

## *EXECUTIVE SUMMARY*

### **SECTION I**

**Context/Environmental Factors:** This section has five modules that describe societal and educational factors that are currently affecting the delivery of services to children with disabilities and their families.

#### ***School Reform and Students with Disabilities: The Changing Context of Classrooms***

- Over the past 15 years, general education reforms have focused on six major policy areas: standards development, assessment, accountability, governance, teachers, and finance. During the same period, special education programs have been changing as a result of efforts to promote inclusion of students with disabilities in regular education classrooms, to decrease inappropriate identification of students with disabilities (particularly cultural- or language-minority children), and to improve postschool results of all students receiving special education services.
- A recent national survey conducted by the Council of Chief State School Officers in collaboration with the Center for Policy Research on the Impact of General and Special Education Reform indicated that 38 States and the District of Columbia have standards ready in one or more content areas. Thirty-four States and the District of Columbia will apply those content standards to students with individualized education plans (IEPs).
- Teacher licenses for both special education and general education are moving toward fewer licensing categories. In special education, the trend appears to be toward more developmental and less content- or disability-specific categories. General education teacher license requirements in 22 States include a requirement that elementary teachers have some coursework related to students with disabilities, and 21 States have a similar requirement for secondary teachers. Eleven States require that general education teachers obtain practical

experience working with students with disabilities before obtaining a license.

***Poverty Among Children: The Impact on Special Education***

- Over the past 25 years, the overall poverty rate has remained relatively constant at approximately 12 percent; the child poverty rate has increased from 15 to 19 percent. Younger children have a greater likelihood of being in poverty. For the period 1990-95, the average annual poverty rate for children birth through age 2 was 25.7 percent, that of 3- through 5-year-olds was 24.3 percent, and that of 6- through 17-year-olds was 19.9 percent.
- Poverty increases the likelihood of problems that affect the education of children. Children of low-income families on average miss more days of school. A pattern of underachievement is also associated with children of low-income families. Students from low-income families are twice as likely to drop out of high school as their middle-income peers, and students from low-income families are 11 times more likely to drop out than their upper-income peers.
- Poverty has been associated with an increased risk of children being born with a lower than average birth weight. Low birth weight babies are at higher risk of developing learning disabilities, hyperactivity, emotional problems, mental illness, neurodevelopmental problems, and visual and hearing impairments. When poverty and low birth weight occur together, the number of students who need special education services is greater than would be predicted for those factors independently.

***The Costs of Special Education***

- Sources of cost information include historical data from previous national studies of special education costs and data collected from States in the 1980s as required by Section 618 of IDEA. Estimates of the current costs of special education are based on a recent State survey conducted by the Center for Special Education Finance (CSEF), the national per pupil cost of education, and the total amount of Federal expenditures for special education.

- Historical data show that the cost of special education has risen at a higher rate than the cost of general education as a whole. However, much of the cost can be attributed to the implementation of IDEA and to the costs associated with expansion of services to eligible children ages birth through 5. Current influences on the costs of special education include the: (1) growth in special education enrollment, (2) changes in the funding agencies and the types of services being provided, (3) revenue restrictions such as property tax restrictions that limit the growth in general education expenditures but have not limited the growth in special education expenditures, and (4) changes in the population such as the increase in economically and medically at-risk students.
- In response to a CSEF survey of 24 States, 13 reported that they could estimate their statewide cost of special education programs with a high degree of confidence, 9 States were either somewhat confident or confident of their data, and 2 States were not confident. States with a high degree of confidence in their data reported the average marginal cost of special education per student to be \$5,435.
- The use of illicit drugs, particularly marijuana, has increased among secondary school students since 1992. The use of alcohol among secondary school students and adults has remained stable or declined during the 1990s, and the use of cigarettes has increased among this population.
- Youth violence in the general community has increased dramatically over the past decade, and this trend is also evident in schools. In an attempt to understand the growing problems of violence and substance abuse, efforts are being made to understand the way in which this social problem may affect students with disabilities.

***Problems  
Facing  
Education:  
Substance  
Abuse and  
Violence***

***Disproportionate Representation: Can This Civil Rights Concern Be Addressed by Educators?***

- Issues regarding minority students and students receiving special education services have been a focus of concern for both OSEP and the Office for Civil Rights (OCR).
- Data from the 1992 OCR Compliance Report and current OCR cases suggest disproportionate representation of racial and ethnic minorities in special education is an ongoing problem nationwide, with continuing concentrations in certain areas. For example, African American students appear to be overrepresented in programs for students with mental retardation, serious emotional disturbance, and specific learning disabilities.
- OSEP and OCR have continued to seek solutions to this civil rights issue by allocating additional resources to address the issue as a programmatic priority. Discretionary grant programs through OSEP have funded research and technical assistance activities that have provided insights into the issues concerning minorities in special education and strategies to resolve concerns. OCR has designated minority students in special education as a priority enforcement issue. It has conducted compliance activities on placement of students, equal access to pre-referral programs, and lack of access to regular education settings.

**SECTION II**

**Student Characteristics:** This section contains four modules related to the characteristics of students served under IDEA and the Federal funding that States received to serve these students.

***Infants and Toddlers with Disabilities Served Under IDEA, Part H***

- Funding for Part H has increased from \$50 million in 1987 to \$316 million in FY 1996. All States and Outlying Areas serve the children that meet eligibility criteria, and in 1995, 13 States and 1 Outlying Area served at-risk infants and toddlers.

**Children Served  
Under IDEA,  
Part B Pre-  
school Grants  
Programs**

- The number of infants and toddlers receiving early intervention services has increased from 145,129 in 1992 to 177,673 in 1995. Almost 50 percent of the children served in 1995 were in the 2- to 3-year-old range, whereas approximately 17 percent of the infants were 1 year old or younger. Only the 2- to 3-year-old age group had an overall increase during 1992-95.
- In FY 1996, Congress appropriated \$360,409,000, only slightly more than the \$360,265,000 appropriated in FY 1995, for the Preschool Grants Program. However, the number of children served increased 4.9 percent from 522,710 on December 1, 1994, to 548,441 on December 1, 1995.
- Many States apply the general education reform efforts that are made within their States to programs that serve children ages 3-5 with disabilities. According to the *Section 619 Profile (Seventh Edition)*, 18 States have revised their Section 619 programs to reflect some of the general education reform efforts.
- On December 1, 1995, just over 50 percent of children ages 3-5 with disabilities were served in regular class placements, an increase of 2 percent from December 1, 1994. The second most frequent setting was separate class placements, followed by resource rooms. The use of separate facilities has declined over time.

**Students Served  
Under IDEA,  
Part B**

- Funding for the Part B Program has increased steadily from \$251,770,000 in 1977 to \$2,323,837,000 in 1996. The per child allocation has risen from \$71 in 1977 to \$418 in 1995. In 1996, the amount allocated for the 1996-97 school year did not correspond to the increase in the number of students with disabilities who were served, and the per child allocation dropped to \$413. However, the \$3,107,522,000 appropriation for FY 1997 will significantly increase the per child allocation for the 1997-98 school year.
- A total of 5,619,099 children and youth with disabilities ages 3 through 21 were served under IDEA, Part B during the 1995-96 school year, an increase of 188,876 (or 3.5 percent) from the previous year. The percentage

of children ages 6 through 17 with disabilities enrolled in school increased from 10.4 percent in 1994-95 to 10.6 percent in 1995-96.

- Students with disabilities ages 6 through 11 were the largest group served (2,581,061 or 45.9 percent) followed by students ages 12 through 17 (2,237,124 or 39.8 percent). Children ages 3 through 5 (548,441 or 9.8 percent) and 18 through 21 (252,473 or 4.5 percent) made up less than 15 percent of the students served; however, these two groups accounted for the largest increase in the percent of students served.
- As in past years, the largest disability categories continue to be specific learning disabilities (2,597,231 or 51.2 percent), speech or language impairments (1,025,941 or 20.2 percent), mental retardation (585,308 or 11.5 percent) and serious emotional disturbance (438,217 or 8.6 percent). The largest relative increases from 1994-95 to 1995-96 occurred in the traumatic brain injury (30.1 percent), autism (27.2 percent), and other health impairments (24.5 percent) categories. Most States attributed the increases in the two newest categories, traumatic brain injury and autism, to reclassification of students during the time of triennial re-evaluations. The increase in the other health impairments category was generally attributed to increased service to students with attention deficit/hyperactivity disorder.
- The American Psychiatric Association estimates that children with attention deficit/hyperactivity disorder make up between 3 and 5 percent of the school-age population. These children share common clinical syndromes associated with problems of inattention, hyperactivity, and impulsivity. In addition, many children with attention deficit/hyperactivity disorder experience co-occurring disabilities such as specific learning disabilities or serious emotional disturbance.
- There is no single test for attention deficit/hyperactivity disorder. An accurate diagnosis can be made by obtaining information about the child from personal histories on the child and his or her family, tests and

***Students with  
Attention  
Deficit/  
Hyperactivity  
Disorder***

questionnaires that assess the child's behavior, and direct observation of the child in a variety of settings. The Professional Group for Attention and Related Disorders recommends a two-tier evaluation to properly identify children with the disorder. Tier 1 is a clinical evaluation to see if the child's symptoms meet the accepted standards for diagnosis of the disorder, and Tier 2 is an educational evaluation to determine if symptoms of the disorder have a negative impact on the child's classroom performance.

- Children with attention deficit/hyperactivity disorder may qualify for special education and related services under IDEA or under Section 504 of the Rehabilitation Act of 1973, as amended. Students must meet eligibility criteria under these Acts to receive services. Children with the disorder who require special education and related services because of the disorder are eligible for services under the "other health impairments" category of IDEA, Part B.
- Different treatments, with varying known effects and limitations, are used by physicians, psychologists, teachers, and parents to alleviate the symptoms of the disorder. Psychostimulant medications and educational programs are two treatments used for attention deficit/hyperactivity disorder.

## **SECTION III**

**School Programs and Services:** This section has seven modules that examine some of the programs and services available within schools for children and youth with disabilities and their families.

### ***The Continuum of Placements: From Regular Classes to Residential Facilities***

- The environments in which students receive services vary according to the needs of the child. For example, in 1994-95, 87 percent of students with speech and language impairments were served in regular classes for 80 percent of the day or more, as compared with 9.7 percent of students with mental retardation. Students ages 6-11 were more likely to be served in regular class placements than were students ages 12-17 or 18-21. The percentage of students with disabilities ages 6-21 served in regular classes has gradually increased from 32.8 percent in 1990-91 to 44.5 percent in 1994-95.
- For a small percentage of students, mainly those with severe and profound disabilities, residential settings are considered to be the appropriate placement. During the 1994-95 school year, 35,150 students with disabilities ages 6-21 attended public or private residential placements. These students accounted for 0.7 percent of all students with disabilities, a percentage that has remained fairly constant over the past 5 years. Of these students served in residential settings, most have serious emotional disturbance (39.9 percent), hearing impairments (18.6 percent), mental retardation (10 percent), learning disabilities (9.3 percent), or multiple disabilities (9.1 percent).

### ***Including Students with Disabilities in Statewide Assessments***

- In 1995, 45 of 50 States administered statewide assessments to measure the performance of students; another 3 States were developing their statewide assessments. Practices governing and attitudes about the participation of students with disabilities in statewide assessments are changing; in 1992, 28 States indicated that they had participation guidelines for students with disabilities. In 1993, 34 States had guidelines; in 1994 and 1995, 45 States had participation guidelines. However, evidence suggests that State personnel can



only give general estimates of the number of students within the State who participate.

- Almost all States involve the IEP team in the decision to participate in statewide assessments. In many States, participation decisions take into consideration curricular alignment (i.e., how well the assessment is aligned with what the student is learning). A few States consider student placement, and a few States consider whether the resulting score will affect the validity or reliability of the measure.
- The number of States that had accommodation guidelines for statewide assessments rose from 21 in 1992 to 39 in 1995. The most frequently used accommodations are changes in setting, scheduling, presentation, and how responses are marked. Although use of all four types of accommodations measured has increased, the greatest increase has been in the use of extended time and reading items to students.
- Only 3 States have developed or are developing an alternate assessment for students unable to participate in regular State assessments. Kentucky has implemented an alternate assessment to contribute to the overall accountability scores. Maryland is field-testing an alternate assessment, and Texas is developing an alternate assessment system.
- During the past 25 years, the philosophy regarding the relationship between children with disabilities and the professionals who serve them has shifted from a child-focused to a more family-focused approach.
- A commitment to the parent-professional partnership is embedded throughout the Part H regulations. Some studies have found that a shift toward family-centered practices has occurred; however, some professionals perceived a moderate level of competence in their ability to work with parents and a higher level of competence working with children.

***Developing a  
Partnership  
Between  
Families and  
Professionals***

- Typically, parents of children with disabilities in primary and secondary programs are given less support and have less input into their child's education than parents of children age birth through 5. However, professionals are increasing the variety of methods used to communicate with families, including technology options such as the Internet and teleconferencing.
- Two institutional transitions in special education are the transition from IDEA, Part H, to IDEA, Part B, at age 3 and the transition from school to postschool activities. These are formal opportunities for parent-professional collaboration. Parent involvement can have a critical effect on the transition from school to postschool activities. Parents greatly influence students' perspectives about their vision for the future, how to plan for the future, and their self-determination.

***The Continuum  
of Options in  
Dispute  
Resolution***

- States have begun to use mediation and other alternative dispute resolution approaches to resolve educational differences and issues. In 1994, 39 States operated special education mediation systems, and 2 out of the 11 remaining States were developing formal mediation procedures. Most of the States without formal mediation systems have some form of mediation.
- OSERS has long supported using mediation and other less litigious means for settling disputes between families and schools.
- State and local educational agencies across the country have implemented several methods of using mediation, including single mediators, co-mediators, and a team or panel of mediators. Some States use SEA employees as mediators while others use individuals from an independent bureau or individuals with a legal background or special education and/or regular education background.
- A number of States and local educational agencies have implemented parent-professional partnership projects that try to enhance communication between parents and school personnel and minimize disagreements and conflicts. Also, many schools and school districts have

implemented conflict resolution programs for students and adults.

**Monitoring  
Compliance  
with IDEA**

- OSEP places the highest priority on compliance with those IDEA requirements that have the strongest positive relationship with improved services and results for students with disabilities and their families. OSEP tailors its monitoring and technical assistance activities in each State to maximize positive impact on educational services and results for students in that State.
- In the 1995-96 school year, OSEP began monitoring some States for compliance with the requirements of the Infants and Toddlers Program under Part H of IDEA. OSEP's monitoring procedures reflect the interagency focus of Part H and focus the monitoring process on requirements that are most closely related to improving results for infants and toddlers and their families. These include child find and public awareness, service delivery, and transition services for children at age 3.
- Thirteen Part B monitoring reports issued in FY 1996 found problems in the following four areas: student access to instruction and vocational preparation, transition from school to employment and other postschool activities, procedural safeguards, and how SEAs exercised their general supervision responsibilities.

**Advances in  
Teaching and  
Instructional  
Design**

- Over the past decade, a shift in curriculum for students with learning disabilities and related academic problems has occurred. Instead of focusing on a remedial model (mainly drill and practice of basic skills), problem-solving strategies are now commonly used.
- Explicit instruction, which emphasizes the use of explicit directions about what needs to be done, said, or written instead of leaving it up to the learner to make inferences, is one strategy being used to teach problem-solving skills. Through immersion in a learning environment that is rich in clear, explicit discussions of relationships and full of a systematic use of relevant

examples, students increasingly make linkages on their own.

- Cognitive strategy instruction provides students with a series of steps to help them distinguish important from less important material. It can be applied to a variety of academic areas, including expressive writing, reading comprehension, mathematical problem solving, and scientific reasoning. Students are taught a plan of action and then receive extensive feedback on their use of the plan.
- Anchored instruction recreates some of the advantages of informal learning environments, such as apprenticeships, that permit sustained exploration by students and teachers. This method enables them to see and understand how information and knowledge can be used as tools for real-world problem solving and can enhance intrinsic motivation and the ability to transfer information from one situation to another.
- Remarkable progress has been made during the past 10 years in using technology to meet the needs of students with disabilities. In particular, researchers have customized technology to meet the needs of students with severe cognitive and physical disabilities. A primary source of funding for research projects in this area has been from OSEP.
- Students with severe impairments have increased independence levels through “low tech” solutions such as specially designed pencils, scissors, and silverware and “high tech” advances such as voice recognition systems, word prediction systems, and virtual reality.
- Students with learning disabilities, other cognitive disabilities, and behavioral disabilities have increased their basic skills with specially designed software packages for microcomputers. The technology has also enhanced computer capabilities for all users. For example, Hypercard™, a method that allows the user to click on a boldface text to access other information, pictures, or sound, was first developed for students with disabilities. It is now used by all Internet users.

***Advances in  
Technology for  
Special  
Education***

## **SECTION IV**

**Results:** This section contains two modules: one highlights a study that is measuring some of the results that infants and toddlers and their families are achieving, and one measures the completion rates of students served under IDEA.

### ***The Part H Longitudinal Study (PHLS)***

- The PHLS is gathering longitudinal data about how children with disabilities function, how their families change as their children age, and how services support child functioning and family change. A sampling approach has been designed that will yield a nationally representative sample of 3,300 children from 3 to 5 counties in each of 20 States across the United States.
- Specific child characteristics, including the type of disability, level of functioning within the developmental domains (cognitive, communication, motor, and self-help), and child engagement, will be examined.
- To measure family results, PHLS will gather data on families in a direct and functional way. Four critical result domains have been identified: (1) the family's capacity to meet the special needs of their infant or toddler, (2) parent perceptions of their needs and the extent to which they were met by Part H services, (3) parent perceptions of their internal and external support systems, and (4) the quality of life perceived by families.

### ***Secondary School Completion***

- Students with disabilities may complete high school by receiving a standard diploma identical to the one awarded to students without disabilities or by receiving a modified diploma, certificate of completion, or other credential documenting their program completion.
- There are many different ways to calculate graduation rates for students with disabilities. One method is to calculate the percentage of students with disabilities ages 17-21 who graduate with a diploma or certificate based on the total number of students with disabilities ages 17-21. Using this method, from 1993-94 to 1994-95, the percentage of students with disabilities

graduating with a diploma or certificate increased slightly from 27.9 percent to 28.4 percent.

- A second way to calculate the high school completion rate is to divide the number of students with disabilities ages 17 to 21 who graduate with a diploma or certificate of completion by the number of students graduating with a diploma, graduating with a certificate, reaching maximum age, or dropping out of school. This provides the proportion of students leaving high school who completed the program of study. The 1994-95 completion rate was 71.8 percent.
- From 1990 to 1995, three OSEP-funded dropout prevention projects identified effective strategies for helping students with disabilities to stay in school. These include monitoring student behavior, building relationships, promoting affiliation, teaching problem solving, and exhibiting persistence.

---

## ***INTRODUCTION***

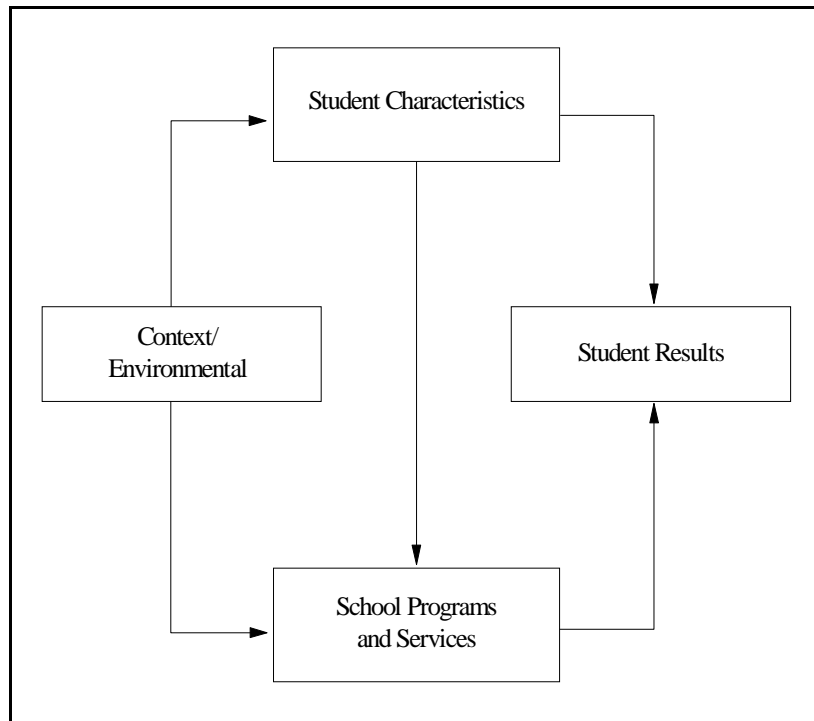
---

As readers of previous *Annual Reports to Congress* will immediately notice, the *Nineteenth Annual Report to Congress* has undergone major changes, compared with previous reports. The Office of Special Education Programs (OSEP) has redesigned this *Annual Report* by eliminating the long chapters of past reports and now presents information in short modules. However, because many readers of the *Annual Report* like the format in which the State and national data have been presented and use the various report appendices extensively, no changes have been made to the appendices.

In addition to this change in format, readers of this *Nineteenth Annual Report to Congress* will find another important difference between this *Annual Report* and past *Annual Reports*. A conceptual model that provides a framework for understanding the various factors that affect educational results for students with disabilities is being used to structure this report. As can be seen from the model depicted in figure 1, educational results for students with disabilities are envisioned as products of three sets of factors: the context and environment in which education is provided, the characteristics of students, and school programs and services. The report is organized around the elements of the model; each of the elements represents a section of the report. Within these sections, succinct modules address current issues in special education that OSEP hopes practitioners, administrators, advocates, and policy makers at all levels will find useful. Figure 2 outlines the specific issues addressed in each section of this report.

The intent of the first section, Context/Environmental Factors, is to describe societal and educational forces that are having a significant impact on the delivery of services to children with disabilities. Five influential contextual/environmental factors are discussed: (1) general education reform, (2) poverty among children, (3) the cost of special education, (4) social problems such as drug abuse and violence in schools, and (5) the disproportionate representation of racial/ethnic minority students in special

**Figure 1**  
**Conceptual Framework of Results for Children and Youth with Disabilities**

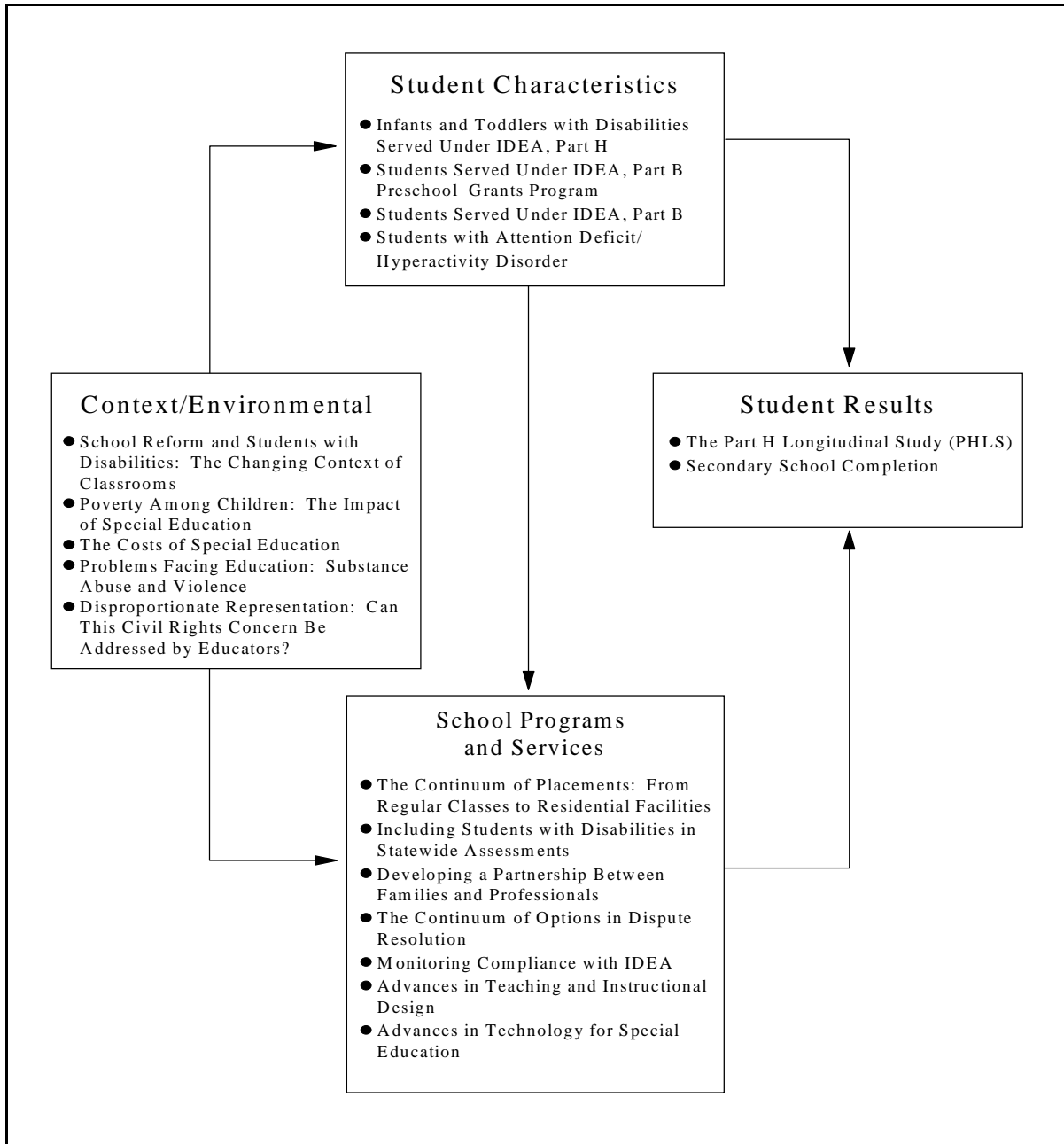


education programs and classrooms. As shown in the model, contextual/environmental factors are directly linked to student characteristics. For example, poverty, violence, and drug abuse are related to the incidence of disability and to participation in special education. Contextual/environmental factors also influence school programs and services. One example of this link is the effect of the general education reform movement on the educational placements of students with disabilities.

Another example of how contextual/environmental factors may influence school programs is the apparent stress that has been placed on schools because of poverty and substance abuse. These factors can influence student characteristics. For example, low-income children are more likely to have chronic health problems. Also, low-income students have higher dropout rates than their middle- and upper-income peers. Often, school personnel have to



**Figure 2**  
**Issues Addressed in This Report**



devote a significant amount of time to these issues. This stress is just one of the factors that have influenced general and special education school reform efforts in many parts of the country.

The second section, Student Characteristics, focuses on the population of students being served under IDEA. School programs and services are not only affected by contextual/environmental factors such as Federal and State laws, but also by the characteristics of students with disabilities being served. The modules in this section focus on infants and toddlers with disabilities receiving early intervention services; children served under IDEA, Part B; preschool programs; and students served under IDEA, Part B. Schools must design their programs and services to meet the needs of their students in a variety of ways. The increase in the number of students with attention deficit/hyperactivity disorder, for example, has resulted in the use of various new classroom interventions to meet the needs of these students.

The third section contains modules related to school programs, services, and inputs. First, trends in the placement data are described. Then issues related to the inclusion of students with disabilities in statewide assessments are addressed. The third module examines the relationship between families of children with disabilities and the professionals who serve both children and families. This module highlights the importance of fostering positive parent-professional relationships; however, as discussed in the fourth module, positive relationships do not always occur. This module focuses on various methods of conflict resolution that are currently being used across the country. OSEP's efforts to monitor State compliance with IDEA are described in the fifth module. A module on promising classroom interventions and one on new technologies for children with disabilities are also included in this section.

Finally, the product of this model is educational results for students with disabilities. These results are affected by all of the input elements in the model. The types of services delivered to infants and toddlers, for example, affect their developmental levels, while changes in graduation

requirements affect the dropout rates of students with disabilities. Two modules, the Part H Longitudinal Study and Secondary School Completion, are included in this section.

During the past 20 years, the Individuals with Disabilities Education Act (IDEA) has had a very positive impact on the lives of students with disabilities. Significant progress has been made, and opportunities are now available to children with disabilities that were unavailable prior to its passage. However, significant challenges remain. Despite progress, educational achievement for students with disabilities remains less than satisfactory. Moreover, the population of students being served is changing, new societal problems are affecting the educational system, and education in America is in a period of dynamic change. Improving educational results for children with disabilities requires new approaches to teaching and learning, combined with a continued focus on full implementation of IDEA.

A variety of sources were used to write this report. Please note that statutory requirements and citations are to the IDEA as it existed prior to the IDEA Amendments of 1997. Some of the modules were written by individuals from the research centers funded by OSEP. Other modules were written by OSEP and OCR staff of the U.S. Department of Education. Finally, some of the modules were written by the staff at Westat. All of the modules were reviewed at multiple levels of the U.S. Department of Education.