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Taking Sides: Parent Views on Inclusion for Their Children with Severe Disabilities

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ABSTRACT: *Written comments by 140 parents of students with severe disabilities are analyzed to identify reasons why they are supportive of, or resistive to, inclusive education programming. Reasons parents were supportive of inclusion included beliefs that the child would learn more in a general education classroom. Parents who opposed inclusion largely indicated that the severity of their children's disabilities precluded any benefit from such programs or that the general education classroom program would not be educationally appropriate or welcoming to their children. Discussion includes speculation that views regarding inclusion may often be related to perceptions of the general education system itself. Ideas regarding parental perceptions of the importance of social relationships between students with and without disabilities are also considered.*

> *I have watched the progress of the inclusion movement for the last 4 years. I always wonder if I am doing the right thing. My son is not socialized, so I do not push for mainstreaming. But does he need to be mainstreamed to even be socialized? I would love to believe that mainstreaming would help, but in my heart I believe that he is just too disabled. And it breaks my heart.*

Given the high degree of debate regarding inclusion that has taken place among educational advocacy groups and in the mass media (Borthwick-Duffy, Palmer, & Lane, 1996), it can be assumed that many, if not most, parents of children with severe disabilities are aware of the inclusion option. This awareness has likely caused some to pause and consider—possibly for the first time—the merits of special education versus general education class placement for their own children. While some may continue to struggle with the previous question, others have developed strongly held views, with a significant number of parents opposing the practice (Palmer, Borthwick-Duffy, Widaman, & Best, 1998).

While inclusive educational programming has become more common for many students over the last several years (Katsiyannis, Conder-

man, & Franks, 1995; Sawyer, McLaughlin, & Winglee, 1994), recent data (McLeskey, Henry, & Hodges, 1999) suggest that the vast majority of children with severe disabilities continue to be served in traditional special day class settings with minimal integration into general education programs. In fact, it seems a paradox that while the current inclusion movement has been largely promoted by those advocating for students with severe disabilities (Borthwick-Duffy et al., 1996; Fuchs & Fuchs, 1994), the most significant increase in inclusive placements over the last few years has occurred for those students with the mildest forms of disability (McLeskey et al., 1999). It appears that, while the inclusion movement has opened up previously unavailable placement opportunities for many students with severe disabilities, a wide-scale move toward general education service delivery for all as envisioned by some (e.g., Lipsky & Gartner, 1997; Stainback, Stainback, & Forest, 1989) has not materialized.

One reason may be that the inclusion movement is lacking support from a critical mass of parents whose children with severe disabilities would be directly affected by this agenda. It is widely recognized that parental support and involvement is essential for any educational reform movement to succeed (Erwin & Soodak, 1995; Glenn, 1992; Grove & Fisher, 1999; Hiatt, 1994; Turnbull & Turnbull, 1990). In addition, Katsiyannis, Conderman, & Franks (1995) found that anti-inclusion attitudes were among the most frequently cited barriers to the development of inclusion programs and initiatives. Such attitudes may be found among parents who express concerns regarding the lack of individual attention and support or the possibility of rejection or mistreatment that may result from inclusion (Garrick-Duhaney & Salend, 2000; Green & Shinn, 1994; Guralnick, Connor, & Hammond, 1995; Strong & Sandoval, 1999).

Additional understanding of reasons behind parent perceptions of inclusion may offer insight into the status of the inclusion movement. What leads some parents to enthusiastically embrace the inclusion model while others strongly oppose the practice? The answer is likely to vary from parent to parent. Attitudes toward educational practices are inclined to be multidimensional and difficult to determine (Anotonak & Larrivee, 1995; Garrick-Duhaney & Salend, 2000; Palmer, Borthwick-Duffy, Widaman & Best 1998; Semmel, Abernathy, Butera, & Lesar, 1991; Wilczenski, 1992). Further, as noted by Giangreco, Cloninger, Mueller, & Ashworth (1991), a parent's satisfaction with a school program is often based on such subjective criteria as perceptions regarding their child's sense of well being or the presence of a caring teacher in a given placement.

The inclusion movement may be lacking support from a critical mass of parents whose children with severe disabilities would be directly affected by this agenda.

Despite the subjective nature of this question, findings from a quantitative analysis of the large-scale survey study from which the data in this article were gathered (Palmer, Borthwick-Duffy, Widaman, & Best, 1998) offer some clues. This study found that, among parents of children with severe disabilities, those who (a) place a high value on socialization as an educational goal; (b) have children who display relatively higher cognitive skills, fewer behavior problems, and fewer characteristics requiring specialized services; and (c) whose children have spent more time in a general education class environment, are more likely to have positive perceptions of inclusion. This study is to date the only large-scale quantitative investigation that has specifically explored the views of parents whose children share the most significant forms of disability and are being served in traditional special day class settings. Exploring these views is important since, given that the vast majority of children with severe disabilities are still served in such traditional special class programs, it is from this group that new recruits into the general education classroom must be found if the inclusion movement is to progress.

While these findings offer some insight regarding how parents may develop views or positions on the topic of inclusion, the quantita-

tive nature of the underlying study did not allow for a more focused analysis of reasoning used by individual parents when considering inclusion. Yet such an evaluation is needed if we are to better understand the specific parental beliefs, fears, and desires behind the complex reasoning process that influences decisions regarding inclusion. The current study, through the use of a systematic qualitative methodology, seeks to address this need by reviewing and categorizing individual parents' written reactions to a proposed inclusion model.

METHOD

SUBJECTS

Participants in this study were parents of children with the severe disabilities which included a diagnosis of mental retardation. Another criterion for selection was that these children were being served in traditional or noninclusive public school settings.

Parents for the current study were solicited from the Los Angeles County Office of Education, the Orange County Department of Education, and the North Orange County Special Education Local Plan Area in California. These agencies were chosen for the large geographic area they cover as well as for the nature of the students they serve. In California, students with the most severe forms of disability are often served through county agencies or a consortium of school districts called Special Education Local Plan Areas (SELPAs), rather than through individual districts.

Of the 3,267 parents who met the study criteria and were subsequently contacted, 995 parents asked to be involved in the study and were contacted for participation. A total of 476 surveys (a 15% rate of return in reference to the initial mailing and a 48% return rate for those who requested surveys) were later returned and analyzed. Of the returned surveys, 16 were excluded from final data analysis due to incompleteness.

According to analysis of data gathered through the survey instrument used, 70% of respondents to the 460 remaining surveys were mothers, 18.7% were fathers, and 11.3% identified themselves as caregivers, group home workers, or relatives. The largest group of respondents (62.6%) identified themselves as White/Euro-American, while the second largest group was Hispanic/Latin American (17.6%). Asian Americans composed 9.1% of the sample, while African Americans represented 5.4%, and 5.2% identified themselves as "Other" or did not respond to the survey question regarding ethnicity. Of the parents responding, 43.4% indicated that they held a college degree or had a graduate level college education, whereas 31.5% indicated that they had "Some College" work. Of the remaining respondents, 15.7% were high school graduates leaving a small group indicating that they either had some high school or elementary experience (6.8%) or had no formal education (1.3%).

Fifty-eight percent of the children in question were male with ages ranging from 3 to 23 years of age (X = 11.3). As previously mentioned, all of the children were being served in traditional special education class programs for children with severe disabilities and all had a diagnosis of mental retardation. Many of these children also had other serious conditions requiring specialized school services. For example, an evaluation of survey data showed that 22% were unable to walk and 22% had difficulty walking; 39.1% were not toilet trained at all and 28.1% had toileting accidents during the day. Further, 22.8% had seizures; 39.1% needed to be monitored due to behavioral or emotional problems; and 22.6% needed close supervision during the day due to poor health or a physical condition.

INSTRUMENTATION

Parents' written comments regarding inclusive practices were gathered through the use of the "Inclusion Survey", a 62-item survey instrument

What leads some parents to enthusiastically embrace the inclusion model while others strongly oppose the practice?

developed for a larger study designed to gather quantitative information reflecting influences on parent perceptions regarding inclusive practices (Palmer, Borthwick-Duffy, Widaman, & Best, 1998).

As part of this survey instrument, parents were presented with the following written description of a supported inclusion program:

> These days, most students with severe disabilities are taught in a special education classroom grouped with children who have similar needs. Some of these students attend school outside of their neighborhoods in order to be in these special classrooms. Some of these students are mainstreamed into regular classes at that school for part of the day.
>
> Now, there are a few schools that are trying a new way of educating these students. In these schools, students with severe disabilities are placed in a regular education classroom in their neighborhood school with nondisabled students and they stay there all day. There is usually only one student with severe disabilities in any one regular education classroom and not more than two or three students with severe disabilities enrolled at any one school.
>
> These students do not spend any time in a special education classroom with other students with disabilities. Instead, a special education teacher and other adults who work at the school help the teacher in the regular class to make the materials and lessons more understandable and useful for the students with severe disabilities. Support services, such as language therapy and adaptive PE training, are offered within the regular program to those students who need them. At some of these schools, even the most severely handicapped students participate in the regular education classroom in this way.

This description contains reference to indicators of a quality inclusion program as defined by Sailor (1991) including (a) student enrollment in a chronological age-appropriate general education classroom in natural proportions at the home school, (b) special services delivery in integrated settings through general and special education collaboration, and (c) zero reject—or the concept that no student is excluded from participation based on the severity of a disability. The description was carefully worded to present the supported inclusion program in a descriptive and factual manner so as not to influence parent opinions of the model.

After reading the description, parents were asked to rate on a Likert scale the extent to which they felt the described program would be a "good idea" for "most or all" children with severe disabilities, and the extent that they felt the program would be a "good idea" for their own child. See Table 1 for a review of frequency of responses to this question.

Following these questions, this statement was contained in parentheses: "If you wish, use the back of this survey to make any comments on the kind of program described above." This prompt was included to allow parents a chance to further elaborate on their reactions to inclusion in a more natural, free flowing format than was possible through the quantitative (i.e., multiple choice and Likert rating scales) nature of the Inclusion Survey.

Although we expected that a few parents would respond to this prompt, we were surprised at the number and quality of written comments offered. Out of the 460 respondents to the Inclusion Survey, 140 (30%) provided some form of written response. Most of these responses appeared to be heartfelt and carefully stated reactions demonstrating strongly held and deeply considered views on inclusion. It is these parent reactions that we sought to examine.

Procedure

In arriving at a qualitative method to examine the written comments provided by the parents, we started with the presumption that qualitative data reduction is an inductive, data-driven activity, and should thus be a dynamic and reflective process rather than be based on a rigid predetermined set of rules (Coffey & Atkinson, 1996; Miles & Huberman, 1994; Tesch, 1990).

Tesch (1990), for example, describes qualitative analysis of textual data in terms of decontextualization and recontextualization. Decontextualizing data involves segmenting or dividing the original data set into portions that are understandable by themselves and large enough to be meaningful. In other words, de-

TABLE 1
Frequency of Parent Response to Description of Full Inclusion Model Program

Parent Ratings of Whether the Full Inclusion Model Described Would be a "Good Idea" for Students with Severe Disabilities in General (M = 3.32 [a]; SD = 1.63)

Rating	*Percent of Total Sample*
Strongly Disagree	15.9
Disagree	22.8
Disagree Slightly	14.1
Agree Slightly	18.7
Agree	15.9
Strongly Agree	12.0

Parent Ratings of Whether the Full Inclusion Model Described Would be a "Good Idea" for Their Own Child with Significant Disabilities (M = 3.22 [a]; SD = 1.82)

Rating	*Percent of Total Sample*
Strongly Disagree	25.2
Disagree	19.8
Disagree Slightly	09.1
Agree Slightly	12.8
Agree	17.4
Strongly Agree	14.8

[a] Theoretical mean = 3.5. Negatively worded items were reversed scored so that positive attitudes are always reflected by higher mean scores.

contextualization is the act of separating data extracts from their original context while retaining meaning. Segmented data are then organized and sorted as part of a process of recontextualization.

Tesch describes the first step of recontextualization as sorting or coding text segments under descriptive category sets. As this is done, the categorization system is refined according to emerging themes, theoretical frameworks, the research question, or the data itself. The textual data is continually refined in this manner to reduce and expand the data into new forms and with new organizing principles. Through this process, decontextualization and recontextualization allow the researcher to think *about and with* the textual data.

Using the precepts of decontextualization and recontextualization as a guide, we designed our qualitative heuristic by starting with the following research question:

> What specific reasons do parents have for supporting, or not supporting, inclusive placement for students with significant disabilities?

After agreeing on the research question and entering the written comments from the surveys verbatim into a word processing pro-

gram, we began the process of decontextualization by scrolling through each parent's comment to identify text segments composed of one or more sentences, that specifically addressed the research question. During this initial stage of data decontextualization, we included in the text segments both "lead-in" and "clarification" statements. Lead-in and clarification statements were defined as words that introduced or followed an idea, reason, or concept, but that were nonessential to understanding the underlying meaning.

To aid in the sorting and decontextualization process, we initially placed each of the relevant text segments into two "start lists" (Miles & Huberman, 1994) categories:

- Statements reflecting support for inclusive placements for children with severe disabilities.
- Statements reflecting resistance toward such placements.

As we scrolled through the written statements, we began the process of recontextualization by refining the initial two categories to include subcategories. Each reason statement that suggested a distinct idea that was related to the research question was put into a separate category. When more than one reason statement suggested the same idea, a tentative name was given to the emerging theme suggested by the statements in that category. Categorical names were changed or refined as additional reason statements were added. Statements that were vague, redundant, or that were clearly addressing the pros and cons of traditional part-time mainstreaming rather than the inclusion model were excluded from consideration.

Although most reason statements were easy to categorize under the emerging categorical headings, some were more ambiguous, or appeared appropriate for more than one category. In these instances, we either created a new categorical heading or collaboratively agreed on the "best fit" for the segment based on further inspection. Where there was continued disagreement as to how a reason statement should be categorized, that particular text segment was marked and returned to later, after a better feel for the emerging categories was established. Each text segment that stood on its own as a separate, comprehensible, and meaningful contribution to the research question was recontextualized in this way.

Although some parental comments (36%) did not contain any identifiable reason statements, most contained one or more such statements. As the final categories emerged, reason statements contained under each category were revisited for the purpose of excluding the nonessential "lead-in" or "clarifying" words defined earlier. The reason for elimination of nonessential words was primarily to make the reason statements easier to present in a table format. Following is an example of one parent's written comment that contains two reason statements and which has been gleaned of lead-ins and clarifications. For the first reason statement, only the words in italics were included in the final analysis. The text before the italicized excerpt was considered a nonessential lead-in to the reason statement and was therefore eliminated. Similarly, the text after the italicized statement was eliminated as it was considered a nonessential follow up or clarification referent to the reason statement.

> First reason statement: I do not believe "mainstreaming" for the severely disabled is a good idea for the disabled child or the regular classroom children. *Most severely disabled children such as Roger need to learn living skills so as to survive in the outside world.* Vocational training and independent living training are more necessary than what is taught in the regular classroom.

> Second reason statement: *Regular classrooms are so over-booked with students already that are struggling to learn, that neither the students, nor the teacher needs the additional problem of the diversion of a severely disabled child.*

Results

Figure 1 presents the final reason statements derived from the qualitative analysis under the emergent thematic categorical names. Reason statements expressing why parents are supportive of inclusion are presented first while statements expressing resistance to inclusion follow. Theme categories subsumed under these two areas are presented in an order reflecting the

number of reason statements contained within each, with categories containing the largest number of reason statements presented first.

While about half of the parents participating in this study (approx. 45%) expressed some degree of positive perception of inclusive practices when responding to the Likert question related to inclusive practices (see Table 1), only about 13% (12 out of 94) of the reason statements identified through our qualitative research process were associated with positive perceptions of inclusion. While it would be difficult to determine the reason for this discrepancy, one hypothesis may be that parents who have decided against inclusion feel the need to argue or "defend" their positions given the "inclusion for all" atmosphere promoted by some advocates for children with severe disabilities (Lipsky & Gartner, 1997; Stainback & Stainback, 1984).

The thematic category containing the most reason statements supportive of inclusion were those indicating beliefs that the included child would experience improvements in academic or functional skills due to the higher expectations or additional stimulation provided in a general education setting. Special education classrooms are seen by some of these parents as limiting their child's development due to the lack of a challenging curriculum or higher functioning role models. Three reason statements reflected the idea that general education students would benefit from inclusion by becoming more sensitive to others with disabilities, by seeing how one can deal with or overcome adversity, or by better appreciating their own good fortune through a comparison of their own circumstances with the adversity experienced by a fellow student with a disability. Only one reason statement was contained in each of the three remaining theme categories reflecting support for inclusion due to (a) the chance for improvement in the included child's social skills, (b) the benefits of having their child attend a neighborhood school, and (c) the view that classrooms should not be segregated, but rather be representative of the larger society.

Considering statements reflecting why parents are not supportive of inclusion, the thematic category containing the most reason statements consisted of beliefs that the type or severity of the child's disability precludes benefit from participation in a general education classroom. Parents cited such characteristics as medical needs, sensory impairments, lack of self-help skills, lack of language, the presence of conditions such as seizures or cerebral palsy, and the presence of multiple disabling conditions as reasons why they felt general classroom placement would not be appropriate for their children.

Reason statements related to beliefs that inclusion would overburden or negatively impact general education teachers or students made up the next largest thematic category. Many parents of students with severe disabilities view their child as requiring more care and attention than is possible for a general education teacher to offer. Parents also express empathy with general education teachers whom they perceive as being overwhelmed with large class sizes, poor teaching conditions, and demands related to teaching general education students with diverse needs. Other parents stated that they believed their children would distract the general education classroom students or impair their ability to learn.

The third thematic category contained reason statements that expressed concerns that the child's needs could not be met in a classroom with an emphasis on academic or core curriculum. Most of these parents stated a desire to have their children in an environment that emphasized basic living or functional skills.

A review of the remaining seven thematic categories reveals other specific concerns related to inclusive programming. Some parents are fearful that their children would be neglected or not receive the individualized attention or the specialized services that they need if they were to be served in a general education classroom. Others feel that their children would be mistreated, harmed, or ridiculed by general education students or that their children would be overwhelmed by the stimulation and lack of structure in a general education classroom. Some parents also note beliefs that their children's age, size, or behavior problems preclude benefits from inclusion. Still others express concerns regarding the lack of specially trained personnel in general education settings or express beliefs that children with severe disabilities need to be edu-

FIGURE 1

Written Statements by Parents Explaining Why They Are Supportive or Not Supportive of Inclusive Placement for Children with Significant Disabilities.

1. *STATEMENTS REFLECTING REASONS PARENTS ARE SUPPORTIVE OF INCLUSION.*

A. IMPROVEMENT IN THE INCLUDED CHILD'S ACADEMIC OR FUNCTIONAL SKILLS DUE TO HIGHER EXPECTATIONS OR MORE STIMULATION. [1]

The "special education" program is very limiting and acts to confine people to "expected limitations," closing the door to the ability or opportunity to learn because they are not expected to or thought able. [2]

It is my strong opinion Joshua [3] is not progressing in a special education classroom because he is not challenged enough. I believe he regresses due to the fact the children in his class are considerably more handicapped when compared to Joshua.

I have always felt my son would benefit more if he were mainstreamed into a "regular" classroom! My son has recently in the past 6 months improved his language and he's using more words and I know he will do better mainstreamed in a "regular" classroom.

I personally think that even though my son is physically and mentally delayed—mainstreaming in regular classrooms is a great idea. He responds well when playing with his brother, and he pushed himself to sit up and he is trying very hard to stand and take steps. I credit his motivation to being around his able bodied brother and other children in our extended family.

She loves to be with others, is interested in their activities, even if she can't do them, I feel if she were given more opportunities she could and would learn more.

I also feel the program she is in through the county isn't enough, she isn't challenged . . . [4] she is in a class with others that have such low skills that she is bored or ignored.

Lots of kids I see are working down to someone else's level when they would blossom in a more demanding environment.

B. BENEFITS TO GENERAL EDUCATION STUDENTS

Teaches nondisabled children to be sensitive to other children who have not the same capabilities.

With the problems of the students getting into drugs, maybe seeing the disabled child will make the nondisabled child see how grateful they should be with their lives. They could walk, they could talk, see, use hands, all these wonderful gifts that God has given them. Not waste their lives in gangs and drugs, and they could use their gifts to help others.

I see mainstreaming as a plus, and both sides benefit—besides getting a great education in the triumphs and difficulties in life.

C. IMPROVEMENT IN SOCIAL SKILLS

I feel being around "normal" kids helps him with social skills.

D. CONVENIENCE/FAMILY CONNECTION ASSOCIATED WITH HOME SCHOOL PLACEMENT

. . . parents like me would be involved in the school and siblings can go to the same school.

E. PHILOSOPHICAL OR MORAL VIEWS

I am adamantly opposed to any segregation by disability or ability because the situation created . . . is *not* representative of the society their children will live to grow up and eventually work in.

2. *STATEMENTS REFLECTING REASONS PARENTS ARE NOT SUPPORTIVE OF INCLUSION.*

A. BELIEFS THAT THE TYPE OF SEVERITY OF THE CHILD'S DISABILITY PRECLUDES BENEFIT FROM INCLUSION. [1]

My child is severely handicapped. She is hydrocephalic, microcephalic, and has bilateral ventro-peritoreal shunts. She has a severe seizure disorder and is on two seizure medications, which she receives at school.

. . .. I don't believe my daughter would benefit by being mainstreamed in a regular classroom.

FIGURE 1
(Continued)

I do not agree with Jennifer in a regular class. Jennifer has many medical conditions that I feel need a special classroom and teacher. She will never learn to take care of herself. I feel she needs to be in a protective class.

It would not benefit my son because he has severe hearing loss, visual impairment, and is in a wheelchair with cerebral palsy.

My child is both physically and mentally handicapped (severely) and although 16 1/2 years old is at a 3-month-old stage both physically and mentally. He is very social, loves to be around people but cannot "learn."

. . . due to his severe disability and multiple medical problems, I have no plans to try to have him mainstreamed in the future.

I do not believe my son could be completely mainstreamed . . . . My son would require constant supervision and assistance.

My son is severely retarded and nonverbal. He would not be able to function in a regular classroom.

My child would be stuck in her wheelchair most of the day, unless the classroom were completely modified with carpet, and room to move. She is cortically blind and can hit her head often. She shuts down when in her wheelchair for long periods of time. A lot of special equipment would be needed.

Roger is mentally disabled . . . not for the child like my son.

My daughter has epilepsy. She will have bouts of seizures, maybe ten a day. Must always be monitored. She would need to take medication at school, if the day lasted later than 1:30.

Daniel's mentality is around 2 years old or less and he is 8 years old. He would not benefit from a regular classroom environment, other than socially, because he does not have the mentality at this time to comprehend basic subjects.

Frank has microcephaly and needs to be in a low teacher–student ratio classroom . . . .

That is fine if the child has some sense as to what is going on in life and has some communication skills. My daughter has neither of the above. Her only interest is to play and listen to soothing music.

My daughter is like an infant physically and a toddler emotionally/socially/intellectually . . . advancing a child like my daughter along with her peer group would be isolating and inappropriate.

. . . my daughter is severely physically as well as mentally invalid. In cases such as my daughter's I do not see where anyone benefits.

My daughter cannot walk, talk, sit, or crawl. She wears diapers and must be spoon fed. Every time the possibility of her placement on a high school campus arises, I panic! I would keep Sarah at home rather than exposing her to such an environment.

This setting is great as long as the disabilities do not include mental disability. The child would get no benefit.

Until she can communicate expressively, she does not need inclusion. She has CP and can't verbalize nor sign so others can understand.

B. BELIEFS THAT INCLUSION WOULD OVERBURDEN OR NEGATIVELY IMPACT GENERAL EDUCATION TEACHERS OR STUDENTS.

The present condition at public schools right now is just *horrendous* . . . It would be extremely difficult for a teacher to take care of regular students, let alone students with severe disabilities, even with help from the people mentioned in the survey.

Regular classrooms are so over-booked with students already that are struggling to learn, that neither the student, nor the teacher needs the additional problem of the diversion of a severely disabled child.

. . . regular classroom teachers with a normal class population of 32-35 students cannot manage their time well enough necessary for the 1 to 1 teaching required for special education students.

Our 13-year-old is attention deficit. His teachers have been at their wit's end with him year after year. How will they help my autistic son?

I think regular teachers have a tough job so let's don't make it any tougher for them.

. . . the academic ability spread in those classes was already beyond the ability of the teacher to manage.

FIGURE 1
(Continued)

Increasing the spread seems a poor idea.

I feel if the "regular" education teachers wanted to teach special education that is what they would have chosen.

Mainstreaming our handicapped kids to benefit the regular kids is wrong. We must meet the true needs of the handicapped child and not infringe on other students (too much) at the same time.

I believe that full inclusion of a handicapped child would deny both the child and the teacher the ability to fully celebrate their abilities. The teacher's time in the classroom would either be infringed upon to the degree that the development of the so-called normal child would suffer; or the other children would not be able to develop to their fullest.

*. . . in time regular children would come to accept but would disrupt the class too much and waste re-*sources.

I am totally against integration for both my "normal" child and Linda. Linda would not benefit at all from being in a class with "normal" children. . . . I also would not want a "severely disabled" child in my "normal" daughter's room, as I feel that the child would distract the classroom.

*I have seen the problem first hand . . . the one's I've had experience with did not have a positive experience and the disruption to the classroom was hard on all the students and the teach*er.

Each class day has enough disruptions already.

I see it as a real disadvantage to the regular students. This child would be a distraction.

. . . the other children would not be able to develop to their fullest.

. . . the severely handicapped, that's too hard. It's taking away from the regular classmates having not to be able to concentrate on their work the way they should.

I also have another daughter who is not handicapped (6 years). In any way, I would not want my disabled child interrupting or causing problems which would interfere with her learning.

This has got to be an expense that most parents of regular school children would resent.

C. BELIEFS THAT THE CURRICULUM OF THE GENERAL CLASSROOM DOESN'T MATCH THE INCLUDED CHILD'S NEEDS

Most severely disabled children such as Roger need to learn *living* skills so as to survive in the outside world. Vocational training and independent living training are more necessary than what is taught in the regular classroom.

. . . as the kids get older the difference becomes more obvious. As the curriculum gets more difficult our kids get lost. Our kids need repetitive information and very simple instruction. My son at 16 needs more living skills than academic. He would hate to sit all day listening and understanding very little and remembering nothing.

. . . he would not receive the education he needs.

I do not think it would be possible to adapt the materials and lessons of history, math, etc. to John's needs.

. . . she also requires the skills being taught in the special education programs.

His special education program provides the help he needs in so many areas, I would not want him to miss.

I feel that by and large, the special education student would be missing out on a lot of what is important for him educationally . . . . As they continue educationally, won't they fall further and further behind?

. . . until I can see how this program will be run, and assure myself that she (my daughter) will not lose out on any other area of need she required, I prefer she remains in a closely supervised school room.

The level of one on one care required is very high, and she is unable to understand basic language—so I see no benefit in academics.

Maybe if he learned his basic life skills as in: walk, talk, communicate, and *he* wanted to go to regular classroom, then I would consider it.

FIGURE 1
(Continued)

His needs are much too different. This is called DIVERSITY. People are different with different needs.

Margie will never benefit from an academic curriculum . . . .

Very little of what goes on in a regular classroom would be of any benefit to Thomas.

. . . now my child is 14 years old and I don't think he is capable of learning academic subjects at a 9th grade level, nor would that be particularly helpful. He needs to learn to behave appropriately, speak as much as possible, get along with others, and be as independent as possible. He is getting all that in the special ed. classroom he is in.

I see no advantage to having her in a regular class. She cannot do any of the tasks that a regular child her age does.

D. CONCERNS REGARDING A LACK OF ATTENTION OR SERVICES THAT THE INCLUDED CHILD WOULD RECEIVE.

It is widely recognized that these individuals require greater attention and in a fully inclusive situation this would never be possible, all would suffer.

Total (full) inclusion is ridiculous for the majority of severely handicapped students, as my child. I may as well keep her home if she were to sit All Day in a regular education classroom. She would be neglected—no doubt about it!!!

She would be neglected in a regular or a mainstreamed environment.

With budget cuts, large classes, I don't think one child could or would receive the kind of help his IEP requires.

I fear that mainstreaming severely handicapped children into regular programs will have a detrimental effect on the services the child desperately needs . . .

. . . she needs a more nurturing environment than a public school teacher with thirty-two students could possibly provide.

My daughter has severe disabilities, mental and physical. My wife and I feel, that she would not receive the attention or benefits that she presently receives at this special education school - where she attends.

I think that the program described would not provide my daughter with the special one on one attention she needs to understand academics.

I have strong concerns about how will these kids' needs can be met. I am providing my "normal" child with several hours a week of tutoring because our classroom teacher cannot provide what this child needs. How on earth could she provide for my children with "real disabilities"?

E. CONCERNS REGARDING HOW THE INCLUDED CHILD WOULD BE TREATED

Normal teens have a hard time as is. I think very few are able to treat these kids as human beings!

I do have doubts about the way she'll be treated by non-disabled children.

I would not like to submit my child to that, because children can be very cruel . . . .

No matter the benefit to "regular students," SH children should NOT be used as "examples" to better the "regular students'" life. SH children have a tough enough time just living and should be given additional support NOT additional ridicule!

I feel it would be a "hard sell" to these regular ed. teachers to accept children like my son into their classroom. I don't want to have my son where he's not welcome!

. . . I would also fear that curious students would possibly harm her or mistreat her.

If she were to be mainstreamed the other "normal" students will make fun of her and hurt her feelings, or [tease] her or make her do bad things.

Right now (he's 6) 4 year olds don't want to have much to do with him, because he can't socialize, play, and participate on their level. His self-esteem is very good now, but would suffer deeply in a regular classroom situation.

FIGURE 1
(Continued)

In the case of hygiene (when a child is in diapers or a messy eater) ridicule and embarrassment by the child's so-called "peers" would create emotional trauma for the handicapped child.

F. BELIEFS THAT THE INCLUDED CHILD WOULD BE UNABLE TO BENEFIT OR BE OVERWHELMED BY SURROUNDINGS

I cannot envision how he or the other kids would get any benefit out of putting him in a kindergarten classroom, much like a pre-toddler. He is nonverbal and tends to be oblivious to what goes on around him.

Special schools provide kids with disabilities a warm, friendly environment and patient caring teachers who can take the time to teach each child individually and at their own pace. It's like a "SAFE HAVEN" for them.

My son is Autistic and we believe he needs some time in a structured environment so he can "sort out" the extra stimulation of a regular classroom.

I believe that she needs a quiet and structured environment, such an environment would not encourage growth in a "normally" functioning child.

Our experience with William had been that even when placed in a classroom with students of moderate delay, he developed behaviors reflecting frustration with not being able to keep up . . . . The benefit of appropriate behavior models is far outweighed by the disadvantages.

I feel the regular activities and noise would interfere with the one on one instruction and attention she receives now in her special education class.

'Normal' activities would be a distraction.

G. CONCERNS REGARDING AGE OR SIZE OF THE CHILD

I believe mainstreaming has to start when the child is younger (early elementary school) for both disabled child and normal child to get used to each other. To ask Mark at 14 to go to a regular classroom now is insensitive and cruel.

Gary is 9 years old and his "size" makes it difficult to mainstream him where he belongs cognitively.

Now that he is 16 years old, I think it would not work out too well. Special day classes is all he knows.

Currently my son is six and does need supervision.

This would have been good for my child when he was younger but he's too old now for most regular classes.

At this time, my son is still young and lacks the basic skills to be mainstreamed into a kindergarten class.

H. BELIEFS THAT CHILD NEEDS TO BE AROUND OTHER CHILDREN WITH SIMILAR DISABILITIES

Disabled children need to be around other people with disabilities in order not to feel isolated . . . .

. . . he would not be happy in a regular classroom. He cannot talk or do anything for himself, but is aware of what goes on in his surroundings, and is sensitive to other's actions. He appears relaxed and content with the other severely disabled students in his class, but around non-disabled, seems to tense and withdraw.

Personally, I think it is cruel to put him and others like him among students who are not disabled. Severely disabled persons seem to have a communication with each other, without talking or seeing, that no one else can.

It has been my observation . . . that special needs children often feel more comfortable with other students of similar needs. Being more similar in developmental levels, they tend to enjoy similar types of activities and play.

I also think that she needs to see other children that are having the same level of instruction so that she won't feel that she is the only one that needs special attention, and she needs to be around children that can relate to what she is dealing with.

FIGURE 1
(Continued)

My child is a profoundly retarded, spastic, quadriplegic with multiple seizure disorders . . . She needs to be in a special education school only with her true peers.

I. BELIEFS THAT THE CHILD IS TOO BEHAVIORALLY INVOLVED

I would *strongly* disagree with placing him into a mainstream classroom because he is *very* disruptive . . . does not comply nor understand how he would be expected to sit "quietly" in a normal classroom, which would in turn interfere with the other children's learning.

I feel that students with severe behavior problems do not belong in these settings. They are already controlling too much of special education resources.

. . . would not be appropriate for him. He has a very bad behavior problem, attitudes change constantly. Hurts others.

This child . . . fights at school and acts out in other ways. Destructive at home inside the home and outside. . . . Cannot keep still, taken medication for behavior and sleep. . . . Regular school would not help this child.

Michelle can be very aggressive and can be a threat to adults as well as students. She weighs 240 lbs. and is very strong.

J. CONCERNS REGARDING LACK OF SPECIALLY TRAINED PERSONNEL AVAILABLE IN THE GENERAL EDUCATION CLASSROOM

I do not feel any regular classroom or teacher are trained to take on a child with a lot of disabilities.

. . . children with very severe disabilities (such as my lovely daughter) cannot benefit, at this time, in these types of classrooms. They aren't equipped with the proper materials nor instructors, like that of the special education classrooms.

Paraprofessionals are not always well trained, especially in special ed., and I do not feel they would be as effective as his present educational setting.

When a child cannot feed or toilet himself, has no verbal skills and a severe seizure disorder, as my child has, I feel mainstreaming is the worst possible possibility. The special education professionals deal with these things daily and are trained in the severely disabled field.

The everyday school person does not know what to do for those children . . .

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1. Categories are presented in the order of number of reason statements included.
2. Reason statements are presented with punctuation and wording as written by parent.
3. Names were changed in all reason statements.
4. Nonessential text was omitted from beginning, middle, or end of reason statement sentences where ellipses (. . .) appear.

cated around others with similar needs or developmental levels.

DISCUSSION

This study sought to explore the views of parents whose children are considered "severely disabled" and are being served in traditional special education placements. Understanding the views of this group is crucial since organizations that currently promote inclusion are those primarily advocating for those with severe disabilities. Further, because the overwhelming majority of parents whose children have severe disabilities are being served in traditional special education settings, it is these parents whose beliefs and values will determine the future of the inclusion movement.

It is important to note that, due to the focus on this specific group of parents and to the lack of randomization in sampling technique, the findings presented here cannot be generalized to other groups of parents-for example, those whose children may be identified with milder disabilities or those whose children already have experience with integrated placements. For instance, research has shown that for some parents, more experience with integration leads to more positive parent perceptions of the practice (Giangreco, Cloninger, Mueller, & Ashworth, 1991; Hayes & Gunn, 1988; Larson & Lakin, 1991; Lowenbraun & Affleck, 1990; McDonnell, 1987; Miller, et al., 1992).

While the current study offers insight into parents' reasoning behind their beliefs regarding inclusion, it remains difficult to predict which parents will be for and which against these programs. The inclusion movement is now promoted by those advocating for children with the most severe forms of disabilities (Borthwick-Duffy et al., 1996; Fuchs & Fuchs, 1994), yet the current study makes clear that parents' decisions to embrace an inclusive placement for their own child depends on many factors beyond the severity of the child's condition. In truth, parents whose children display the most significant disabilities are less likely to favor inclusion (Palmer, Borthwick-Duffy, Widaman, & Best, 1998) or other forms of integration practices (Borthwick-Duffy, Eyman, & White, 1987; Eyman & Borthwick, 1980; Eyman & Call, 1977; Hunt, Haring, et al., 1993; Tausig, 1989; Thurman & Fiorelli, 1979) than are parents whose children are relatively higher functioning.

Despite the complex nature of the issue, the information presented in this study extends our understanding of influences on parental decision making by identifying some of the specific reasons parents may use in support of or in opposition to inclusion. A review of findings shows that parent statements in support of inclusion mainly involved beliefs that the child would learn more due to higher expectations or a more stimulating or challenging environment or cited the benefits to general education students of being exposed to students with disabilities.

Parents who opposed inclusion wrote statements largely indicating beliefs that the severity of their children's disabilities precluded them from benefiting from such programs, or that the general education classroom program would not be accommodating or welcoming of their children. In fact, seven of the ten categories of "Statements Reflecting Reasons Parents Are Not Supportive of Inclusion" presented in Figure 1 had to do with negative perceptions of general education classrooms or beliefs that children with disabilities would overburden the teachers or students in these programs. Considering this finding, it may be true that views regarding inclusion are often related to perceptions of the general education system itself.

When considering the inclusion option, at some point parents are likely to ask themselves, "Included into what?" If the general education classroom is viewed as a place where the teacher is overworked, overwhelmed, and undertrained, the students are intolerant and lack control, and the curriculum is inflexible and irrelevant, then parents are unlikely to camp out to enroll their children in these programs. Inversely, parents who view the general education program at their local school as accommodating and nurturing may be more likely to favor inclusion.

It is interesting to note that while the perceived benefits of socialization resultant from inclusion have often been used to support the movement (Evans, Salisbury, Palombaro, Berryman, & Hollowood, 1992; Hall, 1994; Lipsky

The best inclusion programs for some, therefore, may be those that allow for a close association between children with similar disabilities—a concept that is incongruous with the inclusion ideal of natural proportions (Sailor, 1991).

& Gartner, 1997; Strully & Strully, 1996), a review of Figure 1 shows only one reason statement that cites improvement in social skills as a positive benefit of inclusion, whereas nine statements were extracted that indicate beliefs that the child with severe disabilities would be socially rejected-concerns that have in fact been supported by recent research (Cook & Semmel, 1999; Freeman & Alkin, 2000). Although some parents who place a higher value on the development of social skills may be willing to trade off "special education" benefits such as a specialized curriculum to enroll their child in an inclusive education program (Palmer, Borthwick-Duffy, & Widaman, 1998), others may fear risking their child's social well-being for the chance to interact with nondisabled classmates. It is also true that some parents believe that there is benefit to having other children with similar needs in their child's classroom as means of promoting tolerance and acceptance (Guralnick et al., 1995). Moreover, research has demonstrated the desire of children to associate with others who are like themselves (Farmer & Farmer, 1996; Kupersmidt, DeRosier, & Patterson, 1995). The best inclusion programs for some, therefore, may be those that allow for a close association between children with similar disabilities—a concept that is incongruous with the inclusion ideal of natural proportions (Sailor, 1991).

One view regarding the importance of friendships between students with and without disabilities is shown in the following excerpt from one parent's written statement:

> It has been my observation (with my own son, and from working in several different capacities with handicapped individuals), that special needs children often feel more comfortable with other students of similar needs. Being more similar in developmental levels they tend to enjoy similar types of activities and play.... Once they reach high school age, I really don't understand how they would form meaningful friendships with nondisabled peers nor benefit educationally from regular class placement. I would think acceptance by non-disabled students is very important (that the handicapped would not be stigmatized); but I don't see that friendships between disabled students are any less valuable than a friendship with a nondisabled peer. I guess what I'm trying to say is, I love my son for who he is, I don't think he will ever be normal-he will always be child like in many ways. If he can develop relationships with others in his life, outside of his family, I don't care if they are like him-if he loves them, and they make him happy-that's what is most important to me.

IMPLICATIONS FOR PRACTICE

The inclusion movement has expanded historically limited placement options for students with the severe disabilities there is evidence that many such students and their parents have benefited from well-supported programs (Freeman & Alkin, 2000; Hunt & Goetz, 1997). However, as shown by many of the reason statements reviewed here, it appears that inclusion to date has not been embraced by all parents. Negative reactions held by some may be in part a backlash from those who feel that the philosophy or ideals of inclusion have been imposed on their community without their consent or input. In fact, from early on, the inclusion movement has been criticized for being promoted by those who view themselves as an elite set of special education advocates who have left those most impacted by the movement out of the debate (Davis, 1989; Kaufman, 1989). Parents who are making important decisions regarding what is best for their child are unlikely to be influenced by what may be perceived as social or educational experimentation with their child's well-being at stake. Rather, these decisions are likely to be based on a contemplative and subjective evaluation of a specific child's attributes, circumstances, and needs.

The following written responses of two parents who considered their options and made

Negative reactions held by some may be in part a backlash from those who feel that the philosophy or ideals of inclusion have been imposed on their community without their consent or input.

different choices regarding general education integration for different children within their own family illustrate this complex and personal reasoning process.

First response:

> I think I have a pretty good perspective on full inclusion because I have three children; all with different needs. I have a "normal" 10-year-old son in regular ed. Then I have 6-year-old twins with cerebral palsy. My daughter will be fully included in public school in kindergarten …. She talks and is very bright but is in a wheelchair and has deficits in fine motor. My son, on the other hand, is severely handicapped. He does not talk, walk, or communicate to us. He is very unhappy and cries a lot. So he would be extremely disruptive in a regular educational setting. His needs are best met in a special ed classroom. I would not like a kid like him to be fully included in either my other son's class or my daughter's class (his twin).

Second response:

> I have two children with disabilities this survey is about one. He is uncomfortable around other children and in close spaces. He expresses dislikes of normal students. He is also disliked by them and they tell me about his behavior when I'm on campus. Mainstreaming to a large extent would not do anyone service in his case.
>
> My other son has been fully and successfully mainstreamed for years. I know the downfalls. I know the up side. I consider mainstreaming as something that *must be decided on a case-by-case basis*. Like any other fad, it is being evangelized as a cure-all. It isn't. It is terrific in some cases. In others, it is child abuse.

The inclusion movement has expanded historically limited placement options for students with severe disabilities and has allowed families and educators the freedom to base their placement decisions not on limiting assumptions but on individual needs and values. Differing beliefs and circumstances will lead to differing choices between and within families regarding inclusion. Findings of this study argue for an expanded view of the concept of least restrictive environment (e.g., Rueda, Gallego, & Moll, 2000) that goes beyond a focus on degree of involvement with general education peers and instead examines the interaction between the educational setting and student and family characteristics and values.

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