**Chapter 1**

**Children with Exceptionalities and Their Families**

**CHAPTER FOCUS**

The chapter explores the definition of exceptionality from an ecological view, discussing the influence of family, culture, community, and philosophical orientation of professionals on the identification and perception of individual differences. Emphasis is placed on the development of support systems to empower families with children with exceptionalities.

**LEARNING OBJECTIVES/FOCUS QUESTIONS**

1-1 Who are children with exceptionalities?

1-2 Why is early identification of children with exceptionalities so important?

1-3 What are some of the major causes of exceptionalities?

1-4 How many children with exceptionalities are there?

1-5 How does the child with exceptionalities affect the immediate family – the parents and the siblings?

1-6 How do cultural differences in families affect children with exceptionalities?

1-7 What challenges do students with exceptionalities face as they transition to life beyond school?

KEY TERMS AND DEFINITIONS

The following terms are used in this chapter. These descriptions are included as a quick reference for answering students’ questions.

Child with exceptionalities: A child who differs from the average or normal child in mental characteristics, sensory abilities, communication abilities, behavior and emotional development, or physical characteristics.

Culture: The attitudes, values, customs, and language that family and friends transmit to children.

Ecological model: A model in which the exceptional child is seen in complex interaction with many layers of environmental forces (e.g., family, neighborhood).

Family-centered model: A model of family dynamics that empowers families to take the lead in determining what is best for their child. This is done through support that focuses on the strengths of the child and family.

Family empowerment: The family is helped to play a major decision role in the planning and execution of the program for their child with disabilities through the IEP process and subsequent planning and treatment.

Family-focused approach: Helping parents become more autonomous and less dependent on professionals.

**Gene-environment interaction:** The interaction between genes and environment that produces behavioral traits, personality, and abilities.

**High-incidence disabilities:** Categories of disability that are most prevalent and compose 1% of the overall school population. Includes learning disabilities, speech/language impairment, intellectual and developmental disabilities, behavioral and emotional disabilities, other health impairments, and autism.

**Individualized education program (IEP):** Legal document outlining an intervention plan for a child with exceptionalities based on the student’s individual strengths and weaknesses.

**Information processing model (IPM):**  A model that explains how students interact with and respond to the world around them and describes the complex learning process.

Interindividual differences: Substantial differences among people along key dimensions of development.

Intraindividual differences: Differences within a person in areas of intellectual, psychological, physical, or social abilities/behavior.

**Low-incidence disabilities:**  Categories of disability that are least common including deaf-blindness, visual impairments, traumatic brain injury, orthopedic, hearing problems, and multiple disabilities.

Medical model: A model that implies that the physical condition or disease exists within the person.

Response to intervention (RtI): A method of academic intervention used in the United States designed to provide early, effective assistance to children before referral to special education and identification as learning disabled. Components of RTI include use of research-based curricula and intervention strategies organized from least intense to most intense, frequent progress monitoring to assess students’ learning, and use of a standard treatment protocol or collaborative problem-solving process for making decisions regarding instruction.

**DISCUSSION QUESTIONS**

1. How has our understanding of exceptionality changed over time? How has the relationship between schools and students with exceptionalities changed over time?
2. Why is RtI an important educational framework both for children with exceptionalities and for those who have not been identified as exceptional?
3. Based on what you learned in chapter 1 about the prevalence of students with exceptionalities, why is it important for general educators to have knowledge of special education programs and processes?
4. What is the issue of disproportionate representation in special education? What should educators be mindful of in regards to this issue?
5. How do educators and the school play a role in the ecological approach to understanding children with exceptionalities?
6. Why are the ecological approach and the family-centered approach integral to early intervention programs? Why is early intervention essential?
7. Why is it important to consider the entire family system of a student with exceptionalities when developing interventions or educational programs?
8. How can educators support parents, siblings, and other family members? What are ways that families can be empowered to support their child with exceptionalities?
9. Why is it important to examine your own cultural biases and assumptions as an education professional? What are some ways a student’s family/cultural background might impact her educational program?
10. Why are schools involved in the process of transitioning students to life after school?

**CLASS/ONLINE ACTIVITIES**

## Class Activity 1.1

Have the class develop a bulletin board in the classroom devoted to newspaper, magazine and Internet articles and advertisements related to issues concerning individuals with exceptionalities. Have the students update the board continuously throughout the course.

*Online: Students could contribute articles, etc. related to issues concerning individuals with exceptionalities to a class blog, wikispace, or message board.*

## Class Activity 1.2

Discuss the distinction between the concepts of “exceptionality,” “disability” and “handicap.” An Exceptionality is when the educational program needs modification for the student to reach his/her full potential and includes gifted. Disability is restriction in the range of a person’s abilities in a given venue compared with a “normal” population. A handicap occurs only in interaction with a barrier in a particular environment. A disability, therefore, does not necessarily result in a handicap. For example, a person in a wheelchair is not handicapped until his or her access is restricted (unable to get up the stairs). The implications of this distinction for educators are profound. One would hope that school would be an environment in which both physical and intellectual barriers are minimized so that all persons can perform at their potential. Break the class into small groups and discuss this distinction. Have each student record examples of these concepts in their environment (classroom, campus, dorm room, restaurants, shopping mall, etc.) over the next couple of day and then report their findings to the class.

*Online: This could serve as a starting question and follow-up activity for an online message board with each student required to post her understanding of the distinction between terms and share examples from her environment.*

## Class Activity 1.3

Have the students find a book, story, poem, or film (video) written for children (ages 4–16) that deals with individuals with exceptionalities. Each student should fill out an index card with the title, author, date of publication (production), publisher (production company), and age of the target audience. Have the students bring their choice to class to share with their classmates. Divide the class into small groups for a “show and tell.” Collect the index cards and create a bibliography of materials, sorting the titles by target age, for distribution to the class.

*Online: Each student creates a blog entry or other online posting with the information for her resource, instantly creating an annotated bibliography of materials.*

## Class Activity 1.4

The shift from a student-centered planning and service delivery model to a family-centered approach has left many teachers and administrators questioning the appropriateness of this model for public schools. Often teachers remark that if they had wanted to deal with the complexity of family needs and issues they would have gone into social work. Teachers are trained in child development, learning and motivation theory, and instructional procedures. Few have the knowledge base or intervention skills required to facilitate family development and support, and there is seldom time in the school day for teachers to meet with professionals who do have this expertise. Have the class reflect on the positive and negative implications for schools and teachers of this shift in focus and what it means for them personally as future or current education professionals.

*Online: This could be used as a prompt for an online discussion forum.*

## Class Activity 1.5

For many of us, our first encounter with an exceptional individual is through the media (TV, film, or books). Historically, individuals with disabilities have been portrayed in a very stereotypic manner (as have other minorities). They have been given either sinister, dark, foreboding qualities or angelic innocence. More recently the characterizations have been more realistic.

The purpose of this activity is for you to explore the “public” depiction of individuals with disabilities or gifts and to reflect on how the media image might affect the public’s perception of these individuals and therefore their acceptance in everyday society.

Have each student keep a log for several weeks of all the television shows (commercials as well) or movies that they watched or novels that they read and report on whether or not individuals with disabilities were included and how they were portrayed in each. Also have the student watch a film produced for popular release that includes a character that has a disability or gift. For each film, provide bibliographic information: title of the film, date of release, and production company. In your review summarize the plot of the story. Identify the character(s) with the disability or gift, and indicate if the character is major or minor to the plot. Evaluate the accuracy or appropriateness of the characterization of the disability. Did the actor or writer portray a “real” person with whom the audience could relate, or a stereotype (either positive or negative)? What impression do you feel this character makes on the viewer, and what impact might this have on the viewer’s awareness or acceptance of exceptional individuals?

*Online: Responses may be shared via an online message board or course blog.*

**Class Activity 1.6\* Portfolio Assessment**

Read the Council for Exceptional Children’s “Special Education Professional Ethical Principles” (<http://www.cec.sped.org/Standards/Ethical-Principles-and-Practice-Standards?sc_lang=en>) and “Initial Preparation Standards” (<http://www.cec.sped.org/~/media/Files/Standards/Professional%20Preparation%20Standards/Initial%20Preparation%20Standards%20with%20Elaborations.pdf>). Print a copy of each document for your portfolio.

After reading each document, write a brief essay (~2 pages) describing connections between the information discussed in this chapter and these two sets of standards. How does the knowledge gained through this chapter and related discussions help prepare you to meet these standards as a professional?

*Online: As an alternative to individual essays, this prompt could be used as an online discussion board starter. Students would then be evaluated on their individual contributions to the discussion.*

**FIELD EXPERIENCES**

**Field Experience 1.1**

1. Visit a special education classroom within a school or a center for children with exceptionalities. Observe a child who has a disability and try to get a feeling for the details of what he or she does during the course of a regular day.

2. Include the following in your notes:

* Stressful conditions
* Attitude of the individual toward the disability
* Support from staff and classmates
* The extent of the individual’s independence
* Opportunities available to the person for cognitive, psychological, and social growth

3. In a summary, express your feelings as you compare a day in your school life with what you have just encountered. What did you learn? What impact has this experience had on you?

**Field Experience 1.2**

Interview a general classroom teacher who has students with exceptionalities in her classroom. What is her involvement in the IEP process? How does she interact with families? How does she use the principles of RtI in her classroom (specifically what sorts of Tier I modifications does she make)?

*Note: If possible, students in the class should visit different grade level classrooms so that they can share findings and begin to see how these answers will vary as students move from elementary to secondary school.*

**Field Experience 1.3**

1. Many states publish prevalence data on exceptional populations. You may be able to find this information on your state department of public instruction/education’s website, or you may need to contact the department directly. You may need to contact a separate office to get information on students identified as gifted. Your local education agency may also be willing to provide you with prevalence data. How do these figures compare to the statistics in chapter 1? If you find discrepancies, what might explain the differences?
2. Research agencies in your community and state that provide support for children with exceptionalities and their families. List the name and website of these organizations as well as a brief description of what services each organization offers.

*Note: This activity works well in small groups or partners.*

**VIDEO ACTIVITIES**

**Video Activity 1.1**

Watch the following videos about RtI:

* <https://www.youtube.com/watch?v=nkK1bT8ls0M>
* <https://www.youtube.com/watch?v=hOkwkLLayyQ>
* <https://www.youtube.com/watch?v=g6vuc0jC_-w>
* <https://www.youtube.com/watch?v=8gJVo27M-xM>

After viewing the videos, consider the following:

* How does RtI affect the educational experience of all children? Why is it an important strategy for students with exceptionalities?
* What challenges might educators face in implementing RtI? How might challenges be different at the elementary level vs. the secondary level?

**Video Activity 1.2**

Watch the following videos featuring parents of children with exceptionalities:

* <https://www.youtube.com/watch?v=90hycGfqdos>
* <https://www.youtube.com/watch?v=UZ9kAJPGTxg>
* <https://www.youtube.com/watch?v=JOn85pEn_kw>

After viewing the videos, consider the following:

* What concerns, challenges, or frustrations are shared by these parents?
* What strengths do the parents discuss (either their child’s strengths or family strengths)?
* What supports have these families found helpful?

**POWERPOINT OUTLINE (FROM THE NOTES ON EACH SLIDE)**

**Slide 1: Chapter 1: Children with Exceptionalities and Their Families**

**Slide 2: Children with Exceptionalities**

*1.1 Who are children with exceptionalities?*

Children are considered educationally exceptional only when it is necessary to alter the educational program. Adapting to the educational environment frames the discussion of what makes the child with exceptionalities different from the “average” child. Differences may be (1) mental characteristics, (2) sensory abilities, (3) communication abilities, (4) behavior and emotional development, and/or (5) physical characteristics. Although the focus is on altering the environment, we still tend to classify the child into one or a combination of the following subgroups: (1) intellectual differences, including children who are intellectually superior and children who are slow to learn; (2) communication differences, including children with learning disabilities, autism, or speech and language disabilities; (3) sensory differences, including children with auditory or visual disabilities; (4) behavioral differences, including children who are emotionally disturbed or socially maladjusted; (5) multiple and severe disabilities, including children with combinations of impairments (cerebral palsy and IDD; deafness and blindness); and (6) physical differences, including children with nonsensory disabilities that impede mobility and physical vitality. The legal categories are outlined by the Individuals with Disabilities Education Act (IDEA, 2004), see Table 1.1 in the text.

**Slide 3: Difference in Development**

*1.1b Who are children with exceptionalities?*

Intraindividual differences reflect differences within a child’s own abilities, as opposed to interindividual differences, which reflect how children differ from other children. For example, a child who is 9 may have the intelligence of an 11-year-old but the social behavior of a 6-year-old; both his interindividual and intraindividual differences should be of concern to educators. It is just as important for teachers to know a child’s individual strengths and weaknesses as it is to know how she compares with other children. Intraindividual and interindividual differences can show up in any area: intellectual, psychological, physical, or social.

**Slide 4: Brief Historical Overview**

*1.1c Who are children with exceptionalities?*

Early History: (1500 bc–1700 ad): Early beliefs centered on superstitions, witchcraft and generally not a supportive environment for someone with disabilities.

Nineteenth Century: (1790–1870): Jean-Marc Itard and Edouard Sequin were the first individuals to work with children with intellectual and developmental disabilities. Toward the end of this era, many institutions were in existence in the United States. Dr. Thomas Gallaudet started programs for students with hearing impairment and deafness.

Early Twentieth Century: (1900–1950): Isolated classes for students with disabilities were started in the United States. In 1922, the Council for Exceptional Children was founded in order to organize teachers who were working to help children with exceptionalities.

1950s and 1960s: In 1950, the post–World War II era saw the beginnings of special programs for children with exceptionalities. This era included the civil rights movement for our country.

1970s: During this era, many lawsuits, class action suits, and laws were established to provide services for students with disabilities. The courts were enacting legislation that mandated that schools provide students with disabilities a free and appropriate education. P.L.94-142 was passed.

1990s: Era of Rededication, Redefinition, and Refinement. This era has seen a movement toward the use of a multidisciplinary team of specialist to work with children with exceptionalities. A strong state and federal legislative base has been established supporting a “free and appropriate public education” (FAPE).

**Slide 5: Response to Intervention (RtI)**

*1.1c Who are children with exceptionalities?*

Response to Intervention (RtI) is an approach used by teams of school professionals to meet the needs of students with exceptionalities; it allows for collaboration between general education and special education. This permits early and pre-referral intensive interventions based on the student’s needs without waiting for the student to “fail.” Universal Tier I includes changes in the general classroom that incorporate children with exceptionalities. Targeted Tier II provides targeted interventions – such as special reading groups – to small groups of students. Intensive Tier III represents individual programming for children with special needs including alternative environments for learning. Each chapter of this text will highlight different aspects of the RtI model.

**Slide 6: The Information Processing Model**

*1.1 Who are children with exceptionalities?*

The information processing model explains how students interact with and respond to the world around them. Students receive information through sensory input. This information is then processed through memory classification and reasoning abilities. They finally respond to this information through an output mechanism (i.e., speaking, writing, or acting). Students are aided in this processing of information by their executive function, a decision-making ability to choose how to interpret the information and which option to use in response. Information processing takes place within an overall emotional context that influence every aspect of the system. Through this course, this model will demonstrate how and way learning is impact by each exceptionality.

**Slide 7: The Importance of Early Identification**

*1.2 Why is early identification of children with exceptionalities so important?*

Professionals who work with exceptional children agree that early intervention is key in producing better outcomes for children with exceptionalities; the earlier the intervention in a child’s developmental sequence, the more positive gains will be seen. Early childhood programs including day care, Head Start, and Title I programs are increasingly able to offer early intervention programs to young children with exceptionalities. Children with exceptionalities are being identified at younger ages as well as screening techniques improve. Interventions should begin as soon as an exceptionality is identified – as early as birth.

**Slide 8: The Interaction of Heredity and Environment**

*1.3a What are some of the major causes of exceptionalities?*

Three major stages have occurred in our belief system regarding the relative influence of heredity and environment on human development. Initially, it was believed that heredity determined intelligence or that intelligence was a function of heredity. Starting around 1960, the important role played by the environment was recognized. The belief that intelligence is a function of environment is the second stage. Currently, the emphasis is on the progressive interaction of heredity and the environment. Gottlieb (1997) proposed that by changing the environmental conditions of early childhood, we could activate different patterns of genes, which then can result in behavioral changes. One of the most dramatic recent scientific breakthroughs has been made by the Human Genome Project (Refer to Figure 1.2 Human Genome in text) which mapped the human genome in 2003. Now the focus is on identifying the role of specific genes and better understanding gene-environment interaction. Since as educators we are unable to control genes, our focus is on optimizing the environment for children with exceptionalities.

**Slide 9: Prevalence: How Many Children with Exceptionalities are There?**

*1-4 How many children with exceptionalities are there?*

A reasonable estimate is that more than 6 million children in the United States can be classified among the categories of exceptional children. This estimate is obtained by aggregating the reports of the 50 states, which is required by law. This means that approximately one out of about every 10 children can be labeled *exceptional*. It is important to recognize that exceptionality exists on a spectrum. In some ways, the classifications used to identify exceptionality are arbitrary; children on either side of a cutoff point are very similar. Therefore, even children not officially identified as exceptional may have special needs; this is one reason RtI is such an important approach. Students with special gifts and talents are not included in these numbers as they are not covered under IDEA 2004. Children with ADHD may also not be included if they are not also classified as having an exceptionality recognized by IDEA 2004.

**Slide 10: Percentage of High Incidence Disabilities among Students 6-21**

*1-4 How many children with exceptionalities are there?*

These numbers reflect students served under IDEA; therefore these numbers reflect only the number of students receiving services and not the total potential number of children with exceptionalities. About 1 percent of students 6-21 exhibit high-incidence disabilities (learning disabilities, speech impairments, IDD, behavior and emotional disorders, other health impairments, and autism). About 3.4% of all students are classified as having a learning disability. 1.6% are identified as having speech or language impairments. .06% are classified as having an intellectual or developmental disorder (IDD); another .06% as having a behavior or emotional disorder (EBD). About 1% of children are identified as “other health impaired” (a category that frequently includes children with ADHD). The category of autism has grown the most in recent years; nearly 1% of children age 6-21 are now classified as having autism.

**Slide 11: Percentage of Low Incidence Disabilities among Students 6-12**

*1-4 How many children with exceptionalities are there?*

Less than 1 percent of students age 6-21 are classified in the low incidence disability categories. Although many of these conditions are serious, they are also extremely rare. Note that visual impairment does not include all students who wear corrective lenses but only those whose vision problems can interfere with learning.

**Slide 12: Disproportionate Representation of Culturally/Linguistically Diverse Students in Special Education**

*1-4a How many children with exceptionalities are there?*

Figure 1.4 in the text (shown above) shows the risk percentage or the likelihood of finding a child of a particular race or ethnic background in special education programs. For example, black students are twice as likely as white students to be identified as having an intellectual or developmental disability. One explanation is racial bias in identifying students as having exceptionalities. Another contributing factor can be found by examining measures of academic progress such as the NAEP 4th grade reading proficiency results (see figure 1.5 in the text). While 20% of white students fall below basic on the 4th grade reading proficiency NAEP exam, about 50% of black and Hispanic students fall below basic. This indicates disparities in the educational experiences of minority groups and may explain why minority students are more likely to be referred for special education programs (simply because they are more likely to have low scores on measures of academic performance).

**Slide 13: The Ecological Model/Approach**

*1-5a How does the child with exceptionalities affect the immediate family – the parents and siblings?*

The Ecological Model/Approach replaces the Medical Model as a way to understand exceptionality. The Medical Model saw exceptionality as a quality of the child; the Ecological Approach sees a child with exceptionality as being in complex interactions with many environmental forces. As a result, effective intervention seeks to not only impact a child’s learning or behavior but also to modify the environment around the child. Figure 1.6 in the text illustrates one way to visualize the Ecological Approach as a series of concentric circles – child, family, school, peers, culture and community, and so on.

**Slide 14: The Role of Families**

*1-5b How does the child with exceptionalities affect the immediate family – the parents and siblings?*

Although today it is almost a given that families will be involved in any intervention for a child with exceptionalities, this was not always the case. What counts as “family” has also evolved in recent decades. Families are social systems; anything (such as an exceptionality) that impacts one family member will also impact other family members. Therefore it is important to consider the entire family unit when assessing a child with exceptionalities and developing an intervention plan. It is also important for educators and others working with children with exceptionalities to remember that families are embedded in larger sociocultural systems. Values and practices with those systems must be understood in order to effectively work with families. Family interactions are of particular importance in early intervention as much of the work with young children involves strengthening the family environment. All intervention should be family focused, drawing on family strengthens and empowering families to be proactive in their child’s progress. Box 1.2 in the text uses Roger’s story to provide a glimpse into the way a child’s exceptionality impacts the entire family system.

**Slide 15: Considerations Around the Role of Families**

*1-5c-g How does the child with exceptionalities affect the immediate family – the parents and siblings?*

There are a number of areas to consider when assessing the impact of a child’s exceptionality on a family unit:

**Family Responses:**  Many families struggle to accept a child’s initial diagnosis. The care of an exceptional child can be physically, emotionally, and financially draining. Families may also have concerns for their child’s future.

**Family-Professional Relationships:** The family-centered model seeks to put families firmly in partnership with professionals providing care to the child with exceptionalities. There is also an emphasis on family strengths vs. deficits. Instead of “treating the child,” the family-centered model asks professionals to develop interventions that take the entire family system into account.

**Emotional Development and the Family:**  The emotional repertoire of a child is, in part, socially constructed; therefore it can be socially modified. The family plays a key role in this process.

**Siblings of Exceptional Children:** It is important to consider how a sibling’s role in the family is altered by having a sibling with exceptionalities. Siblings may have questions that need to be answered about his/her sibling’s exceptionality and its impact on the family. Siblings may also have anxiety around their role in the family that should be acknowledged. Support systems such as Sibshops address the concerns and needs of siblings of exceptional children.

**Assessment of Families:** The Family Quality of Life Scale is one metric used to measure family status and response in light of a family member with exceptionalities. Elements of assessment include family interaction, parenting, emotional well-being, physical well-being, and disability-related support.

**Slide 16: Culturally and Linguistically Diverse Families**

*1-6a,b,&e How do cultural differences in families affect children with exceptionalities?*

Families may have a wide range of cultural values and beliefs that may differ from those of the professionals working with them. Families may be diverse in a variety of ways including race, ethnicity, social-class, language usage, family structure, and so on. It is important to recognize how these differences might impact both a family’s response to the exceptional child as well as their interactions with educators and service providers. The traditional family model of father, mother, child has been replaced with families of all shapes and sizes: single parent homes, grandparent headed homes, same-sex couples, and so on. Culture can be thought of as the attitudes, values, customs, and languages that family and friends transmit to children. All children, regardless of exceptionality, exist in a cultural space and are influenced by the culture they are exposed to. If there are tensions between a student’s home culture and the expectations of the school or the culture of providers, the stress of the child and family will increase. To alleviate this, it is important for providers and educators to be culturally aware and honor and value family differences.

**Slide 17: Considerations for Diverse Families**

*1-a,c-d How do cultural differences in families affect children with exceptionalities?*

Because poverty and race often overlap for students with exceptionalities, it is important to consider the ways economic diversity can impact a student’s development. RtI offers a way to serve students who may not qualify for services under a category of exceptionality but who do need extra support. The Office of Special Education Programs (OSEP) offers support centers and up-to-date information for families with children with exceptionalities. Parent advocacy and support groups have developed for many types of exceptionality, these groups have been able to lobby for state and federal legislation as well as more resources and supports for their children. These groups also provide essential support for families as they learn how to best support their children with exceptionalities. There is little existing research on the effectiveness and impact of family support services; more work in this area is needed.

**Slide 18: The Transition to the Community**

*1-7 What challenges do students with exceptionalities face as they transition to life beyond school?*

While families provide the central influence in the early part of a child with exceptionalities life, peers play a larger role as the child enters adolescence. Potential rejection and bullying are particular concerns. As the child with exceptionalities grows older, he or she will play a larger role in his/her relationship with service providers and educators. Legislation currently requires that students receive transition planning at the age of 16 to help them move to the next stage of their lives. While there are community resources available to support adults with exceptionalities, they are not always easy to find or well known. Transition plans can help connect students and their families with these resources making the transition to adulthood and community life more successful.