A Review of Research on the Educational Benefits of the Inclusive Model of Education for Special Education Students

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Abstract

The practice of inclusion is not a new idea to the educational setting; it is a newer term. Before No Child Left Behind, during the 1970s students with disabilities were mainstreamed into the general education population under Public Law 94-142. Public law 94-142, which was renamed to Individuals with Disabilities Educational Act (IDEA), required students with disabilities to be educated with their non disabled peers as much as possible. Additionally, IDEA requires that a continuum of placement options be available to meet the needs of students with disabilities. This has not changed with the reauthorization of IDEA2004, however now students with disabilities must be included in statewide assessment. With this addition to the law, schools are paying more attention to their students with disability populations, thus the emergence of full inclusion. The rationale for inclusion has never rested on research findings alone, but on principle (Hines 2001). Proponents insist that the integration of students with disabilities are inherently right, compared often to the same right to racial integration (Hines, 2001).

The primary focus of this article is to review the research on the educational benefits of the inclusive model of education for students with disabilities. The term inclusion or responsible inclusion is a term used to identify the movement to provide service to students with disabilities in the general education setting. Inclusion is usually considered the least restrictive environment for students with disabilities. In this article I will discuss the history of special education, the different services options for educating students with disabilities and the benefits associated with inclusion, as well as the opposing arguments for inclusion.

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History

Before the federal legislation passed in the 1970’s, programs for students with disabilities were minimal and resources for parents were private educational programs. Parents paid for educational services out of their own resources (Smith, Polloway, Patton & Dowdy, 2006). Since the 70’s services for students with Disabilities changed allowing more appropriate services to be provided by schools. These changes were due in part to legislation, parental advocacy and litigation and funding by the federal government.

In the 1954 Brown vs. Board of Education court case, the United States Supreme Court deemed “Segregation solely because of a person’s unalterable characteristics (e.g., race, or disability) was unconstitutional (Yell, Rogers, & Rogers as cited in Smith et. al.).”
Parents of students of disabilities used this civil rights law to advocate for legislation that would help meet the needs for their children. In 1975 PL 94-142, the most important legislation for students with disabilities was passed and later implemented in 1978. Public Law 94-142 (Education of All Handicapped Children Act), states in order to receive federal funds, states must develop and implement policies that assure a free appropriate public education (FAPE) to all children with disabilities. This law also provided that handicapped children and adults ages 3-21 be educated in the "least restrictive environment" to the maximum extent appropriate. This meant that students with disabilities were to be educated with children who are not handicapped and that special class, separate schools or other removal of children from their regular educational environment occurred only when the severity of the handicap is such that education in regular classes could be achieved.

Since 1975, PL94-142 has been reauthorized by congress several times and changes implemented, but the foundation of the law has remained intact. In 1986, the reauthorization mandated services for children with disabilities ages 3-5. In 1990, the name was changed from PL 94-142 to the Individuals with Disabilities Education Act (IDEA). In the reauthorization the word handicapped was replaced with disability, two new categories of disabilities were added, Autism and TBI, and required school to develop transition planning for students at age 16. The most recent reauthorization was in 2004. IDEA 2004 had several new key components, however the most important component related to state assessments and Child Find. IDEA 2004 mandated that students with disabilities be included in statewide assessment with appropriate accommodations and the development of an alternative assessment for students who cannot participate in district and statewide assessments. It also requires schools to seek out students with disabilities, homeless children and migrant children who may qualify for special education.

Additional components included:

1. Least Restrictive Environment- Children with disabilities are educated with non disabled children as much as possible.
2. Individualized Education Program- All children served in special education must have an individualized education program (IEP).
3. Due-Process rights- Children and their parents must be involved in decisions about special education.
4. Due- Process hearing- Parents and schools can request an impartial hearing if there is a conflict over special education services.
5. Nondiscriminatory assessment- Students must be given a comprehensive assessment that is nondiscriminatory in nature.
6. Related services- Schools must provide related services, such as physical therapy, counseling, and transportation, if needed.
7. Free appropriate public education- The primary requirement of IDEA is the provision of a free appropriate public education to all school age children with disabilities.
8. Mediation/Resolution-Parents have a right, if they choose, to mediation or a resolution session to resolve differences with the school. Using mediation should not deny or delay a parent’s request for a due-process hearing.
9. Transfer of rights-When the students reaches the age of majority, as defined by the state, the school shall notify both the parents and the student
and transfer all rights of the parents to the child. (10) Discipline- A child with a disability cannot be expelled or suspended for 10 or more cumulative days in a school year without a manifest determination as to whether the child’s disability is related to the inappropriate behavior. (11) Transition-Transition planning and programming must begin when students with disabilities reach age 16. (Smith et.al p.13)

Service Options

The changes for services for students with disabilities evolved in three phases: relative isolation, integration and inclusion. The relative isolation phase consisted of students being denied access to public schools or permitted only to attend in isolated settings. This phase in education was the norm before 1970. The integration phase, which started in the mid 70’s included mainstreaming students with disabilities in the general education programs when appropriate primarily for socialization. In the mid 1980’s, the inclusion phase began. This phase also placed students with disabilities in the general education environment, but unlike the integration phase, the inclusion phase assumed that these students belonged in the general education setting, for empowerment, self determination, and to better prepare students for the highest degree of independence possible (Polloway, Patton, & Smith, 1996).

The Individuals with Disabilities Education Act (IDEA) requires that a continuum of placement options be available to meet the needs of students with disabilities. The law also requires that:

"to the maximum extent appropriate, children with disabilities ... are educated with children who are not disabled, and that special classes, separate schooling, or other removal of children with disabilities from the regular environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be attained satisfactorily. IDEA Sec. 612 (5) (B)."

The continuum of placement option is a range of placements, from institutions to full time education in the general education environment. Traditionally students with disabilities were educated in specialized classrooms with teachers trained to give specialized instruction for mental retardation, learning disabilities or some other disability. This service model was known as self contained and was the dominant service model of education up until the 1970’s. With the passing of PL94-142, and the growing awareness of the ranges in disabilities, the self contained model of educating students with disabilities was criticized and did not provide students with the opportunity to interact with nondisabled peers. As a result of the scrutiny by parents and professional, the resource room model became the next model. The resource model of education, provided specialized instruction in a separate classroom, however the students did not spend the entire day in that room. Students, who used the resource room, would receive special assistance in deficit areas and spend part of the day with nondisabled peers in general education classes.
The term Full inclusion means all students with disabilities, regardless of the severity of the disability, be included full time in general education classes (Smith, 2006). The idea that all students be educated in the general education classes was met with opposition, Kavale & Forness, 2000, (as cited in Smith, 2006) stated “in advocating this approach, there would be no need for a continuum of placement options for students, since the least restrictive environment would always be the general education classrooms for all students (p. 23). Thompkins, & Deloney, 1995 contends, Inclusion is the move to educate all children, to the greatest possible extent, together in a regular classroom setting. It differs from the term full inclusion in that it also allows for alternatives other than the regular classroom when more restrictive alternatives are deemed to be more appropriate. According to Smith, (2006) inclusion means “(1) that every child should be included in a regular classroom to the optimum extent appropriate to the needs of that child while preserving the placements and services that special education can provide; (2) that the education of children with disabilities is viewed by all educators as a shared responsibility; (3) that there is a commitment to include students with disabilities in every facet of school; (4) that every child must have a place and be welcome in a regular classroom” (p. 24).

The National Association for State Boards of Education (NASBE) endorses the "full inclusion" of students with disabilities in regular classrooms. In a report released in 1992, NASBE suggest states should revise teacher-licensure and certification rules so that new teachers would be prepared to teach children with disabilities as well as those without disabilities. It also recommended training programs to help special educators and regular educators adapt to collaborating in the classroom.

Inclusion supporters have argued in favor of its benefits on social, philosophical grounds and academic gains. In addition, inclusion can better prepare students with disabilities for community living, and also assert that teachers’ professional skills improve as a result of teaching in inclusive classrooms (Begeny & Martens, 2007). It has also been argued that successful inclusion helps typical students to develop more positive attitudes toward individuals with disabilities, which ultimately increases their likelihood of establishing social principles based on equality and promoting a more harmonious society (Karagiannis et al., 1996b as cited in Begeny & Martens, 2007).

According to Lewis, (as cited in Thompkins & Deloney, 1995), students with disabilities in inclusive environments "improve in social interaction, language development, appropriate behavior, and self-esteem". Inclusion supporters also suggest cooperation between regular and special education in integrated settings tends to raise their own expectations for their students with disabilities, as well as student self-esteem and sense of belonging.

Thompkins & Deloney (1995) suggest the weaknesses of special education, as it currently is structured; the dual system of education and the issue of "labeling effects" on students with disabilities is enough reason for supporting inclusion. According to Lipsky & Gartner, as cited in Thompkins & Deloney 1995, the impact of such labeling, lowered
expectations, and poor self-estees on school learning is significant. Stainback, Stainback, and Bunch (1989) suggest that schools have had to organize a separate system for their students with disabilities, which waste time, money and resources. They also contend with the National Association of State Boards of Education, 1992, that this dual system suggest that this dual system does not adequately prepare students with disabilities for the "real world," because the "real world" is not divided into "regular" and "special." In addition, limited interactions between those with disabilities and their non-disabled peers’ further handicap special education students.

According to Tomko (1996):

“Through inclusive education children with disabilities remain on a path that leads to an adult life as a participating member of society... it increases their ability to achieve academic and physical growth to their potential, and it enhances their overall quality of life. Inclusive education teaches all children team work and how to interrelate and function together with others of different abilities. They learn to value diversity, see the ability of others to contribute, and it gives children a sense of unity.”

The benefits of inclusion for students with disabilities, according to Kids Together, (2009), include: (1) Friendships (2) Increased social initiations, relationships and networks (3) Peer role models for academic, social and behavior skills (4) Increased achievement of IEP goals (5) Greater access to general curriculum (6) Enhanced skill acquisition and generalization (7) Increased inclusion in future environments (8) Greater opportunities for interactions (9) Higher expectations (10) Increased school staff collaboration (11) Increased parent participation and (12) Families are more integrated into community. Smith et.al 2006, states the advantages of the inclusive model are ease in accessing the general curriculum, (Begeny and Martens, 2007) inclusion can result in academic and social gains, better preparation for community living, and an avoidance of the negative effects caused by exclusion, (Karagiannis et al., 1996 as cited in Begeny & Martens, 2007) “successful inclusion helps typical students to develop more positive attitudes toward individuals with disabilities, which ultimately increases their likelihood of establishing social principles based on equality and promoting a more harmonious society” (p.1).

Hunt (2000) reports positive effects for both general and special education students at the elementary level, concluding that academic benefits for general education students include having additional special education staff in the classroom, providing small-group, individualized instruction, and assisting in the development of academic adaptations for all students who need them. Another study reporting perceptions of middle school students, their parents, and teachers indicated a shared belief that middle level students with mild disabilities included in the general classroom experienced (1) increased self-confidence, (2) camaraderie, (3) support of the teachers, and (4) higher expectations. The study also indicated that these students avoided low self-esteem that can result from placement in a special education setting (Ritter, Michel, & Irby, 1999). In a review of research on inclusion at both the elementary and secondary levels, the report showed that academic performance is equal to or better in inclusive settings for general education...
students, including high achievers, and social performance also appeared to be enhanced because students have a better understanding of and more tolerance for student differences Salend and Duhaney (1999). In general, students with disabilities in inclusive settings have shown improvement in standardized tests, acquired social and communication skills previously undeveloped, shown increased interaction with peers, achieved more and higher-quality IEP goals, and are better prepared for post school experiences (Power-deFur & Orelove, 1997).

Not all studies on inclusion have been shown to be beneficial for students with disabilities or for nondisabled students. Some studies report positive social gains for students with disabilities in the regular classroom, while others report that students included have experienced isolation and frustration. The opponents of inclusion, particularly those opposed to a full inclusion model—have argued that (a) general education is not prepared for inclusion, and fully inclusive education cannot be accomplished due to its inherent complexities; (b) empirical evidence has not sufficiently validated the effectiveness of inclusion; (c) students with disabilities need more intensive interventions than can be provided in a general education classroom; and (d) school wide inclusive education attitudes, adaptations, and accommodations for students with disabilities must be in place and highly supported by teachers and administrators before an inclusion model has a strong chance of success (see, e.g., Burstein, Sears, Wilcoxen, Cabello, & Spagna, 2004; Fuchs & Fuchs, 1994; Kauffman, 1993, 1999; Stainback & Stainback, 1996). Lieberman, 1992 as cited in Thompkins & Deloney 1995) points out that many advocates (including parents) for those with learning disabilities have significant concerns about the move toward inclusion, stemming from the fact that they have had to fight long and hard for appropriate services and programs for their children. In addition, they contend that students with learning disabilities do not progress academically without individualized attention to their educational needs and these services work when a specialized teacher works with these students individually or in small groups, usually in a resource room setting.

Based on a survey from 120 teachers from six middle schools in one Colorado school district Tiner (1995) found that teachers were most concerned with ensuring that all students have an opportunity to learn and voiced a concern that too much time was spent on special students and resulted in time taken away from others in the classroom. According to Staub and Peck (1995), studies conducted with control groups to compare progress of children who are not disabled in inclusive classrooms and with those in classrooms that do not include students with disabilities, no significant differences were found between the two groups of students.

Among the professionals and parents who oppose the inclusion model, (Smith et. al) some of their concerns are:

(1) General educators have not been involved sufficiently and are not likely to support the model. (2) General educators as well as special educators do not have the collaboration skills necessary to make inclusion successful. (3) There are limited empirical data to support the efforts, (4) Full inclusion of students with
disabilities into general education classrooms may take away from students without disabilities and lessen their quality of education. (5) Current funding, teaching training, and certification are based on separate educational systems. (6) Some students with disabilities do better when served in special education classes by special education teachers (p.25).

Although research can be found to support inclusion or disprove the benefits of inclusion, however, there are other obstacles for inclusion. According to Kochhar, West, & Taymans, 2000, (as cited in Hines 2001) the barriers to inclusion generally fall into three categories: organizational, attitudinal, and knowledge barriers.

Organizational barriers are related to the differences in ways schools and classes are taught, staffed, and managed, as well as scheduling the amount of time needed for collaborative planning. Attitudinal barriers involve the collaboration of teachers and a shift in control and sharing of a learning environment rather than having individual space. Also, educators have to be willing to accept new ideas about teaching, learning, and learning styles. Both general and special educators feel that knowledge barriers also exist in inclusive classrooms. In many cases, general educators do not feel that they have received the necessary training for working with students with special needs and special educators may feel under qualified if they are not content experts, especially at a middle or secondary school level.

Heyne’s (n.d.) barriers to inclusion consist of four categories; attitudinal barriers, administrative barriers, architectural barriers and programmatic barriers. Attitudinal barriers may take the form of misconceptions, stereotypes, or labeling and staff may not understand the concept of inclusion and what it represents in terms of people’s rights and opportunities. Administrative barriers involve agencies with the lack of outreach networks, staff trained in inclusive practices, adequate transportation, and funding for coordinated services and individual supports. Boards of directors and administrators may not understand inclusion well enough to support it and may also mistakenly presume that inclusion means complicated and expensive liability arrangements. Architectural barriers should never be used as an excuse to deny participation. It consist of curb cuts, ramps, automatic door openers, elevators, braille signage, telecommunication devices, and similar accommodations (or the lack thereof) send a message that people with disabilities are or are not welcome. Programmatic barriers involves serving people with varying abilities, and program staff may not have accurate information about disabilities nor experience teaching people with differing abilities. In addition the staff may not know how to provide inclusion supports such as individual needs assessments, environmental inventories, behavioral teaching techniques, adaptations, or specialized equipment.

Summary

There is research that can be found to support both views on inclusion. Opponents point to research showing negative effects of inclusion, often citing low self-esteem of students with disabilities in the general education setting and poor academic grades. For those
supporting inclusion, research exists that shows positive results for both special and
general education students, including academic and social benefits.

Since all children in the United States are entitled to a free public education, teachers
today must provide instruction and other educational services that meet the needs of a
very diverse population. Classrooms that will successfully include students with
disabilities are designed to welcome diversity and to address the individual needs of all
students, whether they have a disability or not. If schools are to be effective in providing
services for all students, than school personnel must address the needs of all students and
have an understanding of the types of disabilities and services models. Inclusion should
not be disregarded because of lack of funding, staff or preconceived ideas of its
complexity. Inclusion should be based on the individual students’ needs.

For the successful implementation of inclusion, schools and school districts should
provide support at the administrative level and classroom level, by providing time for
planning, time for training, and an overall commitment to provide support. With such
legislation as IDEA, and parent advocacy groups, schools will have no choice in
providing the inclusive model of education for students with disabilities.

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