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PREVIEW

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CLASSIFICATION OF DEAF STUDENTS AS LEARNING DISABLED AT
RESIDENTIAL DEAF SCHOOLS IN THE UNITED STATES

The University of Nebraska - Lincoln

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PREVIEW

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CLASSIFICATION OF DEAF STUDENTS AS LEARNING DISABLED
AT RESIDENTIAL DEAF SCHOOLS IN THE UNITED STATES

by

Kyle R. Jaussi

A DISSERTATION

Presented to the Faculty of
The Graduate College in the University of Nebraska
In Partial Fulfillment of Requirements
For the Degree of Doctor of Philosophy

Major: Interdepartmental Area of Administration,
Curriculum and Instruction

Under the Supervision of Professors James Walter and
Robert E. Stepp, Jr.

Lincoln, Nebraska

August, 1985

TITLE

CLASSIFICATION OF DEAF STUDENTS AS LEARNING DISABLED

AT RESIDENTIAL DEAF SCHOOLS IN THE UNITED STATES

BY

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CLASSIFICATION OF DEAF STUDENTS AS LEARNING DISABLED
AT RESIDENTIAL DEAF SCHOOLS IN THE UNITED STATES

Kyle R. Jaussi, Ph.D.

University of Nebraska, 1985

Advisors: James Walter and Robert E. Stepp, Jr.

The purpose of this study was to compare the definitions of learning disability, processes for identifying learning disabled students, and educational procedures followed as delineated in PL 94-142 with the definitions, processes, and procedures used by residential deaf schools in the United States enrolling deaf, learning disabled students.

The population consisted of administrators and teachers at residential deaf schools in the United States enrolling four or more deaf, learning disabled students. This population was selected by reviewing the 1983 American Annals of the Deaf Survey, reported in April, 1984. The instruments included a descriptive survey and Likert scale to which the population responded.

Administrators from 31 residential deaf schools responded to the survey, with the majority of them reporting (1) no definition for learning disability, (2) no formal process for identifying deaf students as learning disabled, and (3) no formal program for deaf, learning disabled students enrolled at their institutions. Analysis of teacher responses to questions paralleling administrator questions revealed a diversity of opinions. Sixty percent of the teachers

reported no definition for learning disability; 44 percent reported no formal process for identifying deaf, learning disabled students; and 38 percent reported no formal program for deaf, learning disabled students at their institutions. There was a lack of consensus among administrators and teachers at the 31 institutions and frequently among administrators and teachers at the same institution. Although the administrators reported planning no changes in programs for deaf, learning disabled students at their institutions, teachers reported changes were needed. Teachers consistently cited the need for personnel trained in learning disabilities and in-service training for the regular staff concerning learning disabilities.

PREVIEW

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K.R.J.

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PREVIEW

CHAPTER I

INTRODUCTION

Context of the Problem

With advances in medical science, more children survive pregnancy and birth complications, with handicaps such as deafness or multiple handicaps. General incidence figures suggest that the number of multihandicapped deaf students is increasing rapidly. For example, Wier (1963) reported there were 1,069 multihandicapped deaf students in 1954 and 3,050 in 1960. Using data from the 1968 Annual Survey of Hearing Impaired Children and Youth, Rawlings and Gentile (1970) reported that over 7,000 of the total 21,000 deaf students were identified by their programs as having at least one additional handicap. Power and Quigley (1971), in a review of the literature, estimated that approximately 25 percent of all deaf children in the United States had another disability.

Twenty to thirty years ago, the major causes of hearing impairment were very different. A large number of children were deafened (postlingually deaf), or were genetically deaf (inherited deafness, mostly without major secondary handicaps). There has been a shift in incidence, time of onset, and etiology in the population. By the early 1970's, more than 66 percent of the population in schools for the deaf were prelingually deaf and multihandicapped (Vernon, 1969). The percentage is even higher in the 1980s. Neurological, behavioral, emotional, and learning disorders are significantly more common among

hearing-impaired individuals than in the past. Vernon (1969) and Zwirecki et al. (1976) indicated that parental rubella, premature birth, complications of the Rh factor, various pre-, peri-, and post-natal insults to the developing child, plus meningitis, are some of the major causes of sensorineural hearing impairments. Furthermore, these maladies cause other physical, behavioral, and learning anomalies as well. Rubella, for example, has been linked to many auditory, visual, and haptic-perceptual problems. The rubella child's language dysfunction has been described widely in many research articles as being either aphasoid or autistic-like. In many instances, the insult to the fetus by the rubella virus not only caused the hearing impairment, but also contributed to central nervous system damage resulting in visual defects, cerebral palsy, orthopedic problems, learning disabilities, and other concomitant problems. Any one of these problems can contribute to altered, distorted, or compensatory learning skills.

As more multihandicapped deaf children enter school, they, along with many "normal" deaf children are classified as learning disabled. Moores (1978) reported a growing reluctance by educators to classify a child as retarded. There are over 90 different terms used to describe children with learning problems (Fass, 1976). Thus, in some cases, the child has merely been assigned a new classification, for example, learning disabled.

Anderson and Stevens (1969), Calver (1970), Rawlings and Gentile (1970), and Craig and Craig (1975) reported an incidence of educational mental retardation or trainable mental retardation of up to 11 percent in day and residential programs for the deaf, with the average

being six percent. In addition, six to eight percent of the students in programs for the deaf are classified as deaf, learning disabled (Craig & Craig, 1984). This represents a far greater percentage than found in the general population, which is estimated at three percent (Kirk & Gallagher, 1983). Moores (1978) stated one probable reason for the greater percentage is the classification of deaf children by professionals who do not understand the communication problems faced by deaf individuals and who operate under the mistaken assumption that language and speech problems are symptoms of mental retardation or learning disabilities.

The deaf student, especially the multihandicapped deaf student, is often misunderstood, misdiagnosed, and programmed for failure by a society which does not understand or accept deafness. Parents often feel guilt, recrimination, hostility, and frustration. Educational programs receive limited administrative support for multihandicapped individuals and are staffed by teachers who are inadequately trained in deaf psychology or communication skills and are often placed in multihandicapped classes by administrative assignment and not by choice (Moores, 1978).

Statement of the Purpose

The purpose of this study was to compare the definition of "learning disability," the processes used to identify deaf, learning disabled students, and the educational procedures to be followed, as delineated in PL 94-142 (Federal Register, 1977) with the definitions, processes, and procedures used by residential deaf schools in the United

States which enroll students classified as deaf, learning disabled. The population surveyed consisted of administrators and teachers of deaf students, classified as learning disabled at residential deaf schools in the United States. A review of these populations' perceptions on defining, processing, and following educational procedures was conducted and compared with the Federal guidelines in PL 94-142. In order to determine the consistency of student classification as deaf, learning disabled at residential deaf schools in the United States, a comparison of the data contained in the 1983 Annals' questionnaire (AAD, April, 1984) concerning deaf, learning disabled students and the author's questionnaire was performed.

Research Questions

1. How do residential deaf schools in the United States, with populations classified as deaf, learning disabled, define learning disability and how do these definitions compare with the Federal definition for learning disability as found in PL 94-142?
2. What processes do residential deaf schools in the United States, with populations classified as deaf, learning disabled, use to classify the deaf student as learning disabled and do these processes follow the federal guidelines as outlined in PL 94-142?
3. What educational procedures are followed and programs provided for deaf students, classified as deaf, learning disabled, at residential deaf schools in the United States?
 - a. Are the procedures followed and the programs provided designed to overcome the student's

specific learning disability?

- b. Do administrators and teachers perceive that students classified as deaf, learning disabled receive adequate programs and services?

4. How does the number of students reported in the 1983 Annals questionnaire (AAD, April, 1984) as deaf, learning disabled compare with the number of students reported as deaf, learning disabled in the questionnaire sent by the author to the same population?

Definitions

Learning disabled. Children with specific learning disabilities refers to those children who have

. . . a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which disorder may manifest itself in imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. Such disorders include such conditions as perceptual handicaps, brain injury, minimal brain dysfunctions, dyslexia, and developmental aphasia. Such term does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, of mental retardation, of emotional disturbance, or environmental, cultural, or economic disadvantage. (Federal Register, August 23, 1977)

Residential deaf school. A school which provides a comprehensive program and facilities for deaf students, including dormitories.

"Normal" deaf students. Students with no handicap other than deafness.

PL 94-142. The 1975 Education for All Handicapped Children Act.

Multidisciplinary evaluation team. An evaluation team composed of a teacher or specialist in the area of the suspected handicap; the

child's regular teacher (or a teacher qualified to teach a child of that age); at least one person qualified to conduct individual diagnostic examinations of children, such as a school psychologist, a speech-language pathologist, or a remedial reading teacher; and, for evaluation of learning disabilities, a learning disability specialist.

Assumptions

1. Residential schools for the deaf in the United States that enroll students classified as deaf, learning disabled have different definitions for the term learning disability.

2. Residential schools for the deaf in the United States that enroll students classified as deaf, learning disabled use different processes for identifying and classifying deaf students as learning disabled.

3. The survey method was the most suitable one for collection of data to answer the research questions.

Delimitations

1. The population involved in this study was confined to administrators and teachers of deaf students, grades one through twelve, at residential schools for the deaf in the United States enrolling students classified as deaf, learning disabled.

2. The design for the study was survey.

Limitations

1. Conclusions drawn from this study are applicable only to residential deaf schools, grades one through twelve, in the United States enrolling students classified as deaf, learning disabled.

2. This study is subject to the basic weaknesses of a survey design.

Significance of the Study

Multihandicapped deaf students are part of society today. How to cope with the special problems of these students is a challenge the community, school, and home must face. If schools and educators are classifying students as deaf, learning disabled, they may need to re-assess the processes and procedures used for classification, and perhaps reassess the classification of students presently identified as deaf, learning disabled to determine if individual needs are being met. The processes and procedures followed by residential deaf schools to classify deaf students as learning disabled should be verified as following the processes and procedures outlined in PL 94-142. The optimum environment for learning should be developed for individual students. This study provides a focal point for parents, educators, and social workers within the community as they face the challenge of educating the multihandicapped deaf and providing for the needs of these students, especially those classified as deaf, learning disabled.

CHAPTER II

REVIEW OF LITERATURE

There is an abundance of literature pertaining to learning disabilities and deaf education. In order to organize this research, the review is limited to the following areas:

1. A discussion of learning disabilities, including the definition of learning disability contained in PL 94-142.
2. The individual education plan (IEP) specified by federal law as an integral part of the identification and verification of learning disabled children as well as all handicapped children.
3. Deafness, hearing impaired defined.
4. An overview of the education of the deaf, including methods of educating the deaf and mainstreaming.
5. The education of the learning disabled, hearing impaired child.

Discussion of Learning Disabilities

Children with difficulties in learning have been the concern of specialists from many different disciplines for a number of years. Educational, psychological, and medical services for the mentally retarded, emotionally disturbed, and children with sensory handicaps have long been offered through various schools, agencies, and organizations.

The field of education, in particular, has greatly contributed to a more thorough understanding of children with mental, physical, and

emotional handicaps by organizing many different special schools, self-contained special classes, and, more recently, resource rooms.

Learning disabilities are very subtle in milder forms and can easily be overlooked or mistaken for other educational challenges such as mild retardation or laziness. As compared to more visible handicaps, such as orthopedic problems and sensory deficits, the learning disabled child has often been referred to as a child with an "invisible" handicap. The learning disabled child usually appears normal in every respect except for the fact that his or her learning difficulties limit progress in school (Wagner, 1971). The condition of learning disabilities is perplexing; although they are not deaf, many do not listen or hear normally and although they are not retarded in mental development, they do not learn. Many of these youngsters also exhibit other behavioral characteristics that make them disruptive in the classroom and at home.

The basis of homogeneity for learning disabled children is their difficulties in the process of learning. The primary problem common to all is their disability in learning. It is only when the specific types of learning disabilities are categorized that differences among these children show up. Learning disabilities are not similar among all children. Each child exhibits difficulties which are unique to him or her. Many of these children encounter difficulties in one specific area (e.g., math) while others experience problems with a number of academic subjects. Difficulties are primarily divided among many school-related tasks, including listening, thinking, talking, reading, writing, spelling, and arithmetic. However, even within each of these areas

many learning disabled children will be markedly different. For example, children with written language problems demonstrate variations ranging from the child who is unable to hold a writing utensil properly to the older learning disabled child who has difficulties expressing his or her thoughts in writing. In addition to extending across academic tasks, learning problems are complicated by varying degrees of difficulty, by the age of the child, and by the attitude of the child toward the disability (Wallace & Kauffman, 1971).

Whether one seeks to define learning disabilities for therapeutic, scientific, or political purposes, individual identification continues to be a major problem in this field. Definitions of the syndrome differ with regard to whether the focus is on physiological dysfunctions, psychological process deficits, or academic underachievement as descriptions of, and explanations for, learning disabilities. Whether one leans toward a medical, psychological, or educational model of childhood deviance, it is likely that the following is the most widely used definition of learning disabilities since it was included in the Education for All Handicapped Children Act (Public Law 94-142) which serves as the basis for funding special educational programs (Donahue, Pearl, & Bryan, 1982):

"Specific learning disability" means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, developmental aphasia. The term does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, or mental retardation, or emotional

disturbance, or of environmental, cultural, or economic disadvantage. (Federal Register, August 23, 1977)

There are actually two parts to this definition. The first part appears in the major body of the rules and regulations of PL 94-142 and was adopted from the report of the National Advisory Committee on Handicapped Children to the United States Congress in 1968. The second part of the definition is considered as an operational definition. It appears in a separate set of regulations applying to PL 94-142, which is concerned solely with specific learning disabilities (Federal Register, December 29, 1977). These regulations resulted from considerable debate and discussion on the part of the profession and are designed to give procedures for evaluating specific learning disabilities. They specify that a team may determine that a child has a specific learning disability if:

1. The child does not achieve commensurate with his or her age and ability levels in one or more of the seven specific areas when provided with learning experiences appropriate for the child's age and ability levels.

2. The team finds that a child has a severe discrepancy between achievement and intellectual ability in one or more of the following areas:

- a. Oral expression
- b. Listening comprehension
- c. Written expression
- d. Basic reading skills
- e. Reading comprehension