature and state policies concerning noncategorical certification of special education teachers. First, the issues are identified and include services organized around the categorical conditions defined in Federal law, the tendency of categorical certification to adversely affect teacher supply and limit administrative flexibility, and the tendency of too broad certification to result in teachers poorly qualified to teach the range of categories. Research on differentiating characteristics of mild handicapping conditions generally shows only slight differences between the mentally retarded, learning disabled, and mildly emotionally disturbed. Research on instructional methods consistently fails to indicate that different approaches to instruction are needed for different categories of mildly handicapped students. States have tended to move toward more noncategorical certification raising some concerns about adequate training. Teachers may be trained categorically and then broadly certified and placed. Since certification standards can serve as a major control for quality, states are encouraged to (1) develop certification policies that reflect the two dimensions of functional level and age; (2) provide teacher training that parallels certification policies; and (3) place special education students in classrooms according to the same two dimensions of functional level and age. (DB)

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Categorical Certification in Special Ed:
Does It Really Make a Difference?

by

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EXECUTIVE SUMMARY

State certification policies are critical factors in determining the quality of special education services in the public schools. More than two-thirds of the states have made some type of revision to their state certification standards, including special education, during this decade. Within special education, there has been a slow but definite trend for states to move toward a noncategorical model. While this movement appears to be driven by administrative concerns, research on differentiating characteristics and instructional needs of students with mildly handicapping conditions tends to support noncategorical certification. Yet, some states experiencing problems with what they consider to be poorly qualified, generic special education teachers are questioning the policy of noncategorical certification.

What Are The Issues?

Debates about categorical versus noncategorical certification of special education teachers abound. The field of special education is known for its categorization of students by the nature of their handicapping condition(s). In 1975, with passage of the Education of All Handicapped Children Act (P.L. 94-142), 11 different categories of disabling conditions were established as the criteria for special education service delivery.

State certification in special education is currently a mix of licensing in specific disability areas and in broad or generic areas. Categorical certification is the more restrictive of the two options. It

has a tendency to adversely affect teacher supply, limit administrative flexibility in service delivery, and create redundancy within teacher preparation programs. Broad area certification allows teachers to instruct several categories of handicapped children. Too broad a certification, however, can result in teachers who are poorly qualified to teach well the range of categories that may be present in the classroom.

The problem before the states, then, is to design certification policies that represent the best of what is known about teaching in special education, while recognizing the need to maintain an adequate quantity of teachers capable of delivering quality services to the handicapped learner.

What Does the Research Show?

Researchers have looked at special education's practice of labeling and serving students according to specific handicapping conditions. Their efforts, however, have focused primarily on the less severe disorders--mildly mentally retarded (MR), learning disabled (LD), and behavior disordered (BD) or mildly emotionally disturbed (ED).

The research looks at two areas: the differentiating characteristics of the various mild conditions and the instructional methods and curricula that are effective with specific handicapping conditions. Results are mixed. Studies generally report slight differences on IQ and achievement tests and on conceptual tasks between mildly mentally retarded and the other two categories. Teachers also report differences among these three types of students. These

perceptions, however, are attributed to stereotyping and not to actual observable characteristics.

Research on instructional methods consistently fails to produce evidence that different approaches to instruction are needed for different categories of mildly handicapped students. Teachers who design and conduct programs that incorporate best practices--such as direct instruction, contingent feedback, and continuous evaluation--are equally effective with all mildly handicapped children.

The lack of empirical evidence to support categorical grouping of these students or training of teachers does not translate into universal support for the noncategorical approach. Many parents of LD students do not favor their children's placement in classrooms with BD or mild MR students. Some professionals, many of whom have invested long careers in one categorical area or another, feel legitimately tied to the notion that differences exist among these categories of mildly handicapped. Given the current research base, the issue is not categorization but teacher skill in delivering effective instruction.

What Are Current State Policies?

From 1977 to 1986, 10 states moved from a categorical to a more noncategorical approach to certification. The distinction between the two is not a sharp one, however. States with a noncategorical slant typically also issue endorsements for certain types or handicaps or certain types of personnel. Likewise, states that maintain a primarily categorical orientation may issue cross-categorical certification for some personnel.

The move toward noncategorical certification prompted the most comment from state department representatives responding to a 1986 survey of state certification policies. Their concern centered around a perceived lack of adequate training and skill of teachers broadly certified. It appears that teacher training programs have not kept pace with changes in certification standards. Many teachers continue to be trained categorically only to be broadly certified and placed.

What Are the Implications for Policy?

State certification policies, teacher preparation programs, and teacher placement all affect service delivery. Teacher training institutions and local public schools share responsibility for assuring quality in special education services. Certification standards can serve as a major control for quality.

To enhance special education service delivery, states can

- develop certification policies that reflect two dimensions: functional level (mild, moderate, or severe) and age (preschool, elementary, secondary);
- provide teacher training that parallels certification policies; and
- place special education students in classrooms according to the same two dimensions--their functional level and age.

Setting standards that recognize what teachers really must know to be effective with handicapped students and guaranteeing that teachers have experience with students they will instruct are much needed steps toward assuring an appropriate public education for our nation's handicapped students.

Introduction

State certification policies are an important aspect of a state department of education's quality control in education. The licensing of education personnel is one of the oldest functions of state departments of education and is based on the premise that an individual must demonstrate certain competencies to become a teacher. Certification policies, in part, crystallize a state's orientation to service delivery and set the standards for quality. In fact, state departments, through the exercise of their certification policies, serve as the gatekeepers to the profession of education. Equally important is the effect of certification policies on work force supply and on the content and rigor of preservice training programs. Thus, changes in certification policies can neither be capricious nor formulated in a vacuum without regard for how such policies will bump against the realities of providing adequate quantities of personnel who can deliver quality educational services in the public schools.

The dilemmas and controversies involved in setting certification standards are perhaps best exemplified in the area of special education, where debates about categorical versus noncategorical certification abound. Traditionally, special education has been based on the classification or categorization of students according to the nature of their disabling condition(s). Some of the more traditional categories include mental retardation, emotional disturbance, and learning disabilities. The 1975 Education for All Handicapped Children Act

(P.L. 94-142) established categories of handicapping conditions as the criteria for special education service delivery. These include: deaf, deaf-blind, hard of hearing, visually handicapped, mentally retarded, multihandicapped, orthopedically impaired, other health impaired, seriously emotionally disturbed, specific learning disability, and speech impaired. Categorical labels have changed over the years, and states have elected to use some or all of the federal categories to define their handicapped students. For example, some states refer to emotionally disturbed students as behavior disordered or use terms such as educationally or learning handicapped to include the learning disabled, mildly retarded, and mildly emotionally disturbed. While some states refer to their more functionally limited students as trainable mentally retarded, multiple handicapped, and so forth, other states combine all such students under the category of severely handicapped or severely intellectually limited. Regardless of the terminology, the categories are used to group students with similar learning patterns for instruction and subsequently determine teacher certification policies.

States are struggling with whether special education teachers should be licensed to teach according to specific disability areas or be given one broad or generic license that allows them to teach children with several types or categories of handicapping conditions. The problem before the states, then, is to design a policy for governing the certification of teachers that represents the best of what is known about special education teachers, while recognizing the need for an adequate quantity of teachers who can deliver quality services to the handicapped learner in the environment provided by local schools.

Review of the Problem

States' use of noncategorical certification is most prevalent for teachers of the mildly handicapped, usually including the learning disabled, the mildly mentally retarded, and the behaviorally disordered students. This practice does not, however, extend to teachers of the more moderately and severely handicapped. Here, states typically mix categorical and generic certification, requiring that teachers first meet a set of broad generic requirements and then seek special "endorsements" that require additional course work or competency attainment in specific categorical areas. Endorsements are usually reserved for teachers of the more severely handicapped or for teachers of other students, such as the visual and hearing impaired, whose handicaps require highly specialized teacher training. Further complicating the certification issue is student age. Both categorical and noncategorical certification can be specific to grade levels (e.g., K-3rd grade, 3rd-8th grade, etc.) or can encompass the full range of grades K-12.

Each of these certification options has profound implications for a state's special education work force supply, its preservice training programs, and the quality of its special education programs. The more restrictive policy of categorical certification can reduce supplies of teachers, limit administrative flexibility in terms of how services can be delivered, and create redundancy within teacher preparation programs. Meanwhile, too broad a certification can result in teachers who really aren't well qualified to teach all the students who will comprise their classes. Certification of teachers, especially those in special education, is one of the most volatile policy areas in the states.

A national study conducted by the Institute for the Study of Exceptional Children and Youth (McLaughlin, Smith-Davis, & Burke, 1986) reported that more than 65 percent of the states had changed their certification policies during this decade. The range of changes in special education included the creation of new speciality areas (e.g., autism), the creation of noncategorical certification, and major additions in requirements such as increased teacher training or teacher testing. The study, which involved interviews with representatives of state departments of education, indicated that most of the changes resulted from changes in the way services were organized, such as the creation of multicategorical resource rooms. These programs are usually designed to serve in the same classroom the more mildly handicapped students, such as the learning disabled, mildly retarded, and mildly emotionally disturbed. Such arrangements facilitate flexibility in staff deployment. While none of the policy changes were without their repercussions, we'll focus on only one in this paper: the creation of noncategorical certification.

The Basis for Certification Policy in Special Education

Historically, the field of special education itself has been organized around categories. From its inception, the field has emphasized classification of students into specific categories, such as mental retardation and emotional disturbance. Supported by the underlying assumption that students with specific handicapping conditions require uniquely different treatments or programs that match their

handicap, the service delivery system, teacher training programs, and certification policies were founded on this classification system and its assumptions. In addition, the policy base in special education, as epitomized by P.L. 94-142, is distinctly categorical.

Over the years, the assumptions about the categorical model for providing programs for students have been challenged, particularly for those students who are more mildly handicapped (see for instance Reynolds, 1979; Reynolds, Wang, & Walberg, 1987). Critics have challenged the assumptions for a number of reasons, including a general lack of data supporting real or educationally relevant differences among characteristics of different categories of children and their instructional needs.

Research on Classification

Over the years, the issues of labeling and serving handicapped students according to specific handicapping conditions have been subjected to a substantial amount of research, but primarily in the areas of the mildly mentally retarded (MR), learning disabled (LD), and behavior disordered (BD) or mildly emotionally disturbed (ED). The research has focused on two areas: the differentiating characteristics of the various mild conditions, and the instructional methods and curricula that are effective with specific handicapping conditions. Recent reviews of both bodies of research (Epps & Tindal, 1987; Morsink, Thomas, & Smith-Davis, 1987; Reschly, 1987) provide some direction to the practice of categorizing students by handicap.

Results of research related to differentiating characteristics of mild MR, LD, and BD/ED students are mixed. Some studies have demonstrated that student characteristics, such as scores on IQ and achievement tests and conceptual tasks, may differ, albeit slightly, between the mild MR and the other two categories. Even fewer differences have been found between BD/ED and the other categories, MR or LD. While differences have been found among teachers' perceptions of these three types of students, these have been attributed to stereotyping and not to actual observable characteristics.

Research related to teaching methodology has consistently indicated that there are no differences among mildly handicapped students in terms of their instructional needs or in the effectiveness of various techniques and procedures. Furthermore, the similarities are greatest among the mild MR and LD. In short, the reviews conclude that there is no evidence to suggest that different approaches to instruction are needed for different categories of mildly handicapped students. Thus, teachers who design and conduct programs that incorporate best practices--such as direct instruction, contingent feedback, and continuous evaluation--are equally effective with all mildly handicapped children, and do not need special techniques for these different categories.

While there is virtually no empirical evidence to support specialized grouping of these students or specialized categorical training of teachers, there is strong opposition to the noncategorical approach among some professionals and parents. Many parents of LD students fear that their child will be stigmatized by placement in

classrooms with BD and MR students. In addition, some professionals, who have invested long careers in one or another categorical area, feel legitimately tied to the notion that there is some difference among these mildly handicapped students. However, given the current research base, the bottom line is that it doesn't matter what category a student or teacher is assigned to, but whether or not the teacher can deliver effective instruction.

Competencies for Special Educators

The practice of teacher certification rests on the premise that educational professionals must possess certain skills and competencies to be effective with students. This belief has been tenaciously maintained in the area of special education because of the complex needs and highly specialized educational requirements of students with handicaps. Over the years, various competency lists and professional standards have been generated. Two reviews in this area (Richardson, Noel, Boyer, & Gallant, 1985; Valdivieso, in preparation) have identified some 20 separate lists of competencies that effective special educators should demonstrate. All but seven of these lists represent professional opinion and have not been empirically validated. Despite the questionable validity of the lists, a comparison of them, as shown in Figure 1, yields a common group of competencies.

Given that these competencies continuously reappear in the literature, it is safe to assume that there is some evidence, or at least professional wisdom, to suggest their importance to educating handicapped students.

Figure 1: Common Elements of Special Education Competency Lists

Knowledge of special education law and mandates

Implementation of legal procedures such as IEPs, multidisciplinary assessments, due process, etc.

Philosophy and history of special education

Classroom behavior management

Conducting and interpreting student assessments

Development and modification of curricula

Techniques for integrating handicapped students into the school and community

Consultative skills

Communication with regular educators and other disciplines

Working with parents and families

As noted earlier, relatively few studies have systematically attempted to identify specific teaching behaviors (skills or competencies) of special education teachers that are considered to be better than others. An early study of teachers of the mentally retarded conducted by Meisgeier (1965) found that those teachers judged to be better in terms of the programs they were implementing had higher academic achievement, higher scholastic aptitude, and more positive attitudes toward the handicapped. Scheuer (1971) found that emotionally disturbed students achieved more if they felt they had a good relationship with their teacher.

Fredericks, Anderson, & Baldwin (1977) identified three factors that accounted for the greatest gains among a group of severely handicapped students: teacher's task analyses of programs, teacher's ability to provide positive feedback, and length of the instructional day. Finally,

Westling, Koorland, & Rose (1981) concluded that the most effective special education teachers, as perceived by their local directors, were those with more formal graduate education, more practicum experience during their preparatory course work, and more experience teaching handicapped students. In addition, more of the teachers believed to be superior developed their own curricula and used student evaluations to design and modify individual programs.

This sparse research base provides some insight into what may constitute an effective special education teacher. The lack of sound research linking the demonstration of these skills to student outcomes is due in large measure to the difficult, if not impossible, task of separating teacher behavior from student academic behavior and instructional setting (e.g., Leinhardt, Zigmond, & Coley, 1981).

The Literature and Special Education Certification

In general, little research is available regarding special education certification per se, and even less with regard to types of certification policies, such as categorical versus noncategorical. Research in this area is limited to three studies. In the area of the severely handicapped, Geiger and Justen (1983) conducted a national survey to determine how many states had adopted a definition of the term "severely handicapped" and how each state had structured its certification requirements for teachers of this population. In terms of certification, they found that states adopted one of three approaches: (a) 8 states require a general special education certificate to work with all types of students; (b) 21 states require a certificate/endorsement in one or more

categorical areas such as mental retardation; and (c) 21 states require a specialized certificate/endorsement in the area of severely handicapped.

Two studies (Marston, 1987; O'Sullivan, Marston, & Magnusson, 1987) specifically examined the relationship between type of certification (categorical or noncategorical) held by a special education teacher and the reading achievement of learning disabled and educable mentally retarded (EMR) children receiving instruction in a resource room. Both of these studies found that there was no interaction between student achievement and the type of certification held by a teacher. That is, learning disabled students achieved equally if instructed by a teacher holding certification in LD or EMR or joint LD/EMR. In other words, neither categorical nor cross-categorical certification made the difference in student achievement.

State Certification Policies

Although no major research base supports the shift to noncategorical approaches, at least 10 states have moved from categorical to noncategorical certification. In 1977, only 11 states were reported to require noncategorical certification (Gilmore & Argyros, 1977). In the 1986 survey conducted by McLaughlin, et al., 21 states had generic or noncategorical certification. However, the distinction between categorical and generic certification is not a sharp one. States with a basic noncategorical certification can and usually do have specialty endorsement areas for certain types of handicaps or certain types of personnel (e.g., adaptive physical education teachers). In addition,

states that maintain a primarily categorical certification may issue cross-categorical certification for teachers who provide services in particular settings, like resource rooms, or for consulting teachers, who instruct several types of students. Mixed certification policies almost mirror the service delivery arrangements in a given state and reflect the lack of consensus regarding certification and categorical placement.

Overall, however, the 1986 survey showed that, to increase flexibility in deployment of teachers, certification policies were being modified to include more generic categories. At the same time, there has been a tendency for states to create new endorsements or otherwise increase the requirements for teachers of the severely handicapped, either as a group or by category (e.g., mentally retarded, autistic, etc.). In addition, while the majority of certification remained K-12, some states were moving toward recognizing developmental levels or age and grade categories in their certification practices, specifically in the early childhood area.

Noncategorical certification was the one issue that prompted the most comment and concern from the state representatives responding to McLaughlin and her colleagues. Most of the concern centered around what was perceived as a lack of adequate training and skill of non-categorically certified teachers in dealing with the full range of learning and behavioral handicaps presented by their students. Several states that had recently initiated noncategorical certification, were reconsidering the policy based on feedback from local districts regarding teacher performance. The change to noncategorical certification was

attributed to pressure from local districts, most frequently rural, that wanted maximum flexibility in placing teachers and less restrictive certification requirements to facilitate recruitment.

Comments regarding noncategorical certification included:

Administrators feel that they have to supplement training...not everyone is trained to work with all types of handicaps in a class. Graduates [teachers] really don't have a good knowledge of the range of handicaps they have to work with (p. 24).

We established a new type of teacher for the mildly handicapped, and we've heard mixed reactions about this new type of teacher...we'll see (p. 24).

A person with four years of training can teach four types of handicaps, and there is dissatisfaction about this. There is a particular concern with teachers of emotionally disturbed students at the secondary level that adequacy of teacher qualification is most problematic (p. 24).

Our endorsement is in one area, regardless of how a [teacher] may have specialized, so they can be put in whatever positions are open or needed. Many [preservice teachers] are afraid of this because they may train in the area of the mildly handicapped and have to teach severely handicapped. The preparation such teachers have received is not adequate, yet these kinds of assignments occur under a noncategorical endorsement system (p. 24).

We will move to stop multicategorical resource rooms. These teachers will have to have certification in all areas they serve (p. 24).

In sum, the states appear to be moving toward more noncategorical models for certification despite an undercurrent of dissatisfaction. While state officials express concerns regarding the training and placement of noncategorically certified teachers, flexibility in placement of students and increased supply of special education teachers support noncategorical certification.

Current Certification Policy Issues

A review of special education certification in several states, including those served by the Appalachia Educational Laboratory, gives a current picture of the issues confronting state policymakers.

Kentucky currently requires elementary education certification as the basis for K-12 special education. Certification for the latter is generic, permitting either dual certification or a special endorsement in learning and behavior disorders or trainable mentally handicapped in conjunction with the elementary certificate. Secondary teachers may acquire generic certification only in learning and behavior disorders. However, they are limited to teaching the grade levels for which their secondary certificate applies. Special endorsements are required for severe profound handicapped, visually impaired, and hearing impaired.

Interestingly, the state first had K-12 certification, changed to 1-7 and 8-12 certification, and has now moved back to K-12, due in part to extreme teacher shortages in some areas. Currently, the Teacher Certification Council is working on all areas of teacher certification, a subcommittee of which is reviewing some 18 issues. Some special education issues in the state include: staffing patterns, training requirements for cross-categorical teachers, continuation of dual (elementary and special education) certification, minimum preservice requirements, continuation of the emergency certification provision used when a certified special education teacher is not available, and alignment of special education certification with regular education certification, which is K-4, 5-8, and 9-12. A major variable in the

consideration of these issues is the pervasive lack of special education personnel across the state.

Tennessee has generic certification, which covers learning disabilities, mentally retarded, emotionally disturbed, crippling and special health conditions, and multihandicapped. Gifted education is no longer part of the generic special education certificate. Instead, teachers of the gifted must meet state board of education employment standards. Special endorsements are required for deaf, visually impaired, and speech and hearing. Out-of-state teachers seeking generic certification may be certified, if they have completed an approved program in any three of the four categories of handicapping conditions.

The major certification issue at present in Tennessee is the adequacy of the generic certification for the multihandicapped, the functionally more severely handicapped, and the preschool handicapped. Again, this state reported shortages of generic special education teachers. These shortages are further exacerbated by those teachers leaving special education and returning to regular education.

Virginia uses categorical certification for special education, certifying teachers in one of eight areas from K-12. However, the state has organized separate task forces, consisting of representatives from the department of education, teacher training institutions, the department of commerce, parents, and teachers to examine certification within each of the categories. More waivers are requested in special education than in other areas of certification due to the shortage of certified teachers. Problems also exist with certifying teachers from

other states without categorical training programs and without reciprocity. State officials express concern about serving students with more than one disabling condition in the same classroom. Therefore, the state currently offers cross-categorical or generic special education certification. As yet unknown is the effect of a recent recommendation by the Governor's Commission on Excellence in Education that all teachers in Virginia have a B.A. in the liberal arts. With this mandated restructuring of teacher preparation programs, education standards will be revised by July 1, 1990. At that time, the state department will develop certification guidelines to parallel teacher preparation programs. The guidelines are due in 1992.

West Virginia also certifies teachers categorically for specific learning disabled; behavior disorder, both including autism and excluding autism; mentally impaired (mild and moderate); severely and profoundly handicapped; gifted; speech language pathology; hearing impaired; visually impaired; and preschool handicapped. Three areas--specific learning disabled, behavior disorder, and mentally impaired--require elementary education certification or its equivalent. The area of gifted also carries special requirements. Gifted at the elementary level requires elementary certification. Gifted at the secondary level requires secondary level subject area specialization. Due to extreme teacher shortages and the resultant pressure from local districts, the state department is examining its certification standards.

Representatives in three other states were interviewed to determine the reliability of the 1986 data and to obtain a picture of current

trends. One of the states, Massachusetts, has recently undergone a major and radical shift to noncategorical service delivery. Thus, special education certification is totally noncategorical, but by severity level. That is, there is certification for teachers of young children with special needs, children with severe special needs, children with moderate special needs, a generic consulting teacher, and separate certificates for (a) audition [for teachers of deaf children], (b) vision, and (c) speech, language, and hearing disorders [for teachers of children with language acquisition problems].

State certification personnel report that special education certification will likely undergo some changes before September 1, 1993. The certificate for teachers of young children with special needs is expected to be subsumed within certification for early childhood, which will require all early childhood teachers to be trained to deal with children's special needs. Another anticipated change is the elimination of the certificate for generic consulting teacher. State personnel say that few school systems use the generic consulting model in service delivery. The small number of people holding the certificate generally teach children with moderate special needs, an area for which a certificate is already issued.

In each of the other two states surveyed, certification is categorical, but each also has added a generic certificate for resource room teachers of the mildly handicapped. Thus, it is fair to say that states are continuing to move toward a more generic or noncategorical model for serving the more mildly handicapped learner, and their certification requirements are being modified accordingly

Conclusions

It appears that state service models and certification policies are moving in the direction of a more noncategorical approach to serving students, especially those students with mildly handicapping conditions such as learning disabilities, educable mental retardation, and behavior disorders. A primary force behind these changes appears to be extensive teacher shortages in special education and the need to provide a degree of flexibility in grouping students and placing teachers. In almost every case, recent changes to more noncategorical certification were attributed to pressure from local education agencies caused by the lack of adequate numbers of fully certified special education teachers. These changes are supported, to some degree, by a research base that has demonstrated the efficacy of basic instructional practice across categories of children with a variety of handicapping conditions.

While noncategorical certification appears to be both conceptually sound and practical, it is not without criticism. As noted earlier, parents and some professionals resist the noncategorical approach. Also, state department representatives are concerned about what they see as a lack of the full range of skills needed to instruct children with a range of disabilities. However, the issue here is likely not related to qualitative differences among categories of students, but rather to a teacher's lack of training or experience in implementing effective instructional or behavior management techniques.

This problem is magnified if teachers are expected to be equally effective with children at very different ages and functional levels.

That is, the more important variables are not the category or label, but the level of severity (mild, moderate, and severe) and the age (infant/toddler, preschool, elementary, adolescent, transition). Curricula, instructional arrangements, and philosophies differ markedly for age and severity levels.

A further consideration is what happens to teachers once they leave their training institution. While it is easy and not totally unwarranted to fault preservice training on the quality issue, teachers placed in multicategorical rooms that combine mild, moderate, and, in some cases, severely handicapped students across several age ranges with high student/teacher ratios cannot be expected to provide quality individualized instruction. Such abuses of the noncategorical model are not uncommon according to information obtained in the 1986 survey. These abuses result from both teacher shortages and budgetary constraints.

Implications

Teacher training institutions and local public schools share responsibility for assuring quality in special education services. Certification standards can serve as a major control for quality, if such policies reflect best practice and current knowledge regarding instruction of handicapped students. States have a responsibility to address quality; states' design of special education certification can be one of their major contributions to quality programs.

The implications for policymakers, then, appear to be straightforward.

- Given the lack of substantive research demonstrating differences among students carrying different labels but of similar severity level, certification policies in special education should reflect two dimensions: the functional level of the students (e.g., mild, moderate, or severe) and age (e.g., preschool, elementary, and secondary). An example is the Massachusetts policy, which certifies by functional level and age, with some special endorsements for the more specialized areas such as vision impairment.
- Teacher training programs should parallel certification policies to ensure that teachers who are certified in a specific area have direct training and experience with that population of students.
- Placement or grouping of students must adhere to the same two dimensions. Special education classrooms should be organized by age and functional level. Teachers should not be required to provide instruction to types of students with whom they have no previous training and experience.

Certifying teachers for mental retardation in no way guarantees that these personnel have had practice and training encompassing the entire range of ages or functional levels. Without such experiences, it is unrealistic to assume that teachers understand the unique behavioral and learning characteristics presented by students of different ages and severity levels. Setting standards that recognize what teachers really must know to be effective with handicapped students and guaranteeing that teachers have experience with students they must instruct can go a long way toward assuring an appropriate public education for our nation's handicapped students.

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