The Continuing Dilemma of Educating Children with Mild Learning Problems


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Despite the relatively great volume of professional debate regarding the elimination of categories within the field of special education, much effort continues to be invested in defining various subpopulations of exceptional children. Categorical definitions of exceptionalities are still being used for the purpose of securing funds from governmental agencies, training professionals at the preservice level, as well as providing specific educational services. Unfortunately the profession of special education has been unable to resolve the conflict between this trend and the opposing trend of noncategorization. The practice of more restrictively defining various subgroups of exceptional children has centered around attempts to include all persons who should be subsumed under a certain definitional category while excluding those who do not belong to this particular group. Noncategorization, on the other hand, has revolved around efforts to eliminate many of the traditional categories associated with special education, e.g., educable mentally retarded, learning disabled, etc. Proponents of non-categorization have argued that the restrictiveness of present definitions of exceptionalities causes children with a number of similarities to be artificially separated from each other in many educational settings.

Another argument advanced by proponents of a less categorical system is that as a result of the increasing specificity of definitions and the accompanying rigid administrative procedures, a disturbingly large number of children with mild learning problems are being "defined out"
of eligibility for the educational assistance they need. That is, these children are relegated to an educational demarcation zone (DMZ) which disenfranchises them from the provision of appropriate educational services. The purpose of this paper is to examine how this DMZ has been created and to discuss the resultant implications for categorical grouping and special education programming.

Creation Of The Gap In Services

The creation of the DMZ eligibility gap is based on the existence of several traditional educational categories used in classifying children with mild learning problems. These categories include children who are now classified as educable mentally retarded (EMR), learning disabled (LD), emotionally disturbed/behaviorally disordered (ED/BD). Each of these categories presupposes that children classified as EMR, LD, or ED/BD have certain specific characteristics which are unique to that group and that children with these specified characteristics can be homogeneously grouped for instruction. Yet, Lilly, Hallahan and Kauffman, Hewett, and Forness have argued convincingly that children placed in these traditional categories share a number of similarities in the are as of etiological backgrounds (e.g., genetic, environmental, and largely unknown factors which cause a certain disability to be manifested), characteristics (e.g., underachievement and adjusted problems) responsiveness to similar teaching methods. Despite these commonalities however, many special education policy makers have insisted on arbitrarily dividing the above mentioned exceptional children into discrete categorical groups.

EMR children are still identified in many instances primarily through the use of IQ scores. The American Association on Mental Deficiency (AAMD) attempted to curb this practice by indicating in its 1973 revision of the definition of mental retardation that a person should not be
considered mentally retarded unless he/she shows deficits in both the areas of intelligence and adaptive behavior. However, as a result of the AAMD's 1973 revision and the subsequent lowering of the IQ cut off point from 85 to 70, an estimated 13% of the school population has become ineligible for mental retardation services. Therefore, many children at the upper limits of this former borderline category would now need to be classified as learning disabled or emotionally disturbed in order to receive special educational services.

The most widely accepted definition of learning disabilities, posited by the National Advisory Committee on the Handicapped and subsequently incorporated into Federal legislation, stated that among other characteristics a specific learning disability is not due primarily to mental retardation, emotional disturbance, or environmental disadvantage. The definition has been criticized on numerous occasions because of this exclusion clause which has the effect of telling what a learning disability IS NOT rather than what it is.

In the area of emotional disturbance/behavior disorders, a number of writers have strut in vain to provide a definition which would gain wide acceptance. However, due to the diversity of theoretical viewpoints, and concerned service agencies in this field, the sole concensus emanating from opinions of professionals in this field has revolved around defining an ED/BD child as a "deviant kid" who displays a number of maladaptive behaviors or shows evidence of some internal conflict. The implication here is that although the ED/BD child's maladaptive behaviors or emotional problems may cause him or her to develop certain learning problems, this child can be distinguished from an EMR or LD child because these emotional difficulties serve as the primary source of the child's problems.

The question which this paper seeks to address is: What happens to these children who fall between the cracks of present and proposed definitions? The group of children
being referred to are "too bright" to be eligible for services for the retarded, and yet are paradoxically "too retarded" to be eligible for services for the learning disabled, and/or are not "deviant" enough to be eligible for services for the emotionally disturbed. MacMillan has succinctly summarized the problem at hand, particularly as it relates to funding. He stated: "a recurring problem in special education when a state provides funding for exceptional children by categories (e.g., blind, deaf, retarded) has been that some children with learning problems do not fit any of the existing categories, and thereby cannot be given the needed assistance. In essence, such children 'fall between the keys' and require that another category be created lest these handicapped children go unaided. Creation of new categories has led to a proliferation of categories, and still some children in need of help fail to quality for any of these categories." As a result of the above noted situation then, it would seem that many of these children are assigned by default to an educational DMZ (this might also be termed a "Don't Mention Zone") on the basis of some arbitrary criteria such as their IQ testing behavior and/or the relative degree of their personal and social adjustment problems. The DMZ children are placed in a "between the cracks" category without due regard to their instructional needs and within which appropriate specialized education may not be forthcoming.

As a result of this awkward definitional arrangement, educators may actually be dealing with at least four groups of children, Le., EMR, LD, ED/BD, and DMZ. Extrapolating from descriptions of other mildly handicapped children, it should be expected that several characteristics of the DMZ group can be identified. The most apparent characteristic of the DMZ group would be their intelligence level, which would be likely to fall in the 70-85 range dependent upon state regulations which define other exceptionalities. If the normal curve is to be trusted, this group may include approximately 13% of the school age population.
Another probable characteristic of this group would be the relatively high frequency of learning and behavioral disorders occurring within the group. In many instances the learning problems of this group are associated with inefficient learning approaches, i.e., the individual in this situation may resort to random trial and error rather than developing a consistent strategy for solving problems; poor and/or inefficient teaching techniques; and, conflict with the curriculum, i.e., for some reason the characteristics of the student and the content of the curriculum do not match, hence placing the student at an educational disadvantage. At the same time, many of these same children will exhibit behavioral problems which are intricately associated with their reduced achievement expectancy and failure in school. Therefore, a substantial number of these children are likely to be in need of direct or supportive special education services.

DMZ: Implications For Special Education

At this point, it should be quite apparent that the key to the DMZ child's problem lies within the patterns of funding, placement, and teacher training which presently exist. Obviously too, the identification of the DMZ subgroup does not serve to call attention to the need to create an additional category of exceptionality, but rather to draw attention to the liabilities of the current system of delivering educational services.

In order to avoid the creation of arbitrary problems such as those of the DMZ pupil, a drastic change must occur in the perceptions of educational professionals since categories have become firmly rooted in the American school tradition. There is an apparent need to reconceptualize the basis on which exceptional children are grouped in schools and the ways that educators view their needs. This new perception should be consistent with an increased emphasis on the specific needs of children in conjunction with the mandate of P.L. 94-142 and recent court decisions for the least restrictive
As Moss has indicated, the field of special education should be at least initially moving toward a reduction of categories rather than a total elimination of present categories. Thus, one possible solution to the present dilemma of all exceptional children who fall below the norm in many areas is to reduce many of the present categories for children with relatively minor educational problems to the simple category called mildly handicapped. The mildly handicapped group would include children now labeled EMR, LD, or ED/BD as well as other learners (e.g., DMZ) who are not now receiving needed special services.

A revised categorical system such as the one discussed above would satisfy the funding demands of legislators who require specific information as to the types of children to be served through proposed programs. At the same time, children would not be caught between the cracks of rigid definitions of exceptionality. Since for example a classification as mildly handicapped would not be tantamount to being placed in a special class, many of the problems associated with present classification systems could be avoided, i.e., a child would be classified mainly for funding purposes, but this classification would not interfere with the development of a specific individual educational program (IEP) to meet the needs of the particular child.

An obvious by-product of the revised system would be the lessening of the effects of stigmatizing labels, especially for minority and culturally different children. Shifting diagnostic goals away from specifically classified subgroups would have the effect of placing the emphasis on the assessment of educationally relevant strengths and weaknesses.

Within the framework of the generic category of "mildly handicapped", specific educational strategies could be employed to assist in the prevention and remediation of mild learning problems. The following specific recommendations are offered as guidelines for the above mentioned attempts at remediation and prevention of learning problems: provide
early services to "high risk" students; develop and implement alternative placement options which are geared to fit the needs of the child rather than vice versa; provide remedial services to children who do not develop needed skills; coordinate services throughout the child's academic career. Although these approaches have been utilized successfully within the field of special education for a number of years, the key in this case would be to provide them according to individually-based rather than group-based concerns.

In line with the first recommendation to provide early services to high risk students, Forness has indicated that to accomplish this objective a systematic and comprehensive early identification program must be devised and implemented. The goal at this time is to focus attention on individually relevant strengths and weaknesses which will allow for the development of a responsive intervention program.

Early intervention will assist in the reduction of some specific problems encountered by the mildly handicapped, but some children will be missed or will not exhibit problems at the time of screening. Therefore, the second recommendation is to implement alternative placement options which are geared to fit the needs of the individual child. Again non-categorical or mildly handicapped categorical concerns dictate the establishment of a full array of services as has been detailed by Deno and others. Alternatives should be viewed on a continuum from full-time special class to full-time regular class with the assumption that there is an appropriate niche for each child. Administrative expediency or lack of coordination between special and general education has so far interfered with the full realization of the spirit of P.L. 94-142 as it relates to this concern.

The third recommendation to provide remedial services to those who fail to develop skills is consistent with current educational practices in most special education programs.
expanded inservice training for regular classroom teachers who will teach the handicapped learner.

Although it still can be questioned whether special education will ever evolve to solely a support role as was predicted by Dunn in 1968, the responsibilities for educating mildly handicapped and all exceptional children must be shared by all educators. The elimination of the emphasis on me dico-clinical categories and the substitution of educationally relevant terminology should help to bridge the gap.

Conclusions

Many of the negative factors associated with the definitional problems mentioned above have caused dissatisfied educational consumers to resort to litigation and other pressure tactics in order to have a label such as mental retardation removed from a child's school records, or to gain access to needed educational services. Much of this adverse pressure has focused on the many problems associated with definitions of exceptionality developed by educators. Yet, educators have not developed such definitions for the sole purpose of labeling or segregating children. Rather, the labeling issue has frequently boiled down the intricate concerns associated with the alleged adverse effects of labels on the one hand, and the need to secure category-tied Federal and State monies on the other.

Although the categorical system has a long history of utilisation in the public schools, its days may be numbered since quite a few children are still not receiving needed services. The burden of providing these needed services must now be shared by all concerned parties. Special educators should work to reduce many of the now existing categories into a system that more closely fits the present reality. General education must also increase its flexibility and thus enhance opportunities for all handicapped children to participate in integrated programs regardless of fable. Finally,
5. Begin the measurement project with thought provoking questions, brainstorming estimation, and other preliminary activities. Predicting or guessing the expected outcomes, before beginning the project, will often make it a more exciting, motivating and meaningful activity.

Continued from page 60

the Federal and State governments must have the foresight to alter funding patterns in order to best meet the needs of each individual child. Until all three parties can develop a viable working relationship, there will always be a group of mildly handicapped children who will "fall between the cracks" and thereby be relegated to an educational DMZ.

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