

UNCONDITIONAL MAINSTREAMING:

A GOAL FOR EDUCATION

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Abstract

Unconditional Mainstreaming

A Goal for Education

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The purpose of this study was to review the principles and practices necessary to provide unconditional mainstreaming in regular education classrooms. Unconditional mainstreaming was distinguished from other forms of mainstreaming by four features (a) the degree of administrative and staff commitment and support, (b) the use of a problem solving approach, (c) administrators, teachers, and parents engaged in frequent discussion on how to improve program delivery, and (d) documentation of students' progress. Four model mainstreaming programs were identified and reviewed: Side-by-side, Albuquerque, New Mexico; Project Merge, Olympia, Washington; Homecoming Model, state of Vermont; and a Zero Exclusion Model, Madison, Wisconsin. These four programs, which provide opportunities for unconditional mainstreaming, required system change and were based on the principle of normalization.

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Chapter 1

Introduction

The school's traditional use of segregated differential treatment of children with handicaps follows a long history of segregated and often cruel treatment of people who were considered different (Blatt, Biklen, & Bogdan, 1977; Gearheart & Litton, 1975; Sarkees & Scott, 1986). The history of man's attitudes and treatment of people with handicaps can be divided into five eras (a) era of superstition, (b) era of institutions, (c) era of public school classes, (d) era of legislation and national support, and finally (e) the era of normalization, child advocacy, and litigation (Gearheart & Litton, 1975).

Extermination was the rule during the era of superstition. Beings who were different, retarded, blind, or epileptic were considered incapable of human feelings and therefore not deserving of human compassion. The Laws of Lycurgus from the time before Christ, told of non-humans and called for the deliberate abandonment of idiots and fools (Gearheart & Litton, 1975).

During the Middle Ages, the treatment of individuals with handicaps changed from extermination to ridicule (Kolstoe & Frey cited in Gearheart & Litton, 1975). Kings and Lords kept people with handicaps for objects of play and display - the court fool. Concurrently in some places there existed a trend towards care of the handicapped (Whitney cited in Gearheart & Litton, 1975). During the 13th century, many of the Catholic churches of Europe

began to provide asylum (Knott cited in Gearheart & Litton, 1975). The asylum was not designed for treatment or education but was instead intended to provide sanctuary and separation from society to the special children of God. On the other hand, the churches of the Protestant Reformation believed these same people were filled with the devil or Satan. The members of the Protestant Churches tortured, tormented, and punished people with handicaps in an attempt to exorcise the demons (Gearheart & Litton, 1975).

The late 18th and early 19th century marked the end of the era of superstition. Several events that led to society's changing perspective included the treatment of the mentally ill and insane as curable patients by Pinel; a scientific method of instruction for deaf mutes invented by Pereire; education of the visually handicapped and blind by Braille; and the first scientific individualized educational approach to treating mental retardation by Itard with the wild boy of Aveyron (Gearheart & Litton, 1975).

In the late 1830's, Johann Jacob Guggenbuhl built Abendberg, the first medical and educational facility to house and educate cretins (person suffering from a thyroid deficiency which results in deformity and idiocy as defined by Webster's New World Dictionary, 1972). Abendberg was advertised as therapeutic in that it provided beautiful, serene surroundings; pure mountain air; physical care of the body; various medical treatments; and a good diet. During the 1840's and 1850's, it's fame spread

rapidly; Abendberg became internationally known and copied.

By 1858, people realized no cretin was ever cured, and Abendberg closed amid complaints and charges. The charges filed against Guggenbuhl and his institution included no demonstrable cures, lack of medical supervision, a shortage of instructors, inadequate supply of heat and water, shortage of clothing for the students, progress reports not maintained, and finally that normal children were brought in and represented as cured cretins to visitors. Despite the shortcomings and closing of Abendberg, during the middle and late 19th century, society wholeheartedly adopted institutionalization for the care of people labeled mentally retarded.

Special classes for the mentally retarded were first established in Germany in the late 1800's. The purpose of these special classes was to help students catch up and return to regular classes (Baumeister & Butterfield cited in Gearheart & Litton, 1975).

Treatment of people with mental defects in the United States closely followed European developments. A law dated 1650, in colonial Maryland authorized guardianship for people with feeble-minds (Baumeister & Butterfield cited in Gearheart & Litton, 1975). A 1793 "pauper idiot law" in Kentucky, provided funds for families with individuals with feeble minds (Best cited in Gearheart & Litton, 1975). Other than these two early laws, there are no records of attempts to care for or educate individuals

labeled mentally retarded in the United States prior to the 19th century.

Institutional care for people considered mentally retarded, first occurred in already existing facilities for the blind and the deaf in the United States. In 1848, The first institution exclusively for care and education of individuals labeled mentally retarded was founded in Massachusetts. It's primary goal was remediation using Sequin's physiological methods of treatment. By the turn of the 20th century, all but four states had some public provisions for people who were labeled mentally retarded. The facilities were known by a variety of titles - schools, training schools, asylums, homes or institutions.

Roots of Exclusion. Galloway (1980) traced the development of social policy towards people with handicaps in the United States in a work entitled "Roots of Exclusion". Four broad eras in social policy, coinciding with Gearheart's and Litton's era of institutions and era of public school classes were identified by Galloway, (a) residential schooling, (b) shelter from society at large, (c) protection of society from a menace, and (d) an era he entitled "drift on course". Beginning in about 1850, residential schooling for people with mental handicaps was begun, but by 1870, this had changed to merely sheltering people with disabilities from society. From the 1880's until the mid 1920's, social policy was interpreted as protecting society from the dangerous disabled population. Society spent the time from 1925 to 1950, just

drifting along, continuing to hide the majority of people with disabilities away in large, growing institutions.

During this last era, the schools developed a number of segregated special educational opportunities for the children of parents who refused to use institutionalization. Many states enacted statutes designed to promote the establishment of special classes and special schools for children who were mentally retarded (Gearheart & Litton, 1975). Some states even provided financial support and incentives for special classes or schools.

During the 1950's and 1960's, the growing support for education of children with handicaps was attributed to four factors (a) society's disgust with the Nazi's practice of extermination of people who were labeled mentally retarded, (b) a growing interest in mental retardation by biological and social scientists, (c) public awareness that very little was being done to educate children with handicaps, and (d) a well organized parent movement.

Slowly during the 1950's and 1960's, the federal government passed a number of laws designed to improve education for children with handicaps. Brown v. Board of Education of Topeka (1954) allowed one of the first steps to be taken toward opening society's and the schools' doors to all people. Among the laws passed were several that provided money for research related to the education of mentally retarded (P. L. 83-531, 1954; P. L. 88-164, 1963), and money to colleges to train teachers in the field

of special education (P. L. 85-926, 1958). In 1965 and 1966, the Elementary and Secondary Education Acts were created to provide funds to motivate, expand and improve special education programs.

The 1970's brought the era of normalization, child advocacy, and litigation. Pennsylvania Association for Retarded Children (PARC) v. Commonwealth of Pennsylvania (1972) was a class action suit for the right to education for children who were labeled mentally retarded. A federal district court judge ruled that all persons who are labeled mentally retarded, are capable of benefiting from education. In 1975, the Education for All Handicapped Children Act (P. L. 94-142) was enacted.

In part, P. L. 94-142 states "that to the maximum extent appropriate, handicapped children...are educated with children who are not handicapped, and that special classes, separate schooling or other removal of handicapped children from the regular educational environment occur only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily" (section 300.550). However, in many states, including Wisconsin, separate classes or separate schools for some categories of children continue to be the rule rather than the exception.

Segregated Education. Several researchers have written that schools continue to separate and even segregate students with handicaps (Weiner, 1985). Gerry (Gerry, Martin, & Stern cited in

Weiner, 1985) an advocacy attorney and former director of the Office of Civil Rights wrote "there is still massive separation in secondary schools and even segregation" (p. 68). Martin, advocacy attorney, and Stern, executive director of Advocates for Children in New York City, share similar concerns. Both researchers stated mainstreaming issues are now the bulk of the legal battle.

Wang (cited in Weiner, 1985) wrote that P. L. 94-142 has not done very well in defining how to provide special education services in the context of the regular classroom. Boundy (cited in Weiner, 1985) stated the least restrictive environment has not evolved to the extent it should and is not being enforced, especially for older children. The U.S. Department of Education (1985) reported that for the 1982-83 school year, in Wisconsin, 45.8% of all children with handicaps continued to be educated in separate classes or separate schools.

A number of research studies (Spodek, Saracho, & Lee, 1984; Weiner, 1985) have found that segregated special education classes, whether they are for students who are labeled mentally retarded, learning disabled, or emotionally disturbed, do not help children grow academically or socially any more than regular education classes would. Most researchers (Blatt et al., 1977; Shore, 1986; Spodek et al., 1984) agree mainstreaming is beneficial to both students with handicaps and the students without handicaps. Nonhandicapped children benefit from contact with children with handicaps by becoming more sensitive to

individual differences, developing an understanding of children with handicaps as people and grow academically at least as much as would be expected had there been no integration (Shore, 1986; Bricker & Bricker cited in Spodek et al., 1984). Social behavior of children who are labeled mentally retarded, tends to resemble that of normal classmates the longer they are in normal classes (Spodek et al., 1984). Shore reported that mainstreaming can enhance self esteem, confidence, and social skills of students who have special needs.

Special education is an approach not a place. The critical question facing educators, administrators, and parents, is not whether integration can work, but how to make it work.

Special education requires that one teach according to a child's unique, individual needs. The regular classroom can be used to provide appropriate instruction to a wide range of skill levels (Shore, 1986). Teachers who work with students with handicaps and students without handicaps know that no single teaching method is effective for all children; many techniques designed to help children with handicaps have in fact helped whole classes become more attentive and better organized.

Since 1975, integration and mainstreaming have occurred in many schools, taking many different forms. Biklen (1985) described these forms as ranging from informal "teacher deals" to unconditional thoughtfully planned mainstreaming. Unconditional mainstreaming relies on the principle of normalization for its

success.

Definition of Normalization. The principal of normalization is not something done to a person, rather it is a set of idealistic standards to be applied when designing and delivering services to meet a person's needs. Services designed on the principle of normalization are likely to result in increasing competence and social participation for an individual with a handicap and in increasing social acceptance for people with handicaps as a group (O'Brien, 1980).

The most cited definition of normalization was developed and refined by Wolfensberger (1980), "utilization of means which are as culturally normative as possible, in order to establish, enable, or support behaviors, appearances and interpretations which are as culturally normative as possible" (p. 80). When implementing the principle of normalization, Wolfensberger suggested that a program should strive to avoid dehumanization, age inappropriateness, and isolation of people in segregated programs. Successful education of children with handicaps must incorporate the principle of normalization.

A number of model programs that have successfully integrated or mainstreamed students with handicaps have been identified by researchers throughout the United States. Taylor (1982) wrote of students with severe disabilities from Vermont to Hawaii, from Wisconsin to New Mexico, from Illinois to Alabama attending regular schools, interacting with their nonhandicapped peers, and

participating in normal community environments. The purpose of this study was to review the principles and practices necessary for providing unconditional mainstreaming and to describe model programs which have accomplished such mainstreaming.

Chapter 2

Review of the Literature

A number of research studies have found that special class placement is not any more effective than teaching children in regular classrooms. Wang (cited in Weiner, 1985) reviewed 50 studies comparing academic performance of mainstreamed and segregated children with handicaps and concluded that children with handicaps perform as well or better in regular classrooms than in segregated classrooms. Wang reported that the mean academic performance of the integrated group was in the 80th percentile, while segregated students scored in the 50th percentile. In another study by Wang and Reynolds (1985), students who had formerly been placed in self contained, special education classes on a full time basis, spent a year in a fully integrated regular education class. After a year of instruction both regular education and mainstreamed/integrated special education students made significant academic gains in both reading and math. Average gains for both groups were found to be at or above the expected one year gain. This contrasted with an average gain of six months for special education students of similar abilities who had remained in self contained classrooms. Smith and Kennedy (cited in Affleck, Madge, Adams, & Lowenbraun, 1988) randomly assigned students labeled educable mentally retarded to either part time resource room help or full time regular class placement. They found no significant academic achievement

differences between the two groups.

Spodek, Saracho, and Lee (1984) studied the pull-out strategy but did not find any research on the impact of such programs on children with handicaps. Subsequently, Spodek et al. reviewed research on remedial programs such as those supported by Title 1 of the Elementary and Secondary Education Act, which provides pull-out programs for low achieving normal children. Results from this review concluded that there were no clear academic or social benefits in such programs and furthermore such programs may be detrimental to pupils' progress and adjustment to school (Glass & Smith cited in Spodek et al., 1984). Fenwick (cited in Berres & Knoblock, 1987) wrote that pull-out programs can be a barrier to integration in that students must work without modeling or encouragement from their typical peers. Regular education peers have no way of understanding how pull-out services relate to or help students with handicaps. In addition, pull-out services can leave less time available to be in class learning with, next to and from normal children. Finally there may be a possible lag in carryover or generalization of skills to the classroom.

Several studies from Spodek's review of research on students labeled mentally retarded showed segregated placement provided no advantage in relation to academic achievement (Cegelka & Tyler; Semmel, Gottlieb, & Robinson cited in Spodek et al., 1984). Blatt (1977) stated that it has yet to be demonstrated that special class placement of students with mild handicaps meets their needs

in ways that regular class placement cannot. Blatt found that studies of children labeled trainable mentally retarded have not been successful in demonstrating the superiority of special class placements (Cain & Levine; Dunn & Hottel cited in Blatt, Biklen, & Bogdan, 1977).

Forms of Mainstreaming. Numerous school districts, small as well as large, have demonstrated that they can effectively and positively serve all students, however handicapped through various informal and formal mainstreaming arrangements (Biklen cited in Berres & Knoblock, 1987). Biklen (1985) described many forms of mainstreaming as teacher deals. These teacher deals are informal arrangements worked out between two teachers. Both teachers work informally and on their own time, seldom having official administrative support. Students to be mainstreamed are chosen by their ability to academically fit into an existing program and by their ability to behave.

A form of mainstreaming which Biklen called islands in the mainstream may be the result of a teacher deal. Islands in the mainstream are of two types (a) a child who is physically present in a class, but has little interaction with the normal students, or (b) a self contained class situated in a regular school where little interaction occurs between students with handicaps and students without handicaps. A dual system form of mainstreaming, described by Biklen, is an intermediate school which serves a multidistrict area. The intermediate district rents space, hires

it's own teachers, and runs on it's own school calendar. Students are bused to the intermediate classroom from all the member districts. The teachers are not sure to whom they owe allegiance, the building principal or the intermediate director.

Unconditional mainstreaming is a mainstreaming arrangement with district and building principal support (Biklen, 1985). Mainstreaming is thoughtfully planned and carried out. Unconditional mainstreaming often requires a systems change; it relies on the principle of normalization for its success.

Wolfensberger (1980) explained normalization to mean "...use of culturally valued means in order to enable people to live culturally valued lives" (p. 80). To facilitate understanding of this definition, Wolfensberger suggested seven major strategies or core themes. The first theme deals with the role and importance of the unconsciousness. Wolfensberger suggested that largely unconscious dynamics control or influence a person's routine acts and habits. A service delivery system such as a school is also influenced by unconscious routines. People and schools act in a certain manner because that is the way it always has been done.

A second theme of the normalization principle deals with the relevance of role expectation and role casting. Social roles that people impose on one another or adopt are one of the most powerful social influences and control methods known.

The third theme of the normalization principle according to Wolfensberger deals with the "conservatism corollary" and the

implications of positive compensation. The conservatism corollary states the more the number, severity, and/or variety of handicaps or deviancies of a single person or the larger the number of people with handicaps in a group, the greater the impact of positive compensation. Positive compensation occurs when one or more of three events take place: (a) the reduction of one or more stigma per person, (b) reduction of the number of people in the group, and (c) the balancing of the stigma with other positive factors, images, or abilities.

Belief in the developmental model and personal competency enhancement is the fourth component of the principle of normalization. The developmental model states all people are capable of growth over time. Some people learn more slowly than others, but all people grow, change, and follow the same basic pattern of development. Appearance of some competencies in a person with handicaps tends to elicit other positive feedback. Wolfensberger referred to this phenomenon as personal competency enhancement.

The fifth component of the normalization principle deals with the power of imitation. Wolfensberger (1980) stated the power of imitation is one of the most powerful learning mechanisms known. The majority of children learn to walk, talk, and behave through imitation.

Another theme of the principle of normalization deals with the dynamics and relevance of social imagery. Social imagery

concerns include where a particular service such as a school program is located, what a program is named or labeled, and whether programs are age appropriate.

The final component of the normalization principle deals with the importance of social integration and being a valued social participant. A program in which students are physically present is only the first step towards normalization. Social integration is described as learning how to relate to each other as associates or friends. Students, both handicapped and nonhandicapped may need to be taught how to interact with each other; this teaching can occur through teacher modeling or structured social interactions (Biklen, 1985).

Mainstreaming Principles and Practices

Many schools that follow the principle of normalization must undergo systems change to develop model integration programs. According to several researchers (Berres & Knoblock, 1987; Biklen, 1985; McGregor, Janssen, Larsen, & Tillery, 1986; Taylor, 1982) the principles and practices necessary for successful models for the integration of children with handicaps include the following ideas:

1. Special education should be a part of the school's total instructional program, not an add-on.
2. All students should be placed in classes and schools with the same chronological age peers.
3. Integration should be widely done, using natural proportions

of handicapped students to nonhandicapped.

4. The number of students with handicaps should be geographically distributed within a district.

5. Handicapped students should follow the normal pattern of the school day and school year.

6. Districts should provide ongoing training and inservice for regular education teachers, aides, special education teachers, other students, and support personnel such as bus drivers and cooks.

7. Strong leadership from the building principal and district administration should be available.

8. Programs should avoid the use of special jargon, overt labels, loud voices, or other language or language use that set students apart.

9. Programs should provide modified curriculum or a functional naturalized curriculum that is sequential and integrated into long range educational goals of the school.

10. Related services such as speech and language, physical and occupational therapy should be integrated into the instructional program and occur in the regular classroom.

11. Special staff should be recognized as an integral part of the total staff.

Best Educational Practices. Personnel from Vermont's Center for Developmental Disabilities surveyed Vermont researchers and educators and identified nine best educational practices used

today (Thousand, 1987). The practices include:

1. Age appropriate public school placement. All students (with or without handicaps) should be educated within their own local school with other children of similar age.

2. Social integration. All students (with or without handicaps) should have equal opportunity to interact with community members and other children of their own age.

3. Integrated delivery of services. Students who need physical or occupational therapy, speech or language therapy, recreation services, should receive them in their home, community and school settings. People supplying these services should consult with teachers, parents, and others involved in order to enable a greater number of people to deliver needed special services.

4. Curricular expectations. Curriculum should include sequences of skills which lead to competent adult functioning in communication, community living, work and recreation.

5. Community based training. Students should have opportunities to learn and practice skills in those places where they ultimately will be expected to use the skills.

6. Transition planning should occur for all students well in advance of any major moves. This could be from kindergarten, from segregated placement to regular class, from junior high to high school, or from high school to the world of work.

7. A home school partnership should be developed. Parents

should have ongoing opportunities to participate in the development of their child's educational program. Regular home school communication should be developed and carried out.

8. A systematic data base should be used to make educational decisions.

9. Systematic program evaluation should be done on a regular basis. Evaluation should concern the impact of the services on the student, his family, and the community. This information should be used to decide future directions for the student's educational program

Mainstreaming Models

Madison Metropolitan School District. During the 1970's, the Madison Metropolitan School District (MMSD) shifted from an exclusionary to inclusionary service delivery system. The shift occurred as a result of a strong departmental commitment to the principle of normalization, a system wide belief that interaction between students with handicaps and without was beneficial to both groups, and to strong administrative support for a search for alternatives (McCarthy & Shoultz cited in Berres & Knoblock, 1987). Between 1972 and 1976, a philosophical goal of one instructional program that provided appropriate options to meet the needs of all students was adopted by the board of education. The MMSD superintendent took a firm leadership role with regard to special education and to integration throughout the system, and recommended that two schools which housed segregated special

education programs be among a number of schools to be closed due to declining enrollments. At the same time, the superintendent shifted 13 building administrators, in order to develop a closer match between interests, skills, competencies, and needs of students. Finally a district wide task force was formed to study implementation of Section 504 and make recommendations for better integration.

The philosophical commitment to one integrated instructional program with options for all students called for developing the following: (a) comprehensive yet flexible range of service options to provide appropriate educational services to a full spectrum of children with handicap conditions ranging from mild to severe, (b) systems of support to the regular education system designed to help it teach and manage a broad range of individual differences, (c) closer working relationships with the community and community agencies so the community could understand and better accept people with handicaps, (d) closer working relationships with parents, and (e) evaluation mechanisms for describing and measuring student changes.

Among the lessons learned by MMSD were that the role of building principal can not be underestimated. A supportive principal did not ensure success, but a non-supportive principal almost ensured failure (McCarthy & Shoultz cited in Berres & Knoblock, 1987). Loomis (cited in Berres & Knoblock, 1987) identified specific considerations essential to successful

mainstreaming. Loomis suggested these considerations be addressed by principals and other administrators when placing and managing programs for the integration of students with severe handicaps.

1. Students should be in accessible schools that are chronological age appropriate.
2. Students should be in instructional groups which match their learning style and pace.
3. The number of students with severe handicaps in a building should not far exceed the natural proportion of handicapped in the community.
4. Therapy services should be integrated into the instructional program.
5. Classrooms should be assigned throughout the building with the same considerations which apply to areas assigned to the nonhandicapped so as to avoid a ghetto effect.
6. Schedules should contribute to the integration of students in all instructional and extracurricular activities.
7. Adaptive allocations must be provided; frequently team teaching was appropriate; instructional supplies in mainstreamed classes had to be provided.
8. Heterogeneous grouping should be systematically sought and provided.
9. Opportunities for interactions with nonhandicapped students should be systematically sought and provided.
10. Student, staff, and parent orientation should be

provided on a regular basis.

11. Transition staffings are essential when students progress from one school to another.

12. Adequate paraprofessional resources should be available; volunteer resources can be used.

13. Special staff should be recognized as an integral part of the total staff.

Taylor (1982) did an external evaluation of programs for children with severe disabilities in the MMSD. He found that MMSD had implemented a number of innovative strategies to assist children to live in the community and participate in normal patterns of life. The strategies which he identified included (a) integration of children with severe handicaps into regular schools, (b) a functional, community referenced curriculum, (c) integrated vocational placements for older students, (d) program support for teachers and other school personnel, (e) education of institutionalized children in local public schools, and (f) administrative leadership and support for integration.

Albuquerque Public Schools. Since 1970, the Albuquerque Public Schools (APS) has used a side by side approach to integrate students with severe and profound handicaps into its' schools The side by side approach involved clusters of classes dispersed throughout the schools within the district. Albuquerque's side by side approach featured 60 to 80 students per school of at least 300 students (20 to 26% of total school population), a continuum

of integration experiences which included the reverse mainstreaming of regular education students into special education classes, on site special education administration, comprehensive medical support, expanded janitorial services, accessibility, transportation, staff and community inservice, and technical assistance (Thomason & Arkell, 1980).

The impetus for the side by side model came from parental pressure to educate their children closer to home rather than across town in the segregated facility. When APS initially opened a special class in a neighborhood school, the class remained isolated, the students were not integrated into social or academic activities, there were heavy demands on the principal's time, and insufficient technical support available to the special class teacher. At the end of one year, the initial program was closed, however, both the district and the parents were committed to try it again with a different model. The side by side component of McCullum Elementary School was opened in the fall of 1973, it served about 40 students in seven classrooms housed in one wing of the school. Thus interaction between children was somewhat limited. Interaction did occur on the playground, in the lunchroom, and in assemblies. Classroom integration began slowly, usually on a student by student basis, arranged by the special teacher who would approach a regular teacher and suggest integration of a particular student.

Three years passed at McCullum, in a gradual manner more

integration had taken place, some special classes traded rooms with other regular classes which resulted in side by side classes beginning to disperse throughout the school. Classroom integration increased and regular students were reversed mainstreamed into the special classes for part of each school day.

As children aged, parents again began to pressure APS, this time for an integrated middle school. A middle school site was selected, parents, staff, student body, and community were prepared for the integration of a side by side program into the middle school. Staff were offered the opportunity to switch schools, if they so desired. Parents could chose to send their child to an integrated school or a segregated school. Over the summer, a school was remodeled and in the fall of 1976 a second side by side program opened.

By 1978, both side by side schools were overcrowded. Parents wanted an age appropriate side by side high school program. The segregated special school's population was declining significantly. An elementary school was serving as an integrated site but without the side by side program, this was beginning to have a negative impact on the regular school program. Based on an analysis of the district's needs, and discussions with parents, advocacy groups, and school administrators, the Board of Education decided to expand the side by side model to an additional three schools, one elementary, one middle, and one high school. Over time due to the success of the side by side model, APS opted to

use this model to meet the educational needs of students from other categories of handicaps such as severe communication disorders including autism, severe behavior problems, profoundly retarded, and severe physical impairments. Many of the basic components of the model remain in use and vital to the operation of side by side approach.

A discussion of elements that have been identified as critical to the success of the side by side model follows. Sixty to eighty students per school of at least 300 students was considered optimum by APS so as to support the assignment of ancillary personnel to each side by side site. On site location of ancillary personnel was considered important because support services were considered an integral part of the students' educational program, staff travel time was eliminated, which allowed more time for direct service to students and teachers; collaboration and development of a team approach was facilitated by in-house staff location. In a school of at least 300 students, 60 to 80 pupils with handicaps was a small enough number so as not to overload the resources of the regular education staff, yet was large enough to provide visibility and integration throughout the regular education program.

All side by side sites used systematic instruction as the basis for their program development. They operated on the assumption that there must be a systems approach to the entire educational process for students with severe/profound handicaps.

Systematic instruction will teach students new skills, but it does not change the attitude of the community. Therefore, APS prepared parents of regular education students, the student body, teachers and administrative staff, and community groups for the inclusion of students with severe handicaps on campus. Albuquerque Public School special education staff believed systematic instruction must be accompanied by a series of social and psychological changes in the social environments such as attitude change, availability of generic services, and vocational opportunities, of students with handicaps (Thomason & Arkell, 1980). This demanded that public school programs act as social change agents.

Side by side settings encouraged frequent interaction between students. These interactions were individually planned, and gradually and systematically incorporated into a student's school program. Inservice was provided to regular teachers and students throughout the school year and summer. All students were integrated into the cafeteria, during recess, or during hall passing periods, and to school wide assemblies. Further integration was based on individual student data and readiness of the regular classroom. It was the special education teacher's responsibility to prepare both the student with a handicap and the general student body for integration. Within each side by side program reverse mainstreaming occurred, regular class students came into the special classes on a daily basis. Often a buddy system was developed for use on the playground.

Because side by side sites required a substantial amount of administrative time, each site was assigned a special education administrator to serve as assistant principal or curriculum assistant at each school. This administrator then worked with both special and regular teachers and students, provided technical assistance to teachers and parents, attended IEP meetings and daily educational team meetings, and met with parents.

A full time school nurse was assigned to each program. With 60 to 80 students per site, it was feasible to provide specialized medical equipment such as resuscitator and oxygen at each site. In some cases on site pediatric clinics were an effective way to provide on going medical consultative services.

The side by side model required increased use of the school's janitorial staff. Often a washer and dryer was provided in the bathroom. In many instances bathroom facilities had to be remodeled; stools, changing tables, wash downs, and showers were often needed.

In APS, an integrated therapy model was used. Students' skills were assessed in various environments, classrooms, halls, playground, lunchroom, bus, and treatment occurred in many of these natural environments where the skill must be used. Intervention programs were jointly developed and carried out by and with the various teachers involved in each natural environment.

Albuquerque Public Schools provided advance inservice and

emergency medical training to bus personnel too. Bus service was provided door to door. Thomason and Arkell (1980) suggested buses should be loaded and unloaded away from traffic areas and adjacent to classrooms, and that buses need to be met by school personnel.

Thomason (cited by Berres & Knoblock, 1987) reported that the side by side model was moving towards more of a community based setting. Students were going off campus to visit work environments, increasing student access to career exploration activities, and exposing them to a wider variety of job options.

Philadelphia's Urban Model Project. Parental pressure also forced the School District of Philadelphia to undergo system wide reorganization. In a plan known as the Urban Model Project (UMP) Philadelphia attempted to retrain teachers, provide appropriate educational programs to students with handicaps, and educate all students in age appropriate schools. Urban Model Project utilized current "best practices" in the education of students with severe handicaps, formulated a service system that (a) focused on development of functional skills and behaviors, (b) served each student in the least restrictive environment, (c) provided age appropriate activities in age appropriate settings, (d) provided individualized programs for each student, (e) based educational decisions on valid and reliable data, (f) incorporated current instructional best practices, (g) encouraged parental participation, (h) utilized an integrated approach to delivery of related services, and (i) provided for continued training of

administrative, supervisory, instructional, and related staff.

Urban Model Project activities were organized around the program components of curriculum, data collection, integration, parent participation, and inservice training (McGregor, Janssen, Larsen, & Tillery, 1986). A life skills approach was the basis for all curricular decisions in UMP. Curriculum content was organized into domains of personal maintenance, domestic maintenance, vocational skills, recreation/leisure skills, functional academics, and interpersonal communication.

Urban Model Project had implemented a system of district wide standardized data collection practices. The forms and directions along with minimum standards regarding frequency of data collection had been formulated into a reference manual for district teachers.

The placement of students into regular school environments was the first step in integration efforts. The overall approach began with information dissemination activities to increase sensitivity, awareness, and knowledge about students with handicaps. Teachers attempted to maintain a high level of visibility within the school, by utilizing a range of school environments to teach skills to students. Again more specific information regarding strategies and activities to be used had been organized into a reference manual for teachers.

Urban Model Project made the assumption that the needs and preferences of parents' desire for school involvement was as

individual as their children's learning characteristics and needs. Urban Model Project maintained ongoing communication between school and home. Information was solicited from parents about their expectations and preferences in relation to home school involvement. However, teachers were required to contact parents at a minimum of at least once per week.

To facilitate this district wide reorganization, extensive inservice and retraining of staff was needed. Information regarding philosophy, procedures, and effective programming strategies was provided through group inservice. Written materials were distributed to instructional personnel periodically, and a lending library was established. A training needs assessment was conducted among instructional and related service staff. Direct classroom training was utilized to teach the bulk of the information. Each teacher was assessed against a minimum standards of quality checklist divided into the areas of assessment, IEP's, parent involvement, program organization and management, program implementation, evaluation, integration, and transdisciplinary services. Areas in which a teacher did not demonstrate competency were taught through modeling and on the job feedback. In order to be considered competent, teachers had to meet 90% proficiency on the checklist. Teachers who had not yet met or who fell below criterion received additional training. Once a teacher met criterion, he received only follow up visits from the trainer.

The same checklist was used to train building principals in what should be occurring in the classrooms they supervised. Competency scores increased from 36% and 33% to 85% and 81%. It must be realized many of these teachers either had not been trained in college to teach this population or had been trained when trends and instructional practices were very different from the life skills approach the UMP wanted to use. Therapists were asked to change their approach to meet UMP guidelines.

Since the beginning of Philadelphia's UMP, the percent of students with severe handicaps served in age appropriate schools had increased from 55% to 86% as of September, 1984. In classroom support continued to be offered to teachers who had not yet reached 90% performance on the checklist. The UMP training model had been adopted for teachers of students with moderate handicaps, and regular teachers in specialty areas of art, music, and physical education. Finally annual school based plans were being formulated and monitored to ensure continual home school communication and to continue to promote integration.

Project Merge. In Olympia, Washington, Project Merge was developed to address a number of concerns found in traditional service delivery models. Project Merge operated on two assumptions. Children would not be labeled as a prerequisite to classroom interventions, and the majority of interventions would take place directly within regular education classrooms.

Project Merge called for the restructuring of existing

services for students with special needs in an attempt to effectively link regular education and support services. Several procedures utilized included teacher assistant teams, curriculum based assessment, teacher consultation, peer tutoring, classroom organization, direct instruction, social skills, and study skills. In order to reorganize support personnel (categorical teachers and their aides) a building master schedule was developed which limited all pull-out services for skill instruction to the first one and one half hours each day. With this schedule change, categorical personnel could work directly in regular classrooms, and grade teachers would work with their entire class for the majority of the day. According to Wood, MacDonald, and Siegelman (cited in Berres & Knoblock, 1987) the availability of categorical staff to regular staff resulted in (a) lower student to staff ratios, (b) establishing a functional team relationship between teachers, (c) facilitating small group instruction based on student need rather than on program eligibility, and (d) establishing a consistent pattern in instruction, curriculum, and management strategies for students with special needs.

A second restructuring strategy involved a change in categorical personnel. At the recommendation of the regular classroom teachers, one special education teacher was replaced by a school psychologist who would provide consultation support, specialized instruction in socialization and study skills, and direct intervention services. The structural changes from pull-

out to a consultation model provided a building wide emphasis on the social and behavioral needs of all students (Wood et al. cited in Berres & Knoblock, 1987). This emphasis allowed teachers to more successfully manage and provide instruction.

Project Merge utilized an educational support team concept based upon the teacher assistance team concept developed by Chalfant, Pysh, and Moultrie (1979). The educational support team's objectives were to determine an individual student's high risk status and help teachers establish successful instructional or behavioral programs within the regular classroom. In addition to formal referrals from teachers, the team might screen and monitor high risk learners, share resources and materials, participate in promotion or retention decisions, act as instructional resources to teachers, work with building discipline and study skills committees to establish staff development activities (Wood et al. cited in Berres & Knoblock, 1987).

Project Merge was based on a number of building wide interventions designed to shift emphasis from special classes to prevention of learning and behavioral problems in the regular classroom. All students were taught a range of additional topics including social skills and study skills. Selected students received one to one counseling and/or small group counseling. A classroom management system as well as a systematic out of room management system for the playground, halls, rest rooms, and lunchroom along with parent-home involvement and systematic use of

regular education peers as appropriate role models had been implemented. Project Merge also made use of a leveling process for any student. Students could lose free time, be removed from the classroom for in-school suspension or temporarily transferred to a self contained special class.

Louisville Schools. Parental pressure and district openness to change have meant integration in some Louisville, Kentucky schools. The district operated a number of segregated special schools but had several innovative programs. Among these was the Brown School which was an "optional school" with 650 students enrolled. Parents of five disabled students had enrolled their children here. The students were totally mainstreamed and had been since the first day. The students received a mixture of community based and in school instruction.

Another innovative program in the Jefferson County District was based on the use of an itinerant teacher serving five kindergarteners, each placed in a regular class, each located in a different school. A third program was located at a middle school; seven students with severe and profound handicaps were integrated in regular music, physical education, industrial arts, home economics, language arts and/or science classes (Brost & Johnson, 1986).

Homecoming Model. Thousand, Fox, Reid, Godek, and Williams (1986) described Vermont's Homecoming Model. The Homecoming Model was developed to assist teachers, therapists, and administrators

to educate all students in their local school. Districts using the model had been able to integrate children who present "intensive educational challenges" (moderately or severely retarded, multihandicapped, deaf-blind, autistic, behaviorally disordered, and emotionally disturbed) into regular classrooms. The Homecoming Model has been implemented by 26 schools at both the elementary and secondary level. A total of 77 students, ages 5 to 17, have benefited from the model; 58 students were transferred from regional special education programs, and 19 students at risk of self contained or out of district placement remained in the regular classroom.

The Homecoming Model was based upon the belief of shared ownership between regular and special education teachers for the education of children with handicaps. The model used a building based planning team and a consultive approach. Use of the Homecoming Model benefited the students, the teachers, and the administrators. The potential benefits for students were identified as increased opportunities for integrated education and social experiences. Parents reported enhanced levels of participation and planning of their child's educational program. Teachers who had collaborated to integrate students reported that (a) they had more say in local educational programs, (b) they felt more comfortable asking for and receiving material, technical and emotional support from others, and that (c) the unique expertise of all teachers had been readily discovered and used.

Administrators reported more efficient use of resources, savings to the district through a reduction of duplication of services, and increased understanding and support among teachers, therapists, and parents of one another's roles and needs.

Essential ingredients to fully implement a program such as the Homecoming Model were (a) administrative commitment, (b) instructional staff commitment, (c) means for accessing expert instructional staff, (d) a cooperative planning process, (e) process for developing transition and maintenance plans for students with handicaps, and (f) access to consultive support for the local planning team.

To implement the Homecoming Model a cooperative planning team was formed for each student. Thousand et al. (1986) stated "very likely that every member of the school staff will eventually be called to join a school's local planning team, since team membership changes with each referred student's need for expertise and support" (p. 25). The team followed an 11 to 15 step process for each student referred for support. These steps were generic regardless of student need. Often team members initially needed practice in functioning as a cooperative team member. Traditionally the members of the team came from different backgrounds, and may have had conflicting goals that had to be developed into one integrated goal.

The authors identified several issues related to model development: (a) lack of money, (b) planning team lacks

authority, (c) lack of time for planning team to meet, and (d) the cooperative planning team not committed to a common goal. Issues related to model implementation identified by Thousand et al. include (a) eligibility criteria, (b) referral process, (c) parental role, (d) case management, (e) use of instructional aides, (f) educating the community, (g) preparing the school staff and nonhandicapped students, and finally (h) teacher student ratios. Thousand et al. did not suggest solutions to the above issues. Rather they stated "no one correct answer, no prescription which will work for all schools" (p. 51). Instead they suggested the answers and solutions will be generated by individual planning teams and must be as unique as the characteristics and needs of their schools.

Summary

The literature has shown that the practices and programs reviewed share many common elements which contribute to their success. The principle of normalization has emerged as a central theme in many model programs which have developed goals for unconditional mainstreaming.

Chapter 3

Interpretation of the Literature

A number of researchers and school districts have provided evidence that unconditional mainstreaming or complete integration of children with handicaps is a viable option to segregated self contained classrooms. The Madison Metropolitan School District (MMSD) shifted to an integrated approach in the mid 1970's. As a result of this change, students graduating from integrated programs hold employment in the community rather than in sheltered workshops. The Albuquerque Public Schools (APS) began clusters of side by side programs in the early 1970's. Now all students with handicaps are educated in side by side programs in regular age appropriate schools rather than in a segregated school. Philadelphia, under pressure from the PARC court case, moved 86% of students with handicaps to age appropriate schools and began integration efforts. Project Merge in Olympia, Washington, saw a significant reduction in special education referrals and in the need to remove students to self contained classrooms for any longer than one day. In Vermont, which contains many rural school systems similar to those in Wisconsin, 26 school districts have implemented the Homecoming Model to educate students with severe or multiple handicaps in regular education classrooms. As a result 58 students transferred from segregated schools to regular education classrooms and 19 students at risk for segregated placement remained in regular education classrooms.

Biklen (1985) has argued that segregated education has not generally provided economics of scale (proven less expensive). Segregated schools tend to lack access to the volunteer help of nonhandicapped students, have excessive transportation costs, duplicate administrative, support staff, equipment, and facilities, and create a need to maintain separate data systems, pay roll, and so on. Thousand, Fox, Reid, Godek, and Williams (1986) reported use of the Homecoming Model saved one district \$11,000 in special transportation costs alone. Additional savings were possible when using within district facilities because money previously spent on out of district tuition and federal flow through dollars remained in the district.

System Change and Administrative Support

Many researchers have noted that the physical presence of students with handicaps is not enough. Unconditional mainstreaming goes beyond mere physical presence or teacher deals. Unconditional mainstreaming usually requires a system wide change or reorganization. This becomes evident when one reviews the process Madison, Albuquerque, Philadelphia, and Vermont went through in order to more fully integrate handicapped students. One of MMSD's strategies for change involved support from high level administration and development of linkages and interrelationships, bringing together implementors on a person to person basis. In another strategic move, virtually all special education administrators were dismissed and a new director was

hired (McCarthy & Shoultz cited in Berres & Knoblock, 1987). The system changed from using a director of Specialized Education Services to use of Integrated Student Services. A large number of building administrators were moved to different buildings.

Philadelphia underwent system wide reorganization and retrained numerous teachers. A federally funded model demonstration project based on a plan formulated to improve services for students with disabilities was implemented. The Urban Model Project incorporated best educational practices, retrained teachers, and revamped curriculum and data collection.

Albuquerque Public School's (APS) upper administrators initially expressed serious reservations about moving students with severe handicaps out of segregated facilities into local schools (Thomason cited in Berres & Knoblock, 1987). Staff members gathered data from integrated sites in other states, visited successful integration programs, and brought administrators from districts with integrated programs in to serve as consultants in order to secure administration support and approval.

Thomason and Arkell (1980) suggested that information dissemination is necessary to maintain administration and school board support. This data based information would include within district child progress reports, cost effectiveness data, case histories and testimonial information. She suggested administrators should be taken to visit programs in action, and a

public relations campaign should be launched. The public relation efforts should include utilizing press releases, television coverage, and public recognition events. Administrators should be notified of any recognition received by a program and sent copies of pertinent publications. Lastly dissemination efforts should adhere to local rules and customs.

Examples of Systems Change from Vermont. Thousand et al.

(1986) suggested administrative commitment can be obtained through (a) cost analysis, (b) involvement of the State Education Agency (SEA) in a consultive role, and (c) through additional incentives and benefits about which the SEA may have knowledge. Thousand et al. suggested that the following policy and procedural changes may be necessary at the district or local building level in order to encourage mainstreaming:

1. Assignment of every student residing in the district to a local regular education "home room" based on chronological age regardless of where or what school the child attends.
2. A corresponding annual review of out-of-home room students should be undertaken by the local school to determine barriers, and action should be proposed as to how to remove the barriers involved in returning students to the regular education classroom.
3. A target date for moving individual or groups of students into regular classroom should be set.
4. Money should be redistributed so as to support integrated programs.

5. Instructional aide time available to grade teachers should be increased.
6. Release time should be arranged so teachers can be part of the cooperative planning team.
7. A joint problem solving approach rather than traditional building administration approach should be used.
8. Authority for program implementation should be distributed to members of the cooperative planning team.
9. The principal should become a active member of the cooperative planning team.

Biklen (1985) investigated and described the building principal's role in mainstreaming. "The principle is crucial to success of any school program. Some programs may succeed without the active support and involvement of building principals. But a program cannot succeed where the principal is opposed or negatively disposed to mainstreaming" (p. 30). In implementing the Homecoming Model in Vermont, Thousand et al. (1986) stated the principal became actively involved as a member of the planning team. In some instances, he attended only key meetings, in others, he attended all meetings. The principal was essential to (a) legitimize the team's decisions, (b) ensure that decisions could be put into action in a timely fashion, and (c) demonstrate support for the team's actions.

Thomason and Arkell (1980) suggested that to facilitate acceptance of people with handicaps, not only must the school

system change but the school should act to change community attitudes as well. This is necessary so as to have a place for functional skills training, a community base for training of skills needed to live in community, a place to learn vocational skills and in order to better prepare the community at large to accept people with handicaps. Community attitude change activities begin within the school with the regular students, teachers, and parents of regular students. The mutual benefits to all parties should be emphasized. Representatives from the community should be involved wherever feasible, especially in the planning stage.

The Madison Metropolitan School District was committed to the dissemination of information regarding the education of students with severe handicaps (McCarthy & Shoultz cited in Berres & Knoblock, 1987) to both the community at large and to the educational community. This was done through (a) site visitation coupled with opportunities to discuss programs, and (b) sharing of curriculum products and strategies. Visitation to sites were requested on a daily basis, visits were coordinated by MMSD and university personnel. The sharing of curriculum products and strategies was done primarily through developing written materials and giving presentations. The Madison Metropolitan School District felt that they could demonstrate how and support other districts in procedures necessary to integrate all students into the regular classroom.

Normalization

The applied use of the principle of normalization has emerged as a central theme in successfully mainstreaming students with handicaps. A discussion of the major strategies entailed in Wolfensberger's work (1980) and how they relate to integrating public school programs follows.

Role of Unconsciousness. A person may drive the same route to work everyday, wear his lucky golf card or bowling shirt whenever he participates in an activity, or eat fish every Friday. At one point in time, something or some reason caused a person to act this way; the reason no longer exists but the habit persists. A service delivery system such as a school is also influenced by unconscious routines. Students may be seated in alphabetical order, all first grade students may learn to read using the phonic approach, or all special education students when first identified may be placed in a self contained classroom. People and schools act in a certain manner because that is the way it always has been done. Blatt, Biklen, and Bogdan (1977) wrote that schools are the greatest perpetrator of the "One Right Model"; the idea is that there is one right way for things to be done and all people must learn to do it that way.

Role Expectation and Role Casting. Social roles that people impose on one another or adopt are one of the most powerful social influences and control methods known. Wolfensberger cited five methods people use to convey role expectations. The methods

include the way people (teachers) structure other peoples' (students) physical environments; the activities offered to, provided for, or demanded of students; the language used with and about people; the way people are positioned near each other; and other images and symbols. If a teacher expects a class to do well on a test, chances are good that the class will; if everyone thinks Jon is a misfit he becomes a misfit. Everyone looks for instances of Jon being a misfit and dwells on that behavior. Consequently, people miss noticing when Jon uses good manners or plays a game according to the rules for ten minutes.

Conservatism Corollary. The conservatism corollary states the more the number, severity, and/or variety of handicaps or deviancies of a single person or the larger the number of people with handicaps in a group, the greater the impact of positive compensation. Positive compensation occurs when one or more of three events take place: (a) the reduction of one or more stigma per person, (b) reduction of the number of people in the group, and (c) the balancing of the stigma with other positive factors, images, or abilities. A screaming child with multiple handicaps wearing dirty, ill fitting clothing in the school cafeteria is more likely to attract negative attention than the same child dressed in clean attractive clothing eating lunch and screaming occasionally. A group of ten children with handicaps sitting together in the school cafeteria are more likely to be noticed than the same ten children dispersed at different tables

throughout the cafeteria. A student with a handicap is more likely to be accepted in the classroom if the child dresses like the other students, lives in their neighborhood, and is best friends with one of the more popular students. The more valuable, smarter, in a high position, or well known a person is, the more likely society is to tolerate or overlook some degree of oddity. Gold (1974) labeled this the Competency Deviancy Hypothesis.

Developmental Model. The developmental model states all people are capable of growth over time. Some people learn more slowly than others, but all people grow, change, and follow the same basic pattern of development. One learns to creep and crawl before one learns to walk. A person labeled mentally retarded may have an IQ similar to a child who is three. But if this person labeled retarded is 18, he/she will be able to do many things a child of three can not. Wolfensberger refers to this phenomenon as personal competency enhancement. For example, if other classmates see an 18 year old riding the city bus to meet his/her friend to attend a movie, the classmates are more likely to provide positive feedback, even though the 18 year old can not read the junior history text. If classmates see a person ride a special bus to school, dress in an odd fashion, not be able to read the history text, and not know anything else about him, classmates are less likely to provide positive feedback, they do not see a competent person.

Power of Imitation. The power of imitation is one of the

most powerful learning mechanisms known. The majority of children learn to walk, talk, and behave through imitation. If people with handicaps spend all their time segregated with other handicapped people, all they learn is more behaviors typical only to people with handicaps. Students with and without disabilities are more alike than different. Children with handicaps benefit from being with nonhandicapped children by enhancing self esteem, confidence, and social skills (Shore, 1986). If children with handicaps are exposed to and see typical behaviors of children, those are the behaviors more likely to be imitated.

Social Imagery. Social imagery concerns include where a particular service such as a school program is located, in the basement, next to the principal's office, integrated into a second grade class, or in a segregated facility. What a program is named or labeled is another concern of social imagery. The name of the program should not call attention to the program. Age appropriateness is another major concern of social imagery. High school age students, 14 to 18 years old, with handicaps should be attending a high school, using curriculum concerning development of job skills or independent living skills. Teenagers involved in having to sort beads by color, count blocks, or recite the alphabet song are not doing age appropriate activities.

Social Integration. Valued Social Member. A program in which students are physically present is only the first step towards normalization. Biklen (1980) described the three stages of

integration as physical integration, functional integration, and social integration. Physical integration occurs when students with disabilities are placed in regular classrooms or schools. Functional integration is programmatic integration that occurs when a student attends regular class and partakes of the same curriculum. Social integration is described as learning to relate to each other as associates or friends. Students, both handicapped and nonhandicapped may need to be taught how to interact with each other; this teaching can occur through teacher modeling or structured social interactions (Biklen, 1985).

When one examines and compares the best educational practices identified by Thousand (1987), the components identified necessary for successful mainstreaming and the principle of normalization, one finds much overlap. Age appropriateness and social integration are common to all three. Future role expectation and role casting could be enhanced by use of functional community curriculum and integrated delivery of related services as suggested by the researcher reviewed.

The interpretation of the literature reviewed indicates unconditional mainstreaming can not be done by one teacher alone. "We have consistently avoided implying that any individual teacher can independently make integration succeed, for we think such cases are rare and have been fraught with difficulties" (p. 56, Biklen, 1985). However there are many teacher specific practices that can be used to help facilitate integration.

Teacher Practices

Project Merge Components. Project Merge encouraged teachers to use the following components in order to be able to successfully support students with handicaps including those labeled emotionally disturbed in the regular education classroom.

1. Small group instruction in social skills training based on programs such as the Accepts Program (Walker, McConnell, Holmes, Todis, Walker, & Golden, 1983) or Skill Streaming (McGinnis, Goldstein, Sprafkin, & Gershaw, 1984).

2. Individual one-to-one counseling by the school psychologist may be used but is done infrequently.

3. Use of small group counseling by the school psychologist of groups who experience some common problem such as fighting on the playground. This is usually conducted in regular classroom.

4. Whole class lessons which focus on social skills. These are short term, a specific social skill that a majority of the class lacks or needs to practice is taught by the school psychologist.

5. Behavior contracts.

6. Consistent use of classroom management systems individualized by classroom according to teacher tolerance and class needs including rules generated by the whole class. These are posted in a positive format.

7. A school wide management system is used in the playground, hall, and so on. Direct instruction on expected

behavior is provided to all students first, then bonus tickets and positive verbal comments are awarded at random by various staff (cooks, teacher walking in hall, playground monitor, classroom teacher).

8. Study skills curriculum in six areas is taught to the complete class. Areas covered included (a) self management, (b) seatwork, (c) group discussion, (d) direction following, (e) textbook reading skills, (f) research, and (f) test taking.

9. Parent home involvement. The school offers parent study groups for the teaching of positive skills for interaction with a child at home. The groups are open to all parents, but certain parents are issued specific invitations to join a group on a specific topic.

10. Systematic use of regular education peers as appropriate role models.

Planning Team Steps. The Homecoming Model identified specific steps that can be used to both transition a child with handicaps into a regular classroom, and maintain a child with severe handicaps in the regular classroom. The steps that the Homecoming Model used to support children in regular classrooms follow.

1. Identify team membership for each individual child.
2. Identify the child's strengths and educational needs.
3. Identify the current resources provided to the child's program.

4. Describe the child's current education program including activities, settings, materials, and teaching strategies.
5. Identify potential next placements (transition step only).
6. Describe all of potential next placements (transition step).
7. Analyze the specific activities, settings, teaching styles, and materials available in all potential next placements (transition step) and for student's current placement (maintenance planning).
8. Develop a best match between the child's skill level and educational needs and available next placements (transition step).
9. Develop a schedule of activities with materials, needed adaptations, and resources identified for the current or next year's placement.
10. Develop specific transition activities (transition step).
11. Provide additional resources to the child's program if needed.
12. Provide technical assistance to the student's program if needed.
13. Provide needed training for school staff.
14. Provide for continual parental involvement in the child's program.
15. Monitor student's progress and make needed adaptations in

plan as needed.

Presenting Hypothetical Examples. Biklen (1985) noted non-interaction or relative isolation as typical of situations where teachers had not actively intervened to create alternative patterns of interaction. The Salend & Knops (1984) model of presenting hypothetical examples, discussion, and brainstorming is an example of a model that could be an effective cognitive strategy for (a) promoting positive attitudes towards handicapped and (b) could teach nonhandicapped children when and how to assist peers. The steps identified as necessary to use this hypothetical example model are broken into teacher preparation steps and example presentations. The following steps must be done by the teacher in preparation for use of the model:

1. Determine strengths and weaknesses of child to be mainstreamed.
2. Specify the classroom's and the school's (a) environment demands, (b) instructional format, (c) curricular demands, (d) teaching style, (e) physical design, (f) student socialization patterns, (g) class rules, and (h) unique class characteristics.
3. Identify potential problem areas.
4. Phrase problem area as several hypothetical examples.
5. Present the hypothetical examples one at a time to the class.
6. Brainstorm solutions, write down on the board all suggestions without passing judgement on any of them. Include

even the obviously absurd ideas.

7. Lead the class in evaluating and discussing the proposed solutions.

Many of the steps described in Vermont's planning team are activities similar to what an IEP meeting might do. However, the planning team concept goes beyond just defining if a child has a handicap and needs special education. The planning team should be active in writing the student's actual educational program and determine if and what adaptations, materials, and curriculum the child needs. No longer is the special education teacher the sole decision maker, bargaining with a regular teacher to accept a child in the class and bargaining more to get the teacher to change some aspect of the classroom.

Summary

Unconditional mainstreaming is a reality in some schools. This form of mainstreaming often requires applying the principle of normalization to affect system change, administration and staff support, group or team planning, and cooperation. The system must be flexible enough to accommodate the individual needs of all students within the regular classroom. The administration must provide resources and the technical assistance necessary to accommodate student needs in the regular classroom. The teachers must work together to provide an optimal learning environment for all children in the regular classroom.

Chapter 4

Summary

Throughout history, society has segregated those people who were different or who have handicaps. First we enslaved or abandoned people with handicaps, then we created institutions. One of the first institutions, Abendberg closed amid complaints of inadequate treatment. Those same complaints are still being leveled against today's institutions. A massive deinstitutionalization campaign was begun in the 1970's and continues yet today.

The schools must now educate people with handicaps in the least restrictive environment. No longer can a segregated school or even a self contained classroom be considered a least restrictive environment. A number of school systems around the country mainstream children with handicaps into regular education classrooms for the more than half of the school day. The most progressive schools have undergone system change and changed special education to mean education of children with handicaps in the regular classroom on a full time basis. Biklen (1985) referred to this concept as unconditional mainstreaming.

Distinguishing Features. Unconditional mainstreaming is practiced in a number of school districts around the country. Unconditional mainstreaming may be distinguished from other forms of mainstreaming by four features (Biklen, 1985). These features are:

1. The degree of administrative support given. Unconditional mainstreaming is marked by total administrative and staff support. Mainstreaming is done following a school wide plan and students are actively socially integrated into the regular classroom as well.

2. A problem solving attitude is held by the staff. A process such as teacher assistance teams or local planning team is used to support regular education teachers in academic areas, behavior management, curricular decisions, and technical assistance as well as emotionally.

3. Frequent discussion by teachers, administration, and parents on how to improve mainstreaming and individual educational programs. Home school communication lines are kept open. Systematic data is kept and used to document the need for change in educational programs. The whole mainstreaming component of education in the school is evaluated for overall effectiveness and change is implemented where needed.

4. Careful documentation to demonstrate student progress. Individual Educational Plan decisions are based on documented information. Educational programs are systematically sequenced and delivered.

Program models such as Homecoming and Project Merge have been developed and are used to educate students with handicaps in the regular education classroom next to their peers. Using these models teachers have learned how to adapt styles of instruction,

materials presented, classroom management, curriculum, and activities with support from administration, a building team, and consultants.

Handicapism. The need for teachers to learn how to educate students with handicaps may indicate a fundamental flaw in society and teacher preparation programs. If people grow up with individuals with handicaps, view all people as equal participating members of society, and if schools operate as one educational system with options available for all students regardless of ability, society would not have to deal with the problems segregation has created. Blatt (1977) termed society's treatment of handicapped people as "handicapism". He compared handicapism to racism. Both handicapism and racism are based on assumptions and practices that promote the differential treatment of people. Society decides who is handicapped based on apparent or assumed differences which may be physical, mental, or behavioral. Blatt (1977) wrote "handicapism pervades our society and, overall presents the most important barrier to the development of community programs. Prejudice, stereotyping, and discrimination are its major components" (p. 244). Advocates of people with handicaps use the principle of normalization to fight segregation, the prejudice and stereotypic attitudes, and the discrimination it tends to cause.

Many schools deliver special education in the us and them mode. There is regular education (us) and special education

(them). Madeline Will (1986) has proposed to eliminate the us and them mode through an idea called the regular education initiative. The initiative would facilitate system change and educate all students in the regular education classroom. The regular education initiative is debated in schools and teacher preparation programs around the country. This debate is another sign of society's reluctance to allow people with handicaps into our midst.

As individual people or teachers we can advocate for people with handicaps through system change and unconditional mainstreaming. Much of the research reviewed in this paper can be used by individual teachers to help to improve the mainstreaming done in their schools'. Unconditional mainstreaming may solve the schools' use of segregated treatment and it may eventually help solve the apparent much deeper cultural or societal problem of handicapism because students growing up in integrated classrooms will know the prejudices and stereotyping are unwarranted.

Blatt (1977) wrote " ...we must free the old, the weak, the handicapped because in truth they are us. Our problem is not one of merely defining what represents the least restrictive environment in an unjust society, but rather one of changing that society for everyone..." (p. 346).

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