

inclusion

*The National Down Syndrome Society
envisions a world in which all people with
Down syndrome have the opportunity
to realize their life aspirations.*

*The National Down Syndrome Society
is committed to being the national leader in
supporting and enhancing the quality of life,
and realizing the potential of all
people with Down syndrome.*



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EDUCATING STUDENTS WITH DOWN SYNDROME WITH THEIR NON-DISABLED PEERS.



What is Inclusion?

In a growing number of schools across the United States, it is now possible to walk into elementary, middle and secondary classrooms and observe students with Down syndrome and other cognitive and physical disabilities learning with their nondisabled peers. This practice of welcoming, valuing, empowering and supporting diverse academic and social learning among students of all abilities is called *inclusive education*.*

Inclusive education is much more than mainstreaming. *Mainstreaming* implies that a student from a separate special education class visits the regular classroom for specific, usually non-academic, subjects. *Inclusion* is an educational process by which all students, including those with disabilities, are educated together for the majority of the school day. With sufficient support, students participate in age-appropriate, general education programs in their neighborhood schools.

Inclusion is a philosophy of education based on the belief in every person's inherent right to fully participate in society. Inclusion implies acceptance of differences. It makes room for the person who would otherwise be excluded from the educational experiences that are fundamental to every student's development.

When inclusion is effectively implemented, research has demonstrated academic and social benefits for all students: both those who have special needs as well as typical students. Friendships develop, nondisabled students are more appreciative of differences and students with disabilities are more motivated. True acceptance of diversity ultimately develops within the school environment and is then carried into the home, workplace and community.

While inclusive education is a highly effective educational approach—a fact that has been recognized for decades in federal disability rights and education laws—some students with special needs may benefit from other arrangements. There are many educational strategies and placements available to students with Down syndrome, including self-contained special education classes, resource rooms, mainstreaming, residential schooling and home instruction.

* Terms in *bold and italics* are defined in the glossary at the end of this pamphlet.

This brochure will familiarize readers with the philosophy and practice of inclusive education. It examines the history of the inclusion movement, the benefits of inclusion and the rationales and factors most frequently associated with successful inclusive education programs.

A Brief History of Inclusion

Until the late 1970s, students with disabilities were routinely placed in segregated educational settings, such as separate specialized schools or institutions. In 1970, schools in the United States served only one in five students with special needs. Since then, researchers, policy makers, parents and educators have debated how to integrate special and general education services into one educational system that serves all students. Educational practices such as mainstreaming and inclusion have shown that all students of differing abilities benefit from learning together.



Federal law followed parents' growing demand for education of their children with disabilities in more inclusive settings. Established to grant states federal money to educate children with disabilities, the Education for All Handicapped Children Act was instituted in 1975. Later renamed the Individuals with Disabilities Education Act (IDEA) in 1990, this law sought to end segregation and exclusion of this group from general education settings. IDEA mandated that a "free and appropriate public education" be available to all school-age children with special needs, regardless of disability. An amendment in 1986 added children three to five years of age.

In 1985 U.S. Assistant Secretary of Special Education Madeleine Will introduced the Regular Education Initiative, named to convey the notion that students with mild disabilities could participate in the general education program at their neighborhood school. Not long afterward, advocacy efforts expanded the REI concept to include students with moderate and severe disabilities.

By 1990, this concept was further expanded and renamed "inclusive schooling" or "inclusion," the practice of welcoming all students into general education classrooms in their neighborhood schools with the necessary support, services, and curricular and instructional modifications. By 1993, almost every state was implementing inclusion at some level.

Today, the inclusion discussion has expanded beyond special education and has become part of the total school reform movement. Reports like *Winners All*, published in 1992 by the National Association of State Boards of Education, demonstrated success in inclusive schools and urged states to adopt a new inclusive belief system, re-train teachers and revise funding formulas to support inclusive educational practices.

The Individuals with Disabilities Education Act

The *Individuals with Disabilities Education Act (IDEA)* is the primary federal law protecting the educational rights of students with disabilities. Although the terms "inclusion" and "inclusive education" are not written in the law, the concept of a "free and appropriate public education" in the "least restrictive environment" provides the legal basis for creating education based on the principles of inclusion.

A *free and appropriate public education (FAPE)* requires that students receive special education and *related services* that meet their unique needs and prepare them for independent living, employment or post-secondary education once their secondary education is complete. This focus on long-term outcomes is essential to the success of any educational strategy.

The FAPE and *least restrictive environment (LRE)* mandates must be balanced. IDEA states: "Each state must establish procedures to assure that, to the maximum extent appropriate, children with disabilities are educated with children who are not disabled and that special education, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily" [20 U.S.C 1412(5)(B)]. This means a student is entitled to be educated in the least restrictive environment in which an appropriate education can be obtained with the use of supplementary aids and services.

The starting point in any discussion of where a student should be educated is the age-appropriate general education classroom in the school that the student would attend if not disabled (called the "neighborhood school"). However, it is important to remember that this placement is not necessarily appropriate for every student. Full inclusion may not be every individual's least restrictive environment. For some, LRE may be full inclusion in a general education classroom with supplementary support such as a special education teacher aide, or paraprofessional. For others, LRE may involve a self-contained classroom comprised of all students with disabilities.

Therefore, the least restrictive environment may be different for each student, depending on his or her individual needs. It is important to note that IDEA clearly specifies that the placement of any student must be based upon the individual's identifiable needs, not based on the student's diagnosed condition or categorical label.

PRACTICAL TIPS TO ACHIEVE INCLUSION THROUGH THE IEP PROCESS

Unfortunately, effective models for inclusion do not yet exist in many parts of this country. Often, parents must convince reluctant IEP teams that inclusion is right for their child. Following are steps parents can take in this situation.

1. Independent Educational Evaluation (IEE)

If parents or caregivers disagree with the educational evaluation provided by the school district, reimbursement may be available from the school district for the cost of an independent evaluation.

If parents do not want school personnel to evaluate their child, an IEE can be obtained at their own expense. The IEP team must consider an IEE as long as the type of assessment used and the credentials of the person who gave

the test comply with school district standards. To get health insurance reimbursement, it is easier to go through the genetics department at a hospital covered under the student's insurance plan or use a developmental pediatrician if the student's plan covers those services.

2. Long-Term Goals

Parents should tell the IEP team that they want to prepare their child to live and work as independently as possible. This means being able to function and behave appropriately in a world of typical peers. The goals on the IEP should reflect the skills necessary to achieve this—both academic and non-academic. Parents acknowledge their high but reasonable expectations and inform the team that they will support them in any way possible. It is critical that the IEP team sees the student's future through both the parents' and the student's eyes.

3. Drafting IEP Goals for Inclusive Settings

The goals drive placement decisions at IEP meetings. As long as the student can make progress toward the goals in an inclusive environment, the team should not consider a more restrictive placement. It is important



that these goals be appropriate for the general education classroom. For example, if the student's IEP includes a goal that specifically requires trips into the community, it cannot be met in an inclusive environment. If the student's goal is to learn to handle money in real-life situations, the goal can be written in a way that uses the cafeteria or the school store, rather than the mall or McDonald's. It also helps to have social goals that involve interactions with typical peers, which cannot be worked on in segregated

settings. The goal should not be restricted to "small-group settings." Even though small groups can be arranged in the general education classroom, the term "small-group setting" is often considered to be synonymous with a special education class.



4. Planning Matrix

A chart should be used to show how the goals can be worked on in the different parts of a typical school day. For example, the schedule may indicate that the

student will work on money at lunchtime, communication and reading skills throughout the day, and one-to-one correspondence during math by handing out dittos to each classmate. By demonstrating to IEP and school personnel that it just takes a little creativity and flexibility, the concept of inclusion becomes less threatening.

5. Supplementary Aids and Services and Related Services

All the supports and services the student and teacher will need should be reflected in the IEP. Examples include curriculum modification, assistive technology, augmentative communication, paraprofessional support, a behavior plan, staff training, staff collaboration time, psychological support and occupational, speech and physical therapy. The student's need for these supports is not grounds for a more restrictive placement unless they cannot be provided at the school. It is not enough for the school to say it does not have these services; efforts must be made to bring the services to the school, through traveling staff or some other means.

Individualized Education Program and Guidelines

IDEA mandates that an Individualized Education Program (IEP) be developed for each student by an IEP team, which includes the student's parents. When developing the IEP, the team should consider the entire range of the student's abilities and goals, including non-academic goals.

Guidelines are available on the required elements of an IEP, the individuals who comprise the IEP team and options if you disagree with the team's decisions. These guidelines are available from your school, local department of special education, through NICHCY (www.nichcy.org) or from other sources listed on the NDSS Inclusive Education Resource List. You may also contact the State Department of Education and ask for a copy of their special education policies. The Parent Training and Information (PTI) center in your state often has useful information as well. Contact NDSS if you need assistance locating these resources or search the NDSS resource database at www.ndss.org.

Inclusion Defended—Key Court Decisions

Since the passage of IDEA in 1975, numerous federal court cases have affirmed the right of students with Down syndrome and other disabilities to attend regular classes. The courts continue to clarify the intent of this law. For example, in 1983, the *Roncker v. Walter* case addressed the issue of “bringing educational services to the child” versus “bringing the child to the services.” This case established another principle of inclusion: **portability**. If special education services can be successfully delivered in a general education classroom, the law says it is inappropriate to offer such services in a segregated setting. They are also referred to as “pull-in” services.

In 1988, the U.S. Court of Appeals ruled in favor of Timothy W., a student with severe disabilities whose school district contended he was “too disabled” to be entitled to an education. The ruling against the school’s position clarified the school district’s legal responsibility under IDEA to educate *all* children with disabilities in the least restrictive environment, without exception.

The Fifth Circuit in the 1989 Daniel R.R. case established three factors for analyzing LRE decisions:

1. Did the school district make attempts to accommodate the student in a general education classroom by considering the full range of supplementary aids and services?

2. Can the student receive some academic or non-academic benefit from placement in the general education classroom?
3. Are there any negative or adverse effects to either the student with the disability or the student’s classmates?

In weighing the third factor the school district must first look for ways to minimize the negative effects, including positive behavioral interventions and supplementary aids and services.

In 1993, the U.S. Court of Appeals for the Third Circuit upheld the right of Rafael Oberti, a child with Down syndrome, to be educated in his neighborhood school with adequate and necessary support services. As in the Daniel R.R. case, the court placed the burden of proof for compliance with IDEA’s requirements squarely upon the school district and the state rather than the family. The Oberti decision established another important rule: that the school cannot justify a more restrictive placement on the basis that the student would make greater educational progress in that setting. As long as the student is getting some educational benefit in inclusion, the argument of greater educational



benefit elsewhere will not affect placement. This rule is extremely important because many educators assume that a student with Down syndrome will learn more academics in a segregated setting. This assumption is often untrue and it does not take into consideration the non-academic benefits of inclusion.

Other cases clarified a fourth factor: cost. In order for cost to affect an LRE decision, it has to be so high as to “significantly impact” the education of other students. In 1994, the U.S. Court of Appeals for the Ninth Circuit upheld the district court decision in *Holland v. Sacramento Unified School District* that indicated inclusion is the presumed starting point for placement of children with disabilities. The court found that the school district exaggerated the costs of educating Rachel Holland by attributing expenditures to her that would also benefit other students (e.g. training and paraprofessional support).

Advocates of inclusion often cite parallels to other struggles for human and civil rights, all of which have emphasized that legal, moral or philosophical segregation of subgroups of people is a violation of civil rights and the principle of equal citizenship. Many believe Chief Justice Earl Warren clarified this in the landmark *Brown v. Board of Education* decision more than four decades ago. The decision indicated that imposing separateness in education can generate a feeling of inferiority so deep that it can permanently interfere with a student’s motivation to learn and grow.

Benefits of Inclusion

Several years ago, the basic premise of special education was that students with disabilities would benefit from a unique body of knowledge and from smaller classes staffed by specially trained teachers using special teaching materials. While the premise remains valid, there is no compelling evidence demonstrating that segregated special education programs have significant benefits for students.

A number of studies over the years have reported the various benefits of inclusive education. In 1996, the National Down Syndrome Society published a research report on the inclusion of children with Down syndrome in general education classes¹. After analyzing and comparing extensive parent and teacher questionnaires, this study found that with proper support and adequate communication between parents, teachers and professionals, inclusion is a favorable educational placement for children with Down syndrome. The study also found that the learning

characteristics of students with special needs were more similar to their nondisabled peers than they were different. Moreover, teachers reported positive experiences with students with Down syndrome. They described their students as eager to learn, especially when encouraged, and reported personal satisfaction in terms of their professional achievements.

Literature documenting successful inclusion practices is significant and growing. An analysis by Baker, Wang and Walberg in 1994 concluded that “special-needs students educated in regular classes do better academically and socially than comparable students in non-inclusive settings².” Research by Hollowood et al. (1995) found inclusion was not detrimental to students without disabilities³. In fact, a national study of inclusive education conducted in 1995 by the National Center on Educational Restructuring and Inclusion (NCERI) reported academic, behavioral and social benefits for students with *and without* disabilities⁴. The study also concluded that students within each of IDEA’s 13 categories of disability, at all levels of severity, have been effectively integrated into general education classrooms. NCERI also reported positive outcomes and



high levels of professional fulfillment for teachers. A number of other studies confirming the educational and social benefits of inclusion for students with and without disabilities can be found in the reference list at the end of this publication^{5,6,7}.

In May 2000, the Indiana Inclusion Study⁸ investigated the *academic* benefits of inclusive education for students without disabilities. This study concluded that students without disabilities who were educated in inclusive settings made *significantly greater* progress in math than their peers. Although their progress in reading was not significantly greater than their peers, there was a “consistent pattern” in their scores that favored educating students without disabilities in inclusive settings.

This and other research has highlighted improved academic skills, social skills, communication skills and peer relationships as four of the most important benefits of inclusion. Nondisabled students can serve as positive speech and behavior role models for those with disabilities and students with disabilities offer their nondisabled peers acceptance, tolerance, patience and friendship. As allies and friends, peers can offer support both in and out of the classroom. These findings show that everyone involved in inclusive schooling can benefit from the experience.

The introduction to the Individuals with Disabilities Education Act acknowledges that education in inclusive settings works when the mandates of the law are followed. It states:

Over 20 years of research and experience has demonstrated that the education of children with disabilities can be made more effective by:

1. Having high expectations for such children and ensuring their access to the general education curriculum to the maximum extent possible;
2. Strengthening the role of parents and ensuring that families of such children have meaningful opportunities to participate in the education of their children;
3. Providing appropriate special education and related services, aides and supports in the regular classroom to such children, whenever possible; and
4. Supporting high-quality intensive professional development for professionals who work with such children” [20 U.S.C. 1400(5)(C)].

Inclusive education has also been shown to have a positive impact on employment outcomes. A 1988 study by Affleck et al., spanning fifteen years, found that students with disabilities educated in inclusive settings had an employment rate of 73 percent while those in segregated programs had an employment rate of 53 percent⁹. Ferguson and Asch (1989) found that the more time students with disabilities spent in regular classes, the more they achieved as adults in employment and continuing education¹⁰. More recently, in its 1997 annual report to Congress, the U.S. Department of Education noted: “across a number of analyses of post-school results, the message was the same: those who spent more time in regular education experienced better results after high school¹¹.” As nearly all employment settings are themselves inclusive, involving people with and without disabilities, it is easy to imagine why inclusive education has a positive impact on employment outcomes.

Overcoming Barriers

Many children with disabilities continue to be educated in separate classrooms or schools for all or most of the day, even when their parents believe an inclusive setting would be more appropriate.

Why does this happen? Researchers have identified a variety of perceptual, cultural and emotional barriers that cause people to resist the idea of students with and without disabilities sharing the same classroom. In some cases the barrier is simply a matter of prejudice. But there are also many more complex views, including the belief that only those students with disabilities who are closer to “normal” can or should be included and the belief that the needs of students with disabilities are unique and beyond the reach of general educators.

Others may be concerned about the need for special expertise to support the student’s academic and social learning or the potential for students with disabilities to disrupt the classroom. Concerns may also include the costs associated with special services and the idea that functional life skills cannot be addressed in general classroom settings.

Successful inclusion programs allay these concerns. In fact, models of inclusive education can be models for the education of *all* students, as they overcome barriers and offer a variety of approaches which reach a broader range of students and improve learning. These successful inclusion programs demonstrate how certain changes in the structure of school systems, classroom operations and the roles of teachers, students, parents and community members can enable equal access to general education curricula and related services for all students.

Successful Inclusion Strategies

What makes inclusive education successful? There are at least eight factors to success identified by the National Center on Education Restructuring and Inclusion National Study (1995).

1. Visionary Leadership at All Levels

A study of 32 inclusive schools in five U.S. states and one Canadian province by Villa, Thousand, Meyers and Nevin¹² indicated that the degree of administrative support and vision is the most powerful predictor of the general educator's attitude toward full inclusion. Although leadership is traditionally seen as emanating from the school superintendent or principal, this study found that the initial impetus for inclusive education and visionary leadership can come from many levels and sources—educators, related services personnel (e.g. psychologists, occupational therapists), parents, students or university or state-level projects. Whoever initiates the change for inclusion, the vision must be clearly and broadly articulated, consensus must be built and all stakeholders must be involved for it to be successful.



SUCCESSFUL INCLUSIVE SCHOOLING PRACTICES

- Diversity is valued and celebrated.
- The principal plays an active and supportive leadership role. In order to ensure that an appropriate inclusive education occurs, principals and other general education administrators must be held accountable for the progress of all students, including those with disabilities.
- All students work toward realistic educational outcomes based on high standards.
- These outcomes are not just academic. They also include social, behavioral and independence goals.
- Everyone feels accepted and supported by their peers and other members of the school community.
- There is an array of services, including the supports necessary for students with disabilities to access extracurricular activities.
- Flexible groupings, authentic and meaningful learning experiences and developmentally appropriate curricula are accessible to all students. Scheduling of the student's classes must be based on the student's needs and not on the basis of which teachers are willing to accommodate a student with disabilities.
- Research-based instructional strategies are used and natural support networks are fostered for students and staff.
- Staff have collaborative roles and teachers work together in and out of the classroom. To achieve meaningful collaboration, staff must be given high quality training and sufficient planning time.
- There are adequate accountability measures to ensure that all individuals fulfill their responsibilities.
- There is access to necessary technology and physical modifications and accommodations.
- Parents and caregivers are embraced as equal partners. One way for parents to implement this partnership is to become involved in developing their school's annual improvement plan.

2. Educator Collaboration

Reports from school districts across the United States clearly indicate that successful inclusive education does not require that every teacher have the expertise to meet the educational needs of every student. Rather, giving teachers (both regular and special education) the opportunity to collaborate and develop new skills is a prerequisite for success. In a study of more than 600 educators, Villa and colleagues found that the degree of collaboration was the only common variable indicating supportive attitudes toward inclusion. Successful collaboration strategies include building planning teams, scheduling time for teachers and other professionals to work together, recognizing teachers' problem-solving skills and using teachers as front-line researchers¹².

3. Refocused Use of Assessment

Historically, up to 50 percent of a special educator's and sometimes a psychologist's time has been spent on non-instructional assessment and administrative paperwork related to a student's eligibility for special education services. Inclusive schools and districts report that they are moving toward more authentic assessment approaches that are less about administration and more about how students learn and what their potential is. These assessments shift the focus to the student's work and performance records, among other elements, to identify strengths, interests and communications preferences. The objective is to determine how the student is smart, rather than how smart the student is. This approach establishes a personal learning profile, revealing what the student has and has not yet learned.

4. Support for Students and Staff

Support resources, such as speech therapy, for students with disabilities may be integrated into the general education classroom. These are referred to as "pull in" services, versus "pull out" services that remove students from the general classroom. Peer support such as buddy systems or "circles of friends," computer-assisted technology and part-time or full-time paraprofessional support are a few ways to integrate services. The approach used is "only as much support as needed" in order to avoid imposing too much or the wrong kind of help on these students. Thus, a paraprofessional may be part of a team, but won't be assigned exclusively to a student with a disability. This "only as much as needed" principle recognizes that support services are supposed to be educationally necessary to enable a student to take full advantage of the curriculum and allows all students to benefit from additional support in the classroom.

5. Effective Parental Involvement

Meaningful parental participation is critical. Schools successfully practicing inclusion provide family-support services and opportunities for collaboration and communication. It is often the parents or caregivers who assume the role of advocate for a child. The 1997 reauthorization of the IDEA reinforced parental participation by requiring full engagement of parents in all decisions involving their child's eligibility and placement. IDEA also requires that parents be informed of their child's progress as frequently as parents of children without disabilities and according to district standards applying to all students.

6. Collaborative Teaching Models

National studies have identified at least five collaborative teaching models that have been successful in inclusion programs.

- **Co-Teaching.** In the co-teaching model a special educator co-teaches alongside the general education teacher.



- **Parallel Teaching.** Parallel teaching assigns a special educator (and other support personnel) to work with a sub-group of special education students in the general classroom.
- **Consultation.** Using the consultation model, a special educator, with a support person, helps the general educator teach students with disabilities in their regular classroom.
- **Teaming.** With the teaming model, a special educator teams up with a support person and one or more general education teachers to share responsibility for all students in the inclusive classroom.
- A **dually licensed** teacher with general and special education certification teaches all students in an inclusive classroom with assistance from other support personnel such as a speech and language therapist.

7. General Education “Best Practices”

Inclusion is successful for both typical and disabled students due to two important ideas. First, classroom adaptations designed for students with disabilities are often also helpful to students without disabilities. Second, the instructional strategies for inclusive education are the same good-teaching practices recommended by general educational reformers and researchers. Such strategies include cooperative group learning (i.e., a group of students with diverse skills and traits working together), students supporting other students, activity-based learning, paraprofessional support in the classroom, diversified instruction and the use of instructional technology.

When adaptations are necessary there are many options. Students can pursue the same curriculum but proceed at multiple levels and with different objectives. For example, a math class in which some students do basic computation while others work on complex word problems. Or students can be taught the same lesson but the objectives might be different. For example, a team-based biology lab project including students with and without disabilities might stress science objectives for some students, while for others the lab is a lesson in communication and social skills.

8. Funding

In the past, funding formulas encouraged segregated placements for special education students. Under IDEA (as amended in 1997) funds must follow the student regardless of placement and must be sufficient to provide necessary services.

Lack of adequate personnel or resources cannot be used as an excuse by any school district to relieve them of their obligation to make a free appropriate public education available to students with disabilities in a least restrictive environment. Schools are responsible for ensuring that there are sufficient qualified teachers as well as appropriate support services in the general education program.

Inclusive education programs are usually no more expensive than segregated models. However, districts should anticipate one-time conversion costs, particularly for investments in planning and professional development.

The Future of Inclusion

Tremendous progress has been made since the passage of the first special education law in 1975 to guarantee students with disabilities full educational rights and opportunities. These advances would not have been possible without the parents of children with disabilities and, increasingly, the individuals with disabilities themselves, who have always been the most visionary, vocal and effective advocates of the inclusion movement.

It is the parents and self-advocates who have rejected institutional placement, started the first schools for students with moderate and severe disabilities and mounted national advocacy campaigns to secure the federal laws that brought us mainstreaming and later inclusion.

It is understandable that families have led the movement because inclusion is not just about philosophy, educational practices or legal statutes. Inclusion is about children and their families -- their dreams and their futures.

GLOSSARY

Free and Appropriate Public Education (FAPE). A “free and appropriate public education” is guaranteed to children with disabilities under IDEA. The law states that all children with special needs, ages three to 21 years of age, must receive special education and related services in accordance with state-mandated standards at public expense.

Inclusive Education/Inclusion. Inclusion is an educational process by which all students, including those with disabilities, are educated together for the majority of the school day.

Individualized Education Program (IEP). An “individualized educational program” is a document that must be created for each student with a qualifying disability attending public school, as mandated by the Individuals with Disabilities Education Act. The IEP specifies the special education and related services that a child with a disability will receive. Produced and periodically reviewed and revised in a meeting with an IEP team, the IEP is intended to provide both long-term and short-term goals and establish the educational placement and necessary supplementary aids. The required contributors and components of the document are specified by IDEA.

Individuals with Disabilities Education Act (IDEA). IDEA gives children with special needs the right to receive special education and related services in school. The regulation requires that a free and appropriate education be provided to children with disabilities and that they are entitled to learn in the least restrictive environment.

Least Restrictive Environment (LRE). IDEA requires that a child with special needs be educated in a setting that provides for maximum interaction with nondisabled peers. IDEA states specifically that education for students with disabilities should take place in the “least restrictive environment.”

Mainstreaming. Mainstreaming is an educational practice where a student from a separate special education class visits the regular classroom for specific, usually non-academic, subjects.

Portability. Portability refers to the ability to successfully deliver special education services in a general education classroom. Under IDEA, it is inappropriate to provide portable services in a segregated setting unless it is the parent’s preference.

Related Services. Related services are transportation and developmental, corrective and other support services that a child with disabilities requires in order to benefit from an education. Examples of related services are speech pathology and audiology, psychological and counseling services, physical and occupational therapy, recreation, interpreters for the hearing impaired and medical services for diagnostic and evaluation purposes.



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