

Families as Faculty

Student Handbook

University of New Mexico

UNM-Farmington

Western New Mexico University (Silver City)

Western New Mexico University (Deming)

WNMU-Graduate Studies Center Gallup

New Mexico State University

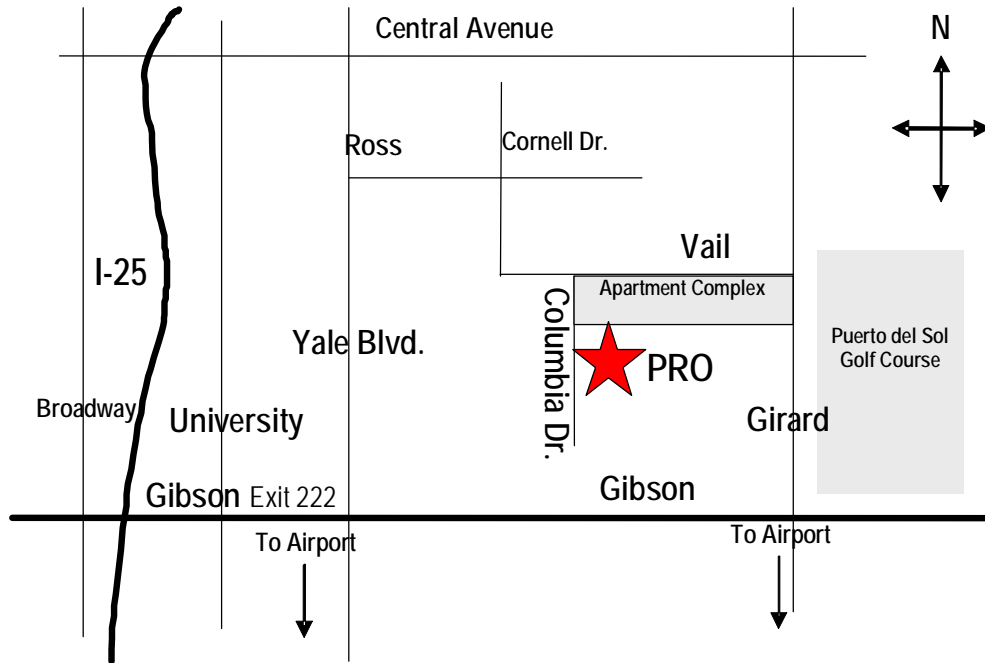
Eastern New Mexico University

Central New Mexico Community College



Parents Reaching Out
Your One Stop Resource for a Stronger Family

How to Find Us



From I-25—take the Gibson Blvd Exit (222) and go East on Gibson. Turn left at the third stop light (Girard). Turn left on the first street—Vail. Go one block to Columbia. Turn left on Columbia. Go about a half of a block (past brown apartments). Parents Reaching Out is the concrete building on the left. Welcome!

Parents Reaching Out

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1-800-524-5176
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Welcome to Families as Faculty!

The materials in this handbook will provide you with information about the Families as Faculty experience, Parents Reaching Out the hosting organization, information and resources for families and educators about special education, home school communication, and essays and poems by families who have children with special needs. We hope that each in their own way, will help support you in your class work and prepare for your family visit.

We are pleased to have so many supportive and enthusiastic colleagues around the state who have helped Families as Faculty to grow and continually evolve and deepen. We also want to say “*thank you*” many times over to the more than 170 host families in communities throughout New Mexico who are critical in making this experience a memorable and often transformational learning experience for students.

Families as Faculty has four parts: 1. an orientation session in which you will learn the guidelines for your family visit and hear an adjunct family faculty member’s experiences having a child with special needs and navigating the special education system, 2. a family visit with a partner, 3. writing a reflection paper and, 4. a wrap up session during which we will discuss your experience and reflect upon the challenges and rewards of partnering with families and its implications for your classroom practice.

We look forward to meeting with you and arranging a successful family visit.

Families as Faculty Staff

Let us put our minds together
and see what
life we can make
for our children.

Chief Sitting Bull



Parents Reaching Out is funded through a grant from the U.S. Department of Education, Office of Special Education Programs as the Parent Training and Information Center for New Mexico. The contents of this handbook were developed under the grant. However, the contents do not necessarily represent the policy of the US Department of Education, and you should not assume endorsement by the Federal Government.

Families as Faculty Student Handbook

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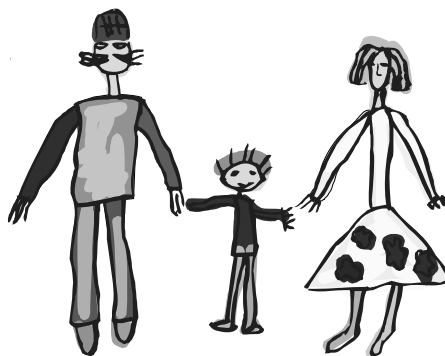
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"The way schools care about children is reflected in the way schools care about the children's families. If educators view children simply as students, they are likely to see the family as separate from the school. That is, the family is expected to do its job and leave the education of children to the schools. If educators view students as children, they are likely to see both the family and the community as partners with the school in children's education and development. Partners recognize their shared interest in and responsibilities for children, and they work together to create better programs and opportunities for students."

Dr. Joyce Epstein, "Caring for the Children We Share"



Overview

Families as Faculty (FAF) is often called a transformational experience by students who participate in this program. This innovative component of undergraduate and graduate special education course work is a collaborative program between Parents Reaching Out (PRO), New Mexico's Parent Training and Information Center and seven New Mexico universities. At its center, is a student visit with a family who has a child with special needs. Students learn first hand from host families about their experiences, both positive and negative, with the special education system. Families as Faculty provides students with a hands-on, real life experience at a crucial time in their teacher preparation program.

As a result of this personal and often intimate visit, students leave with an appreciation and better understanding of the joys and challenges of having a child who has special needs. They also frequently come away with thoughts about their own attitudes about children with special needs and their families, questions about how to effectively collaborate with families, and their capacity to effect positive change on the system to better serve children.

Families as Faculty provides a framework and practicum to support the requirements of family communication and collaboration as outlined in the New Mexico three-tiered licensure and teacher competencies (seven and nine). This experience reinforces the value of family and educator connections to improve student outcomes as measured by Indicators 5, 6 and 8 of the NM State Performance Plan (SPP) that is an integral component of the Educational Plan for Student Success (EPSS) required for every school district.

Families as Faculty is an adaptation of a family centered care curriculum for medical students based on the following principles: *collaboration, information, respect, support, flexibility, strengths, empowerment and choice*. Families as Faculty was adapted for educators using the precepts of the Individuals with Disabilities Education Act (IDEA). This program reaches nearly 300 students a year on seven campuses across the state: University of New Mexico, University of New Mexico-Farmington, Western New Mexico University (Silver City and Deming), Western New Mexico University-Graduate Studies Center, Gallup, New Mexico State University, Eastern New Mexico University and the Central New Mexico Community College.

Goals

It is our expectation that students will come away from their visit with 1) a better understanding of the home-school relationship; 2) an appreciation of the Least Restrictive Environment and its possibilities; 3) a view of families as resources from whom they can learn; 4) an understanding that all children and families are different, each with unique strengths, values, beliefs and challenges and, 5) a consideration of their own personal beliefs, values and attitudes about children, families, the educational system and their capacity to effect positive change in it.

Families describe this program as empowering for them and their children and as an opportunity to make a difference in the system, as one host family said, "two teachers at a time." They also have a chance to teach students about a particular disability, how the IDEA law is implemented in real life and strategies that could be helpful in the classroom. Students often describe this experience as one of the most important in their coursework. "Without this experience," said one student, "I am afraid I would have been a teacher who would have turned my back on children with special needs."

Connecting Students with Families

Host families are recruited and trained by Parents Reaching Out. They are required to participate in a two-hour orientation, Host Family 101. During this hands-on session, families become familiar with program goals, practice how to frame their family story around one or more of the goal areas, and are offered ideas to help ensure a successful visit.

An Adjunct Family Faculty and a FAF staff member conduct a two-hour orientation session for students. This family faculty is an experienced host and has completed an eight-hour training and mentoring program with the FAF staff. During the session, program goals are discussed, a family story is shared highlighting each program goal, tips for a good visit are offered, and assignments are made.

The assignment is in the form of an invitation from the family. It contains contact information, favorite family activities, the names and ages of children in the family and best times to make contact calls. No disability or diagnosis is provided. It is our goal that students visit the family with an open mind and a willingness to ask questions. Although students are asked to prepare for the visit and have questions in hand when they go, they are instructed that this is not an interview, but rather an informal meeting.

Visits are planned for two hours and generally take place at the home of the host family. Families determine when and where they will meet with students, and who among family members will be present. It is important that the visits are held at a place of the family's choosing. Being in a familiar setting helps them to manage the meeting and the environment, creating a shift in role for students.

Impact of Families as Faculty

Listening to family stories helps students understand the impact a teacher and the system can have on child and his or her family. In addition, they also come to see the child a member of a family, as someone who is loved, has interests, conflicts and needs, just as any other child might. Students have an experience with a family to talk about more than grades and behavior.

A two-hour discussion with students is held when the visits are completed. An Adjunct Family Faculty and FAF staff member facilitate this session. Each student has the opportunity to talk about the visit—what they learned from the family, the child, a disability, the system and implications for their future classroom practice.

Families as Faculty Goals

Participation in Families as Faculty has opened my eyes in ways that no amount of classroom lecture or library research ever could. I was allowed to experience, rather than discuss real life issues with a family from my own community. Student

Goal One

To increase understanding of the home-school relationship

I learned that the only person who suffers from a broken relationship between parents and educators is the child. Student

Goal Two

To expand understanding of Least Restrictive Environment and its possibilities

He won't ever read or write, but there is so much he gains from being in the classroom. . . He can draw and he can teach students about sharing, laughing, and about loving and helping one another. I never realized how strongly I felt about inclusion until I met (Bob). Student

Goal Three

To recognize and acknowledge personal beliefs, values and attitudes (about disabilities, special education and families)

I learned so much from my family that afterwards, I just had to sit down and reevaluate so many things about being a teacher Student

Goal Four

To provide an opportunity to view families as teachers from whom educators can learn

Parents and students themselves know the most about their needs and desires. My job is to help students and families explore the possibilities that will allow them to achieve their dreams.

Student

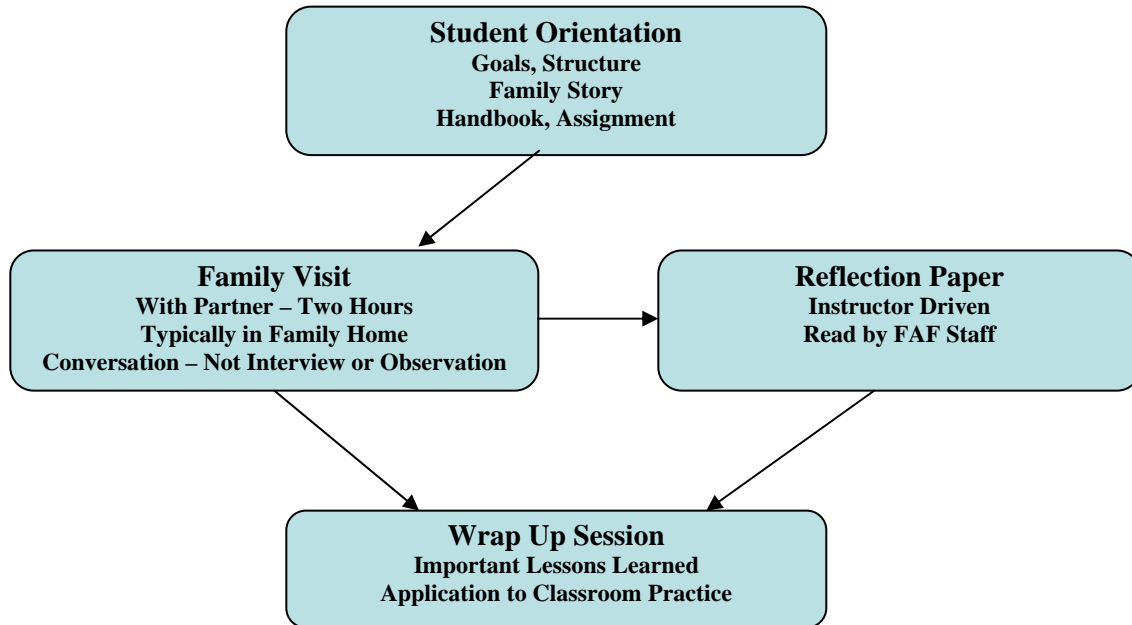
Goal Five

To better understand that all children and families are different, with unique strengths, values, beliefs and challenges

I was humbled by their positive approach. I have heard people wonder if they would have the strength to raise a child with disabilities. After spending time with (Connie's) family, I am more convinced than ever that we all have the strength, what we may be lacking is an open mind.

Student

Families as Faculty – At a Glance



Families as Faculty Continues to Grow

| Year | Sites | Classes | Students | Host Families |
|---------|-------|---------|----------|---------------|
| 2001-02 | 2 | 6 | 139 | 40 |
| 2002-03 | 5 | 12 | 284 | 80 |
| 2003-04 | 5 | 15 | 395 | 92 |
| 2004-05 | 5 | 14 | 300 | 170 |
| 2005-06 | 6 | 15 | 320 | 185 |
| 2006-07 | 5 | 16 | 260 | 190 |
| 2007-08 | 7 | 26 | 297 | *140 |

Since 2001, Families as Faculty has expanded from two (2) to seven university sites throughout New Mexico. Over this period of time, a total of 1995 university students have benefited from the learning experiences gained by visits with Host Families.

* Note: The decrease in Host Families during 2007-08 is linked to changes in family dynamics that occur as children become young adults and transition to independent life in their community. We continue to recruit new families who are willing to play a key role in the training of future educators.

Students come into our home. They meet real kids with challenges. They hear real stories of experiences with the school system. Some good, some bad.

Family Faculty

The Power of Story Telling

Their story, yours, mine – it's what we all carry with us on this trip we take, and we owe it to each other to respect our stories and learn from them.

Everyone has a story to tell. Our stories reveal how we think about ourselves, how we define and give meaning to our experiences and how information is selectively passed on from one generation to the next. Our stories are shaped by what we pay attention to. And what we pay attention to is influenced by gender, age, culture, family history, values and expectations for the future.

The Families as Faculty experience is based on the central principle of story telling, a language common to families everywhere.

Teachers too, are familiar with story telling. Many home-school interactions begin with a description of the child's experience: the "story" of the problem. Before strategies can be developed and put into place, it is our belief that educators must first understand the meaning of the child's behavior in the larger context of his or her life.

By inviting students into their homes and communities, families have the opportunity to teach the kinds of lessons that can't be learned in school or at a therapy session. There, the emphasis is on the diagnosis or problem. In the home and community, the emphasis is on living life to the fullest.



A possible starting point for our conversations

For conversations to take us to a deeper realm, I believe we have to practice several behaviors. Here are the principles I've learned to emphasize before we begin a formal conversation process.

We acknowledge one another as equals.

We try to stay curious about each other.

We recognize that we need each other's help to become better listeners.

We slow down so we have time to think and reflect.

We remember that conversation is the natural way humans think together.

We expect it to be messy at times.

By Margaret Wheatley
from *Turning to One Another*
Berrett-Kohler Publishers, Inc. 2002

People First Language



Language can reflect how people see each other. That is why the words we use can hurt. It is especially important to use language that reflects the dignity of people with disabilities—words that put the person first, rather than the disability. For example, are you myopic or do you wear glasses? Are you freckled, or do you have freckles? Are you handicapped, or do you have a disability?

People First Language describes what a person has, not what a person is. Those with disabilities are people with abilities and are more like an average person than different from him or her.

Using “handicapped” and even “disabled” typically evokes negative feelings (sadness, pity, fear and so on) and creates a perception that people with disabilities are all alike.

They are not.

The disability community is the largest minority group in the United States and is all-inclusive. It includes people of either gender, all ages, religions, ethnic background and socioeconomic levels. Unique to the disability community is that it is the only minority group that anyone can join in the split second of an accident. If you were to acquire a disability, how you would want to be described?

People First Language — it's the person first, then the disability.

| SAY | INSTEAD OF |
|-----------------------------------------------|-------------------------------------|
| <i>A person with...or a person who has...</i> | |
| a disability | disabled, handicapped |
| a cognitive disability | mentally retarded |
| autism | autistic |
| Down's Syndrome | Down's, retarded |
| has a physical disability | crippled; paraplegic |
| congenital disability | birth defect |
| typical | normal, healthy |
| brain injury | brain damage |
| accessible parking | handicapped parking |
| Cerebral Palsy | CP, palsied, spastic |
| a developmental delay | slow, stupid, retarded |
| a learning disability | learning disabled, stupid, retarded |
| | |
| SAY | INSTEAD OF |
| uses a wheelchair | is confined to a wheelchair |
| receives special education services | is in special education |
| needs...or... uses... | has a problem with... |
| a person who is blind | a blind person, can't see, blind |
| a person who is deaf | deaf, hearing impaired, mute |

Reminders for Your Visit

Before You Call

- ✓ Have three dates and times that you and your partner have agreed on before you call your host family. Allow them to take the lead on what date and time will be the most convenient for their schedule.
- ✓ Review the phone tips on your invitation before calling your host family.
- ✓ Call your host family within ONE WEEK of the orientation.

The Call

- ✓ Be sure to leave your name and telephone number with your host family.
- ✓ Tell your host family that your partner (his/her name) will be calling to confirm the visit.
- ✓ Call your host family to confirm your appointment at least TWO days before your visit.

The Visit

- ✓ Go with an open mind.
- ✓ **Keep family information confidential.**

Tips for a Successful Visit

Follow-up is very important. If you can not reach your host family within ONE WEEK, contact Parents Reaching Out so that we can help you arrange a visit. (See your invitation for contact information.)

Be flexible about the day and time to meet with your partner and host family.

ONLY Families as Faculty staff can change your host family assignment. You are expected to go with your partner(s) to the family to whom you are assigned.

Be understanding of the busy schedules and the demands of everyday family life. You may not be able to meet the child(ren) or the entire family during your visit.

The focus of the visit is the family's experience, NOT the child's disability.

Your assignment is to listen and observe and not to make assumptions or judgments about what you hear or observe.

Be thoughtful about the questions you ask about family life or the child's disability.

Be sensitive in your responses to what the family says or does. Take care in making comments about family life or the child's disability. Be thoughtful in your remarks and choice of words.

Remember, this is **NOT** an interview. It is a time for your host family to share their experiences. **BE AN ACTIVE LISTENER!**

Host Family Evaluation

Note: This evaluation form is sent to your host family. They complete and return it after your visit with them. A copy is shared with your instructor and the original is kept at Parents Reaching Out for evaluation purposes.

Please return by _____

| |
|------------------|
| Instructor _____ |
| Date _____ |

Please be as forthcoming as possible. Your responses are also shared with the university faculty and to help us improve Families as Faculty. Thank you! You may use the back of this form to provide any additional information or feedback.

Name _____ Visit Date _____ Number of Family Members Present _____

Student A _____ Student B _____ Student C _____

Would you like to discuss this visit with a FAF staff person? _____ Yes Best time to call: _____

| Please answer the questions below for each student using a scale of 1 to 4. 1 No, not at all 3 Mostly 2 Somewhat 4 Yes, very much so | Student A | | | | Student B | | | | Student C | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----|----|---|-----------|----|----|---|-----------|----|----|---|
| | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1. Was the student prepared for the visit? | | | | | | | | | | | | |
| 2. Did the student have an open attitude and learn from you and your family? | | | | | | | | | | | | |
| | Yes | No | NA | | Yes | No | NA | | Yes | No | NA | |
| 3a. Did the student contact you in a timely and courteous way to arrange the visit? | | | | | | | | | | | | |
| 3b. Did the student call and confirm the visit? | | | | | | | | | | | | |
| 3c. Did the student arrive on time for the visit? | | | | | | | | | | | | |

4. What were the two most important ideas that you shared with the student(s)?
- a. _____
- b. _____
5. Did you talk about home-school relationships and how they affect your child and your family? Yes No
6. Did you talk about your child's experiences with Least Restrictive Environment? Yes No
7. Was your child present for any or all of the visit? Yes No
8. What, if any, resources or materials did you share with students? Please describe.

Comments about the visit.

Expanding What We Know



Individuals with Disabilities Education Act (IDEA)

IDEA as a Cultural Statement

IDEA encompasses six principles of law:

1. Zero reject or the right of every child to education
2. Nondiscriminatory assessment, or the right to a fair evaluation to determine appropriate educational placement
3. Individualized and appropriate education to ensure that education is meaningful
4. Least restrictive environment to ensure that children with disabilities can associate with typical peers to the maximum extent appropriate to their needs
5. Due process to ensure the child's right to challenge any aspect of education
6. Parent participation, which allows parents to participate in the education decision-making process

By Maya Kalyanpur and Beth Harry
Culture in Special Education
Paul H. Brooks Publishing Co. Baltimore, 2004

Disabilities as Defined by IDEA

The Education of the Handicapped Act, Public Law (P.L.) 94-142 was passed by Congress in 1975 and amended by P.L. 99-457 in 1986 to ensure that all children with disabilities would have a free, appropriate public education available that would meet their unique needs. In 1990, the amended law changed to Individuals with Disabilities Education Act (IDEA). In 2004, IDEA was reauthorized and the name preserved as the “Individuals with Disabilities Education Improvement Act of 2004.”

The following definitions are used to qualify children and youth for special education services as defined by IDEA 2004 and regulations 34 CFR Sec. 300.8.

- 1. AUTISM:** A developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age three, that adversely affects educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or changes in daily routines, and unusual responses to sensory experiences.
- 2. DEAF-BLINDNESS:** Concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness.
- 3. DEAFNESS:** A hearing impairment which is so severe that a child is impaired in processing linguistic information through hearing, with or without amplification that adversely affects a child's educational performance.
- 4. EMOTIONAL DISTURBANCE:** A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance: (A) an inability to learn which cannot be explained by intellectual, sensory, or health factors; (B) an inability to build or maintain satisfactory interpersonal relationships with peers and teachers; (C) inappropriate types of behavior or feelings under normal circumstances; (D) a general pervasive mood of unhappiness or depression; or (E) a tendency to develop physical symptoms or fears associated with personal or school problems. *(The term includes children who have schizophrenia. The term does not include children who are socially maladjusted, unless it is determined that they have a serious emotional disturbance.)*
- 5. HEARING IMPAIRMENT:** An impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance but that is not included under the definition of "deafness."
- 6. MENTAL RETARDATION:** Significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period, that adversely affects a child's educational performance.

- 7. MULTIPLE DISABILITIES:** Concomitant impairments (such as mental retardation-blindness or mental retardation-orthopedic impairment, etc.), the combination of which causes such severe educational problems that the child cannot be accommodated in a special education program solely for one of the impairments. The term does not include children with deaf-blindness
- 8. ORTHOPEDIC IMPAIRMENT:** A severe orthopedic impairment that adversely affects a child's educational performance. The term includes impairments caused by a congenital anomaly, impairments caused by disease (e.g. poliomyelitis, bone tuberculosis), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures).
- 9. OTHER HEALTH IMPAIRMENT:** Having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that—(i) is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; and (ii) adversely affects a child's educational performance.
- 10. SPECIFIC LEARNING DISABILITY:** A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations including conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include children who have learning problems that are primarily the result of visual, hearing, or motor disabilities, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage.
- 11. SPEECH OR LANGUAGE IMPAIRMENT:** A communication disorder such as stuttering, impaired articulation, a language impairment, or a voice impairment that adversely affects a child's educational performance.
- 12. TRAUMATIC BRAIN INJURY:** An acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial maladjustment, or both, that adversely affects a child's educational performance. Traumatic Brain Injury applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psychosocial behavior; physical functions; information processing; and speech. The term does not include brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma.
- 13. VISUAL IMPAIRMENT, INCLUDING BLINDNESS:** An impairment in vision that, even with correction, adversely affects a child's educational performance. The term includes both children with partial sight and those with blindness.

Section 504 of the Rehabilitation Act

Congress passed Section 504 of the Rehabilitation Act in 1973 to protect people with disabilities from discrimination in programs that receive federal funds. Section 504 addresses a much wider population of children than the Individuals with Disabilities Education Act, which is the federal special education law. Because all public schools and many independent schools receive federal dollars, they are required to follow Section 504 guidelines. This means that students with disabilities who qualify for services must have equal access to all academic and nonacademic activities and programs, including after school programs.

Children with disabilities who are not eligible for special education may qualify for extra help and accommodations under Section 504 of the Rehabilitation Act. If a child qualifies for Section 504 services, she or he may receive specialized instruction, related services, classroom accommodations, or adaptations to the education environment. Listed below are answers to questions families frequently ask about Section 504.



Q. What is Section 504 of the Rehabilitation Act?

- A.** Section 504 of the Rehabilitation Act of 1973 is a federal law that:
- guarantees education services for students who qualify as having a disability;
 - prohibits physical barriers to individuals with disabilities in public buildings;
 - does not allow post-secondary and vocational programs receiving federal dollars to discriminate against individuals because of a disability;
 - prohibits employers from excluding qualified individuals from employment solely because of a disability;
 - provides related services and accommodations to qualified students with disabilities whether or not they are eligible for special education.

Q. Who can receive Section 504 services?

- A.** To qualify for services under 504, a child or adult
- must have a disability that substantially limits one or more major life activities; or
 - must have a record of having a disability (a history of a disability); or
 - must be regarded as having a disability (person has been treated as though he or she has a disability). Major life activities include self-care, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

Q. What disabilities are covered under Section 504?

- A.** Section 504 describes disability as a “physical or mental impairment” including, but not limited to:
- severe allergies, chronic asthma or health impairment;
 - cosmetic disfigurement or amputation;
 - injuries or broken bones;
 - communicable diseases, such as HIV;
 - diabetes; and
 - eating disorders.

Q. How does the Section 504 process work in my school district?

A. Every school district must have written 504 policies and procedures that describe how they will carry out the requirements of the law. This information is public, and you can get a copy to help you understand how things work in your school district. Here are examples of how a school must carry out Section 504 requirements:

- The school must identify and evaluate children in the district, ages three through 21, who may have a disability;
- The school must establish that the child has a disability that substantially limits one or more major life activities;
- The school must develop a written plan to show how they will provide the child with a free appropriate public education (at no cost to parents) including accommodations that enable the child to have equal access to academic and non-academic education programs.

Q. How do I find out about my school's Section 504 procedures?

A. Your school district must have a person who oversees its Section 504 program. To find out the name of this person, contact the school principal, superintendent, or special education director. This information should also be contained in any publications put out by the district such as a handbook.

Q. How do I refer my child for Section 504 services?

A. Read your school district's policies and procedures to find out what to do. Then make a referral following school guidelines. Talking to the principal, special educators or other parents whose children get 504 services is another way to learn how to make a referral.



Q. Who decides if my child qualifies for 504 services?

A. A group of educators called a 504 team, will decide if your child qualifies for 504 services. While schools are not required to include parents, some schools welcome parents as part of the team. If you want to participate, ask your 504 coordinator to include you in meetings, or request an opportunity to share information about your child with team members. To determine eligibility, the 504 team must evaluate your child. There are several ways the school can gather information about your child. They can use information from a special education evaluation, get information from a physician (with your permission) and/or request a separate evaluation.

If the 504 team determines that your child doesn't have a disability, they are not required to conduct a 504 evaluation, but they must provide you with notice of your right to disagree with their decision.

Q. How can the school make programs accessible to my child?

A. Some ways in which the school can ensure that your child is able to take advantage of school programs include holding classes or other programs in places that are physically accessible, redesigning equipment and facilities used for academic and nonacademic programs, or providing an individual aide.

Q. *Once my child becomes eligible, what services and accommodations will be available to support my child?*

A. The services or accommodations your child receives will depend on his or her individual needs. Some of the services available under Section 504 include:

- transportation,
- speech and language services,
- equal opportunity to participate in non-academic and extra-curricular activities,
- equal access to building and other facilities,
- home-based instruction,
- modified attendance policies,
- administering medication,
- changing grading procedures,
- changing standards for making the honor roll and graduating,
- classroom modifications,
- behavior plans,
- standards of conduct.



Q. *What rights do my child and I have under Section 504?*

A. As a parent you have the right:

- to examine all relevant records regarding your son or daughter;
- to receive notice (not necessarily in writing) regarding the identification, evaluation and eligibility of your child;
- to receive notice of your parental rights;
- to file a local complaint with your school district;
- to challenge school decisions regarding your child's evaluation and eligibility;
- to request mediation;
- to request an impartial due process hearing to resolve differences with the school;
- to be represented by an attorney at the due process hearing;
- to have your attorney's fees paid if you prevail at the hearing;
- to a review of the hearing decision at a higher level;
- to file a complaint with the US Department of Education or Office for Civil Rights.

Q. *How can you make a complaint to the Office for Civil Rights?*

A. If you feel the school has discriminated against your child because of a disability, you can file your complaint by email at OCRcomplaint@hhs.gov, or mail or fax your complaint to the OCR Regional Office that serves your state.

Region VI - Dallas (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)

Office for Civil Rights

U.S. Department of Health and Human Services

1301 Young Street, Suite 1169, Dallas, TX 75202

1-214-767-4056 TDD 1-214-767-8940 Fax 1-214-767-0432

Your complaint generally must be filed within 6 months (180 days) from the date that the discrimination occurred or was discovered. The federal government will investigate your complaint and issue a decision. The decision may be appealed in the courts, by the school, or by you.

New Mexico Resources for Professionals and Families

U.S. Congress – New Mexico Delegation

Parents Reaching Out recommends that you first contact the New Mexico office(s) of our Congressional Representatives, especially if you are writing letters. Their staff will assist you and insure that your Senator or Representative gets information in a timely manner. The official government web sites are:

The web site for the House of Representatives is: <http://www.house.gov/>

The web site for the Senate is: <http://www.senate.gov/>

Congressman, Martin Heinrich

<http://heinrich.house.gov/>

Washington, DC Office
1505 Longworth HOB
Washington, D.C. 20515
202-225-6316 / Fax: 202-225-4975

New Mexico District Office (1st District)
20 First Plaza NW Suite 603
Albuquerque, NM 87102
505-346-6781 / Fax: 505-346-6723

Congressman, Ben R. Lujan

<http://lujan.house.gov/>

Washington, DC Office
502 Cannon HOB
Washington, D.C. 20515
202-225-6190 / Fax: 202-226-1331

New Mexico District Office (3rd District)
811 St. Michael's Drive Suite 104
Santa Fe, NM 87505
505-984-8950 / Fax: 505-986-5047

Congressman, Harry Teague

<http://teague.house.gov/>

Washington, DC Office
1007 Longworth HOB
Washington, D.C. 20515
202-225-2365 / Fax: 202-225-9599

New Mexico District Office (2nd District)
200 E. Broadway, Suite 200
Hobbs, NM 88240
575-392-8325 / Fax: 575-433-8325

Senator Jeff Bingaman

<http://bingaman.senate.gov/>

Washington Office
703 Hart Senate Office Building
Washington, DC 20510
202-224-5521 / TTY 202-224-1792
Toll Free (from NM only) 1-800-443-8658

New Mexico Offices

- 625 Silver Avenue, SW Suite 130
Albuquerque, NM 87102
505-346-6601
- 106 B West Main
Farmington, NM 87401
505-325-5030
- 148 Loretto Towne Centre
505 South Main, Las Cruces, NM 88001
505-523-6561
- 200 East Fourth Street, Suite 300
Roswell, NM 88201
505-622-7113
- 119 East Marcy, Suite 101
Santa Fe, NM 87501
505-988-6647

Senator, Tom Udall

http://tomudall.senate.gov

Washington Office
110 Hart Senate Office Building
Washington, D.C. 20510-3102
202-224-6621 / Fax: 202-228-3261

New Mexico Offices

- 120 South Federal Place, Suite 302
Santa Fe, NM 87501
505-988-6511 / Fax: 505-988-6514
- Albuquerque Plaza, Suite 710
201 3rd Street NW
Albuquerque, NM 87102
505-346-6791 / Fax: 505-346-6720
- Loretto Town Center, Suite 118
505 South Main
Las Cruces, NM 88001
575-526-5475 / Fax: 575-523-6589

New Mexico Agencies and Organizations

Office of the Governor

State Capitol, Room 400, Santa Fe, NM 87501
505-476-2200 Web: <http://www.governor.state.nm.us/index2.php>

New Mexico Legislature

505-986-4600 Web Address: <http://legis.state.nm.us/lcs/>

Governor's Commission on Disabilities

Lamy Building, Room 117

491 Old Santa Fe Trail, Santa Fe, NM 87501

Phone/TTY: 505-476-0412; 877-696-1470 (Toll Free in NM only)

Web: <http://www.gcd.state.nm.us/laws.htm>

New Mexico Aging and Long-Term Services

Elderly and Disability Services Division

D&E Waiver program, the Personal Care Option (PCO) program, Mi Via self-directed waiver

1190 St. Francis Drive, Room N-3050

P.O. Box 26110, Santa Fe, NM 87502

505-476-4785

Web: http://www.nmaging.state.nm.us/Elderly_Disability_Services_Division.html

New Mexico Career Technical Work Force Education Bureau

Public Education Department - Education Building

300 Don Gaspar Avenue, Santa Fe, NM 87501

505-827-6512 Web: <http://www.ped.state.nm.us/index.htm>

New Mexico Children, Youth and Families Department

P.O. Drawer 5160, Santa Fe, NM 87502-5160

505-827-7602 Web: <http://www.cyfd.org/>

Report Abuse or Neglect: 1-800-797-3260

New Mexico Commission for the Blind

2905 Rodeo Park Dr. East Building 4 Suite 100

Santa Fe, NM 87505

505-446-4479; 888-513-7968 Web: <http://www.cfb.state.nm.us/>

New Mexico Commission for Deaf and Hard of Hearing Persons

P.O. Box 5138, Santa Fe, NM 87502

Voice/TTY: 505-881-8824; 800-489-8536 (V/tty, Toll Free in NM only)

Web: <http://www.cdhh.state.nm.us/index.html>

New Mexico Developmental Disabilities Planning Council

810 West San Mateo Rd. Suite C

Santa Fe, NM 87505

505-476-7321; 800-322-2229 (Toll Free in NM) Web: <http://www.nmddpc.com/>

New Mexico Division of Vocational Rehabilitation / Public Education Department

435 St. Michaels Drive Building D

Santa Fe, NM 87505

505-954-8511 / 1-800-224-7005 (Toll Free)

Web: <http://www.dvrgetsjobs.com/DVRInternet/index/index.aspx>

New Mexico Department of Health

2040 S. Pacheco, Santa Fe, NM 87505

505-827-2613 Web: <http://www.health.state.nm.us/index.html>

New Mexico Family, Infant Toddler Program Ages Birth Through 2

New Mexico Department of Health/Long Term Services

1190 St. Francis Drive, Santa Fe, NM 87502

877-696-1472 Web: <http://www.health.state.nm.us/ddsd//fit/index.html>

New Mexico Public Education Department

300 Don Gaspar

Santa Fe, NM 87501-2786

505-827-5800 Web Address: <http://www.ped.state.nm.us/index.htm>

New Mexico Public Education Department: Special Education Bureau

120 S. Federal Place Room #206

Santa Fe, NM 87501

505-827-1457 Web: <http://www.ped.state.nm.us/seo/index.htm>

New Mexico Technology Assistance Program

435 St. Michael's Drive, Building D

Santa Fe, NM 87505

800-866-2253 (V); (800) 659-8331 (TTY) Web: <http://www.nmtap.com/>

Center for Developmental and Disabilities (CDD) University of New Mexico

2300 Menaul Boulevard

Albuquerque, NM 87107

505-272-3000 Web: <http://cdd.unm.edu/about/index.htm>

Native American Disability Law Center

3535 E. 30th Street Suite 201, Farmington, NM 87042

Voice: 505-566-5880 / 800-862-7271

207 South 2nd Street, Gallup, NM 87301

Voice: 505-863-7455 / 877-283-3208

Web Address: <http://www.nativedisabilitylaw.org/>

Protection and Advocacy System

1720 Louisiana Boulevard, Suite 204

Albuquerque, NM 87110

505-256-3100; 800-432-4682 (Toll Free in NM)

Web: www.nmpanda.org

Disability-Specific Organizations

Attention Deficit Disorder

Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)

8181 Professional Place, Suite 150
Landover, MD 20785
310-306-7070 Web: www.chadd.org

National Attention Deficit Disorder Association (ADDA)

P.O. Box 543 Pottstown, PA 19464
484-945-2101 Web: www.add.org

Attention Deficit Disorder Association– Southern Region (ADDA)

12345 Jones Road, Suite 287, Houston, TX 77070
281-897-0982 Web: www.adda-sr.org

Autism

New Mexico Autism Society

P.O. Box 30955 Albuquerque, NM 87190
505-332-0306 E-mail: nmautism@nmautismsociety.org Web: www.nmautismsociety.org

Brain Injury

Brain Injury Association of New Mexico

121 Cardenas, N.E., Albuquerque, NM 87108
505-292-7414; 888-292-7415 (Toll Free in NM)
E-mail: info@braininjurynm.org Web: www.braininjurynm.org

Learning Disabilities

New Mexico Learning Disabilities Association

P.O. Box 556 Albuquerque, NM 877110
505-821-2545 Web: www.vivanewmexico.com/nmlda

Mental Health

NAMI-New Mexico

P.O. Box 3086 Albuquerque, NM 87190-3086
505-260-0154; 800-953-6745
E-mail: naminm@aol.com Web: <http://nm.nami.org>

Mental Retardation and Related Developmental Disabilities

The Arc of New Mexico

3655 Carlisle, N.E., Albuquerque, NM 87110
505-883-4630; 800-358-6493 (Toll Free in NM)
E-mail: arcnm@arcnm.org Web: www.arcnm.com

Speech and Hearing

New Mexico Speech-Language-Hearing Association

P.O. Box 66085
Albuquerque, NM 87193-6085
505-899-6674; 800-292-8465
E-mail: nmsha@qwest.net Web: www.nmsha.net

Organizations Especially for Parents

Abrazos Family Support Services

Education for Parents of Indian Children with Special Needs (EPICS) Project
P.O. Box 788, Bernalillo, NM 87004
505-867-3396 (V/TTY) E-mail: info@abrazosnm.org Web: www.abrazosnm.org

American Foundation for the Blind (Southwest)

11030 Ables Lane, Dallas, TX 75229
214-352-7222 Web: www.afb.org

Family Voices of New Mexico

2340 Alamo SE, Suite 102. Albuquerque, NM 87106
Voice: 505-872-4774 or 888-835-5669
Fax: 505-872-4780 Web: <http://www.familyvoices.org/states.php?state=NM>

National Fragile X Foundation

P.O. Box 190488, San Francisco, CA 94119
800-688-8765 Web: www.fragilex.org

Parents for Behaviorally Different Children

1101 Cardenas, N.E., Suite 202
Albuquerque, NM 87110
505-265-0430; 800-273-7232
Web: www.pbdc.org

Parents Reaching Out (Parent Training and Information Center (PTI) / Parent to Parent)

1920 B Columbia, Drive
Albuquerque, NM 87106
505-247-0192; 800-524-5176 (Toll Free in NM)
Web: www.parentsreachingout.org

For information about the Individuals with Disabilities Act, visit:

IDEA: Building the Legacy 2004 <http://idea.ed.gov>

One-stop shop for resources related to the IDEA (Part C & B) aligned with NCLB to ensure equity, accountability and excellence in education for children with disabilities.

Publications of Parents Reaching Out

The follow publications are available in hard copy and on CD. If you would like a copy of our materials, please feel free to visit our office, download from our web site or call the Resource Coordinator at 505-247-019 or 1-800-524-5176 to place a request.

* Indicates Spanish version is available

Acronyms, Abbreviations and Definitions

A Bridge to the Future * (Ability Pathway to Diploma)

Book of Ideas * (Learning Styles, Instructional Strategies and more)

DD Waiver Application & DD Waiver Allocation Handbooks * (Family friendly tools)

Did You Know Fact Sheets * (NCLB, Literacy, Parent Involvement, Early Childhood)

Early Intervention and Natural Environments * (Birth to three)

Extended School Year * (Special Education Related Service)

Family Health Care Tips* (Fact Sheets on Health Care Access)

Family Connections Series* (Six books based on Epstein's Model)

Family Involvement: Building Community Partnerships* (Schools & Systems Change)

First Steps Fact Sheets* (Early Intervention)

How Can I Help This Child? (Sensory Integration)

Let's Begin the Journey * (Overview of Special Education)

Mission Transition * (Head Start to Elementary)

Next Steps to Success * (Early Intervention to Early Childhood)

Open Line and More * (Communication Skills)

Positive Directions for Student Behavior (Intervention Strategies & Tools)

Practical Inclusive Education in New Mexico * (Differentiated learning at its best)

Response to Intervention (RTI) * (Planned support system for students in NM schools)

Telling Your Story * (Communication Skills--Sharing Your Perspective)

The Journey Continues* (Standard and Career Readiness Paths to Diploma)

The Handbook: Parental Rights and Special Education Procedures * (IEP Process)

We also distribute New Mexico Public Education Department-Technical Assistance Documents: Pathways to the Diploma; SAT- Student Assistance Team and the Three-Tiered Model of Student Intervention; and Gifted Education as well as publications from other agencies.



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THE MOST APPROPRIATE LABEL IS
USUALLY THE ONE PEOPLE'S PARENTS
HAVE GIVEN THEM.

Welcome to Holland

I am often asked to describe the experience of raising a child with a disability—to try to help people who have not shared that unique experience to understand it, to imagine how it would feel. It's like this...

When you're going to have a baby, it's like planning a fabulous vacation trip—to Italy. You buy a bunch of guidebooks and make your wonderful plans. The Coliseum. Michelangelo's David. The gondolas in Venice. You may learn some handy phrases in Italian. It's all very exciting.

After months of eager anticipation, the day finally arrives. You pack your bags and off you go. Several hours later, the plane lands. The stewardess comes in and says, "Welcome to Holland." "Holland??" you say. "What do you mean, Holland? I signed up for Italy! I'm supposed to be in Italy. All my life I've dreamed of going to Italy."

But there's been a change in the flight plan. They've landed in Holland and there you must stay. The important thing is that they haven't taken you to a horrible, disgusting, filthy place, full of pestilence, famine and disease. It's just a different place.

So you must go out and buy new guide books. And you must learn a whole new language. And you will meet a whole new group of people you would never have met. It's just a different place.

It's slower-paced than Italy, less flashy than Italy. But after you've been there for a while and you catch your breath, you look around, and you begin to notice that Holland has windmills. Holland has tulips. Holland even has Rembrandts.

But everyone you know is busy going to and from Italy, and they're all bragging about what a wonderful time they had there. And for the rest of your life, you will say, "Yes, that's where I was supposed to go. That's what I had planned."

The pain of that will never ever, ever go away, because the loss of that dream is a very significant loss. But if you spend your life mourning the fact that you didn't get to Italy, you may never be free to enjoy the very special, the very lovely things about Holland.

By Emily Perl Kingsley
Copyright © 1987 Emily Perl Kingsley

Emily Perl Kingsley has been writing scripts for Sesame Street for thirty years. Much of her work on the show has focused on enhancing the understanding and acceptance of people with disabilities. Emily is mother of Jason Kingsley (1974) and served as the dictation typist for Jason's and Mitchell Levitz's book *Count Us In: Growing Up with Down Syndrome*.



Celebrating Holland



I have been in Holland for over a decade now. It has become home. I have had time to catch my breath, to settle and adjust, to accept something different than I'd planned. I reflect back on those years of past when I had first landed in Holland. I remember clearly my shock, my fear, my anger, the pain and uncertainty. In those first few years, I tried to get back to Italy as planned, but Holland was where I was to stay.

Today, I can say how far I have come on this unexpected journey. I have learned so much more. But, this too has been a journey of time. I worked hard. I bought new guidebooks. I learned a new language and I slowly found my way around this new land. I have met others whose plans had changed like mine, and who could share my experience. We supported one another and some have become very special friends.

Some of these fellow travelers had been in Holland longer than I and were seasoned guides, assisting me along the way. Many have encouraged me. Many have taught me to open my eyes to the wonder and gifts to behold in this new land. I have discovered a community of caring.

Holland wasn't so bad. I think that Holland is used to wayward travelers like me and grew to become a land of hospitality, reaching out to welcome, to assist and to support newcomers like me in this new land.

Over the years, I've wondered what life would have been like if I'd landed in Italy as planned. Would life have been easier? Would it have been as rewarding? Would I have learned some of the important lessons I hold today?

Sure, this journey has been more challenging and at times I would (and still do) stomp my feet and cry out in frustration and protest. And, yes, Holland is slower paced than Italy and less flashy than Italy, but this too has been an unexpected gift. I have learned to slow down in ways too and look closer at things, with a new appreciation for the remarkable beauty of Holland with its tulips, windmills and Rembrandts.

I have come to love Holland and call it Home. I have become a world traveler and discovered that it doesn't matter where you land. What's more important is what you make of your journey and how you see and enjoy the very special, the very lovely, things that Holland, or any land, has to offer.

Yes, over a decade ago I landed in a place I hadn't planned. Yet I am thankful, for this destination has been richer than I could have imagined!

By Cathy Anthony, 2001

Cathy Anthony is a parent, advocate and the Executive Director of the Family Support Institute in Vancouver, British Columbia (www.vcn.ca/bcacl/fsi.htm)

Recommended Reading: The Family Perspective

The following books can be found at the Parents Reaching Out (PRO) Resource Center.

Berube, M. (1996). *Life as we know it: A father, a family and an exceptional child*. New York: Pantheon Books

Fadiman, Anne (1998). *The Spirit Catches You & You Fall Down*. Farrar, Strauss & Giroux, NY

Fialka, Janice, (1999). *Do you hear what I hear?* Ann Arbor: Proctor Publications

Fialka, Janice (1997). *It matters, lessons from my son*. Ann Arbor: Proctor Publications

Fialka, Janice (2005). *Whose life is it anyway?* Madison: University of Wisconsin

Kaufman, S.Z. (1998). *Retarded isn't stupid, Mom!* Baltimore: Paul H. Brookes Publishing Co.

Marsh, J.D. (1995). *From the heart: On being the mother of a child with special needs*. Bethesda: Woodbine House

Meyer, D.J. (1995). *Uncommon Fathers: Reflections on raising a child with a disability*. Bethesda: Woodbine House

Schulze, C. (1993). *When snow turns to rain: One family's struggle to solve the riddle of autism*. Bethesda: Woodbine House

Simons, R. (1985). *After the tears: Parents talk about raising a child with a disability*. San Diego: Harcourt, Brace and Co.

Spiegle, J. A. & R. A. van den Pol (Eds.) (1993). *Making changes: Family voices on living with disability*. Cambridge, MA: Brookline Books

Sullivan, T. (1995). *Special parent, special child: Parents of children with disabilities share their trials, triumphs and hard-won wisdom*. New York: G.P. Putnam's Sons

Stress and the Family of a Child with a Disability

Stress is not unique to families. However, families who have children with disabilities may have additional stressors that are unique. Some of these stressors include:

- Stares and rudeness from strangers.
- Rejection or lack of help from relatives.
- Clashes in priorities among family members.
- Siblings feeling guilty, jealousy, embarrassment, confusion.
- Failure of one or more family members to be involved with the child with a disability.
- Perceived judgmental attitudes from professionals.
- Time demands.
- Problems with transportation.
- Inaccessible home.
- Financial burdens.
- Physical care of a disabled child.
- Lack of respite care.
- Lack of leisure activities for the child with disabilities.
- Sadness over limitations of child with disabilities.
- Private life open to many professionals.
- Child's behavior out of control.
- Lack of information about the disability.
- Lack of services.
- Feeling limited in recreational opportunities.
- Making decisions about placements.
- Attending Individualized Education Program (IEP) meetings.
- Dealing with sexuality of disabled adolescent.
- Dealing with demands for more independence from disabled child.
- Fear of the future for the child with disabilities.
- Disruption in routine.
- Wishing the child could die, or thinking other bad thoughts about a child with disability, then feeling guilty.
- Fear the child might die.

- Feeling professionals not being honest with you.
- Feeling isolated.
- Child having no friends.
- Not understanding systems that the parent must work with.
- Child being uninsurable.
- Having to impoverish the family to be eligible for services.
- Some people thinking the disability is the parent's fault.
- People implying the parent isn't doing enough to help the child.
- Too much advice from well-meaning people.
- Lack of knowledge about where to get equipment or other special services for the child.
- As the child gets older, society doesn't perceive him or her as cute anymore.
- Unrealistic portraits of miracle cures by media and other people suggesting to parents they could cure their child.
- Inaccessibility of public and private facilities.
- Red tape to obtain services.
- People telling the parent he/she is special because of having a child with disability.
- Fear of asking questions of professionals.
- Worry that the child will out-live the parent or who will take care of the child after the parent dies.
- Fear that others will take advantage of a child with a disability.
- Difficulty in communicating the child's needs to teachers.
- Fear of separation from the child.
- Transitioning from one program to another.
- Everyone thinking the child is "normal" and being intolerant of his or her differences.
- Not wanting to cry or become emotional in front of others.

This is long list of stressors and most families of children with disabilities can feel several of them at any given time. Learning and understanding the stressors that they face will enable educators to be more sensitive and effective in working with them.

School Lessons

Excitement is high.

New clothes hang on the bodies of charged
little boys and girls.

The air is pierced by a mixture of reluctance and spirit.

I glance at familiar faces of neighborhood moms.
A few have taken me under their wing.

I want so much to feel their same pleasure.
It is their child's first day of the new school year.

I want to proudly walk to my son's new room.
I want to chat with moms and wonder
if their children will become my child's new friends.

I want to wonder what birthday invitations await my son.

I want to climb
that mountain staircase leading to the THIRD GRADE

I want to hold my son's hand
and enter the new room of his new grade.

I want that experience so much.
I would exchange almost anything for it.

But I cannot have it.

My child is kept
on the first floor
despite the rise of all the other nine year olds.

I enter his special education classroom.
I want the room to look like all other classrooms.
I want there to be parents talking
(but their children are bussed)
I want there to be children chasing each other.

It will not be that way.
So I take my cue from my son.
He is smiling.
I slap on a smile.

I wear that plastered smile down the hallway
past the beaming parents.

I walk alone.
Inside I ache for what seems so available to others.

It is my son's first day of third grade.
I'm not ready for this lesson.

By Janice Fialka
from *It Matters, Lessons from My Son*
Madison: University of Wisconsin, 2005

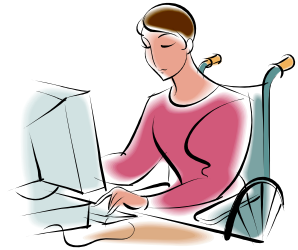
Lessons of Segregation

Revolutionary Common Sense

By Kathie Snow

Kathie Snow is a zealous promoter of new ways of thinking about disability. Her website, as well as her newsletters, articles, workshops and presentations offer a new perspective about disability. Lessons of Segregation: Revolutionary Common Sense appeared in the November 2006 issue of the Disability is Natural newsletter. Unedited excerpts from this article are included below. If you would like a PDF version of this article to share with others for non-commercial purposes, please visit: www.disabilityisnatural.com

Gina has a Master's degree, lives in her own home, and has enjoyed moving up the corporate ladder in a variety of professional positions. When she was a young child, her parents followed conventional wisdom and placed Gina in a residential “crippled children’s” school. She only saw her family once a month, and she grew up surrounded by children with orthopedic disabilities, along with therapists, special educators, and other professionals. She ultimately became accustomed to this “placement”—to the point that this sheltered, artificial setting seemed the norm, and life in the real world seemed strange. This particular school had high expectations for its students, so Gina received an academic education which enabled her to move on to college.



Outwardly successful, 42-year-old Gina struggles daily with the demons of segregation. Spending her formative years (ages 5-18) in a special, segregated environment caused deep wounds that have never healed, and they’re reopened regularly. When faced with any difficulties at work or with family, Gina automatically believes she's at fault, incompetent, and unworthy; and she feels she doesn't belong. Being "sent away" by her parents taught her that she didn't belong because of her disability, she wasn't "good enough." As an adult, this deeply-rooted emotional pain is almost too much to bear, and has created more difficulties for Gina than her disability. She's currently in counseling, hoping to exorcise the demons that haunt her daily.



Brad's life has been different, and he's learned other lessons from segregation. He grew up at home with his family, but he never attended the same schools as his brother and sister. At the age of three, he was put on the Special Ed bus for the 45-minute ride to the Special Ed Preschool. During public school years, he never knew what grade he was in, a common occurrence when children with disabilities of various ages are grouped in the same special ed ungraded classroom. Unlike children without disabilities who are exposed to greater learning opportunities and responsibilities as they move up the "grade ladder," Brad's educational and social growth were almost static. Little was expected of him throughout his childhood by his parents or the special ed teachers. No one ever talked to him about his future and his potential. At age 22, he aged out of special ed services and left the school system with a "certificate of attendance" instead of a diploma. While his brother and sister moved on to college and jobs, Brad went from the segregation in public school to segregation in a group home, day programs, and sheltered workshops.

Brad's service coordinator has tried to "place" Brad in a real job in the community, but all attempts have failed. Like Gina, Brad learned some powerful lessons from segregation. He, too, learned that he didn't belong in the real world. But in his case, this lesson is manifested in Brad's belief that he doesn't have to work or assume any responsibilities for himself. He's learned to be helpless. If little or nothing has been expected from him his entire life, why should things change now?

Delia, a special ed teacher, has recognized the benefits of inclusive education and is working to move her sixth grade students out of her segregated classroom and into general ed classrooms. But the general ed teachers complain that these students "don't know how to behave". They don't know how to take turns, raise their hands and wait to be called on, use their "indoor" voices, and other ordinary student behaviors most children learn in kindergarten. The general ed teachers feel this situation is the result of the students' disabilities.

Delia recognizes that the place to learn these real-life skills is the real-life environment of a general ed classroom. But she expresses valid concerns that the general ed teachers (even with Delia's assistance) won't take the time or make the effort to help these students learn how to succeed in the real world. If this occurs, back into a segregated setting they'll go. So when will they learn? Who will take the time and make the effort? If no one does, these young people will be shipped back to segregated special ed classrooms, where the lessons of segregation will be reinforced. As adults, they will not be prepared for life in the real world, but only for a life of segregation in congregate living quarters and sheltered work/activity programs.

Some educators, and some parents, have looked into their mythical crystal balls and prophesied that students with disabilities will never be able to work, so why bother with an academic education? Their "educated" minds have missed the more important prophecy—the self-fulfilling prophecy that if students are not educated, they won't be in a position to achieve gainful employment. Duh—this isn't rocket science!

But there are schools where educators include all students in general ed classrooms, where general and special ed teachers work side-by-side, ensuring that all students learn and belong. These educators have recognized the dangers of segregation and the benefits of inclusion, and they do what it takes to make it work.

If we support the segregation of people with disabilities, we must also bear the responsibility for the consequences of our actions: children and adults whose hearts and minds are scarred by feelings of inferiority and who are ill-prepared for life as successful citizens in our society. If we do not support segregation, when will we turn our righteous indignation into action?



I'm Special



I'm special. In all the world, there's nobody like me.

Since the beginning of time, there has never been another person like me. Nobody has my smile. Nobody has my eyes, my nose, my hair, my hands, my voice. I'm special.

No one can be found who has my handwriting. Nobody anywhere has my taste—for food, or music or art. No one sees things just as I do.

In all of time, there's been no one who laughs like me, no one who cries like me. And what makes me laugh and cry will never provoke identical laughter and tears from anybody else, ever. No one reacts to any situation just as I would react. I'm special.

I'm the only one in all of creation who has my set of abilities.

Oh, there will always be somebody who is better at one of the things I'm good at, but no one in the universe can reach the quality of my combination of talents, ideas, abilities and feelings.



Like a room full of musical instruments, some may excel alone, but none can match the symphony sound when all played together. I'm a symphony.

Through all of eternity no one will ever look, talk, walk, think, or do like me. I'm special. I'm rare. And in all rarity there is great value. Because of my great rare value, I need not attempt to imitate others. I will accept—yes, celebrate—my differences.

I'm special. And I'm beginning to realize it's no accident that I'm special. I'm beginning to see that God made me special for a very special purpose. He must have a job for me to do that no one else can do as well as I. Out of all the billions of applicants, only one is qualified, only one has the right combination of what it takes.

That one is me. Because...I'm special.



Anonymous

Notes and Reflections

Classroom Practice



*“Una mano lava a la otra
Y las dos lavan la cara.”*

*One hand washes the other,
And both wash the face.”*

(collaboration is key)

-Spanish Dicho



Inclusion

Children that learn together, learn to live together.

| Children with Special Needs | General Education Students | Teachers | Society |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|---------------------------------------------------------|
| affords a sense of belonging to the human family | provides opportunities to experience diversity on a classroom scale | helps appreciate the diversity of the human family | promotes the civil rights of all individuals |
| provides stimulating environment in which to grow and learn | develops an appreciation that everyone has unique characteristics and abilities | helps recognize that all students have strengths | teaches socialization and collaborative skills |
| evolves feelings of being a member of a community | develops respect for those with diverse characteristics | creates an awareness of the importance of direct individualized instruction | builds supportiveness and interdependence |
| enables the chance to develop friendships | develops sensitivity toward others' limitations | increases ways to creatively address challenges | provides children with a model of democratic principles |
| provides opportunities to develop neighborhood friends | develops feelings of empowerment and the ability to make a difference | supports collaborative problems solving skills | |
| provides affirmation of individuality | increases abilities to help and teach classmates | affords opportunity to face the challenges of participating on a multi-disciplinary team | |
| provides peer models provides opportunities to be educated with same age peers | develops empathetic skills | enhances accountability | |

A Teacher Shares

Like Talking with a Teammate: Informality Enhances Parent Meetings

Because I want families to be important members of their child's educational team, I make opportunities throughout the school year for in-person conversations with each student's parents or guardians. These "meetings" range from one-on-one conferences to quick exchanges with family members joining us for Morning Meeting, lunch, or a classroom event. I've found that a sense of warm informality encourages parents to visit and to comfortably share information about their children.

To begin establishing that warm, informal tone, I plan "get to know you" visits early in the year. With a brief letter (translated if necessary) or just a sticky note in the child's homework folder, I invite parents to choose a convenient meeting time. Because most parents work, popular times are just before or after school, during lunch, or during our after-school program.

We sit together in a quiet conference room. I offer coffee, tea, and cookies, which enhances the sense of sociability — as does having all folders and notes out of sight to start. My goal is to listen more than I speak, so after a bit of general conversation, I ask how I can support their child's learning and encourage parents to share insights about their child, family, and culture. Only then, do I invite parents to notice specific things in their child's work folder. At later meetings, I'll share an earlier and a later piece of work so that parents have a concrete sense of their child's progress.

For me, even the smallest tidbit of information gleaned from these meetings offers insight into how to help each child learn and feel comfortable in school. For example, I might learn that one child has few opportunities to read with the parent, or that another child's close friend just moved away.

For parents, frequent, friendly, and informal conversations help them relax and feel that they're talking with a teammate — one who values their input and shares their goals for their child.

Radhika Rajgarhia teaches first graders at Braddock Elementary School in Annandale, Virginia.

By Radhika Rajgarhia
Responsive Classroom Newsletter \ February 2007

The Dance of Partnership: Why do my feet hurt?

Strengthening the Parent-Professional Partnership

By Janice Failka, M.S.W., A.C.S.W

Keynote address delivered at the Division of Early Childhood's [DEC] Thirteenth Annual Conference on Children with Special Needs, New Orleans, November 20, 1997. Permission has been granted by the author to include the entire contents of this presentation in this handbook.

There is no escaping it these days. "Partnership" is a recurrent buzzword in the fields of education, health, and human services. "Parents and professionals must be partners. Collaboration is the name of the game." This is the refrain sung by administrators, policy makers, direct service providers, and parents. Indeed, partnership is a noble goal and, on the surface, seems fairly reasonable to achieve. "Let us sit at this table together, create the best plan of action for three-year-old Sally—and be partners." Seems relatively easy. Yet, regardless of the hat you wear, you know that being partners is often challenging beyond words. At times, forming partnerships is more challenging than parenting my son, Micah, who has developmental disabilities. I did not anticipate that the partnering with professionals would be at times this hard.

Several years ago, I began a journey to gain understanding about what complicates this partnership. My first step was to consult the dictionary for the definition of "partners." I found, "Either of two persons dancing together." (Webster's New World Dictionary, 1968). This image of dancing fit perfectly. Forming partnerships with the myriad of professionals have entered my life via Micah is like learning to dance. At first, my professional partners and I do not often glide together gracefully across the floor. Our movements feel stiff, awkward, and out of sync. We sometimes seem to be listening to different music with conflicting beats and rhythms. Our toes and feelings get stepped on as we try to maneuver around unspoken worries.

What is it that complicates this parent-professional partnership, this dance? Why do we often collide in our attempts to help our children and students reach their fullest potential? I have identified five distinct features, or dimensions, which both entangle and enhance our partnership dance. These ideas are based on my own personal experiences. My impressions on partnerships may not match those of all parents. However, the universality is found in the desire of all parents to have their uniqueness recognized and valued. The following is what I have learned about my partnership dances as Micah's mom.

First Dimension — Choice: Do You Wanna Dance?

The first dimension pertains to choice. For most parents, this is not a chosen relationship. In spite of the many gifts given to me by the scores of professionals I have met because of my son's disability, I would rather not know them under these circumstances. I would rather not have a child with a disability. I did not choose this.



On the other hand, most professionals made a very conscious choice to work with children. Many of you chose this work because of a strong sense of connection with these little people, and a passion for teaching. You anticipated that this work would give you some sense of meaning to your life and a sense of self-esteem and mastery, maybe not everyday, but often. Many of you were drawn to make a difference in the lives of a child.

Let's look at this issue of choice using this dance image. Here you are, the professional, eagerly awaiting your new dance partner. Your arms are stretched out inviting us, parents, to enter your world of interventions, appointments, activities, forms, and (maybe) hope. You beckon us into your brightly decorated offices and classrooms. "Please come in and see what is here. I'm excited to share these toys and opportunities. Welcome."

We, as parents, having not chosen this dance, are usually not as eager to join you. We may approach you not with open arms, but with tightly folded ones clutched to our chest. Sometimes, it is as if our backs are turned to your welcoming arms, eliminating all opportunities for engagement. We may feel reluctant, ambivalent, and often unwilling. For one thing, if we choose to join you, we have to acknowledge that our child has special needs. We have to acknowledge that we are entering your world, one that is initially unfamiliar and frightening. Entering into our partnership with you demands that we let go of our dreams and begin to build new ones so we may not appear too eager or too willingly to join you in this partnership dance.

To your open, welcoming arms, we parents may appear arrogant, withdrawn, hostile, uninvolved, or defensive. Some might refer to us as being "in denial." It is easy to see how you, as the professional, might personalize our distancing attitude we seem to project with our folded arms and defensive posture. You may find yourself silently crying out to us, "I'm only trying to be helpful!"

I recall the story of one mother whose young son was unable to walk. The idea of a wheelchair was introduced to the family. A freshly graduated social worker met this mother at her home eager to take her to select her son's first brand-new wheelchair. The mother hardly shared the worker's enthusiasm. To the mother, this was another shattering of a dream. She wanted to be selecting a tricycle for her son, not a wheelchair.

One of your tasks as a professional is to not personalize our distancing attitude, and to understand, that in most cases, our reluctance to connect with you and your program is not about YOU, but rather about the situation and circumstances forced upon us, our families, and our child. Your acceptance and sensitivity toward our worries and fears help to relax our tightly folded arms. When you can see our ambivalence from our side of this partnership dance, then maybe you're less likely to be offended by our unintended, and sometimes challenging, dispositions. You maybe able to see that our lack of enthusiasm for one more meeting, one more phone call, one more form, one more test, one more transition is less about YOU and more about our worries and uncertainties.

Second Dimension — Forced Intimacy: Too Close for Comfort

The second dimension unique to our partnership deals with intimacy. Because we are sitting with you during one of the most painful and confusing times of our life, we feel thrust into an uninvited and awkward closeness with you. We sit before you at one of our most vulnerable times. You enter our hearts. You hear our guilt and shame. You listen to our inadequacies. You are stung by our salty tears. You are witness to our pain. We may welcome the tender support and practical interventions, but the nature of the circumstances forces an immediate intimacy that is awkward. At times, it is as if we are forced into a slam-dance popular among the younger generation a few years ago.



Most relationships evolve gradually over time. In this unique parent-professional partnership dance, we often are forced into an instant closeness bringing us nose-to-nose with strangers long before there is a foundation of trust to cushion the strong feelings. I'm struck by the fact that we parents sometimes cry in front of people whose last names we don't know. Our unexpected display of our feelings of sadness, rage, or frustration sometimes makes it hard to return to your office. We're not sure what you think of us and our strong emotions.

Many of us are rather awkward with feelings in general. In many of our relationships we try to avoid expressing and acknowledging them. I refer to feelings as the "F" word in partnerships—something to avoid at all costs. Consider Jeff, a friend of mine. Jeff's four-year-old daughter had an immune deficiency problem and was struggling to stay alive. The family teetered on the edge of life and death on a daily basis, sometimes on a moment-to-moment basis. One night Jeff decided to spend the evening at home away from the hospital, now his daughter's home. He hoped for a good night's sleep, but was rudely disturbed by a haunting dream in which his daughter died. Her death felt so real to him that he traveled to the hospital in the middle of the night hoping to be reassured by her warm, rhythmic breathing. He maneuvered his way through New York City's night traffic, rushed through the hospital's long hallways, shoved open his daughter's door and knelt down close to her soft cheeks. He burst into sobs as he felt her warm, reassuring breaths on his face.

A nurse observed Jeff's unexpected arrival and later sat next to him offering supportive words. She commented that she was surprised to see this strong reaction from him as she had grown accustomed to his consistent positive attitude. "Jeff, I didn't know you felt this way," she remarked. Jeff looked at her and responded, "I always feel that way. It's just that I can't walk around falling apart all the time."

You as professionals have the opportunity to allow us our feelings, even to invite us to "fall apart" once in awhile in the presence of someone who understands and cares. Your compassion and non-judgmental attitude can be a gift that decreases our sense of isolation, softens our stress, and decreases the number of times we unintentionally step on toes!

Third dimension-Identification of Partners: Will the Real Partners Please Come Forward?

The third dimension to our partnership deals with identifying who is the partner on the family side. You as professionals often enter this work because you enjoy children; you are drawn to the little people." Additionally your education and training emphasized the child, focusing on how to arrive at the proper diagnosis of and intervention for the child. Thus, you as the professional enter this dance ready to partner with the child. "Let's dance, little one. You are my partner. I'm ready to play with you and teach you. Let's begin together."

Parents, however, want and should be primary partners in this dance. I am reminded of the words of Kristen Birkmeier (1993), a physical therapist and national speaker, as she addressed an audience of early intervention therapists. She said, "Put the parents first, for it is their lives that have been changed. The child is who she is, and needs your expertise, but not without the active involvement of the parents who live with this child 24 hours a day."



"Thank you! Thank you!" I remember whispering under my breath as I listened to Kristen. I was recalling Micah's early childhood days when I took him to his every Thursday speech therapy sessions. I would hand him over to the speech pathologist, but I found myself wishing I could hand me over to her as well. He needed to learn how to stimulate his oral motor muscles, but I needed to learn how to live with a child who did not have words or a familiar way to communicate his needs. Micah and I both needed to dance with our professional partner.

This rearranging of partners to include the parents is often awkward and new for the professional. It is a shift away from the "old ways" where the focus was primarily on the child to a more inclusive perspective which invites parents in on the work. For me, some of the most meaningful sessions with Micah's therapists were the ones when the professionals momentarily put aside the big, green, bouncy ball and turned to me to ask, "What are you concerned about? What have we neglected to think about for Micah? How are you doing?" Those questions felt wonderful and truly engaged me in this partnership dance.

Another aspect to this third dimension deals with the sheer number of partners. Earlier I stated that the definition of partners was "either of two persons dancing together." As we all know, we are not talking about a partnership of two when dealing with our child. On the parent's side there may be two, but more likely there are others, including significant loved ones, siblings, extended family members, and friends. On the professional side, there's the speech therapist, the occupational therapist, the physical therapist, the social worker, the teacher, the nurse, the paraprofessional, and on and on. I didn't just give birth to Micah; I gave birth to an entire ballroom. And at any time, any one of those partners can change faces, as the professionals move in and out of jobs or assignments. Sometimes we are dancing with more people than is manageable.

I am a strong proponent of meetings that include all members of the team. It is in this setting that the creative problem solving is invigorating and reassuring. At our recent school meeting to plan for my son, one teacher learned from another teacher ways to involve his peers in assisting Micah with written assignments. Then, the speech therapist offered suggestions about new software to enhance his participation and we, his parents, reminded the team about the importance of using current events to engage Micah in the class discussions. The partnership dance was working!

Not all meetings of the entire team flow this evenly, however. Negotiation with two people can be challenging, but with eight, nine or ten it can feel cumbersome and unproductive. Sometimes it makes sense to meet with only two or three members, especially when the issues are volatile or complicated. Most of us talk more freely and risk sharing our worries when we work with fewer people.



There are times when a large square dance is needed and other times when dancing cheek-to-cheek makes all the sense in the world. All partners do not need to be at every dance, at every meeting. Knowing which meetings should be small and which should involve the entire team is another way to reduce the amount of times that toes get stepped on. Sometimes more is not better.

Fourth Dimension — Expectations: Who's Leading This Dance?



The fourth dimension is the lack of clarity to our distinct roles; that is, who is leading this partnership dance. Historically, based on the medical model, the professionals were viewed as the experts. They lead this dance. They gave the direction to the dance and decided on the music. Now we hear more talk about parents being the experts. "Parents know their child best." In many ways, I agree with this approach. My husband and I do know a tremendous amount about Micah, especially now that we've been his parents for 16 years. We know what grabs his attention—politics and sports. We know he often repeats himself when he wants to keep your attention and doesn't know what else to say. We know that he needs coaching about ways to engage his peers. We know that he has an exquisite ability to read people's moods and respond with compassion and insight.

At the same time, there is so much that we still don't know and understand about him and his mind, especially as we face his future as an adult. There are so many processes that are not clear to us. Our uncertainty was more prominent during his early childhood years. I was less likely to trust my "mother instinct." During those early years, when professionals used that well-meaning but pat phrase "You are the expert, Ms. Fialka," my mind would go as blank as a freshly cleaned chalkboard and I would shiver at my inability to say something profound or at least coherent. In the beginning I knew more about what he didn't do, then what he could do. For me the use of the phrase "You are the expert" pulled me away from my familiar role of everyday mom who giggled with Micah as we splashed in the bath tub, and instead shoved me behind the professional's desk piled high with thick reports and foreign acronyms. "Expert? What do you mean by that?"

I prefer to move away from this idea of expert and in its place use the word contributor. Each dancer, professional and parent, contributes to the understanding of the child. Our unique contributions evolve and build on each other as we offer differing sides and perspectives about this child. There is the playground-side, the art class-side, the dinnertime-eating-side, the bouncing-on-daddy's-knee-side. Each of our contributions is critical. Ann Hartman (1993) captured this spirit when she wrote to professionals, "We must relinquish the role of expert so that our clients' narratives and experiences can be validated....We do not discard our knowledge, we cease to privilege it, and we apply our knowledge with caution and humility, with the recognition that it is one of many truths..."

A square dance comes to mind as I see the partners circling in and around, over and through these many "truths," relying on the hand of the next partner to guide us to the next place in our dance.

Fifth Dimension — Differing Priorities: Do You Hear What I Hear?

The fifth dimension deals with priorities—priorities for parents and professionals often differ. It is as if we each have on our own set of headphones and are listening to our own music with its own tune, words, and rhythm. There's the mother-song, the father-song, the speech pathologist-song, the neurologist-song, and the teacher-song. Sometimes the only song we can momentarily agree on is "Hit the road Jack, and don't you come back no more, no more!"

When Micah was about two years old, a teacher consultant made weekly visits to our home for "fun and therapy!" One beautiful spring day, we decided to play outdoors. As we moved to our back lawn, we saw our next door neighbor and her young daughter playing outside on their



swing set. The teacher consultant commented, "It must be nice to have a playmate for Micah right next door." I understood her thinking, but offered my own experience. "Some days it is pleasant." I tentatively continued. "But more days than not, that sweet, unknowing girl is the constant reminder of what Micah can't do, no matter how much exercising, and pushing and pulling of his low muscle tone arms and legs we do! Many days that innocent girl is a reminder of our lost dream." The teacher consultant maintained her eye contact with me and respectfully acknowledged my perspective. "I never thought about it that way. I'm glad that you mentioned it to me. You helped me to see your world." The teacher consultant, in essence, took off her professional-headphones, put on my parent-headphones and listened to my music and words. This interaction reminds me that as partnership-dancers we must be willing to take risks, offer our headphones to our partners and be willing to listen to each other's music and experiences. We won't be able to do it all of the time, but when we can, I believe we will be more effective in strengthening the parent professional partnership.

When the physical therapist suggests to a mother that she begin helping her child focus on proper hand- positioning of eating utensils, it is critical that the therapist also be mindful that this seemingly innocent recommendation may wreak havoc during the family meal time. When making new recommendations to families, one therapist asks the family a series of questions, "Now that I have suggested some new approaches at home, what have I missed? How will this change or disrupt your life? How will this complicate your daily living? What do I need to understand from your side as the parent?" This type of questioning respectfully invites parents to share their music, their perspective so that recommendations can be relevant, practical, and manageable. This gives the message to parents that "I need your participation.

These five dimensions — *choice, forced intimacy, partnership roles, number of partners, and priorities*-are present in all our dances, in all our parent-professional partnerships. When we are experiencing difficulties, when we step on each others toes, when we feel we'd rather not be at this dance, at this meeting, then it is time to examine these five issues to determine which one might need to be further explored or addressed. The issue is not will these dimensions creep into our partnerships, because they obviously will. The issue is are we willing to recognize these dimensions and be courageous enough to discuss them and work on them.

Maybe our theme song for our partnerships should at least begin with the refrain, "Getting to know you, getting to know all about you." I believe that if parents and professionals are to be effective in creating marvelous opportunities for our children, then both sets of partners must carve out time to get to know each other's dreams, hopes, fears, constraints, and perspectives. We must take off our own sets of headphones and be willing to hear each other's music, with special attention to and inclusion of the parent's music and unique dance steps. To truly get to know the child, we must also get to know each other, not just as parents and professionals (more labels) but as people. This is hard work requiring patience, trust, and lots of getting to know each other, as well as ourselves. It is one of the most significant ways that we can make a difference in the lives of our children who are indeed the star dancers of this relationship.

References: Kirkmeier K, (1993). Nurturing and empowering the family while treating the child with a disability. Presentation for Project REACH Early On, Pontiac, MI.; Hartman, A. (1993). The professional is political. *Social Work*, 38 (4). 365-366 and Webster's new world dictionary (College ed.). (1968). Cleveland, OH: The World Publishing Company. Notes: The author would like to acknowledge Carolyn McPherson and Karen Mikus for their valuable insights, editorial comments, and support. In addition, the author extends a heartfelt thank you to the many parents and professionals who have shared their partnership stories. You can reach Janice Fialka at ruaw@aol.com or www.danceofpartnership.com.

Educating Our Children Together

Selected excerpts from: *Educating our Children Together: A Sourcebook for Effective Family-School-Community Partnerships* by Susanne Carter for The Consortium for Appropriate Dispute Resolution in Special Education (CADRE), 2003.

We use the term “family involvement” in an expansive way to include and recognize the value of a broad spectrum of activities that involve family members and/or guardians helping children to learn, both at home and at school. The single parent who works two jobs to support her three children and makes sure they are safe, loved, and fed each morning before school is “involved.” The significant other who attends the Individualized Education Program (IEP) meeting of his partner’s child is “involved.” The grandparents with temporary custody of their two grandchildren who clear a space at the kitchen table for them to do homework are “involved.” The foster parents who keep their foster children’s birth parents informed of their children’s progress in school are “involved.” The immigrant parents who cannot speak English and are unfamiliar with the American school system but are passing on a strong work ethic to their children are “involved.” The father serving in the Air Force Reserves who is deployed on a military mission and records audiotapes of himself reading books for his preschooler to hear while he is away is “involved.” The stepfather who volunteers to judge a debate tournament at his stepson’s high school is “involved.” The Bosnian parents who volunteer to teach their daughter’s school staff about the Bosnian language and culture are “involved.” So too is the aunt caring for her nephew with spina bifida who becomes a strong advocate for his needs.

Ten Truths of Parent Involvement

1. All parents have hopes and goals for their children. They differ in how they support their children’s efforts to achieve those goals.
2. The home is one of several spheres that simultaneously influence a child. The school must work with other spheres for the child’s benefit, not push them apart.
3. The parent is the central contributor to a child’s education. Schools can either co-opt that role or recognize the potential of the parent.
4. Parent involvement must be a legitimate element of education. It deserves equal emphasis with elements such as program improvement and evaluation.
5. Parent involvement is a process, not a program of activities. It requires ongoing energy and effort.
6. Parent involvement requires a vision, policy, and framework. A consensus of understanding is important.
7. Parents’ interaction with their own children is the cornerstone of parent involvement. A program must recognize the value, diversity, and difficulty of this role.
8. Most barriers to parent involvement are found within school practices. They are not found within parents.
9. Any parent can be “hard to reach.” Parents must be identified and approached individually; they are not defined by gender, ethnicity, family situation, education, or income.
10. Successful parent involvement nurtures relationship and partnerships. It strengthens bonds between home and school, parent and educator, parent and school, school and community.

The Impact of Family Involvement on Student Outcomes

12 Key Findings from a Decade of Research

1. Effective parent/family involvement improves student outcomes throughout the school years.
2. While parent/family involvement improves student outcomes, variations in culture, ethnicity, and/or socioeconomic background affect how families are involved.
3. Parent/family involvement at home has more impact on children than parent/family involvement in school activities.
4. The nature of effective parent/family involvement changes as children reach adolescence.
5. Parent/family involvement in early childhood programs helps children succeed in their transition to kindergarten and elementary school.
6. Parents/families may need guidance and assistance in how to effectively support their children with homework.
7. The many ways that families of differing cultural/ethnic backgrounds are involved in their children's education are valuable and should be respected when planning parent/family involvement programs.
8. Improved student outcomes have been documented in mathematics and literacy when parents/families are involved.
9. The most promising opportunity for student achievement occurs when families, schools, and community organizations work together.
10. To be effective, school programs must be individualized to fit the needs of the students, parents, and community.
11. Effective programs assist parents in creating a home environment that fosters learning and provides support and encouragement for their children's success.
12. Teachers and administrators must be trained to promote effective parent/family involvement.

Biographical analysis of more than 60 research articles, Carter 2002

Best Practices for Promoting Family Involvement

According to the National Board for Professional Teaching Standards, accomplished teachers work with families to serve the best interests of their children.

1. They establish regular, two-way communication with parents early in the school year.
 - Home visits to meet the child
 - Phone calls of welcome
 - Letters of introduction which include a survey for parents to complete and return
 - Holding an Open House before the school year starts to meet families
 - Arranging for a Parent Bus to provide transportation to the school for registration day and /or Open House
 - Arranging to meet the families in the community, making sure to have refreshments
2. They seek information from parents about their children's strengths, interests, preferences, dispositions, health history, learning goals, and home life.
 - This is an ongoing conversation throughout the year.
 - Surveys
 - "Me Bags" where parents and students together put pictures and artifacts together in a bag which represent the child
 - Interviews - student interviews parent and vice versa
 - At Open House, have activities for parents to do that will reveal this information.
3. They provide information about their specific program and outline steps parents can take to support their children's educational development.
 - Classroom/team/program newsletters
 - Sending home scoring rubrics
 - Websites with assignment directions and rubrics that can be printed at home
 - Email conversations, announcements, etc.
 - Student led conferences in which students and the teacher choose the work samples the student will review with the parent
 - Clear written directions available for assignments
4. They see parents as allies. They treat them as such. Communication is open and regular; perspectives are respected.
 - Motto, "Help Me Help Your Child," is repeated verbally and in parent communication.
 - Giving parents home phone number and/or email address
 - Listening to parent issues, accepting them as valid, and using the information to help the child
 - After student led conference, asking parents to reflect in writing on what they heard and saw, and to offer suggestions for improving the class
 - Newsletters on a regular schedule: weekly, monthly, quarterly
 - Parent advisory groups for teams/programs/grade levels

5. They design learning activities and assessments that involve the families.
 - Cultural interviews with families of different heritages or historical perspectives
 - Learning contracts
 - Teach the Parent activities to reinforce a classroom lesson
 - Student learns his or her learning style and has parent take the inventory also; student helps parent understand what it means to be a visual learner, etc.
 - Student led conferences
 - Projects that require adult help/input
 - Read-along
 - Book-in a-Bag or Activity-in-a-Bag in which all the parts of an assignment are in a zip-lock bag that goes home with the student to be done with a parent/guardian
 - Family trees

6. They help parents understand their child's progress by providing concrete examples; thereby weaning them from a reliance on test scores.
 - Student led conferences using portfolios, work sample folders, rubrics, etc.
 - Asking parents to sign off on a notebook or project before the teacher sees it using the teacher provided rubric
 - Rubrics for assignments
 - Showcase events in which parents come to the school to see student work: Authors' Nights, Science Fairs, Debates, Concerts, etc.

Where are the Parents?



Advocacy, Inc. of Austin, TX printed this article from a parent website. The author had been asked one too many times why more parents of children with special needs were not more involved in PTA and other similar school activities. Below is her response.

Where are the parents? They are on the phone to doctors and hospitals, fighting with insurance companies, wading through red tape in order that their child's medical needs can be properly addressed.

They are buried under a mountain of paperwork and medical bills. They are trying to make sense of systems that seem to be designed to confuse and intimidate all but the very savvy.

Where are the parents? They are at home diapering their 15-year old son, or trying to lift their 100-pound daughter onto the toilet.

They are spending an hour at each meal trying to feed a child that cannot chew, or laboriously and carefully feeding their child through a G-tube.

Where are the parents? They are sitting, bleary eyed and exhausted, in hospital emergency rooms, waiting for test results to come back and wondering: Is this the time that my child doesn't pull through?

They are sitting in hospital rooms as their child recovers from yet another surgery.

They are waiting in long lines in clinics because no insurance company will touch their child.

Where are the parents? *They are busy trying to survive.*

Where are the parents? They are sleeping in shifts because their child won't sleep more than 2 or 3 hours a night and must be constantly watched, lest her or she do him/herself or another member of the family harm.

They are sitting at home with their child because family and friends are too intimidated or unwilling to help with childcare, and agencies that are designed to help are suffering cutbacks.

Where are the parents? They are trying to spend time with their non-disabled children as they try to make up for the extra time and effort that is critical to keeping their disabled child alive.

They are struggling to keep a marriage together, because adversity does not always bring you closer.

They are working two, sometimes three jobs in order to keep up with the extra expenses.

And sometimes, they are a single parent, struggling to do it all by themselves.

Where are the parents? They are trying to survive in a society that pays lip service to helping those in need, as long as it doesn't cost them anything.

They are trying to patch their broken dreams so that they might have some sort of normal life for their children.

Special Education is a Service and NOT a Place

1. Write FIVE positive things about your child. Put it on the refrigerator. Remember: “Parents are a child’s first teacher and best advocate!”
2. Read the paperwork from the school carefully. Know who will be participating in the Individualized Education Program (IEP) meeting. Understand their role at the meeting.
3. Document, document, document. Keep a written record of: phone calls, meetings, emails, casual conversation and correspondence.
4. Be open minded and willing to listen and be an active member of the IEP team.
5. Find a way to involve your child in the IEP. Bring a picture of your child to the meeting. It will help to remind everyone why you are there. Prepare a Parent Report to share information about your child with your team.
6. Be sure you understand everything that you are asked to sign. Ask questions about anything you do not understand. Your signature on the IEP means that you were present, but may not agree with it. Put a check in the box if you do not agree. Follow up with a letter to describe the areas of concern. Be sure to get a copy of the IEP before you leave the meeting.
7. Don’t go alone. Being a friend, your partner, a family member. They will see and hear things that you will not.
8. Know what your dreams are for your child and be ready to share them with the IEP team.
9. Give your child a big hug!
10. Call Parents Reaching Out at 247-0912 or 1-800-524-5176 or check out their website (www.parentsreachingout.org) or stop by their office in Albuquerque.

Parents Reaching Out is your one stop resource for a stronger family. We offer workshops, technical assistance, family-friendly publications and a Resource Center with free lending library. We provide support and useful tools for families and those serving children in New Mexico to promote informed decision-making and quality partnerships. Please contact us for resources about early intervention, early childhood, education, special education, health care access, family involvement and much more.

Parents Reaching Out is the home of:
NM Parent Information and Resource Center (NMPIRC)
NM Parent Training and Information Center (NMPTIC)
NM Family to Family Health Information Center (NMFFHIC)

IEP: A Difference in Perspective

| Family | School Personnel |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. Unfamiliar Turf This can be very unsettling, similar to going into a hospital, feeling lost, professionals running around, you're the outsider.</p> | <p>1. Home turf</p> |
| <p>2. Unfamiliar jargon/policies</p> | <p>2. Know jargon/policies</p> |
| <p>3. Outnumbered A parent may often attend alone.</p> | <p>3. Numerous school staff</p> |
| <p>4. Don't know all of the team</p> | <p>4. Know the team</p> |
| <p>5. Don't know regulations/rights</p> | <p>5. Some understanding of regulations</p> |
| <p>6. Time not convenient</p> | <p>6. Time is relatively convenient</p> |
| <p>7. Issues very personal</p> | <p>7. Issues are routine</p> |
| <p>8. Know the student across settings</p> | <p>8. Know the student only within school context</p> |
| <p>9. Risks: emotional, child's future, retaliation, child's safety, blame Families go into meetings feeling great personal emotional risk. This is their child, their life, their family's future. They know that they and their child will live with the life-long outcomes.</p> | <p>9. Risks: change, money, lawsuits, professional competence or adequacy, feeling "ambushed", boss' approval, job security</p> |

Food for Thought

Who do you think is the most nervous at these meetings?

Do you think there is cause for families to never want to return?

After the meeting, who could be so distraught that they cry?

How could school personnel support families to become equal team members?

What incentive are there to attend meetings if little progress is made year after year?

A Dr. Seuss Perspective on the IEP

Author unknown

Do you like these IEPs?



I do not like these IEPs,
I do not like them, Jeeze Louise.
We test, we check
We plan, we meet
But nothing ever seems complete.

Would you, could you
Like the form?

I do not like the form I see
Not page 1, not 2, not 3.
Another change,
A brand new box,
I think we all
Have lost our rocks.

Could you all meet here or there?

We could not all meet here or there
We cannot all fit anywhere.
Not in a room
Not in a hall
There seems to be no space at all.

Would you, could you meet again?

I cannot meet again next week,
No lunch, no prep,
Please hear me speak.
No, not at dawn,
At 4 p.m. I should be gone!

Could you hear
While all speak out?
Would you write
The words they spout?

I could not hear. I would not write.
This does not need to be a fight.
Sign here, date there,
Mark this, check that
[Beware the students ad-vo-cat(e).]

You do not like them
So you say,
Try again! Try again!
And you may.

If you will let me be
I will try again,
You will see.

Say!
I almost like these IEPs.
I think I'll write 6,003.
And I will practice day and night
Until they say "You got it right!"

10 Tips for Successful IEPs

“10 Tips: How to Use IDEA 2004 to Improve Your Child’s Special Education” was written by attorney, Wayne Steedman, for Wrights Law. This article was downloaded from www.wrightslaw.com and is shared in this handbook for instructional purposes.

1. **Use the Findings and Purposes in IDEA 2004 to Establish a Higher Standard for a Free, Appropriate Public Education (FAPE).** In 1982, the U. S. Supreme Court issued the first decision in a special education case in *Board of Education v. Rowley*, 458 U. S. 176. In *Rowley*, the Court held that school districts did not have to provide the “best” education for disabled students but merely had to provide services so the child received “some educational benefit.” *Rowley* established a low standard for a “free appropriate public education” (FAPE). *When you read the Findings and Purposes of IDEA 2004, you will see that Congress raised the bar for a free appropriate public education (FAPE).*

Prepare Children to Lead Productive, Independent Lives. In “Findings” of IDEA 2004 (Section 1400(c)), Congress found that “30 years of research and experience has demonstrated that the education of children with disabilities can be made more effective by having high expectations for such children,” educating them in the regular classroom so they can “meet developmental goals and, to the maximum extent possible, the challenging expectations that have been established for all children and be prepared to lead productive and independent adult lives, to the maximum extent possible.” (Section 1400(c)(5)(A))

Prepare Children for Employment, Independent Living – and Further Education In “Purposes” of IDEA 2004 (Section 1400(d)), Congress describes what they intend the law to accomplish. In IDEA 2004, Congress added “further education” as a purpose of the law:

“The purposes of this title are to ensure that all children with disabilities have available to them a free appropriate public education that emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment and independent living.” (Section 1400(d)(1)(A))

When Congress added “further education” to the Purposes of IDEA 2004, they established a new outcome for special education, an outcome that had never been identified before.



When you read in “Findings” that disabled children should be given the opportunity to meet the “challenging expectations that have been established for all children” and “improve academic achievement and functional performance... to the maximum extent possible” (Section 1400(c)(5)(E)) and you read that one Purpose of the law is to prepare children for “further education,” you are looking at a new legal standard for a free appropriate public education.

As a parent or teacher, you need to understand that when Congress reauthorized IDEA 2004, they raised the bar. To meet these new legal requirements in IDEA 2004, schools will have to use research-based instruction and provide more intensive special education services.

Meet Developmental Goals & Challenging Expectations Established for Nondisabled Children “to the Maximum Extent Possible”. While the phrase “to the maximum extent possible” was included in earlier amendments to IDEA, there is significant qualitative difference in how this phrase is used in IDEA 2004. In IDEA 1997, the phrase “to the maximum extent possible” described the need to provide disabled children with access to the general curriculum and prepare children for life after school.

In IDEA 2004, the phrase “to the maximum extent possible” describes the requirements to meet the developmental goals and challenging expectations established for nondisabled children, to prepare children with disabilities to lead independent and productive adult lives, and to improve their academic achievement and functional performance.

Provide Teachers with Knowledge & Skills in Scientifically Based Instructional Practices. Congress also found that the education of children with disabilities can be made more effective if all school personnel who work with children with disabilities receive “high quality, intensive” professional development and training to ensure that they have “the skills and knowledge necessary to improve the academic achievement and functional performance of children with disabilities, including the use of scientifically based instructional practices, to the maximum extent possible.” (Section 1400(c)(5)(E))

2. **Use IDEA 2004 and No Child Left Behind (NCLB) to Obtain a Better Individualized Education Program (IEP).** When Congress reauthorized IDEA 2004, they specifically noted the intent to coordinate IDEA 2004 with the No Child Left Behind Act. (Section 1400(c)(5)(C)) Many definitions in IDEA 2004 come directly from NCLB, including the requirements for highly qualified teachers.

A highly qualified teacher has full State certification (no waivers), holds a license to teach, and meets the State’s requirements. Special educators who teach core academic subjects must meet the highly qualified teacher requirements in NCLB and must demonstrate competence in the academic subjects they teach. (Section 1401(10))

Closing the Gap. The purpose of the No Child Left Behind Act is “to ensure that all children have a fair, equal, and significant opportunity to obtain a high quality education and reach, at a minimum, proficiency on challenging State academic achievement standards and State academic assessments.” (20 U.S.C. 6301)

The purpose of NCLB can be accomplished “by meeting the educational needs of low-achieving students [including] children with disabilities...” and “closing the achievement gap between high- and low-performing children and “ensuring access of children to effective, scientifically based instructional strategies and challenging academic content. (Section 6301(3), Section 6301(9))

IDEA 2004 requires states to establish performance goals for children with disabilities that are the same as the state’s definition of adequate yearly progress under NCLB. (Section §1412(a)(15))



Attacking Low Expectations. Congress also found that implementation of the IDEA “has been impeded by low expectations and an insufficient focus on applying replicable research and proven methods of teaching and learning for children with disabilities.” (Section 1400(c)(5)) School personnel often assert that it is unreasonable to expect a child to achieve more than one year of academic progress in one year. School personnel assert this even more vigorously when they develop IEP goals for disabled children, goals that often reflect their low expectations.

But if a disabled child is two, three, or more academic years behind his nondisabled peers, the only way to “close the gap” is for the disabled child to make more than one year of academic progress in one year. When children with disabilities receive intensive instruction from teachers who are skilled in the use of scientifically based instruction, it is not unusual for these children to make more than one year of progress in an academic year.

Parents and teachers must learn about the requirements of NCLB and IDEA 2004 to ensure that these legal requirements are met. Although there is no private right of action under NCLB (i.e., parents cannot sue schools when they fail to meet NCLB’s requirements), the failure to meet NCLB requirements can be used as evidence that a child did not receive an appropriate education.

- 3. Include Research Based Methodology in the IEP.** Congress found that implementation of IDEA “has been impeded by the failure of schools to apply replicable research on proven methods of teaching and learning.” IDEA 2004 includes numerous references to “scientifically based instructional practices” and “research based interventions.” In describing permissible uses of federal funds, IDEA 2004 includes “providing professional development to special and regular education teachers who teach children with disabilities based on scientifically based research to improve educational instruction.” (Section 1411(e)(2)(C)(xi))

The child’s IEP must include “a statement of the special education and related services and supplementary aids and services, based on peer-reviewed research to the extent practicable to be provided to the child.” (Section 1414(d)(1)(A)(i)(IV)) In determining whether a child has a specific learning disability, IDEA 2004 describes a process by which the IEP team “may use a process that determines if the child responds to scientific, research based intervention as a part of the evaluation process.” (Section §1414(b)(6)(B)) This language in IDEA 2004 creates new requirements for schools to use scientific research based instructional practices and interventions that are based on accepted, peer-reviewed research, if such research exists.

School officials often refuse to write educational methodologies into the IEP. They argue that teachers should be free to use an “*eclectic approach*” to educating children with disabilities, and should not be forced to use any specific methodology. *Congress rejected this practice when they reauthorized IDEA 2004.*

By including frequent references to the need to use scientific, research based instruction and interventions, Congress clarified that methodology is vitally important. By requiring the child’s IEP to include “a statement of special education, related services and supplementary aids and services, based on peer reviewed research ...” (Section 1414(d)(1)(A)) Congress clarified that IEPs must include research-based methodology.

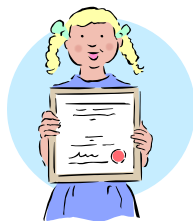
Including methodology in the child's IEP will benefit the child's parents and teachers. As participants in developing their child's IEP, parents will benefit by having input into the instructional methods used to teach their children. The teachers who implement the IEP will benefit by having guidance from a team of professionals who are familiar with the child and who have reviewed the research to determine the interventions and instructional methods that are most likely to provide the child with educational benefit.

This is a win, win situation for all – especially for children who will benefit when they receive effective instruction from teachers who are trained in research-based instructional methods.

4. **Ensure That Annual Goals are Comprehensive, Specific and Measurable.** IDEA 2004 eliminated short-term objectives and benchmarks for students with disabilities, except for those students who take alternate assessments. (Section 1414(d)(1)(A)(i)(I)) Although *Congress may think they did teachers a favor by eliminating short-term objectives and benchmarks, they made teachers' jobs more difficult. Annual goals will have to be far more comprehensive than they were under IDEA 1997.*

Short Term Objectives. The problem is reminiscent of the game “Whack a Mole” where one knocks one mole down, only to have another mole appear in a different location. Since Congress eliminated short-term objectives and benchmarks, this information will now have to be included in the annual goals.

Eliminating short-term objectives creates as many problems for educators as it does for parents. Short-term objectives and benchmarks are steps that measure the child's progress toward the annual goals in the IEP. When written correctly, short-term objectives provide teachers with a roadmap and a clear mechanism to evaluate the child's progress.



Academic and Functional Goals. Although short-term objectives and benchmarks were eliminated, under IDEA 2004 the IEP must include “measurable annual goals, including academic and functional goals.” (Section 1414(d)(1)(A)) IEP goals cannot be broad statements of what a child will accomplish in a year, but must now address the child's academic achievement and functional performance. The IEP must specifically identify all the child's needs, how the school will meet these needs, and how the school will measure the child's progress objectively.

If the IEP goals are not specific and measurable and do not include academic and functional goals, the IEP is defective and open to a challenge that it denies the child a FAPE. Parents must be vigilant. The danger is that the IEP team will propose annual goals that are not specific and measurable, do not meet the child's academic and functional needs, and do not describe how the child's progress will be measured.

Teachers will have to work harder and think more creatively to ensure that the annual goals address all the child's educational needs and that the goals are written in clear, measurable language. If the IEP is based on the child's “present levels of academic achievement and related developmental needs,” addresses the child's academic and functional needs, and includes research validated instructional methods, the IEP should adequately address the child's needs under IDEA 2004.

5. **Use New Evaluation Procedures to Monitor Academic Progress and Progress on IEP Goals.** IDEA 2004 expanded the range of educational issues that must be evaluated and the timeframe within which these evaluations must be completed. After the parent provides consent, the school must complete the initial evaluation and determine if the child is eligible for special education services within 60 days. (Section 1414(a)(1)) Interestingly, the Act does not specify whether the required consent must be in writing.

When conducting an evaluation, the school shall use “a variety of assessment tools to gather relevant functional, developmental, and academic information, including information provided by the parents. (Section 1414(b)(2)) The child’s academic achievement or functional performance may necessitate a reevaluation. (Section 1414(a)(2))

These references to measuring and improving the child’s academic achievement and functional performance are new in IDEA 2004. The IEP team must now consider functional, developmental and academic information in developing an IEP that provides a child with a free appropriate public education (FAPE). School personnel often claim that grades and performance on IEP goals are separate, and that academic failure does not mean that the child was denied a FAPE. IDEA 2004 rejects this claim. *If the child is making progress on his IEP goals, but is receiving failing grades or is not making adequate progress in academic areas, this may be evidence that the child is not receiving a free appropriate public education.*

To meet the threshold requirements for a FAPE, the school must ensure that the child with a disability makes adequate progress in academic achievement and functional performance, and on the IEP goals. If the child’s academic achievement and functional performance are not commensurate with the child’s progress on IEP goals, the child’s IEP needs to be revised. The parents and educators need to determine what adjustments need to be made to the child’s special education program and IEP.

6. **Give Consent Only for Evaluations or Portions of the IEP to Which You Agree.** IDEA 2004 requires the school to obtain parental consent before the initial evaluation and before implementing special education services in the IEP. Although the wording of the statute changed in IDEA 2004, the substantive effect is no different for initial evaluations.



Parental Consent for the Initial Evaluation. Before conducting an initial evaluation (the first assessments requested by a school when a child is suspected of having a disability), the school must obtain parental consent. (Section 1414(a)) If the parent wants the child to receive special education services, there is no reason for the parent to deny consent for the initial evaluation unless the parent prefers to obtain evaluations from a specialist in the private sector. In that case, the parent may consent to the school doing some evaluations. For example, the parent may consent to the school conducting educational evaluations and have their independent psychologist conduct the psychological evaluation.

While IDEA 2004 requires IEP teams to review evaluations provided by the parent, the team is not required to accept the findings and recommendations in private evaluations. Private evaluations can lead to problems if they are improperly done or if the individual who conducts the evaluation does not meet state requirements. (Section 1414(b)(3))

Before scheduling an evaluation by an expert in the private sector (i.e. a child psychologist, school psychologist, neuropsychologist, or educational diagnostician), the parent should carefully review the individual's credentials. Here are some questions you need to answer:

- ✓ Does the evaluator meet state requirements to conduct the evaluation (for example, in most states a psychologist must be licensed to conduct psychological evaluations)?
- ✓ Does the school district generally accept evaluations from this evaluator?
- ✓ Is the evaluator willing to attend the eligibility or IEP meeting to explain his findings, educate the IEP team about the reasons for the recommendations and what is likely to happen if the recommendations are ignored?

If the parent refuses to consent to an initial evaluation by the school, the school may use mediation, resolution, or a due process hearing to obtain the evaluation. (Section 1414(a)(1)(D)(ii))

Parental Consent for Special Education & Related Services. The parent is also required to give consent for special education and related services. If the parent refuses to provide consent for services, the public school “shall not provide special education and related services to the child...” (Section 1414(a)(1)(D)(ii)(II)) This language represents a significant change from IDEA 1997 which required schools to seek mediation or due process to obtain parental consent for services.

This new language may create problems for parents who want their child to receive special education and related services, but disagree with part of the IEP and/or how the school plans to provide services in the IEP. The law does not prevent parents from consenting to parts of the IEP that are acceptable, while refusing consent for those parts of the IEP with which they disagree. There is some support for this approach in the IDEA 2004 statute.



IDEA 2004 maintains the “stay put” provisions of IDEA 1997. (Section 1415(j)) Under the “stay put” provision, the child can remain in the then-current educational placement and continue to receive the same services during proceedings to challenge the IEP, unless the parents and school agree otherwise. Although there is no “then-current educational placement” when there is a dispute between parent and school over the initial IEP, the fact that the parent and school agree on some part of the IEP creates an obligation for the school to implement those parts of the IEP to which the parent provided consent.

If you want to consent to part of the IEP, here are some suggestions:

- ✓ Initial each part of the IEP to which you agree.
- ✓ Next to the signature line, write that you do not consent to any part of the IEP that you did not initial.

Think about how you want to resolve your dispute or disagreement with the school. IDEA 2004 includes additional procedures to resolve disputes. (See Tip #10) As a parent, you need to understand that the school is under no obligation to seek resolution of the dispute and is actually prohibited from doing so under IDEA 2004. (Section 1414(a)(1)(D)(ii)(II))

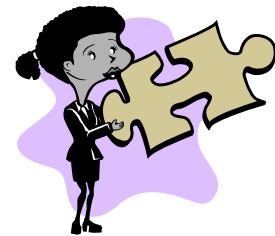
Insist that the Child's Regular Education Teacher(s) Participate in IEP Meetings. IDEA 2004 lists the individuals who are required members of the IEP team:

- ✓ The parents
- ✓ Not less than one regular education teacher
- ✓ Not less than one special education teacher
- ✓ An individual who can interpret the instructional implications of evaluations
- ✓ A representative of the school district who has supervisory responsibilities and is knowledgeable about the general education curriculum and agency resources. Section 1414(d)(1)(B))

Congress changed IDEA 2004 to allow members of the IEP team to be excused from attending IEP meetings, even when their area of the curriculum or related service will be discussed. As a parent, you do not have to consent to this. *Before a team member can be excused, the individual must submit a written report to the IEP team and the parent must consent in writing. (Section 1414(d)(1)(C))* The demands placed on a teacher's time are great. In the end, the time spent developing a comprehensive IEP that addresses the child's unique needs will save time. More important, input from all the child's teachers will benefit the child. Regardless of whether the parent consents to a regular education teacher being excused from an IEP meeting, the law still requires that at least one regular education teacher attend the meeting.

If the child receives any educational services in a regular education class or may receive educational services in a regular education class, the regular education teacher(s) should attend the IEP meeting. Although the law only requires one teacher to attend, all regular education teachers with whom the child has or will have contact should attend the IEP meetings. If the child's teachers do not attend an IEP meeting, it is likely that important information will be missed or overlooked. Without input from the child's teachers, other members of the IEP team, including the receiving teachers, will not understand the child's unique needs and how to address these needs.

The parent should not consent to team members being excused from IEP meetings unless the circumstances are exceptional. If a team member's area will be discussed, the teacher or related services provider needs to attend the meeting to provide information and answer any questions that arise.



If you encounter a problem getting the required members of your child's team to attend the IEP meeting, write a letter to request that all of your child's regular education teachers and related service providers attend the IEP meeting.

7. **Avoid Three-Year IEPs Like the Plague.** The three-year IEP was the dumbest idea Congress came up with when they reauthorized IDEA 2004. Determining a child's unique academic, developmental and functional needs, developing measurable annual goals, determining how these goals will be met, how the child's progress will be measured, and how the parents will be advised of their child's progress at regular intervals is difficult enough when only done once a year.

Anyone who thinks that parents and school personnel can develop an IEP that will meet a disabled child's needs for three years is ignorant about child development and education. Fortunately, three year IEPs are a pilot program that will be available in no more than 15 states. (Section 1414(d)(5)) If your state submits a proposal and is approved for the three year IEP pilot program, the IEP team must obtain your consent before they develop a three-year IEP. Do not grant consent.

Find out if your state was approved for the IEP pilot program. If your state was approved for the pilot program, you need to double-check the beginning and ending dates on any IEP for your child. Before you sign consent to implement your child's IEP, make sure the IEP has an ending date that is no longer than twelve months after the IEP was developed.

You are not limited to one IEP meeting a year. *Parents and teachers can request an IEP meeting to review and revise the child's IEP more often than once a year.* IDEA 2004 provides that the IEP team shall revise the IEP to address:

- ✓ Any lack of expected progress toward the IEP goals or in the general education curriculum
- ✓ The results of any reevaluation
- ✓ Information provided to or by the parents
- ✓ The child's anticipated needs and
- ✓ Other matters. (Section 1414(d)(4))

8. **Challenge Suspension or Expulsion if Child's Behavior was a Manifestation of the Disability, or if the Alternate Placement Does Not Provide FAPE.** IDEA 2004 permits the school to suspend a disabled child from the current program or place the child into an interim program for up to 10 days if the child violates a "code of student conduct." (Section 1415(k)(1)(A))

If the school wants to suspend the child for longer than 10 days, they must convene an IEP meeting to determine whether the child's behavior is a manifestation of the child's disability. If the school concludes that the child's behavior was not a manifestation of the disability, the school can discipline the child in the same way and to the same extent that a nondisabled student can be disciplined. (Section 1415(k)(1)(C))

Congress also made it easier for the school to determine that the child's behavior is not a manifestation by eliminating key elements of the manifestation determination process in IDEA 1997. IDEA 2004 does not require the IEP team to determine whether the child's IEP and placement are appropriate. IDEA 2004 only requires the IEP team to determine whether the child's behavior "was caused by or had a direct and substantial relationship to the child's disability" or "whether the behavior was the "direct result of the local education agency's failure to implement the IEP." (Section 1415(k)(1)(E))

This means the school could provide a child with an inappropriate special education program and placement, and could expel the child from school. There are several strategies you can use to ensure that the school does not use behavior problems as a way to deprive your child of an appropriate education.

IDEA 2004 still requires school districts to provide a free appropriate public education to all children with disabilities, including children who have been suspended or expelled from school. (Section 1414(k)(1)(D) and Section 1412(a)(1)) If the school places your child into an alternate setting, you must diligently investigate whether or not the child's IEP is being fully implemented. If the IEP is not being implemented, you may force its implementation through the dispute resolution procedures in the law. One strategy is to challenge the IEP team's determination that the behavior was not a manifestation of the child's disability. Parents must only request a due process hearing if they are prepared and have a valid claim.

If you attempt to argue that the IEP and/or placement were not appropriate as the reason for the behavior being a manifestation, you may be met by a claim from the school district that your action was frivolous. Parents can certainly argue that the IEP and/or placement are not appropriate. You should also include claims that the behavior for which the child is being disciplined was caused by or had a direct and substantial relationship to the child's disability, and/or that the child's misbehavior was the direct result of the school's failure to implement the IEP, if these claims are valid and you have support for them.

Under IDEA 2004, "stay put" does not apply to appeals of disciplinary decisions, so the child must remain in the alternate program until the removal period expires or until a hearing officer orders the student's return to school.

9. **Avoid Due Process Hearings if Possible.** Due process hearings should be your last resort, after you have attempted all other methods to resolve your dispute. Due process hearings are often an expensive and lengthy process. There are few absolutes in the law, and perhaps even fewer absolutes in the context of special education litigation. The adversarial nature of due process hearings often creates a wound in the relationship between parents and school personnel that never heals. Try to resolve your dispute through IEP meetings, mediation, and/or the Resolution Session before you request a due process hearing.

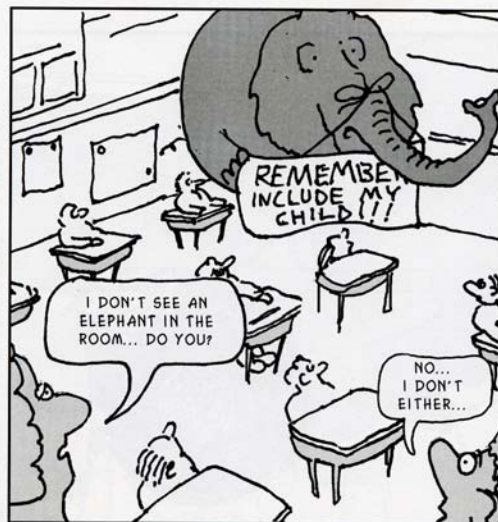
Mediation Parents and schools can attempt to resolve their dispute through mediation. Mediation is a confidential process that allows parties to resolve disputes without litigation. The mediator helps the parties express their views and positions and understand the other's view and positions. Before entering into mediation, you need to understand your rights and the law. When you mediate, your goals are to resolve the problems and protect the parent-school relationship. If the dispute is resolved in mediation, IDEA 2004 requires the parties to execute a legally binding agreement that sets forth the terms of the resolution. (Section 1415(e)(2)(F))

Resolution Session IDEA 2004 includes a new mandatory "resolution session" that provides the parties with an opportunity to resolve their dispute before the due process hearing. (Section 1415(f)(1)(B)) The school district must send "the relevant member or members of the IEP team" who have knowledge about the facts in the parents' complaint and a school district representative who has decision-making authority. The school board attorney may not attend the Resolution Session unless an attorney accompanies the parent. The parents and school district may waive the Resolution Session or use the mediation process. If the school district has not resolved the complaint to the parents' satisfaction within 30 days of receiving the complaint, the due process hearing can be held. (Section 1415(f)(1)(B)(ii))

Due Process Hearings If your attempts to resolve your dispute have been unsuccessful, you may decide to request a due process hearing. Consult with an attorney who is knowledgeable about this area of law first. Many of the pretrial procedures and timelines for due process hearings are new in IDEA 2004. These pretrial procedures are technical and cumbersome. IDEA 2004 includes other disincentives for parents who file for due process. If the parents' claim is found to be "frivolous, unreasonable, or without foundation," the parents' attorney can be held liable for the school district's attorney's fees. (Section 1415(i)(3)(B)) If the parents' complaint was filed "for any improper purpose, such as to harass, to cause unnecessary delay, or to needlessly increase the cost of litigation," the parents can be held liable for the school district's attorney's fees.

Congress only envisioned shifting the school district's attorney's fees to parents or their attorneys in extraordinary cases. This fee shifting statutory language closely follows Rule 11 of the Federal Rules of Civil Procedure and a case from the U. S. Supreme Court (Christiansburg Garment Co. v. EEOC, 434 U.S. 412 (1978)). Cases in which a plaintiff is forced to pay a defendant's attorneys under Rule 11 or the Christiansburg standard are rare. (See IDEA 2004: Rule 11 and Attorneys Fees by Pete Wright)

Parents should not be deterred from requesting a due process hearing out of fear that they may have to pay the school's attorney's fees, if they are filing in good faith and have a valid claim. You should avoid a due process hearing if possible. The best way to avoid a due process hearing is to prepare for a due process hearing as soon as you realize that you have a disagreement or dispute with the school about your child's special education program. If you have a well-organized case and a clear, simple theme, you will be in a stronger position if you need to request a due process hearing. You must be able to document your attempts to resolve the dispute. You must also be able to describe your concerns about the school's proposed program or placement and your proposed solution. When you document your concerns, you make it more likely that others will understand your position and help you resolve your dispute.



AFTER MEETINGS, PHONE CALLS, AND LETTERS HAD FAILED, ONE PARENT TRIED A SUBTLE REMINDER.

SMART IEPs

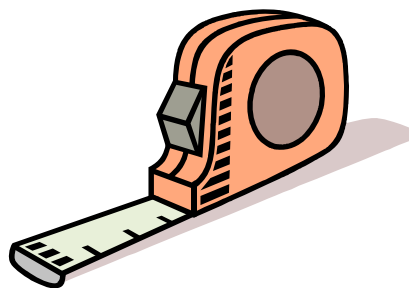
Individualized Education Program

Chapter 12 SMART IEPs From Emotions to Advocacy (FETA) 2nd edition by Pam and Pete Wright offers a common sense approach to writing IEPs that provides useful examples for families and educators. We have included excerpts from this information in this section. For the complete version and other useful information, please visit the Wrights Law website: www.wrightslaw.com or www.FetaWeb.com

Learning About SMART IEPs

The term SMART IEPs describes IEPs that are specific, measurable, use action words, are realistic and relevant, and time-limited.

- S** Specific
- M** Measurable
- A** Use Action Words
- R** Realistic and relevant
- T** Time-limited



Specific. SMART IEPs have specific goals and objectives. Specific goals target areas of academic achievement and functional performance. They include clear descriptions of the knowledge and skills that will be taught and how the child's progress will be measured. Look at these two goals. Which one is specific?

Dylan will increase study skills for academic success.

Dylan will demonstrate the following study skills: skimming written material and use reference materials in social studies class.

Measurable. SMART IEPs have measurable goals and objectives. Measurable means you can count or observe it. Measurable goals allow parents and teachers to know how much progress the child has made since the performance was last measured. With measurable goals, you will know when the child reaches the goal. Which goal is measurable and observable?

Owen will improve his reading skills.

Given second grade material, Owen will read a passage of text orally at 110- 130 wpm with random errors.

Action Words. IEP goals include three components that must be stated in measurable terms: (a) direction of behavior (increase, decrease, maintain, etc.); (b) area of need (reading, writing, social skills, transition, communication, etc.); and (c) level of attainment (i.e., to age level, without assistance, etc.)

SMART IEPs use action words like: “The child will be able to . . .” Which of these goals is specific, measurable and includes action words?

Betsy will decrease her anger and violation of school rules.

Provided with anger management training and adult support, Betsy will be able to remove herself from environments that cause her to lose control of her behavior so that she has no disciplinary notices.

Realistic and Relevant. SMART IEPs have realistic, relevant goals and objectives that address the child’s unique needs that result from the disability. SMART IEP goals are not based on district curricula, state or district tests, or other external standards. Which of these goals is specific, measurable and realistic?

Kelsey will demonstrate improved writing skills.

Kelsey will improve her writing and spelling skills so she can write a clear, cohesive, and readable paragraph consisting of at least 3 sentences, including compound and complex sentences that are clearly related.

Time-limited.

SMART IEP goals and objectives are time-limited. What does the child need to know and be able to do after one year of special education? What is the starting point for each of the child’s needs (present levels of academic achievement and functional performance)? Time-limited goals and objectives enable you to monitor progress at regular intervals. Assume your child is in the fifth grade. Alex’s reading skills are at the early third grade level. Here is a specific, measurable, time-limited goal that tells you what Alex can do now and what he will be able to do after one year of special education:



Present Level of Performance: Given third grade material, Alex reads 50-70 wpm with 4-6 errors.

Annual Goal: Given fifth grade material, Alex will read 120 wpm with only random errors. To ensure that Alex meets his goal, we will measure his progress at nine-week intervals (4 times during the school year).

After **9 weeks**, given third grade material, Alex will read 110 to 120 wpm with 1-3 errors.

After **18 weeks**, given fourth grade material, Alex will read 70-100 wpm with 1-3 errors.

After **27 weeks**, given fifth grade material, Alex will read 70-100 wpm with 1-3 errors.

At the **end of the year**, Alex will read 120 wpm with only random errors.

Smart IEP Goals and Objectives

IDEA 2004 requires your child's IEP to include:

- a statement of the child's present levels of academic achievement and functional performance, including how the child's disability affects the child's involvement and progress in the general education curriculum . . . [and]
- a statement of measurable annual goals, including academic and functional goals, designed to meet the child's needs that result from the child's disability to enable the child to be involved in and make progress in the general education curriculum; and . . .
- meet each of the child's other educational needs that result from the child's disability.

Present Levels of Academic Achievement and Functional Performance

Begin by analyzing your child's present levels of performance. The present levels of performance describe "areas of need arising from the child's disability." The present levels of performance tell you what the child knows and is able to do. How can you make your child's present levels of academic achievement and functional performance measurable? Here are some suggestions:

You can specify performance at a grade or age level on objective tests.

You can indicate a rate (i.e., 3 out of 4 times, 5 minutes out of every 10 minutes.)

When you look at the test data from standardized testing and evaluations on your child, this will provide information about what your child knows and is able to do. Here are some questions to help you identify your child's present levels of academic achievement:

1. What is your child's level of academic achievement in reading, writing, spelling, and arithmetic?
2. Can your child read the textbooks assigned to general education students in his or her grade level?
3. Are your child's reading skills two or three years below grade level on an individual educational achievement test of reading?
4. Can your child read the grade level textbooks in core academic subjects? Assume your child is in the tenth grade. Let's look at your child's functional performance in different areas.
5. Can your child read a job application? Can your child complete the job application without assistance?
6. Can your child read the driver training manual? Can your child pass the driving test without assistance?
7. Can your child read a map? A bus schedule? Balance a checkbook?
8. Can your child use the Internet to do research?

Developing the IEP

The Individuals with Disabilities Education Act of 2004 describes how IEPs should be developed. The IEP team shall consider: the child's strengths; the parents' concerns for enhancing their child's education; the results of the initial evaluation or most recent evaluation of the child; and the academic, developmental, and functional needs of the child. (20 USC §1414(d)(3)(A))



Use Baseline Data for Present Levels of Performance

The term “performance” describes what the child can do. What are your child's present levels of academic achievement and functional performance? What do your child's standard scores, percentile rank, grade equivalent and age equivalent scores mean? Present levels of academic achievement and functional performance include data from objective tests, including “criterion-referenced tests, standard achievement tests, diagnostic tests, or any combination of the above.” (Source: Appendix A, Question 1, of the 1999 Regulations for IDEA 97)

Measurable Academic and Functional Goals

IEP goals should enable the child to learn the basic skills that are necessary for the child to be independent and self-sufficient. These basic skills include: communication skills; social skills and the ability to interact with others; and, reading skills. The child must learn to communicate. Most children communicate by expressive and receptive speech. Some children use assistive technology to communicate. The child must learn social skills so he or she can interact with other people. Finally, the child must learn to read. Reading is the gateway to all other knowledge.

“Teaching students to read by the end of third grade is the single most important task assigned to elementary schools.” - American Federation of Teachers

The IEP should:

Meet the child's academic, development, and functional needs that result from the disability; enable the child to be involved in and progress in the general curriculum; and meet each of the child's other educational needs that result from the child's disability. (Source: 20 USC §1414(d))

IEP goals cannot be broad statements about what a child will accomplish in a year, but must address the child's academic achievement and functional performance. The IEP must identify all the child's needs, how the school will meet these needs, and how the school will measure the child's progress. If the IEP is based on the child's present levels of academic achievement and related developmental needs, addresses the child's academic and functional needs, and includes research validated instructional methods, the IEP should pass muster under IDEA 2004. If the IEP does not include measurable academic and functional goals, the IEP is defective and open to a challenge that it denies the child a FAPE.

SMART IEP Goals and Objectives

Here is a SMART IEP goal for a child who needs to learn to type:

At the end of the first semester, Mark will touch-type a passage of text at a speed of 20 words per minute, with no more than 10 errors, with progress measured on a five-minute timed test. At the end of the second semester, Mark will touch-type a passage of text at a speed of 40 words per minute, with no more than 5 errors, with progress measured on a five-minute timed test.

This SMART goal is specific, measurable, and time-limited. It focuses on Mark's need to learn the functional skill of typing. You can measure Mark's progress by observing his typing speed and accuracy.

Here is another example from Chapter 12 of *From Emotions to Advocacy*. Megan is a fifth grader who has not learned to read. Megan's reading decoding skills are at the 10th percentile level. How will Megan's parents know if she is benefiting from the special education program? If Megan receives an appropriate education, her scores on reading subtests will improve.

According to Megan's SMART IEP goal: *After one year of specialized instruction, Megan will be able to decode words at the 25th percentile level as measured by the decoding score of the Gray Oral Reading Test (GORT).*



When Megan's reading skills reach the 25th percentile level, she is making progress. Her progress will be measured with standardized tests. Megan's next IEP will include new goals and objectives to bring her reading skills up to the level of her peers.

Short-term Objectives

In IDEA 2004, Congress eliminated requirements for short-term objectives and benchmarks in IEPs for students with disabilities, except for students who take alternate assessments. By eliminating short-term objectives and benchmarks, Congress made teachers' jobs more difficult. Annual goals will have to be far more comprehensive than they were under IDEA 1997. Since short-term objectives and benchmarks were eliminated, this information will now have to be included in the annual goals. Eliminating short-term objectives creates as many problems for educators as it does for parents. Short-term objectives and benchmarks are steps that measure the child's progress toward the annual goals in the IEP. When written correctly, short-term objectives provide teachers with a roadmap and a clear mechanism to evaluate the child's progress.

The danger is that the IEP team will propose annual goals that are not specific and measurable, do not meet the child's academic and functional needs, and do not describe how the child's progress will be measured. Teachers will have to work harder and think more creatively to ensure that the annual goals address all the child's educational needs and that the goals are written in clear, measurable language.

Non-Goals: Attitude Statements

IEPs often include attitude statements, i.e., “have a good attitude,” “display a cooperative spirit,” or “develop healthy peer relationships.” *You cannot measure an attitude. An attitude is a state of mind that exists within an individual.* Attitudes are not measurable, nor are attitudes observable to outsiders. You must be able to describe an outcome to know if the goal has been met. How will you know if an attitude goal is met? Can you measure Johnny’s “better attitude?” No. Can you observe “commitment to academic success?” No. Perhaps we agree that Johnny has a better attitude. On what do we base our opinions? Dr. Robert Mager, author of books about goal analysis and measuring educational outcomes, explains that we base our opinions on circumstantial evidence.

We use circumstantial evidence to decide if Johnny’s attitude has improved. If Johnny displays behaviors that we associate with a good attitude, we conclude that Johnny’s attitude has improved. Examples: Johnny smiles often. Johnny stopped yelling at the teacher and his classmates. Johnny offers to help others. *These are observations, not subjective beliefs.*

Make Behavior Measurable. You can make behavior measurable by defining the factors surrounding the behavior. These factors include:

- precipitating events (“when asked to work independently”)
- environmental factors (“when dealing with female authority figures)
- other observable patterns (“after lunch,” “always on the playground,” “in math class”)
- identifying the results of the behavior (i.e. “removal from the classroom increases this negative behavior.”)



Non-Goals: States of Being

Many IEPs include goals that cannot be measured. Examples: to appreciate music, to understand weather, to have a better attitude, to develop a love of reading, to show respect for authority.

Non-Goal: *The student will appreciate classical music.*

To accomplish this non-goal, the student will listen to classical music three hours a day, for one month. How can you assess “appreciation of classical music?” How will independent observers know if the student appreciates classical music? The goal focuses on a state of being. *You cannot measure a state of being.*

Improving Student Outcomes

State Performance Plan (SPP)

The Individuals with Disabilities Education Act (IDEA 2004) is the latest revision to federal special education law. There were several exciting new additions to the law that should enhance meaningful parent involvement in their child's special education program. When families and educators have clear information about the accountability standards set by IDEA 2004, they can work together as a *professional learning community* to investigate the issues, plan strategies and make decisions based on data to improve outcomes for students with disabilities.

There is an important new requirement for State Education Agencies called the State Performance Plan (SPP). The SPP provides a strategic framework for the state to improve certain areas of special education that should improve services to students with disabilities. The SPP is made up of 20 performance indicators that states need to collect data to determine their level of performance, set targets for improvement, and develop improvement strategies to improve state performance for students with disabilities.

Think of the SPP as the State's IEP and the APR as the annual review of the SPP. The SPP is a six-year IEP for the State that improves accountability in special education and improves outcomes for students with disabilities. It is critical to have the parent's perspective and experiences reflected in the SPP. In New Mexico, all districts are required to develop an Educational Plan for Student Success. (EPSS) focused on success for **all** students. The New Mexico Public Education Department expects schools and districts to use the EPSS as the blueprint to meet multiple PED requirements (No Child Left Behind, Section 504, IDEA 2004 and others). Data based goals and strategies to meet the State Performance Plan (SPP) of Indicators 1-13 must be included in EPSS plans of every district in New Mexico.

20 Performance Indicators in the State Performance Plan (SPP)

Indicator 1: Improving graduation rates for students with disabilities.

Percent of youth with IEP's graduating from high school with a regular diploma (standard pathway) compared to all youth from the state graduating with regular diploma. (80% target by 2010-11)

Indicator 2: Decreasing dropout rates for students with disabilities.

Percent of youth with IEP's dropping out of high school compared to the percent of all youth in the state dropping out of high school.

Indicator 3: Ensuring all students with disabilities participate in statewide or alternate assessments.

Participation and Performance of children with disabilities on statewide assessments; percent of youth with IEPs scoring proficient or above in reading and math.

Indicator 4: Reducing suspension and expulsion rates for students with disabilities.

- A. Percent of students with IEP's identified as having a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year by ethnicity compared to state target.
- B. Percent of students with IEP's identified as having a significant discrepancy in the rates of suspensions and expulsions for greater than 10 days in a school year by race and ethnicity.

Indicator 5: Providing services for students with disabilities in the least restrictive environment.

Percent of students with IEP's, ages 6 - 21 in three LRE settings compared to the state target.

- Setting 1: In regular classroom 80% or more of the school day.
- Setting 2: In regular classroom 40% to 79% of the school day.
- Setting 3: Setting 2: In regular classroom less than 40% of the school day.

Indicator 6: Providing preschool children with disabilities services in the least restrictive environment.

Percent of preschool students with IEP's, ages 3 through 5 who received special education and related services in settings with typically developing peers compared to the state target. (70% by school year 2010-2011)

Indicator 7: Improving cognitive and social outcomes for preschool children with disabilities.

Percent of preschool children with IEP's who demonstrate improved:

- Positive social-emotional skills (including social relationships)
- Acquisition and use of knowledge and skills (including early language/communication and early literacy)
- Use of appropriate behaviors to meet their needs

Indicator 8: Improving parent involvement in their child's special education program.

Percent of parents with a child receiving special education services who report that schools facilitated parent involvement as a means of improving services and results for children with disabilities.

Indicator 9: Reducing disproportionality of cultural groups in special education.

Percent of students with IEP's identified as having disproportionate representation of racial and ethnic groups in special education and related services that is a result of inappropriate identification. (Each Local Education Authority [LEA] is compared to itself.)

Indicator 10: Reducing the number of students from other cultures in certain disability categories. (*Autism, Specific Learning Disability, Speech and Language Impaired, Mental Retardation, Emotionally Disturbed, Other Health Impaired*)

Percent of students with IEP's identified as having disproportionate representation of racial and ethnic groups in specific disability categories that is a result of inappropriate identification. (Each LEA is compared to itself.)

Indicator 11: Improving efforts to locate and serve students with disabilities.

Percent of children with parental consent to evaluate, who were evaluated and eligibility determined within 60 calendar days.

Indicator 12: Ensuring a smoother transition from preschool programs to school-based programs.

Percent of children referred by Part C prior to age 3, who are found eligible for Part B, and who have an IEP developed and implemented by their third birthday.(100% compliance)

Indicator 13: Improving transition services for students with disabilities at the secondary level, i.e., 16+ years.

Percent of youth aged 14 and above with an IEP that includes coordinated, measurable, annual IEP goals and transition services that will reasonably enable the student to meet post secondary goals.

Indicator 14: Improving the outcomes for students moving from secondary to postsecondary activities.

Percent of youth who had IEP's, are no longer in secondary school, and who have been competitively employed, enrolled in some type of postsecondary school, or both, within one year of leaving high school.

Indicators 15-20 are related to the general supervision system requirements for the state agency charged with the responsibilities of monitoring school districts to ensure compliance with the law including complaints, hearings, resolution sessions mediation and accuracy of data collected.

Indicator 15: Making sure school districts correct noncompliance areas in the special education program

Indicator 16: Ensuring complaints filed by parents and other agencies are completed in a 60-day period

Indicator 17: Ensuring due process hearings are completed in a 45-day period

Indicator 18: Increasing the use of resolution sessions to resolve due process hearings

Indicator 19: Increasing the use of mediation to resolve differences with the school

Indicator 20: Making sure the data used by the State is valid, reliable, and accurate

The NM State Performance Plan and district information relating to Indicators 1-14 is available from the NM Public Education Department Special Education Bureau. Visit their website: www.ped.state.nm.us/seo/index.htm

The Starfish Story



A man was walking along the beach. Far in the distance, he could see a stretch of beach where hundreds of starfish had washed up on the shore. As he got closer, he could see a young boy picking up the starfish, one by one, and throwing them back into the ocean. The man stood and watched. He felt the futility of the boy's actions; there were so many starfish and only one boy trying to save them. He shook his head with frustration and walked closer to the boy and the hundreds of starfish.

He watched again and finally he could watch no longer. He walked over to the boy and said, "Why are you doing that? There are hundreds of starfish and only one of you. What you are doing is impossible! You will never save them all, and besides what difference does it really make?"

The boy looked at the man as he picked up one more starfish and threw it back into the sea, and then replied, "It made a difference to that one!" After a moment the man, too, bent to pick up a starfish and threw it into the water and the safety beyond the breaking waves.

Like the boy and the man in the story, we can make a difference, one by one.



Parents Reaching Out

Your One Stop Resource for a Stronger Family

As a statewide non-profit organization, we connect with parents, caregivers, educators and other professionals to promote healthy, positive and caring experiences for New Mexico families and children. We have served New Mexico families for over twenty five years. Our staff and Family Leadership Action Network volunteers reflect the unique diversity of the communities throughout our state.

Children do not come with instructions on how to deal with the difficult circumstances that many families experience. Parents Reaching Out believes that families' needs go beyond the bounds of formal services. *What we can offer to each other is uniquely ours. We have all been there.*

Our Mission

The mission of Parents Reaching Out is to enhance positive outcomes for families and children in New Mexico through informed decision making, advocacy, education, and resources. Parents Reaching Out provides the networking opportunities for families to connect with and support each other. This mission supports *all families* including those who have children with disabilities, and others who are disenfranchised.

Parents Reaching Out achieves this by:

- Developing family leadership
- Connecting families to each other
- Building collaborative partnerships
- Providing families knowledge and tools to enhance their power

Our Beliefs

- Families need support where ever they are in their journey.
- All families care deeply about their children.
- Families may need tools and support to accomplish their dreams.
- All families are capable of making informed decisions that are right for their family.
- Families in the state benefit from our organization having the staff and materials that meet their diversity.
- Systems that listen carefully to the family perspective improve outcomes for our children.

We invite all families and those serving families and children in New Mexico to make *Parents Reaching Out your one stop resource for a stronger family.* Our Resource Center, publications and workshops offer tools for informed decision-making and quality partnerships.

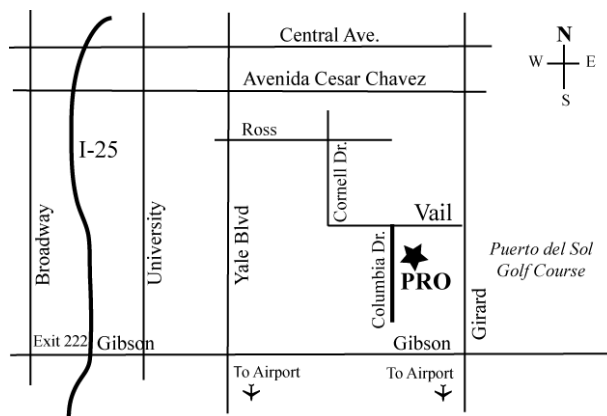
Parents Reaching Out is the home of:

- NM Parent Information and Resource Center (NMPIRC)
- NM Parent Training and Information Center (NMPTIC)
- NM Family to Family Health Information Center (NMFFHIC)

Parents Reaching Out

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Albuquerque, NM 87106
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www.parentsreachingout.org

From I-25—take the Gibson Blvd Exit 222 and go East on Gibson. Turn left at the third stop light (Girard). Turn left on Vail. Go one block to Columbia. Turn left on Columbia. Parents Reaching Out is on the east side of the street. Welcome!





January 2009