A teacher and mother of a child with mental retardation examined the history and current status of the inclusion movement. A review of the historical background considers the origins of special education, the Education for All Handicapped Children Act of 1975, major court cases, and requirements of the 1997 amendments to the Individuals with Disabilities Education Act requiring that all children be considered for regular class placement regardless of the severity of the disability. The next section reviews research on inclusion of special education students in regular classrooms and issues of accountability. Discussion of what inclusion is focuses on 14 things that inclusion is not and then describes several inclusion models including co-teaching, use of a methods and resources teacher or an inclusion specialist, and such teaching methods as multilevel instruction, cooperative learning, activity-based learning, mastery learning, technology use, peer support, and tutoring programs. Examples of "typical" inclusive classrooms are followed by a review of research on the benefits of inclusion. The final sections address the following topics: what it takes for inclusion to be successful; whether inclusion can work for every disabled child; program implementation; overcoming resistance to change; and the effects of inclusion over the long term. (Contains 28 references.) (DB)
GRASPING THE PROMISE OF INCLUSION

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GRASPING THE PROMISE OF INCLUSION

Introduction

If you are a regular education teacher, or a teacher-in-training, chances are very good that you will soon encounter a mentally handicapped student placed into your classroom. Depending on your background and experience, you might feel that this is a mistake and direct the student back to “special education”. When you find out that it is not a mistake, and that this student’s chances for success are better in your classroom than in a segregated special education classroom, you might be shocked. If you are like most teachers, and haven’t received the requisite training or support to help you accommodate this student, then you will need to ask for help. This report is intended to provide you with the information needed so that you will understand why students with mental handicaps are being placed into regular classrooms and what it takes for them to be successful learners. Only by being fully informed, will you enjoy the benefits of what teachers, administrators, academic researchers and parents are discovering: that including disabled children with their non-disabled peers changes our attitudes, develops new competencies, and builds a better future for all of us.

Until you have a child with a mental disability, or know someone with a mental disability, or find you have a disabled child¹ in your classroom, you don’t think much about disabilities in general. My earliest recollection is of Bobbie—who was different. The fact that Bobbie, in the late ‘60’s, was included in our combined Grade 5 and Grade 6 class leaves many questions. Did his parents have to fight to get him included with us or was his presence a school district policy? How much work did our teacher do to make accommodations for Bobbie? What kind of assistance did Bobbie receive at home? Where is Bobbie today? These are questions that concern me, because I am the parent of a mentally disabled child. I am also a teacher, and I’d be very interested in knowing what Bobbie’s mother and teachers would say about his education and what the outcome was for Bobbie.

Historical Background

Today all school districts accept mentally handicapped children and provide special classes and/or services for them, but it wasn’t always that way. Until 1975, most disabled children and disabled people had long been barred from the public school system. It wasn’t until the passage of the Education for all Handicapped Children Act of 1975 (PL 94-142) that the legal exclusion of this minority group was abolished in the United States. The purpose of this legislation was to ensure all eligible students with disabilities received a “free and appropriate public education” (FAPE), holding out the

¹ The term “disabled child”, for the purposes of this paper, is intended to mean a mentally handicapped child. All other references in this paper to individuals with “disabilities” means individuals who are mentally handicapped.
promise of a pathway for the educational improvement for all students. (Lipsky & Gartner, 1997, p. 9)

This legislation didn't just "happen". It was the result of a long process involving complex and interweaving historical events. Revisiting some of these events\(^2\) will help to put the current situation into focus and provide a foundation to understand what tasks are ahead of us to improve the outcomes of children with special needs.

Special education began in the United States in 1823 with the establishment of a state school in Kentucky for people who were deaf. Throughout the following century, other special classes were developed many of them to remove "incorrigible" children from the regular classroom so that the remaining students could benefit. There are reports of schools keeping "retarded" children in classes held in the basement, frequently next to the boiler room, sometimes in the boiler room. (Lipsky & Gartner, 1997, p. 265)

Prior to 1975, parents had no authority in educational matters and were frequently told by school personnel that their disabled child was uneducable and untrainable. Children were sent home with a letter stating "your five-year old does not have the mental age of five. He may not attend our school." (Lipsky & Gartner, 1997, p. 265) Exceptions from compulsory attendance included any child who had been found to be unable to profit from further school attendance, so school board directors had the power to refuse or accept beginners who had not attained the mental age of five years. Once a young student was excluded, the Department of Public Welfare would step in and arrange for the care, training, and supervision of the child.

Thomas K. Gilhool was the counsel for Plaintiff's in a landmark case heard in Pennsylvania during 1972 that changed history for disabled children (see full discussion of this on the next page). In 1995, Mr. Gilhool testified to the Senate Subcommittee on Disability Policy and the House Subcommittee on Early Childhood, Youth and Families about the events that lead up to the changes in the laws pertaining to disabled children:

Most of these children eventually ended up in institutionalized care facilities where the conditions of "care" meant a grotesque life that was nasty, brutish, and short. An investigation ordered by President John Kennedy in 1968 brought the deplorable conditions of these institutions to light. His Committee on Mental Retardation concluded that if schools opened their doors and worked with mentally handicapped children, then the institutions would no longer be required.\(^3\) (Lipsky & Gartner, 1997, p. 267)

\(^2\) For the purposes of this paper, it will not be possible to include all the factors that brought about the Education for All Handicapped Children Act of 1975. The disability rights movement that brought the Americans with Disabilities Act of 1990 (PL 101-336) into law and the changes in perspectives on how children learn (demonstrated by theorists and practitioners of psychology over the past several decades) were both significant factors that are not covered in this paper.

\(^3\) According to Mr. Gilhool, this was in fact, found to be true. In 1970 the Pennsylvania Association for Retarded Children (PARC) reported more than 15,000 children of school age had been sent to institutions; by 1982, four years after the effective date of PL 94-142, fewer than 1,200 were in institutions. Since then, the numbers continue to approach zero. (Lipsky & Gartner, 1997, p. 267)
But how did these institutions come into being? According to Mr. Gilhool, it started at the beginning of the 19th Century, when a wave of immigrants arrived in America. As a response to unknown fears, these newcomers were administered the new Binet IQ test by the United States Public Health Service with the following results: 79% of Italians were found to be feeble-minded, 80% of Hungarians, 83% of Jews and 87% of Russians! National hysteria ensued and pamphlets were circulated throughout the country calling for the need to segregate the feeble-minded, the epileptic, and defective children. In the southern states, Jim Crow laws were enacted to segregate according to race. Public institutions were erected to house colored people, immigrants, the feeble-minded, the epileptic, and defective children, in order to protect the rest of society from the perceived dangers of contact with them. Social workers, physicians, and teachers were to report all persons believed to be feeble-minded so that they could be segregated into institutions. Parents of “feeble-minded” children were considered criminals if they did not perform their duty, that is, send them off to institutions. (Lipsky & Gartner, 1997, p. 268-270)

It was against these policies of exclusion and segregation that parent advocates fought to protect their children from the institutions, and open doors for them back at the schools. As part of the civil rights movement, the Brown v. Board of Education case heard in 1954 by the United States Supreme Court determined that education was a right, which must be made available to all on equal terms. This paved the way for the Pennsylvania Association for Retarded Children (PARC) founded by young parents after World War II, to bring a class action suit on behalf of their mentally disabled children against the Commonwealth of Pennsylvania in 1972.4 The case was won, and a “free public program of education and training appropriate to the child’s capacities” became the law.

The PARC Decree spawned three years of extensive hearings in Congress prior to the formation of the Education for all Handicapped Children Act of 1975 (reversing state-imposed exclusion and segregation practices). A “zero-reject” school system was ordered and children with disabilities were no longer to be treated as outcasts by American society.

Under the new laws, school districts, teachers, principals, and teacher training institutions were required to know and to actually implement “state of the art” practices in the effective education of disabled children. This placed enormous pressure on educators, but as Mr. Gilhool states, that is exactly what the Act intended. (Lipsky & Gartner, 1997, p. 272)

The parents who initiated the litigation on behalf of their children won other rights, too. Parents were now to be considered active participants and equally involved in the decision-making while the individual education plan (IEP) was formulated for their child. Their children had the right to be educated in a regular education classroom (called least restrictive environment—LRE) with the appropriate assistance of services and

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4 This was the case that Mr. Thomas K. Gilhool defended.
supports, and their children had the right to have teachers that were fully informed and continuously trained on promising practices. In fact, under this new law, school districts were mandated to adopt promising practices of instruction.

In 1990, Congress passed the Individuals with Disabilities Education Act (IDEA, PL101-476) as the reauthorization of the 1975 law. Despite this law, parents brought an increasing number of court cases to address the multitude of problems they were having with resistant school districts. Many of the cases were based on getting disabled children into a regular classroom environment, or parents found that school districts were not willing to adopt proven educational methods and so they sought relief through the courts. In my own example, Thompson vs. Fayette County Schools (1997), the hearing officer ordered reimbursement to the parent (me) for expenses I incurred for training the school's paraprofessional (who worked with my child in the classroom). The hearing officer also ordered reimbursement for the expenses I incurred for providing my child with one year of applied behavioral analytic (ABA) therapy at home. It became necessary to file for a due process hearing because, after three years of pleading with the school district, school administrators continually declined to provide this therapy at school, claiming that my child's academic and social progress had nothing to do with the ABA therapy he received at home. My point is that despite IDEA laws, accessing an appropriate education for my disabled child was and continues to be a difficult endeavor.

By 1995, the U.S. Department of Education asked the Office of Special Education Programs (OSEP) to take a close look at how the states across the country were faring with their compliance of the Federal education laws. It was then determined that an "extraordinary range in placement patterns among states" existed, and there were "ongoing findings of states' failure to implement the LRE requirements," and that "schools failed to consider general education as an option for students with disabilities when determining placement." (Lipsky & Gartner, 1997, p. 8) These findings, coupled with the ongoing litigation efforts on the part of parents, caused Congress to act again.

In 1997, the Individuals with Disabilities Education Act Amendments (PL 105-17) were passed. Now the states had a more clearly defined set of regulations for enacting LRE. First, it was clarified that all children are to be considered for placement into a regular classroom first, regardless of the severity of their disability. If a child is not placed into a regular classroom, the IEP document must give an explanation as to why not. Supplementary aids and services are now clearly defined in the law, and Part B funding mechanisms are now in place to pay for special education and related services provided in the regular class, even if non-disabled children benefit.

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Footnotes:

5 For a complete summary, refer to Lipsky & Gartner's Court Decisions Regarding Inclusive Education, p. 85-98.
6 ABA is a scientifically proven educational method effective with children with autism.
7 When the classroom paraprofessional quit, and my personal funds ran out, the ABA therapy could no longer be provided, with the result of severe regression in my child.
8 LRE: Least Restrictive Environment
9 For a full discussion of the 1997 IDEA laws as they pertain to the IEP, refer to the DRAFT IEP Checklist dated April 21, 1999 available at www.cde.ca.gov/spbranch/sed/iepcheck.htm
To the maximum extent appropriate, children with disabilities, including children in public or private institutions and other care facilities, are educated with children who are not disabled; and 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 the child is such that education in the regular class with the use of supplementary aids and services cannot be achieved satisfactorily. (IDEA Section 612 (a)(5)(A))

Research and Accountability

These are difficult times for school districts across the United States. As laws and regulations are passed, school districts are pressured to use funds to meet the diverse and increasing needs of the student population. Added to this situation, parents, policy makers, and the leaders of the business community are becoming more and more dissatisfied with the educational outcomes of our schools.

The popular media, presidential commissions, research, and now an upcoming presidential election, have all caused the current focus to be directed on public education. Schools are now closely monitored through nation-wide testing of student performance. With this trend, effective teaching in special education and the outcomes for special education students are also being examined.

In California, the impact of this trend is described by Delaine Eastin, the State Superintendent of Public Instruction: "Our department will be utilizing focused monitoring methods to evaluate schooling and related services in special education so that adjustments can be made to prepare our children to reach their potential." (California Department of Education, 2000, p. iii) The fact that Mrs. Eastin speaks of forthcoming "adjustments" shows the state's recognition that improvements are needed in the realm of special education.

So what needs to be improved? Howard Gardner (Multiple Intelligences) and Jennifer Goldman explain it this way:

Tragically, the only thing special about the education Jamie will probably receive is that it will revolve around especially small expectations that perpetuate minimal academic achievement (Granger & Granger, 1986). If Jamie is lucky, he will pass through the education system with moderate success. But if Jamie is like many of the 4.37 million children enrolled in special education classes in the United States, he may find himself locked into a cycle of learning failure that will affect the course of his educational career, his resulting self-concept, and ultimately, his future as a productive member of society. (Lipsky & Gartner, 1997, p. 354)

The first "bolt" came in 1983, when a position paper by Reynolds and Wang stated that students placed into special education programs were not being successful in school. As a result, the U.S. Department of Education responded with a new initiative and
asked general and special educators to jointly share the responsibility for educating special needs children. This created a furor, with special educators defensively responding that there was no need for change and also arguing that general educators were unwilling and unable to serve students with disabilities. (Lipsky & Gartner, 1997, p. 78)

So what was the basis for the idea of placing special education students into regular classrooms as a solution? The answer to this question is that educational researchers were beginning to report about the effects of the environment on learning. Taking into account that "abnormal anatomical structures and physiological functions" restrict learning, Bijou says:

A retarded (sic) individual, from this point of view is one who has a limited behavioral repertoire because of the deficiencies in the environment and constraints imposed on the interactions that constitute his history—the more limited and restrictive the interactions, the more underdeveloped his behavioral repertoire. (Wolery, et. al, 1988, p. 13)

Although Bandura's social learning theory had been known and accepted since 1969, an awareness of the implications of placing students with deficits into the same classroom—that it would reduce their opportunities for learning appropriate behaviors due to the lack of role models—was just emerging. A good example of this is found in the research about autism:

A 1983 study concluded that segregating children with autism could have some toxic effects. The problem is that social disabilities are central to a diagnosis of autism, therefore it is critical that children with autism receive active social skills intervention. However, there are few opportunities to learn how to develop age-appropriate social skills when constantly surrounded by other children with autism (in an “autism class”). There is almost no chance of making friends when there is no inclusion with typical peers. (McGee, 2000, p. 26-27)

During the remainder of the 1980's, educational researchers challenged the fundamental design of having special and regular education as two separate systems. Researchers included Stainback and Stainback, who in 1984, called for the "merger" of general and special education; a year later, Biklen called for "integrating" special and general education; and Gartner and Lipsky, in 1987, who called for going "beyond special education" to a unitary and "refashioned mainstream." The same year, Biklen, Lehr, Searl, and Taylor proposed "purposeful integration" whereby all students with disabilities, regardless of severity, would be educated in general classrooms, with

10 As a teacher, I agree with the contention that we are not prepared formally by training to know how to address the needs of special students within our general classes. Unless general educators are provided with unique opportunities to learn how to serve students with disabilities, and provided with ongoing professional support in this endeavor, inclusion will not succeed.

11 With social learning theory, the process of learning through observation of others’ behavior and the consequences others receive for their behavior is referred to as vicarious learning. (Wolery et. al, 1988, p. 13)
necessary supports. The authors emphasized that this did not mean doing away with "special services" or failing to provide necessary support services to the child and teacher to make integration work. (Lipsky & Gartner, 1997, p. 79)

By the mid-90's, enough data had been collected to determine that the outcomes of students educated in a separate special education system were still severely limited. (Lipsky & Gartner, 1997, p. 11) The outcomes of special education students did not improve for graduation rates, post-secondary education and training opportunities, employment, or residential independence. In the National Longitudinal Transition Study of Special Education Students by the U.S. Department of Education (published in 1995), the evidence showed that students who spent more time in regular education classes experienced better results after high school. (Lipsky & Gartner, 1997, p. 13)

In addition to this information, some of the states began questioning the effectiveness of special education as well. Among the problems reported: a disproportionate number of students from ethnic backgrounds were placed in special education, too many students overall were placed in special education, students were unnecessarily labeled in order to "fit" into the system, and labeling of students was leading to educating them in overly segregated settings. Additional problems included the fact that special education had evolved into a separate system, lean budgetary times with escalating costs of special education were beginning to eat into the general education program, and educators were not regularly providing substantially different methods of instruction depending on individual student needs. (Lipsky & Gartner, 1997, p. 79)

Teacher preparation programs have also come under scrutiny in the past decade. Since 1975, the Education for All Handicapped Children Act has required the states to develop personnel preparation programs involving "state-of-the art" practices. However, Williams, Fox, Thousand, and Fox in 1990 stated that a marked gap existed between the understanding of "best practices" and their implementation. (Lipsky & Gartner, 1997, p. 15) While noting some improvements in special education practice, Vaughn, Schumm, Elbaum, Saumell, Cohen, Caballero, Duryea, and Gonzales at a 1995 conference, presented one aspect of the problem: that there continues to be a substantial inadequacy in teacher education programs, both pre-service and in-service. Teacher training programs and licensing procedures continue to perpetuate a dual system in education with general education teachers concentrating on whole class instruction and special education teacher preparation programs focussing on meeting individual needs. The dilemma of meeting the needs of the whole class versus meeting the needs of individual students is not addressed. (Lipsky & Gartner, 1997, p. 16)

From a parent's perspective, accessing state-of-the-art practices through the public school system (in order to help their disabled child), depends on where they live. As Lipsky and Gartner report, there is a wide diversity in the delivery of appropriate educational programs for handicapped children. (Lipsky & Gartner, 1997, p. 6-7) When dealing with their autistic children, many educated parents find they are faced with a short window of opportunity to correct and/or ameliorate the conditions of autism while the child is still young enough to benefit from intervention. Thus, waiting for a school
district to train staff, even if they are willing to, is not feasible. Those who can afford to
do so, go to the private market to hire consultants and researchers housed in the
nation’s universities to work with their children. Others move to a different state where
teachers receive specialized training and support. And the rest have children who don’t
get what they need.12

The knowledge of private market experts is rarely put to use by school systems
because certain school administrators consider it too costly. Indeed, the question: “why
should we spend so much money on these kids?” is still discussed by school
administrators, despite the fact that research proves that it’s worth the commitment.
When faced with parent demands for appropriate state-of-the-art practices in
classrooms, school districts would rather spend money legally defending why they
need not change, rather than hiring and training staff (at a substantially lower cost). In
California, a school district spent $700,000 defending a case for this purpose. (Rudd,
2000, p. 4-5)

A good summary of the after-effects of PL 42-142 comes from Walker, who wrote this in
1987:

If the law has been massively successful in assigning responsibility for students and
setting up mechanisms to assure that schools carry out those responsibilities, it has
been less successful in removing barriers between general and special education.
Pub. L. No. 94-142 and other public policies of the time did not anticipate the need
to take special steps to eliminate turf, professional, attitudinal, and knowledge
barriers within public education. It did not anticipate that the artifice of delivery
systems in schools might drive the maintenance of separate services and keep
students from the mainstream, that the resource base for special education and
other remedial services would be constrained by economic forces, or that special
education might continue to be dead-end programs in many school districts. Nor
could it anticipate how deeply ingrained were our assumptions about the differences
between students with learning problems and those without, and the substantial
power of high (or unfortunately, low) expectations in learning.13 (Lipsky & Gartner,
1997, p. 77).

Dismal outcomes for special education students, failure of schools to get “best
practices” into the classroom, lack of teacher training, and the continuing litigation
required by parents to access appropriate education for their children—all of these—call

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12 Many children with autism who do not get early, appropriate, and consistent intervention must
eventually be placed into residential care because their behavioral deficits make it impossible for the
family to function if they remain at home. I personally know of two families who are struggling with the
possibility of placing a child into residential care. This is an agonizing and heart-breaking situation for any
family to deal with. It is my observation that the emotional costs to the families dealing with this situation
far outweighs any fiscal discussion on the part of administrators when determining the educational
services they will (or will not) provide for a child.

13 More than a decade has passed since Walker wrote this summary, and as a parent of a child with a
disability, my experience is that it accurately reflects the current situation today.
for reform efforts, and now educational researchers are suggesting that, rather than ever separating students on the basis of disability, all students should be included from the beginning of their schooling careers, by right.

What is Inclusion?

When students with disabilities are educated in neighborhood schools, in general education classrooms, according to their appropriate age and grade level, this is known as inclusion. (Perencevic and Hulbert, 1997, p. 12) A common theme throughout the various interpretations of “inclusion” is that rather than requiring children to fit into a preexisting system (or school, or classroom), the environment should adjust to meet the needs of the children. (Perencevic and Hulbert, 1997, p. 10) The classroom teacher (or teachers, if a team teaching approach is used) utilize a variety of instructional methods, such as cooperative learning and peer instructional methods so that all the students are actively engaged in classroom activities. The teacher is also provided support by special education professionals and collaborates with them to modify curriculum and make any other accommodations required so that the child with disabilities can benefit socially and/or educationally, according to their individualized goals.

Perencevic and Hulbert continue to say that inclusion also means a specific philosophy broader than the classroom. Full inclusion means that value is placed on ALL children so that they ALL have access to the opportunities available in their schools and communities. This means that students with disabilities use the school cafeteria, library, and playground with their non-disabled peers, and that there is an extension of this into the community that involves access to church, employment, as well as social/recreation opportunities. (“Inclusion in Education: A Choice for Your Child,” 2000)

Because of the amount of misinformation about inclusion, many sources also provide a short-list to describe what inclusion is not:

**Inclusion Is Not:**

1. Dumping students with disability labels into general education classes without the supports and services they need to be successful.
2. Trading off the quality of a student’s education or the intensive support services they may need for inclusion.

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14 Cooperative learning is a teaching strategy whereby students are placed into small heterogeneous groups and linked by a common goal. It has been popular since the early 1980's because of its positive effect on achievement, self-esteem, interpersonal dynamics, and motivation. (Brozo and Simpson, 1995, p.14)

15 Peer instructional methods: where specifically identified peers are selected to learn (through direct instruction) how to help a disabled friend become engaged in a learning activity or how to help them acquire a skill. (Sweeney and Remington, 2000)

16 For example, accommodations for a child with autism included in an elementary classroom would possibly include the use of the Picture Exchange System (PECS), applied behavior analytic management techniques, activity schedules, social stories, and the use of a computer that is pre-programmed for communication purposes.
3. Doing away with or cutting back on special services.
4. Ignoring each student’s unique learning needs.
5. All students having to learn the same thing, at the same time, and in the same way.
6. Expecting general education teachers to teach students with disability labels without the support they need to effectively teach all their students.
7. Sacrificing the education of non-disabled students so that the students with disability labels can be included.
8. “Visiting” a general education class for a portion of the school day as in “mainstreaming” or “integration”.
9. Providing special education services in separate or isolated places.
11. Ignoring parents’ concerns.
12. Isolating students with disabilities in regular schools.
13. Placing students with disabilities in schools or classes that are not age-appropriate.
14. Requiring that students be “ready” or “earn” their way into regular classrooms based on cognitive or social skills. (Perensevic and Hulbert, 1997 and “Inclusion in Education: A Choice for Your Child,” 2000)

Educators are adopting several types of inclusion models used to support inclusive education practices. Co-teaching, or collaborative teaching is when a general education and special teacher share a classroom. This can be done a number of ways such as: one teacher and one support teacher, where one teacher leads the class while another circulates and provides individual support or observes to gather data. Another example of co-teaching is a parallel teaching strategy. This works when the class is divided into heterogeneous groups and they are taught simultaneously the same content. Station teaching is where teachers divide content and students. This is unlike parallel teaching where the content is essentially the same. Alternative teaching is where one teacher leads enrichment or alternative activities, while the second teacher reviews concepts with small groups needing re-teaching.

Effective co-teaching requires planning between the teachers. It involves discussion and mutual consent around such issues as overall instructional philosophy, respective roles and responsibilities, instructional content, teaching strategies, discipline and other classroom management issues, outcomes for students, and evaluation. This model has been reported by teachers to require a high level of conflict resolution skills and a sense of humor as two critical ingredients to success! (Perensevic and Hulbert, 1997)

Different than co-teaching, another model for inclusion practice involves a “methods and resource teacher” or “inclusion specialist”, that is, a special education professional assigned to classrooms to support curriculum and material adaptations and to provide demonstration lessons.

Specific teaching strategies used by all the models include multilevel instruction, cooperative learning, activity-based learning, mastery learning, and the use of technology, peer support and tutoring programs.
The Inclusive Classroom

A snapshot of a “typical” inclusive classroom is not available because they all look different. Chris Kliewer explains his second grade classroom in New York:

The learning environment is created by whatever interactions the teacher and students have as a group or as individuals in the group. It’s a lot of students doing different things with people helping them, students moving from one environment to another. It’s also a classroom where everybody is smiling, the students are actively engaged, and the teacher is delighted to be there, too. It sounds like pandemonium and looks messy. (What Does an Inclusion Classroom Look Like? 1999)

Inclusive classrooms make use of learning centers visited by small groups of students who make lots of choices about what they are working on. Students are encouraged to help and support one another. Time for meaningful social interactions is allocated, as part of curriculum expectations. The classroom is student-centered and students have a high level of responsibility for creating their community because they help structure the rules and are expected to follow them and to meet contracted expectations for curriculum. In this classroom, students know others will be doing different things and the issue of fairness doesn’t come into play because that’s just the way it is. This classroom reaches beyond the walls of its room and goes to the community as a resource for learning new skills. (What Does an Inclusion Classroom Look Like? 1999)

The Council for Exceptional Children provides an excellent example of an inclusive classroom scenario and points out the training and planning time requirements for the professionals involved:

Jane Smith teaches third grade at Lincoln Elementary School. Three days a week, she co-teaches the class with Lynn Vogel, a special education teacher. Their 25 students include four who have special needs due to disabilities and two others who currently need special help in specific curriculum areas. Each of the students with a disability has an IEP that was developed by a team that included both teachers. The teachers, paraprofessionals, and the school principal believe that these students have a great deal to contribute to the class and that they will achieve their best in the environment of a general educational classroom.

All of the school personnel have attended inservice training designed to develop collaborative skills for teaming and problem solving. Mrs. Smith and the two paraprofessionals who work in the classroom also received special training on disabilities and on how to create an inclusive classroom environment. The school principal, Ben Parks, had worked in special education many years ago and has received training on the impact of new special education developments and instructional arrangements on school administration. Each year, Mr. Parks works

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17 One of the supports provided to most inclusive classrooms is the addition of a para-educator, or paraprofessional (teacher’s aide) who provides extra assistance to the classroom teacher(s). Training is essential for this person, or the disabled child will become dependent upon their assistance. (Perensevic and Hulbert, 1997, p. 53)
with the building staff to identify areas in which new training is needed. For specific questions that may arise, technical assistance is available through a regional special education cooperative. Mrs. Smith and Miss Vogel share responsibility for teaching and for supervising their two paraprofessionals. In addition to the time they spend together in the classroom, the spend one to four hours a week planning instruction, plus additional planning time with other teachers and support personnel who work with their students.

The teachers use their joint planning time to problem-solve and discuss the use of special instructional techniques for all students who need special assistance. Monitoring and adapting instruction for individual students is an ongoing activity. The teachers use curriculum-based measurement to systematically assess their student's learning progress. They adapt curricula so that lessons begin at the edge of the student's knowledge, adding new material at the student's pace, and presenting it in a style consistent with the student's learning style. For some students, pre-organizers or chapter previews are used to bring out the most important points of the material to be learned; for other students, new vocabulary words may need to be highlighted or reduced reading levels may be required. Some students may use special activity worksheets, while others may learn best by using media or computer-assisted instruction.

In the classroom, the teachers group students differently for different activities. Sometimes, the teachers and paraprofessionals divide the class, each teaching a small group or tutoring individuals. They use cooperative learning projects to help the students learn to work together and develop social relationships. Peer tutors provide extra help to students who need it. Students without disabilities are more than willing to help their friends who have disabilities, and vice versa. (Including Students with Disabilities in General Education Classrooms, 1993)

Benefits of Inclusion: Research Findings

At a recent workshop held at the YMCA in Rancho Mirage, California, typical children were trained how to engage children with autism so that they could play together at a summer day camp. When 10-year old J.D. was asked his impressions of the workshop, he stated: "It's pretty cool. I always wanted to play with him (the autistic child), but it's pretty complicated. Now I know what to do." One of the key individuals involved in the design and implementation of the workshop is Donita Remington, Associate Director of the University Center of Development Disabilities at California State University San Bernardino. She states that everyone benefits from social skills training. "Teaching children about the needs of others is very valuable to themselves and society." (Sweeney & Remington, 2000)

A survey of the literature shows that outcomes for inclusive education are positive. Staub and Peck have identified the benefits to students without disabilities in inclusive classes. These include reduced fear of human differences accompanied by increased comfort and awareness, growth in social cognition, improvements in self-concept,
development of personal principles, and warm and caring friendships. (Lipsky & Gartner, 1997, p. 256)

Perencevic and Hulbert report that one of the highest rated outcomes of the educational process for any student is that he/she will have friends. Students who enjoy reciprocal friendships avoid loneliness and develop the natural supports needed to coexist in the community. For many parents of students who receive special education support in schools, friendship is the “bottom line.” The opportunity to develop the social skills needed to make friends becomes the main purpose for being with typical peers in a general classroom, and acquisition of academic skills becomes secondary. (Perencevic and Hulbert, 1997, p. 76-78)

Melissa Heston, Associate Professor, University of North Iowa, states: “Research shows that inclusive education helps the development of all children in different ways. Students with specific challenges make gains in cognitive and social development and physical motor skills. They do well when the general environment is adjusted to meet their needs. Children with more typical development gain higher levels of tolerance for people with differences. They learn to make the most of whomever they’re playing with. When we exclude people, it ultimately costs more than the original effort to include them.” (Philosophy, 1999).

The Western Regional Resource Center in Eugene, Oregon issued a comprehensive report on the research findings pertaining to inclusive education. This documentation shows that there is no negative impact for students without disabilities when they are educated in the same general education classroom as their disabled peers. Thus, fears that inclusion may result in a “watered down” curriculum for students without disabilities, or that less time will be devoted to learning, is not borne out by the research. (Moore, Gilbreath & Maiuri, 1998, p. 8)

For students with moderate to severe disabilities, studies have demonstrated that participation in general education environments results in some academic increases and behavioral and social progress. Notably, children from segregated sites generally regressed in each of the traditional skill domains and social competence, and contrary to the expectations at the initiation of the study, students in segregated sites did not receive a greater concentration of special educational resources. Further studies found that students in regular classes had IEP’s that contained more references to best practices than students in segregated classes, and they were less likely to be engaged in isolated activities and more likely to be engaged with other people in the classroom. (Moore, Gilbreath, & Maiuri, 1998, p. 7)

The majority of research available today supports inclusive education, but there are a handful of studies that take an alternative position. These studies report situations in which students are placed in general education classrooms without proper supports or they are in regular classrooms but not receiving special education, as defined by law. These studies raise concerns about the inappropriateness of “dumping” students into classrooms where teachers are unprepared and where there is a lack resources to
support special education needs in the regular class. (Moore, Gilbreath, & Maiuri, 1998, p. 10) For a disabled child, just being in the same room with typical peers seldom brings benefit. A current autism researcher explains the need for the facilitation of interactions between the disabled and non-disabled children:

> Inclusion provides much-needed opportunities to teach social skills, but inclusion does little good if no social instruction is provided. Children with and without autism have to learn how to share and take turns, how to work in a group, and how to understand as well as be understood by one another. Social intervention must be carefully planned because most social learning does not come naturally to children with autism. (McGee, 2000, p. 26-27)

Apart from research studies, the benefits of inclusion were referred to in *Oberti v. Board of Education*, a case concerning an 8-year old boy with Down syndrome whose parents wanted him placed into a regular classroom. The 3rd Circuit Court of Appeals in 1993 pointed to the “reciprocal benefits of inclusion to the non-disabled students in the class.” This was the first time that a court at the appellate level had focused on the benefits of inclusion to students without disabilities. Previous cases had addressed potential harm to such students. (Lipsky & Gartner, 1997, p. 87).

What it Take For Inclusion to be Successful

The business of including students into the regular classroom needs to be treated just like that—as a business. As investors know, the success of any business venture is reliant on the belief that it will be successful, with responsible leadership, expertise and collaborative skills, technology, high expectations, and capital. The other requirement for business success is the business plan, which translates the owner’s vision and communicates it to all involved.18

Nisbet tells us that inclusion requires restructuring of both the assumptions and the organization of public education in this country (Lipsky & Gartner, 1997, p. 79). Mara Sapon-Shevin, a Professor of Education at Syracuse University, is more specific: “inclusion without resources, without support, without teacher preparation time, without commitment, without a vision statement, without restructuring, without staff development, won’t work.” (*What Does an Inclusive Classroom Look Like?* 1999)

Ace Atkinson, Executive Director of Developmental Disabilities Area Board XII, states that “belief that it works” is what determines successful outcomes for disabled children who attend regular classes. “When IDEA was five years old, only parts of the nation believed that these kids could be in regular classrooms. School administrators are willing to do a limited amount towards realizing full inclusion, but few believe it.” (Atkinson, 2000)

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18 I am of the opinion that public schools need to adopt standard business practices if the United States wants to remain competitive in the global economy.
The Council for Exceptional Children also emphasizes the importance of "positive attitudes and beliefs." The teacher must believe that the student can succeed, and school personnel must be committed to accepting responsibility for the learning outcomes of students with disabilities. (Including Students with Disabilities in General Education Classrooms, 1993)

Besides the belief that inclusion works, a wide array of technologies and competencies are required for successful implementation. Pressman and Blackstone provide a description of how this works at the Berkley Unified School District:

Each disabled student has an augmentative communication team made up of parents, special and regular education professionals, and a variety of consultants who meet on a bimonthly basis to address the complicated and ever-changing needs of the students. All but a few of these children are fully included in regular education classrooms with same-age peers. Because of their multiple and severe disabilities, significant adaptations have had to be made for these students to participate in class activities alongside their peers. Few, for example, are at the same cognitive level as their classmates. Nevertheless, parents, teachers, and support service staff agree that all students benefit from inclusion and that without technology it wouldn't be possible. (Lispy & Gartner, 1997, p. 338)

To ensure success, other systems need to be in place prior to the disabled child entering the regular education classroom: the school personnel and the students in the class need to be prepared to receive a student with disabilities; services required by the student need to be made available (i.e. physical, occupational, or speech therapy); and accommodations to the physical surroundings and equipment need to be adequate to meet the student's needs (i.e. toys, building and playground facilities, learning materials, assistive technology devices). Adequate numbers of personnel, including aides and support staff need to be available. Staff must be provided with training opportunities (i.e. information on disabilities, instructional methods including cooperative learning techniques and using the computer for the specific purpose of integrating students with special needs with their peers, awareness and acceptance activities for students, and team-building skills). Appropriate policies and procedures for monitoring individual student progress, including grading and testing, must be in place.

Understanding the purpose of instruction is critical when adapting curriculum for a disabled child in a regular class. "The purpose of instruction IS NOT the same as for a student without disabilities or with mild disabilities—that is, it IS NOT to come up to or maintain grade level. The purpose of instruction IS to meet individualized goals within the context of general education settings and activities." (Ryndak, 1999)

The research literature stresses the importance of—and the laws outline the requirements for—collaborative skills between teachers, special educators, other specialists, and parents. "Trust and collaboration among staff members are essential

According to Pressman and Blackstone, the use of computer technology in modifying curriculum is essential for inclusive education to work.
components in making inclusion work. Teachers need to be comfortable discussing problems and concerns. Special educators support the classroom teacher by interpreting the IEP, defining IEP goals, developing specially-designed instruction, assisting with instructional adaptations, and collaborating with planning of themes, lessons, and community-based instruction. Administrators who encourage new teaching strategies and instructional changes are also a valuable support for teachers and help them feel more comfortable taking risks, and asking for help as needed. It is a necessity for team approaches and regular meetings to be used for problem-solving and program implementation.” (Perencevic and Hulbert, 1977, p. 70-71, and Including Students with Disabilities in General Education Classrooms, 1993)

But Can This Work for Every Disabled Child?

In a telephone conversation with Darlene Hanson, Program Specialist for the Whittier Area Cooperative Special Education Program (WACSEP), I asked what determined whether or not a handicapped child was placed into a regular education classroom. She stated that it was upon parent request that a child was placed into a regular classroom, and that the school districts under WACSEP had a full range of program options available from full inclusion to special day classes available to meet the needs of their handicapped population. When a child is provided with a regular education placement, an inclusion specialist becomes a “case manager” and visits each child’s classroom twice a week to provide assistance to the classroom teacher. In this district, there are 60 children with disabilities included in the general education classrooms. (Hanson, 2000).

There are educators who believe that inclusion is not the best policy for children with and without disabilities. Allan S. Vann, Principal of Elwood School District in Huntington, NY believes that “pull-outs”20 are the best way to serve students with severe disabilities. “Grouping disruptive and severely deficient children is a good thing because they did not inhibit the education of others, as would have been the case had they been mainstreamed21, and that they were able to receive large daily blocks of time for intensive individual and small-group assistance. The focus of the current inclusion debate should not be all-or-nothing, but how we provide the best available placement for each child on an inclusion continuum.” (Vann, 1997)

Ultimately whether inclusion will work for a particular child may be left for the courts to determine on a case-by-case basis. A review of the recent case histories shows that there are four criterion that must satisfy the courts when determining appropriate placement for a child: first, an examination of whether the state (i.e. local school district)

20 “Pull-out” is a term where a child is removed from the classroom to receive specific individual instruction usually in a one-on-one or small group situation.
21 “Mainstreaming” refers to the provision of opportunities for students with disabilities who are in special classes to spend a portion of their time in general education class. The special education teacher remains responsible for placement in the general classroom and the goals and objectives on the IEP. (Perencevic and Hulbert, 1997, p. 12)
took the steps necessary to accommodate the handicapped child in a regular education class with supplementary aids and support services, and modified curriculum to meet the needs of the student; second, determining whether the child with a disability would benefit from the modified general education program, with the benefits including both academic achievement and social relatedness goals; third, school districts may look at the effects of the presence of a child with a disability on other children, and fourth, determining whether the cost prevents non-disabled children from receiving an appropriate education. (Lipsky & Gartner, 1997, p. 86)

The Council for Exceptional Children makes this statement: “while the regular classroom may not be the best learning environment for every child with a disability, it is highly desirable for all who can benefit. It provides contact with age peers and prepares all students for the diversity of the world beyond the classroom. (Including Students with Disabilities in General Education Classrooms, 1993)

Program Implementation

From all the data received by the National Association of State Boards of Education (NASBE), there has been no general pattern of how inclusive education programs are first initiated in school districts. School districts report that their programs were established through the efforts of parents, teachers, administrators, clinicians, state or district reform initiatives, federally funded systems change projects, or court decisions. Once the initiative is under way, schools may approach the task through a case-by-case evolutionary process, through pilot programs, through a comprehensive, phased-in approach or a complete conversion to district-wide inclusion. (Lipsky & Gartner, 1997, p. 118).

The case-by-case process has the disadvantage of being ad hoc in nature, and is less likely to involve the local board of education, and does not force a district to consider how their system must be realigned to promote inclusion. Since the implementation of an inclusion program requires adjustments in funding mechanisms, teaching and grading policies, teacher hiring and evaluation, and staff assignments, it is important that these issues be addressed at the “systems” level.

The “pilot program” version usually is initiated by the district special education director and it is limited because of its perception as a “special education initiative” that requires additional funding, which districts often are unable to afford.

A superintendent who is a strong supporter of inclusion generally initiates a comprehensive phased-in approach. As reported by NASBE, it happens in many cases that the superintendent leaves the post and then supportive principals maintain the effort on a school-by-school basis. At the school sites, the inclusion effort is phased in grade-by-grade, starting with pre-kindergarten and kindergarten and adding one or two grades in each subsequent year.
The complete conversion to district-wide inclusion usually occurs in small or rural districts that are used to operating flexibly, have a small administrative staff, and have a very receptive staff and community.

Recently, large-scale inclusion efforts have been initiated on the part of the individual states. One example is Florida, which is currently utilizing the services of an outside consulting agency to promote inclusive practices within its school districts. Comprehensive training and technical assistance is available and delivered at regional access points across the state. Administrators cover topics such as the master schedule, using staff more efficiently, and collaborative teamwork. Teachers learn about co-teaching techniques, co-evaluation, and co-planning for implementation in the classroom. Specific instruction is also available on inclusive teaching practices for grades 7-12, fostering natural interactions, writing Individual Education Plans, and the "how to" of practical day-to-day implementation. The training teams also visit school sites for ongoing support. (Florida Inclusion Network Training Calendar: Region III, 2000)

Implementing inclusive education programs in a school district involves changes in personnel role and responsibilities. Rather than special education personnel losing their jobs, the individuals assume different and often more comprehensive responsibilities. Principals now have responsibility for staff and students in the building, as well as general and special education teachers. Teachers are now involved working with a diverse group of learners, regardless of their general or special education status. For related-services providers, often it means providing service in general education classrooms and working with the classroom teacher to reinforce desired outcomes, for example, speech and language therapy carried out in the classroom.

Overcoming Resistance to Change

Expecting resistance to change, defining it, and dealing with it are areas well covered in the literature about inclusion:

"Inclusion means change!" We believe both inclusion and change are inevitable. We have had conversations with hundreds of "Inclusion Survivors—teachers and human service workers—who were petrified. They endured a few weeks of "Tylenol Therapy" and then as if by magic, the terror passed. In interviewing people about that period, there is an overwhelming pattern. Every single person remembers being terrified. No one can remember what they were afraid of—just that they were afraid—and it passed. It usually takes about six weeks, which is the general pattern for any crisis situation, to get back to normal." (Forest & Pearpoint, 2000)

The specialists' fear that, in training general education teachers, they would eventually work themselves out of a job and general educators' concerns are that learning these new skills would overburden them. (Lipsky & Gartner, 1997, p. 130-131.) Janney, Snell, Beers, and Raynes describe the source of the resistance to inclusion as the "autonomous isolation" conditions that teachers work under: they are used to working
and making decisions alone, with few links to other teachers. Therefore, teachers assume that any change will have to be accomplished independently, resulting in "double the workload" for them. However, when general education teachers realize they have input into determining the pace and degree of integration, and also discover the reward of cooperative interaction with supportive and enthusiastic special education teachers, the resistance that stemmed from fears about integration's effect on their workload is quelled." (Lipsky & Gartner, 1997, p. 133)

Those school districts that have already embarked on the inclusion path all report that staff attitudes about inclusive education vary widely, from those who strongly agree to those who strongly oppose it. However, they also report that, over time, staff attitudes become more positive.

Resistance to change may also come from parents of disabled children. A history of conflicts with school systems in accessing appropriate services for their children gives parents the impression that schools just can't do the job right. As reported in the FEAT Daily Newsletter: "When you get a diagnosis for autism, you get handed over to the public schools who would put the child into play-based learning," Ms. Walters said. "If you do any research at all, you'll see that's not the right way to do it." While parents will concede that their children could function with assistance in a regular school classroom, they fear that as soon as the child loses intensive support, their child will regress. (Troy, 2000)

Other parents perceive their disabled children to be emotionally fragile and want them in a small segregated environment to protect them. (Atkinson, 2000)

Those school districts who show a commitment to providing staff and resources, and training opportunities according to the mandated guidelines, and to putting "best practices" into effect in classrooms, will gain the trust of parents.

The Effects of Inclusion over the Long Term

Looking at the long-range goals of legislation, one of the key purposes of the IDEA Amendments of 1997 was to "promote improved educational results for children with disabilities through early intervention, preschool, and educational experiences that prepare them for later educational challenges and employment." (Preparing Students With Disabilities for Employment and Other Post-School Experiences, 2000)

Developmental Disabilities Area Board XII states: "One of the most significant tasks, jobs, or functions of paid professionals is to facilitate the beneficial participation of people without disabilities with people with developmental disabilities." ("Inclusion in Education: A Choice for Your Child", 2000, p. 5)

Bringing this to a personal level, the goals are both current and long-range. Inclusive education opportunities prepare my child to:

...
programs (before and after school), have a circle of friends without disabilities who are his playmates, and the opportunity to participate in community-sponsored family and neighborhood activities (both now and in the future). The future opportunities for my son include participating in paid employment with people without disabilities under natural supervision, having access to residential services in neighborhoods with necessary support services, and having friendly relationships and positive interactions with his neighbors. The inclusive educational opportunity for my child prepares his peers to grow up understanding that disabilities are not to be feared, and that there is room in the community for differences and that people like my son can be accepted, and live alongside with them.

Conclusion

Classrooms and teaching methods have changed since the ‘60’s when Bobbie was included in our combination Grade 5/Grade 6 class. Back then, there was no such thing as cooperative learning groups, nor any classroom discussion about disabilities. Bobbie was there, and our teacher called upon him to answer questions in class, but I don’t remember him having any friends who interacted with him. This is a sad because I now realize that I missed the opportunity to befriend Bobbie and learn more about his world. There was no bridge to facilitate interactions between us, and because he was different from the rest of the class, we did not socialize with him. I doubt that Bobbie would have had the opportunity to fully integrate into society because of our attitudes about him.

It has taken me eight years of living with a child diagnosed with autism to come to the realization that the struggles that I experience with his education are systemic. That is, the obstacles are a result of fundamental structures and attitudes that emerged over time. Our school system is suffering from an immense hangover from old ways of thinking that aren't working any more.

I want my child to be a participant in this world as much as possible. Therefore, the only choice, as I see it, is to include him with his typical peers in a regular classroom, and hold on to the promises guaranteed by law—that he will receive the appropriate supports to help him learn. But the real determining factor will be his teachers. Will they adopt the attitude that he belongs in their classroom, and will they make a commitment to building the bridges between my child and his peers so that there will be meaningful interaction between them?

I have no illusions that the task of educating my child within a regular classroom will be easy. This is hard work because it means grasping new concepts and beliefs, and incorporating them into every day experiences. It takes vision, belief, commitment on the part of leaders, and collaboration on the part of everyone to help my child succeed—the exact same qualities that are required for a non-disabled child to succeed. Today, there is no other proven alternative that will prepare my child for a life within the community, and there is no other way to prepare future generations to accept disabled people as part of their world.
As with everything in this life, there are phases we go through. I would concede that down the road, when new information is obtained and disseminated, I might change my mind and then favor another educational approach for my son. To be a careful observer, and to continually learn and apply what works and to monitor progress—while remaining open to change—is what it takes. These are the essential ingredients for progress.
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