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Exceptional LEARNERS

NINTH EDITION

INTRODUCTION TO SPECIAL EDUCATION



 Daniel P. Hallahan

James M. Kauffman

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Preface

Exceptional Learners: Introduction to Special Education, Ninth Edition is a general introduction to the characteristics of exceptional learners and their education. (*Exceptional* is the term that traditionally has been used to refer to persons with disabilities as well as to those who are gifted.) This book emphasizes classroom practices as well as the psychological, sociological, and medical aspects of disabilities and giftedness.

We have written this text with two primary audiences in mind: those individuals who are preparing to be special educators and those who are preparing to be general educators. Given the current movement toward including students with disabilities in general education classrooms, general educators must be prepared to understand this special student population and be ready to work with special educators to provide appropriate educational programming for these students. This book also is appropriate for professionals in other fields who work with exceptional learners (e.g., speech-language pathologists, audiologists, physical therapists, occupational therapists, adapted physical educators, counselors, and school psychologists).

In Chapter 1, we begin with an overview of exceptionality and special education, including definitions, basic legal requirements, and the history and development of the field. In Chapter 2, we discuss major current issues and trends, such as inclusion, early childhood programming, transition to adulthood programming, inclusion of students with disabilities in general assessments of progress, discipline of students with disabilities, and access of persons with disabilities to new technologies. In Chapter 3, we address multicultural and bilingual aspects of special education. In the next ten chapters we examine each of the major categories of exceptionality—4: mental retardation; 5: learning disabilities; 6: attention deficit hyperactivity disorder; 7: emotional or behavioral disorders; 8: communication disorders; 9: deaf or hard of hearing; 10: blindness or low vision; 11: low incidence, multiple, and severe disabilities: autistic spectrum, traumatic brain injury, and deaf-blindness; 12: physical disabilities; and 13: special gifts and talents. Finally, in Chapter 14, we consider the significant issues pertaining to parents and families of persons with disabilities.

We believe that we have written a text that reaches the heart as well as the mind. It is our conviction that professionals working with exceptional learners need to develop not only a solid base of knowledge but also a healthy attitude toward their work and the people whom they serve. Professionals must constantly challenge themselves to learn more theory, research, and practice in special education and develop an ever more sensitive understanding of exceptional learners and their families.

Major Changes for This Edition

In revising this text over the years, we have learned that there is a fine line between making too many versus too few changes. As teachers, we recognize that change simply for the sake of change in a text can be distracting and end up causing instructors unnecessary work. Therefore, we have tried hard to strike the right balance between including new information and features that truly add to the text's currency and clarity while maintaining those features that our readers tell us they have liked about previous editions.

In making revisions, we have also been attentive to the overall length of the text. Again, as teachers, we know the value of a concisely written text. Instructors and students consistently tell us they appreciate our text's being many pages shorter than others without

sacrificing important content. Thus, we are pleased that through careful consolidation of this revision we were able to incorporate a new chapter plus many important content updates throughout the text while maintaining the same length as the previous edition.

NEW CHAPTER—LOW INCIDENCE, MULTIPLE, AND SEVERE DISABILITIES: AUTISTIC SPECTRUM, TRAUMATIC BRAIN INJURY, AND DEAF-BLINDNESS

In previous editions, we covered these low incidence disabilities in multiple chapters. In this edition for the sake of clarity, we have combined them into one chapter—Chapter 11. Although autistic spectrum disorders and TBI may range from mild to severe disabilities, they are low incidence disabilities and always entail multiple problems. Neither normal development nor disabilities are often neatly packaged with clear lines of demarcation from all other conditions. However, we see the logic and necessity of clustering certain disabilities under categorical labels for purposes of discussion. To us, it makes sense to have a chapter devoted to the types of disabilities we discuss in Chapter 11. We hope you enjoy reading this chapter as much as we enjoyed writing it.

NEW FEATURE—RESPONSIVE INSTRUCTION: MEETING THE NEEDS OF STUDENTS

It is our firm belief that most students with disabilities require intensive instruction in order to maximize their potential. Sprinkled throughout the 10 categorical chapters (4–13) are 25 boxes that feature a variety of research-based strategies for teaching students with disabilities. Although they cannot possibly take the place of a full-blown course and text in teaching methods, we think these strategies offer practical suggestions for begin-

RESPONSIVE INSTRUCTION

Meeting the Needs of Students with Emotional or Behavioral Disorders

Approaches to Reducing Bullying in Schools

Understanding Bullying

Recent school tragedies directly or indirectly tied to bullying have resulted in increased attention on the part of administrators, teachers, and fellow students to the issue of bullying in schools. One program recommended by researchers addresses bullying through involving key people who can help the aggressor learn more appropriate behaviors and the victim learn options for responding. In addition to bringing all stakeholders together, the program addresses the issue from several vantage points (Garrity et al., 1996, 2000).

A Comprehensive Approach to Reducing Bullying

Garrity and colleagues' program involves the entire school (students, teachers, administrators, staff) as well as students' families. Staff receive training in response procedures and then teachers implement the program within their classes. A summary of this model is presented below.

Who Should Be Involved?

1. Teachers and other staff members. All school personnel need to be informed of standard procedures and be willing to act. Students, both the bully and the victim, must know that teachers will respond.
2. The "caring majority." The caring majority are those students who neither bully nor are bullied. These students know the bullying is occurring but often do not know if or how to respond.
3. The bullies. The bullies need to be addressed in ways that stop their aggression toward other students and direct their need for power into more prosocial directions.
4. The victims. Victims need protection and support, but they also need the social and interpersonal skills critical for seeking outside and internal support.
5. Parents. Parents should be made aware of school policies and procedures. Informed parents will feel more secure about sending their child to school and know the type of response that will occur when their child is either the bully or the victim.

What Is Involved?

1. Staff training. All school personnel are involved in staff training—including bus drivers, after-school workers, media specialists, etc. During staff training, faculty learn about the different manifestations of bullying (e.g., physical aggression, name calling, gossiping, intimidating phone calls, verbal threats, and locking in confined spaces); explore ways to address both the victim and bully; role-play conflict resolution, particularly how to address the bully in a "firm, no-nonsense" approach; generate "antibullying" curriculum, such as selecting literature on bullies and victims or creating skits or artwork with similar themes; and develop a comprehensive school plan for addressing instances of bullying.
2. Classroom intervention. Within the classroom, students are taught rules to eliminate bullying, strategies for reacting to bullying, and steps to follow if they see bullying occurring. The following rules, strategies, and steps are recommended by Garrity et al. (1996, 2000):
 - a. Rules for Bully-Proofing Our Classroom
 - i. We will not bully other students
 - ii. We will help others who are being bullied by speaking out and by getting adult help
 - iii. We will use extra effort to include all students in activities at our school
 - b. What I Can Do if I Am Being Bullied
 - i. HA = Help and Assert
 - ii. HA = Humor and Avoid
 - iii. SO = Self-Talk and Own It (p. 38)
 - c. What I Can Do if I See Someone Being Bullied
 - i. Creative Problem Solving
 - ii. Adult Help
 - iii. Relate and Join
 - iv. Empathy

Finally, Garrity and colleagues suggest the following strategies for empowering victims: (1) teach a repertoire of friendship-making skills, (2) develop an understanding that self-esteem affects friendships and how one handles bullying, and (3) teach skills that help victims feel empowered and better able to handle bullies.

—By Kristin Sayeski

ning to meet the needs of exceptional learners through intensive instruction. In keeping with this era of accountability, the author of these boxes, Dr. Kristin Sayeski of the University of Virginia, has stressed teaching practices having a sound research base.

NEW FEATURE—MAKING IT WORK: COLLABORATION AND CO-TEACHING

Each of the categorical chapters (4–13) includes a feature, authored by Dr. Margaret Weiss of the University of North Carolina, devoted to co-teaching and collaboration between special and general education teachers. The first section of each box includes information about knowledge and skills special educators should possess as they enter the field, as identified by the Council for Exceptional Children (CEC) in its *Performance-Based Professional Standards* (2001). We believe it is important for all teachers to understand what expertise special educators can contribute to collaborative, general education classrooms. The second section contains examples of research-based instructional practices that teachers can use when collaborating or descriptions of successful collaborations in real classrooms. Each box contains specifics about how to get more information about the strategy or classroom described.

MAKING IT WORK

Collaboration and Co-teaching for Students with Visual Impairments

"I don't have time to learn braille!"

What Does It Mean to Be a Teacher of Students with Visual Impairments?

Collaboration for students with visual impairments often takes the form of working with itinerant special education teachers. This can be frustrating for general educators in that they are left "on their own" when the special educator is at another building. Therefore, in planning for collaboration, it is important that the general educator and itinerant teacher have time to plan for student needs that may arise at any time. Working with the general educator to plan for instruction, the teacher of students with visual impairments can offer expertise in:

1. Designing multisensory learning environments that encourage active participation in group and individual activities.
2. Creating learning environments that encourage self-advocacy and independence.

3. Teaching individuals with visual impairments to use thinking, problem-solving, and other cognitive strategies.
4. Preparing individuals with visual impairments to respond constructively to societal attitudes and actions.
5. Obtaining and organizing special materials (including technologies) to implement instructional goals. (Council for Exceptional Children, 2001)

Successful Strategies for Co-teaching

Ricki Curry (an itinerant teacher) and Jenny Garrett (a fourth-grade teacher) talk about how they collaborated to fully include Dennis, a student with a severe visual impairment.

Jenny: My fourth-grade class consisted of 23 nine- and ten-year-old students, including two children with learning disabilities, one with severe behavior disorders, and Dennis.

They began the year reading anywhere from a first- to a sixth-grade level.

Ricki: Although he has some usable vision, Dennis can see no details from a distance of more than about two feet and uses large-print texts for reading.

Jenny: Dennis has some difficulty making friends because of his immaturity, his compulsive talking, and his inability to listen. On the other hand, Dennis has a good sense of humor and is quick with language. Dennis was in my class all day long for every academic subject. Ricki worked with him during language arts block, teaching braille. She would come to school during the last half of my planning period, which gave us a daily opportunity to discuss assignments, homework, curricular adaptations, equipment, and the like. Homework was an enormous issue. Ricki helped him set up a notebook with a homework contract enclosed and a special highlighter, which he used to mark off completed assignments. He had to write down the assignments himself, remember to take the notebook home, complete the assignments, get a parent's signature, and get it back to school. The hardest part of working with Dennis was the start-up period. I had to get to know him, his visual capabilities, his strengths and weaknesses, his coping strategies. I began

adapting my teaching style, using an easel rather than the blackboard so that he could scoot up to it. I had to decide how hard to push, what to expect from his parents, and what to demand from Dennis.

Ricki: I often found myself overwhelmed by the number of things that Jenny and/or Dennis needed help with in the short time that I was in the building. And so many things seemed to go wrong in the time between when I left one day and arrived again the next day. Although I was frustrated by the limitations imposed by time constraints, the beauty of the inclusion model was that I was very aware of the true gestalt of Dennis's program and knew exactly what he was involved in all the time. Had I not had an almost daily view of Dennis's classroom performance, I might not have believed how hard it was to integrate this very bright, verbal, personable child into Jenny's class.

Jenny: Collaboration works best when there is a match of personalities as well as energy, enthusiasm for teaching, and professionalism.

More information about visual impairments and their impact on the classroom can be found at the Web site of the Division on Visual Impairments of the Council for Exceptional Children, www.ad.arizona.edu/dv/welcome.htm.

A particular problem for those who are blind is their ability to access the wealth of information that is now available via computers and the World Wide Web. As computers have moved more and more toward graphic displays of information on the screen, users with visual impairments have become concerned about how this affects their access to that information. For example, a graphics-based interface requires the user to move a mouse to a relatively precise position on the screen in order to click on the desired function. There are screen-reading programs available that allow those who are visually impaired to access information nonvisually, but cooperation is required from Web site developers to ensure that their Web sites are compatible with these programs (Wunder, 2000). Some progress has been made on this front. The National Federation of the Blind filed a lawsuit against America Online (AOL) and then withdrew it, in July of 2000, after reaching an agreement that AOL would make its service and content accessible to those who are blind.

Educational Placement Models

The four major educational placements for students with visual impairment, from most to least segregated, are (1) residential school, (2) special class, (3) resource room, and (4) regular class with itinerant teacher help. In the early 1900s virtually all children who were blind were educated in residential institutions. Today, however, itinerant teacher services, wherein a vision teacher visits several different schools to work with students and their general education classrooms, is the most popular placement for students with visual impairment. The fact is, there are so few students with visual impairment that most schools find it difficult to provide services through special classes or resource rooms.

Residential placement, however, is still a relatively popular placement model compared to other areas of disability. For example, about 7 percent of students with vision loss between the ages of six and twenty-one years are placed in a residential institution,

whereas only about .5 percent of students with mental retardation are so placed. The advantage of residential placement is that services can be concentrated to this relatively low-incidence population. In the past, most children who were blind attended institutions for several years; today some may attend on a short-term basis (e.g., one to four years). The prevailing philosophy of integrating children with visual impairments with the sighted is also reflected in the fact that many residential facilities have established cooperative arrangements with local public schools wherein the staff of the residential facility usually concentrates on training for independent living skills such as mobility, personal grooming, and home management, while local school personnel emphasize academics.

Early Intervention

For many years psychologists and educators believed that the sighted infant was almost totally lacking in visual abilities during the first half-year or so of life. We now know that the young sighted infant is able to take in a great deal of information through the visual system. This fact makes it easy to understand why intensive intervention should begin as early as possible to help the infant with visual impairment begin to explore the environment. As we noted earlier, many infants who are blind lag behind their peers in motor development. Consequently, O & M training should be a critical component of preschool programming.

Although many advocate that preschoolers with visual impairments should be educated in inclusive settings with sighted children, it is critical that teachers facilitate interactions between the children. We know from research that merely placing preschoolers who are visually impaired with sighted preschoolers does not lead to their interacting with one another (McGaha & Farran, 2001).

Most authorities agree that it is extremely important to involve parents of infants with visual impairment in early intervention efforts. Parents can become actively involved in

Extensive Revisions and Updates

In addition to the new chapter on low incidence, multiple, and severe disabilities, we have made extensive revisions to virtually every aspect of the remaining thirteen chapters. We have included over 400 new references bearing a copyright date from 2000 and beyond. Approximately 20 percent of the main text in these thirteen chapters is new. These chapters also now include 63 new glossary terms, 9 new tables, and 14 new figures.

EXPANDED COVERAGE OF MAJOR ISSUES

This edition includes material in Chapter 1 on IDEA 1997, the development of IEPs, and the March '99 federal regulations related to IDEA '97. The Amendments to IDEA in 1997 were significant, and we bring students up to date on the new features of federal law and IEP requirements. In Chapter 2, we have added discussions of self-determination and person-centered planning to our coverage of integration. Consistent with trends toward more collaborative teaching, we have added a feature in Chapter 2 on teachers working together, setting up the issue of collaborative teaching for the subsequent categorical chapters. We also revised our discussion of the inclusion of students with disabilities in general assessments of educational progress and on the discipline of students with disabilities. IDEA 1997 requires appropriate inclusion of students with disabilities in general assessments of educational progress as part of schools' movement toward setting higher academic standards. This requirement raises many questions for most teachers and prospective teachers, and our revisions address the most common of these. Probably the most controversial and adversarial aspect of IDEA 1997 is the law related to disciplinary action involving students with disabilities. Consequently, we have added discussion of two important issues: functional behavioral assessment and positive behavioral supports. Issues in special education are ever changing, but some controversies and problems will undoubtedly extend well into the new century. As this edition goes to press, IDEA is undergoing yet another reauthorization. Consult the Companion Web site for changes.

CHAPTER-OPENING QUOTES AND ART

Going back to our first edition is the practice of opening each chapter with an excerpt from literature or song. We draw on this quote in the opening paragraphs to begin our discussion of the topics covered in the chapter. Students continue to tell us that they find this use of quotes to be an effective method of grabbing their attention and leading them



Rebecca Bella Rich

The Family, ink, watercolor on rag paper, 15 × 11 in.

Ms. Rich, who was born in 1960 in Cambridge, Massachusetts, has a dramatic sensibility. Her life, art, and poetry have an extravagant and flamboyant quality. She has produced an autobiographical performance video and a book of interviews with artists who are challenged by disabilities.

CHAPTER

5

Learners with Learning Disabilities

As much as I want to find the perfect words to express what it is like to be dyslexic, I cannot. I can no more make you understand what it is like to be dyslexic than you can make me understand what it is like not to be. I can only guess and imagine. For years, I have looked out, wanting to be normal, to shed the skin that limits me, that holds me back. All the while, others have looked upon me, as well. There were those who have pitied me and those who have just given up on me, those who stood by, supporting me and believing in me, and those who looked at me as if I were an exhibit in a zoo. But, in general, people have shown a desire to understand what dyslexia is and how to teach those afflicted with it. Each side, it seems, longs to understand the other.

LYNN PELKEY
"In the LD Bubble"

into some of the issues contained in the text. Five chapters (mental retardation; learning disabilities; deafness or hard of hearing; physical disabilities; and parents and families) include new chapter-opening quotes.

The chapter opening art is the work of adult artists with disabilities and is supplied by Gateway Arts in Brookline, Massachusetts. Gateway is a vocational art service and workshop of the nonprofit human service agency Vinfen. Adults with developmental and other disabilities attend the program, which has an on-site fine art gallery and craft store. Gateway participants make their careers in art through the facilitation of a staff of artists. Their work is exhibited nationally and abroad. Individuals receive funding from the Massachusetts Department of Mental Retardation, the Massachusetts Department of Mental Health, the Massachusetts Rehabilitation Commission, the Massachusetts Commission for the Blind, and private funding sources.

MISCONCEPTIONS ABOUT EXCEPTIONAL LEARNERS: MYTHS AND FACTS BOXES

We start each chapter with a box that juxtaposes several myths and facts about the subject of the chapter. This popular feature, familiar to longtime users (it dates back to our first edition in 1978) serves as an excellent advance organizer for the material to be covered. We have added seven new myths and facts to the thirteen retained chapters.

MISCONCEPTIONS ABOUT
Learners with Attention Deficit Hyperactivity Disorder

MYTH All children with ADHD are hyperactive.	FACT Psychiatric classification of ADHD includes (1) ADHD, Predominantly Inattentive Type, (2) ADHD, Predominantly Hyperactive-Impulsive Type, or (3) ADHD, Combined Type. Some children with ADHD exhibit no hyperactivity and are classified as ADHD, Predominantly Inattentive.
MYTH The primary symptom of ADHD is inattention.	FACT Although the psychiatric classification includes an Inattentive Type, recent conceptualizations of ADHD place problems with behavioral inhibition and executive functions as the primary behavioral problems of ADHD.
MYTH ADHD is a fad, a trendy diagnosis of recent times with little research to support its existence.	FACT Reports of cases of ADHD go back to the mid-nineteenth century and the beginning of the twentieth century. Serious scientific study of it began in the early and mid-twentieth century. There is now a firmly established research base supporting its existence.
MYTH ADHD is primarily the result of minimal brain injury.	FACT In most cases of ADHD there is no evidence of actual damage to the brain. Most authorities believe that ADHD is the result of neurological dysfunction, which is often linked to hereditary factors.
MYTH The social problems of students with ADHD are due to their not knowing how to interact socially.	FACT Most persons with ADHD know how to interact, but their problems with behavioral inhibition make it difficult for them to implement socially appropriate behaviors.
MYTH Using psychostimulants, such as Ritalin, can easily turn children into abusers of other substances, such as cocaine and marijuana.	FACT There is no evidence that using psychostimulants for ADHD leads directly to drug abuse. In fact, there is evidence that those who are prescribed Ritalin as children are less likely to turn to illicit drugs as teenagers. However, care should be taken to make sure that children or others do not misuse the psychostimulants prescribed for them.
MYTH Psychostimulants have a "paradoxical effect" in that they subdue children rather than activate them. Plus, they have this effect only on those with ADHD.	FACT Psychostimulants, instead of sedating children, actually activate parts of the brain responsible for behavioral inhibition and executive functions. In addition, this effect occurs in persons without ADHD, too.
MYTH Because students with ADHD react strongly to stimulation, their learning environments should be highly unstructured in order to take advantage of their natural learning styles.	FACT Most authorities recommend a highly structured classroom for students with ADHD, especially in the early stages of instruction.
MYTH ADHD largely disappears in adulthood.	FACT Authorities now hold that about two-thirds of children diagnosed with ADHD in childhood will continue to have the condition as adults.

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SPECIAL TOPICS BOXES

Inserted throughout the text are several types of boxes (see an example on page xxviii, top): some highlight research findings and their applicability to educational practice; some discuss issues facing educators in the field; and some present the human side of having a disability. We have added 32 new boxes.

A Focus on Abilities

Erik Weihenmayer



Erik Weihenmayer

I was at this camp [Khumbu Icefall, elevation 21,300 feet on Mt. Everest one night in May that Erik Weihenmayer sat in his tent as a lightning storm moved across the mountain face.

"It was amazingly beautiful," recalls Weihenmayer (pronounced WEE-nay), sitting in a downtown hotel suite during a recent visit to Boston.

"Every time the lightning cracked, it would echo off the mountains," he says. "And would have a view of the way the mountains looked by the echo, I could feel the beauty of it..."

As most everyone on the planet knows by now, Weihenmayer, 32, became the first blind person to reach the summit of Everest when he accomplished the feat May 25 (2001). The achievement put the Boston College graduate and former grade-school teacher on top of the media world, including the cover of *Time* magazine.

It also put to rest any lingering doubts that a climber of Weihenmayer's ability—he has summited five of the seven continents' highest peaks, along with the likes of Yosemite's imposing El Capitan—could pull off something that has cost 170 climbers their lives over the past half-century...

Weihenmayer was born with a rare degenerative eye condition known as retinosis. His pre-school years were "a two-year nightmare of doctor visits around the country," he writes in his book, as specialists told the Weihenmeyers that Erik would be totally blind by his teenage years...

Despite—or maybe because of—his impairment, he grew into a rebellious, even angry, kid. For a long time, he refused to try a cane or to learn Braille. He took up wrestling and became a high-school champion at one of the few sports that allowed him equal footing with sighted athletes. As he would later conquer the world's most challenging mountain, he won his independence gradually, one halting step at a time.

"Only 10 percent of blind people are literate in Braille," Weihenmayer says, looking back on his own period of frustration and denial. "It took me two years to master it, but when I realized I could read Braille, I realized I could do a lot of normal things. I just needed to do them in a different way. Rock climbing was the same deal."

Note: For more details on the climb, see Pierce (2001).

the child's development. The box on page 10 describes two such cases. In spite of federal laws requiring appropriate education and the existence of a special education system, Willie and Anthony received no special education at all or extremely poor special education services. The consequences of the neglect of their need for special education are profoundly negative. Although early identification and intervention hold the promise of preventing many disabilities from becoming worse, preventive action is often not taken (Kauffman, 1999b).

When special education works as it should, a student's disability is identified early and effective special education is provided in the least restrictive environment. The student's parents are involved in the decision about how to address the student's needs, and the outcome of special education is the student's improved achievement and behavior. Consider the case of Alice, presented in the box on page 11.

Students with exceptionalities are an extraordinarily diverse group compared to the general population, and relatively few generalizations apply to all exceptional individuals.

Blair Smith



Blair Smith

Blair Smith is different... Her legs look like they could snap beneath her at any moment, and she is so short that her perspective barely changes when she rises from her wheelchair.

Still, she always rises. Smith is among the 20,000 to 50,000 people in the United States with the bone disorder osteogenesis imperfecta (OI). She is also a relentlessly giddy cheerleader at Monticello High School.

There are at least four forms of OI, representing extreme variations in severity from one individual to

another. Smith's case falls somewhere in the fairly severe category. OI has rendered her bones soft and brittle, leaving her literally fragile. When she walks she relies on the support of her crutches and leg braces to keep from breaking a leg or two. Her growth was stunted drastically...

As a ninth-grader at Albemarle High School, Smith cheered from the stands like most of the other Patriot students. But for her sophomore year, she moved to brand-new Monticello... and joined the junior varsity team for the Mustangs.

And as a junior this past fall, Smith made the varsity squad, serving as a headliner for Monticello's act from September to February. She takes the floor in her wheelchair—Smith's parents had to solicit the aid of their physical education teacher to make her use the chair—and participates in the routines in her own way. Stunts are definitely out, but Smith manages to make her indelible mark on the show without the tools of gymnastic display...

"It's been unbelievable," Debbie Smith (Blair's mother) said. "The kids have just been wonderful. They have been wonderful the whole time she has been in school about accepting her for the way she is."

Added Ralph Smith (Blair's father): "People are always pushing her forward and letting her do things and not putting her in a shell..."

She is just another young girl full of life.

That is all. And that makes you want to stand up and cheer!

SOURCES: "Touching the Sky" by Joseph P. Kahn, Boston Globe, June 27, 2001, p. F1; P5. Reprinted with permission. "Something to Cheer About" by Tom Graham, The Daily Progress, May 7, 2000, pp. E1, E6, Charlottesville, VA. Reprinted with permission.

Their exceptionalities may involve sensory, physical, cognitive, emotional, or communication areas, or any combination of these. Furthermore, exceptionalities may vary greatly in cause, degree, and effect on educational progress, and the effects may vary greatly depending on the individual's age, sex, and life circumstances. Any individual we might present as an example of our definition is likely to be representative of exceptional learners in some respects but unrepresentative in others.

The typical student who receives special education has no immediately obvious disability. He—more than half of the students served by special education are males—is in elementary or middle school and has persistent problems in learning and behaving appropriately in school. His problems are primarily academic and/or social. These difficulties are not apparent to many teachers until they have worked with the student for a period of weeks or months. His problems persist despite teachers' efforts to meet his needs in the regular school program in which most students succeed. He is most likely to be described as having a learning disability or to be designated by an even broader label

SUCCESS STORIES: SPECIAL EDUCATORS AT WORK

Special educators work in a variety of settings, ranging from general education classrooms to residential institutions. Although their main function involves teaching, these professionals also engage in a variety of roles, such as counseling, collaborating, consulting, and

SUCCESS STORIES

Special Educators at Work



Roanoke, VA: Danielle Durrance, who has cerebral palsy, has received early intervention services and early childhood special education since she was nine months old. Her mother, Jennifer Durrance, communicates frequently with special educator Leigh-Anne Williams and special education administrator Beth Umbarger to ensure that Danielle receives appropriate instruction and related services in her county's newly initiated inclusive public preschool program.

Four-year-old Danielle Durrance peered out from under the wide brim of a witch's hat and giggled as her preschool classmates sang "Danielle has a hat. What do you think of that?" Danielle rocked to the rhythm of the music and smiled with delight as she passed the hat to the next child with the help of an instructional assistant. Danielle has cerebral palsy (CP), a neurological condition that limits her mobility, her speech, and her social interactions. She is the only child in the class who uses a wheelchair. Her walker, other adaptive equipment, and supplementary aids and supports are on hand to foster her participation and educational progress.

"We've started an inclusive preschool at Green Valley Elementary School this year," said Roanoke County Public Schools special education preschool coordinator Beth Umbarger. "We used to send our young children with disabilities to private preschools in order to meet IDEA's least restrictive environment requirements. Now we've opened a preschool class designed to serve both typically developing youngsters as well as most of our three- and four-year-olds with disabilities or developmental delays." According to early childhood special educator Leigh-Anne Williams, eight of the preschoolers require the individualized support of special education and related services. The other two stu-

dents are developing typically. "This year, most of the children in the class have special needs. We hope to increase the proportion of children without disabilities in the future," Leigh-Anne Williams's classroom is large, with generous space for movement, sand-play, computers, and specialized equipment. On the day before Halloween her classroom was alive with art and music. Sponge paintings of autumn leaves adorned the walls as her ten students dabbed white finger-painted ghosts and goblets on sheets of black paper. Danielle Durrance finished her creation at her standing table, a piece of adaptive equipment that provides her with vertical support for up to sixty minutes at a time. While her classmates washed their hands, Danielle transferred to her wheelchair with the help of another one of the classroom's three instructional assistants. "We take turns lifting Danielle and positioning her to use her walker or the vestibular chair that hangs from the classroom ceiling," said Ms. Williams. "The instructional assistants also help Danielle with her personal hygiene and we keep a chart on the bathroom door to be sure we're sharing her physical support."

Danielle has attended the Green Valley Preschool Program since August 1999, two years before it started enrolling children without disabilities. According to evaluations using the Carolina Curriculum for Preschoolers with

Special Needs, Danielle has progressed in all developmental areas, although her delays in cognition and social adaptation place her approximately one year to one and a half years behind her age peers. She remembers objects that have been hidden and understands concepts like empty/full and add/one more. Socially, she follows directions, expresses enthusiasm for work or play, plays games with supervision, and enjoys being with other children. According to her IEP, Danielle's social interactions are limited by her physical delays. Danielle's few and gross motor skills place her closer to two years behind her age peers. She receives occupational and physical therapy to enhance her manipulative and visual motor skills and to improve her mobility and endurance. She also receives speech-language therapy. Receptively, Danielle appears to understand many age-appropriate concepts and vocabulary, but she doesn't often initiate communication, nor does she imitate consistently.

Jennifer Durrance, who works in the school's cafeteria, describes her daughter as a happy and outgoing child. "She's curious about things, although her speech is somewhat hard to understand. She's very determined and really wants to walk. Sometimes she gets on her belly at home and slides across the floor." Mr. and Mrs. Durrance have worked closely with medical and educational professionals over the past four years. Danielle was delivered prematurely at thirty-four weeks' gestation when doctors found that her twin sister's heart had stopped beating. Although her twin was stillborn, Danielle survived the traumatic birth but experienced a lack of oxygen during delivery. She weighed only four pounds, four ounces at birth and spent eleven days in the hospital before her parents could bring her home. Mr. and Mrs. Durrance became suspicious that something was wrong when Danielle was four months old. "She couldn't roll over and find a toy that was near her in the crib. You know how babies look at their hands at ten? Well, she would mostly look at one hand; she kept her other hand down." At six months, Danielle was not sitting up and it was clear that her eyes were crossed. "The pediatrician was a little concerned but suggested that we wait until she turned nine months old," remembers Mrs. Durrance. "I wish he had been more aggressive. I wish he had said 'I think there might be a problem' so that we might have

understood what he was waiting to see. Just telling us to wait seemed so impersonal when our child's development was so very personal to us." When she was nine months old, development tests, including an MRI, confirmed that Danielle had CP and early intervention services began. A special education teacher came to the house to work with Danielle. In addition, her parents drove her to physical and occupational therapy several times a week, and made periodic visits to an ophthalmologist.

Jennifer Durrance credits Danielle's smooth transition from early intervention services to early childhood special education to clear communication among the many professionals involved in her care. "At the transition meeting, someone asked if I had a picture of Danielle with me. I really appreciated that. There was nothing in particular that caused me to feel stressed, but I think teachers should know that many parents feel very nervous at these meetings." Leigh-Anne Williams made Ms. Durrance feel welcome at the Green Valley Preschool Program. "I felt she understood. She made the transition so nice. She wrote me notes daily because she knew that Danielle couldn't tell me about her day."

In spring, the IEP team will make decisions for Danielle's programming for the next school year. Together, her parents and her multidisciplinary team will consider if Danielle should start kindergarten with her age peers or whether she would benefit more from extended preschool support. Danielle has learned much from her early intervention services and her preschool special education. Jennifer Durrance has learned a great deal, too, and she has important things to say to teachers who might have a student like Danielle in their class.

First of all, know the IEP, especially when a child is served in the regular classroom. Second, keep communication a priority. Teachers need to make the time to know the parents of the child, too. Third, use information. Know that parents are knowledgeable about their child's disability. Learn as much as you can about how the child's disability affects her life and her learning.

—By Jean Crockett

treatment: new developments in bioengineering, allowing them greater mobility and functional movement; decreases in or removal of architectural barriers and transportation problems; and the movement toward public education for all children (Bogge et al., 2001; Closs, 2000; Heller, Alberto, Forney, & Schwartzman, 1996; Lerner et al., 1998).

Any placement has positive and negative features, and the best decision for a particular child requires weighing the pros and cons. Sometimes the benefits of a particular type of placement are either greatly exaggerated or almost completely dismissed. The box on page 442 is an excerpt from the personal story of Tampa Lyke, a girl with a very "aggressive" type of juvenile arthritis, which caused her a lot of physical pain and required extensive treatment. Her reflections on placement should give pause to any idea that all the benefits are found in one type of placement or the other.

EDUCATIONAL GOALS AND CURRICULA

It is not possible to prescribe educational goals and curricula for children with physical disabilities as a group because their individual limitations vary so greatly. Even among children with the same condition, goals and curricula must be determined after assessing each child's intellectual, physical, sensory, and emotional characteristics. A physical type of ability, especially a severe and chronic one that limits mobility, may have two implications for education: (1) the child may be deprived of experiences that nondisabled children have, and (2) the child may find it impossible to manipulate educational materials and respond to educational tasks the way most children do. For example, a child with severe cerebral palsy cannot take part in most outdoor play activities and travel experiences and

44 The Attainment Company creates resources to help people identify the emerging issues in special education and to access the educational materials that will allow them to meet such issues effectively. www.attainmentcompany.com

so forth. To illustrate this variety, each of the ten categorical chapters includes an example of a special educator at work. Written by Dr. Jean B. Crockett of Virginia Tech University, an experienced special education administrator and teacher educator, each story focuses on a special educator's work with an individual student. These boxes show readers the wide range of challenges faced by special educators, the dynamic nature of their positions, and the competent, hopeful practice of special education.

MARGIN NOTES

The marginal glossary of key terms and concepts continues to appear in this new edition. We have also added new margin notes that provide information about interesting and relevant Web sites. *All* of these Web sites are also included as hot links on the Companion Web site for the 9th edition.

PHOTOGRAPHY

Over half of the photographs for this edition were supplied by Allyn and Bacon's photo library. The photo library is a compilation of images from photo shoots that were set up at schools around the country, including California, Connecticut, Florida, Maryland, Massachusetts, Missouri, New Mexico, Utah, and Canada. Photos for our ninth edition were selected from the most recent photo sessions. Allyn and Bacon's photo department is aware of the rapid changes that are occurring in special education and is committed to reflecting those changes in its library.

Allyn and Bacon solicited our guidance for the shoots. All the photographs we chose are reproduced with the consent of the individual depicted.



Supplements

STUDENT STUDY GUIDE

Written by Paula Crowley of Illinois State University, and reviewed by Dan Hallahan and Jim Kauffman, the study guide reinforces for students conceptual and factual text material and includes key points, learning objectives, exercises, practice tests, and enrichment activities.

COMPANION WEBSITE PLUS, WITH ONLINE STUDY GUIDE

Prepared by Paige Pullen of the University of Virginia, this dynamic, interactive Companion Website includes an online study guide for students that provides, on a chapter-by-chapter basis, learning objectives, study questions with text page references, “live” links to relevant Website (including those referenced and highlighted in the text), audio and video clips, and additional enrichment material. The Companion Website also features a “syllabus builder” that allows instructors to create and customize course syllabi online. [www.abacon.com/hallahan9e]

INSTRUCTOR'S RESOURCE MANUAL AND TEST BANK

The Instructor's Resource Manual section of this supplement was prepared by Melody Tankersley of Kent State University, along with Dan Hallahan and Jim Kauffman. For each chapter of the text, it provides a Chapter Outline, a Chapter Overview, and an Annotated Outline wherein the major headings of the chapter are summarized in detail. Included in the Annotated Outline are suggestions for Lecture Ideas, Discussion Points, and Activities. The IRM also keys each chapter to appropriate videos, transparencies, and digital images available with this text. Also included are references to Related Media, Films, Journals, and Web sites.

The Test Bank section, written by Kerri Martin of East Tennessee State University consists of over 1000 test questions, including multiple choice, true/false, and essay formats. Also included are quizzes and comprehensive tests for each chapter.

NEW! POWERPOINT ELECTRONIC SLIDE PACKAGE

The PowerPoint package, created by Virginia Dudgeon of the State University of New York at Cortland to accompany the ninth edition, is easily accessed from the Allyn & Bacon Web site. More than 100 slides are organized by chapter for use as lecture presentation and/or handouts for students. Those instructors who already use PowerPoint as a lecture presentation tool, will find this new supplement a convenient way to incorporate new slides into their existing slide package. Those instructors who have not used PowerPoint (and perhaps have no intention of doing so!) and/or do not have the PowerPoint program on their computers can rest assured these slides can be easily downloaded onto the hard drive and printed out for use as traditional overhead transparencies and handouts. [www.ablongman.com/ppt]

COMPUTERIZED TEST BANK

A computerized version of the Test Bank is available to adopters in CD-ROM for both PC and Macintosh machines. Please ask your Allyn & Bacon representative for details.

THE “SNAPSHOTS” VIDEO SERIES FOR SPECIAL EDUCATION

Snapshots: Inclusion Video (© 1995; 22 minutes) profiles three students of different ages and with various levels of disability in inclusive class settings.

Snapshots 2: Video for Special Education (categorical organization) (© 1995; 20–25 minutes) is a set of six videotaped segments designed specifically for use in your college classroom. It is also available in closed-captioned format. The topics explored are:

- traumatic brain injury
- behavior disorders
- learning disabilities
- mental retardation
- hearing impairment
- visual impairment

Each segment profiles three individuals, their families, teachers, and experiences. These programs will be of great interest to your students. Instructors who have used the tapes in their courses have found that they help in disabusing students of stereotypical

viewpoints, and put a “human face” on course material. Teaching notes for both *Snapshots: Inclusion* and *Snapshots 2* are provided in corresponding chapters of the Instructor’s Resource Manual.

THE ALLYN AND BACON “PROFESSIONALS IN ACTION” VIDEO SERIES: “TEACHING STUDENTS WITH SPECIAL NEEDS”

Available with the ninth edition of the text, the *Professionals in Action* video is approximately two hours in length, consisting of five 15–30 minute modules. These modules present several viewpoints and approaches to teaching students of various disabilities in general education classrooms, separate education settings, and several combinations of the two. Each module explores its topic through actual classroom footage and interviews with students, general and special education teachers, and parents. The five modules are:

1. Working Together: The Individualized Education Plan (IEP)
2. Working Together: The Collaborative Process
3. Instruction and Behavior Management
4. Technology for Inclusion
5. Working with Families

ALLYN & BACON TRANSPARENCY PACKAGE FOR SPECIAL EDUCATION

The Transparency Package includes approximately 100 acetates, over half of which are full color.

ISEARCH: SPECIAL EDUCATION

This resource guide for the Internet covers the basics of using the Internet, conducting Web searches, and critically evaluating and documenting Internet sources. It also contains Internet activities and URLs specific to the discipline of Special Education. This practical booklet is available *only* as part of a “value pack,” shrinkwrapped with an Allyn & Bacon textbook. Please ask your Allyn & Bacon representative for details and ordering information.

COURSECOMPASS AND BLACKBOARD FOR EXCEPTIONAL LEARNERS, NINTH EDITION

CourseCompass is a dynamic, interactive eLearning program powered by Blackboard. Flexible, easy-to-use course management tools allow you to combine content created for *Exceptional Learners*, Ninth Edition, with your own. Putting your online resources in one place has never been easier and it just got better. An updated CourseCompass design now includes a new Course home page and other features to help you create a better online learning experience for your students. Ask your local Allyn & Bacon representative for more information or go to www.ablongman.com/coursecompass.

CASES FOR REFLECTION AND ANALYSIS—NEW EDITION

The past few editions of *Exceptional Learners* have included a free booklet of case studies with every new copy of the text purchased from Allyn & Bacon. The overwhelming popularity of this supplement motivated us to revise it for the 9th edition. Four of the nine cases are new to this edition. These cases reflect both the joy and the pain teachers experience while working with exceptional children. What professors of education and commentators in the popular press write about teaching is often wondrously abstract, hypothetical, or idealistic, and does not always ring true for those who teach in classrooms every day. These cases are neither abstract descriptions nor conjecture, nor do they

reflect an idealism detached from the realities of the classroom. These are true stories—what really happened as told from the perspectives of real teachers and how they thought and felt about what was happening. We hope you will enjoy reading and discussing them as much as we have.

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This may well be the most extensive overall revision we have made in the twenty-five-year history of this text. For those loyal users of previous editions, we assure you that we weighed carefully each change or update. We hope you agree that our revisions reflect the myriad changes in the field of special education over the past few years as well as the information explosion brought about by ever more accessible computer databases and the Internet. We also hope you will agree that we have not failed in our continuing commitment to bring you the best that research has to offer with regard to educating exceptional learners.

DPH
 JMK

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