

PUPIL SOCIOECONOMIC STATUS, PUPIL RACE, AND
RACIAL COMPOSITION OF THE SCHOOL DISTRICT
AS COMPONENTS OF THE SPECIAL EDUCATION
PLACEMENT DECISION

By

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To My Children, Nieces, and Nephews:

With the earnest desire that they will remember:

Education makes a people easy to lead, but difficult
to drive; easy to govern, but impossible to enslave.

Attributed to Lord Brougham

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And I thank Christ Jesus our Lord, who
hath enabled me, . . . 1 Timothy 1:12

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TABLE OF CONTENTS

	Page
DEDICATION	ii
ACKNOWLEDGEMENTS	iii
TABLE OF CONTENTS	iv
LIST OF TABLES	viii
LIST OF FIGURES	x
Chapter	
1. DEVELOPMENT OF THE PROBLEM	1
Introduction	1
Statement of the Problem	10
Hypotheses	17
Operational Definitions	18
Limitations of the Study	26
Significance of the Study	27
2. REVIEW OF THE LITERATURE	29
Introduction	29
Effects of Membership on Special Education Placement Decisions	29
Effects of Available Data on Special Education Placement Decisions	31
Effects of Team Member Characteristics on Special Education Placement Decisions	33
Effects of Pupil Characteristics on Special Education Placement Decisions	34

TABLE OF CONTENTS (Continued)

	Page
Labeling and Special Education Placement Decisions	39
Conclusions	45
3. METHODOLOGY	46
Introduction	46
Description of the Data Base	46
Population	46
Instrumentation	48
Methodology	54
4. RESULTS	59
Introduction	59
Descriptive Analysis of Subjects	61
Predictor Variables	69
Tests of Hypotheses	71
Hypothesis #1	72
Hypothesis #2	72
Hypothesis #3	76
Hypothesis #4	76
Hypothesis #5	79
Hypothesis #6	79
Hypothesis #7	84
Hypothesis #8	86
Hypothesis #9	91

TABLE OF CONTENTS (Continued)

	Page
Contributory Factors to Variance in Dependent Variables	95
Findings	97
5. DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS	102
Introduction	102
Hypothesis #1	104
Hypothesis #2	105
Hypothesis #3	108
Hypothesis #4	109
Hypothesis #5	109
Hypothesis #6	110
Hypothesis #7	111
Hypothesis #8	112
Hypothesis #9	116
Summary	118
BIBLIOGRAPHY	122
APPENDIX A: Regulations Pertaining to the Education for All Handicapped Children Act - Least Restrictive Environment	133
APPENDIX B: Public Law 93-112 (Rehabilitation Act of 1973 - Nondiscrimination Under Federal Grants)	138

TABLE OF CONTENTS (Continued)

	Page
APPENDIX C: Percent Black Pupil Enrollment in Maryland	141
Percent Black Pupil Enrollment in Virginia	143
APPENDIX D: Prestige Scores Distributions	150
APPENDIX E: Special Education Vignette Protocol	155
Special Education Vignette Protocol Response Sheet	162
APPENDIX F: Letter of Introduction to Special Education Leaders in Maryland and Virginia	164
APPENDIX G: Letter of Introduction to Special Education Leaders in Maryland and Virginia	166
APPENDIX H: Letter Granting Permission to Copy Figures	168
VITA	170
ABSTRACT	

LIST OF TABLES

Table	Page	
1	Number of Protocols Mailed and Number of Protocols Returned by Original Population, Volunteers, Protocols Not Included in Statistical Analyses and District Racial Proportion	62
2	The Distribution of Protocols Mailed and Returned by District Racial Proportion, Pupil SES, and Pupil Race	64
3	Response Categories of Variables	66
4	Number and Percent of Respondents Per Variable Level	67
5	Correlation Coefficient of Variables Used in the Statistical Analyses	70
6	Distribution of Respondents by Handicapping Classification and by Pupil Race	73
7	Analysis of Variance Summary: EMR Classification by Pupil SES, Pupil Race, and District Racial Proportion	74
8	Distribution of Responses by Handicapping Classification and SES	75
9	Analysis of Variance Summary: LD Classification by Pupil SES, Pupil Race, and District Racial Proportion	77
10	Distribution of Responses by Handicapping Classification and Pupil Race	78
11	Distribution of Responses by Handicapping Classification and by District Racial	80
12	Distribution of Respondents by District Proportion and by Time Placement	81
13	Distribution of Responses by Time Recommendation and Pupil SES	82

LIST OF TABLES (Continued)

Table	Page
14 Analysis of Variance Summary: Recommendation of Special Education Time Placement by Pupil SES, Pupil Race, and School District Racial Proportion	84
15 Distribution of Responses by Pupil Race and Time Placement	85
16 Distribution of Responses by Time Recommendation and Handicapping Classification	87
17 Cell Means and Number of Respondents for EMR Classification by Pupil Race and Pupil SES	88
18 Analysis of Variance Summary: Recommendation of Other Category as a Handicapping Classification by Pupil SES, Pupil Race, and School District Racial Proportion	90
19 Cell Means and Number of Respondents for Recommendation of Other Category as a Handicapping Classification by Pupil SES and School District Racial Proportion	92
20 Cell Means and Number of Respondents for Recommendation of Amount of Special Education Time by Pupil SES, Pupil Race, and School District Racial Proportion	94
21 Summary Statistics for Variables in the Time Regression Model	98
22 Multiple Classification Analysis of EMR Classification by SES, Race, and District Racial Proportion	99

LIST OF FIGURES

Figure	Page
1. Comparison of the Black State Pupil Enrollment in EMR Classes to White State Pupil Enrollment in EMR Classes, 1978 (1978-79 OCR data)	13
2. Comparison of the Black State Pupil Enrollment in SLD Classes to White State Pupil Enrollment in SLD Classes, 1978 (1978-79 OCR data)	14
3. School Population Accounted for by Students Classified as LD and EMR 1970-77; All Racial and Ethnic Groups Combined	41
4. Percentage of Each Racial and Ethnic Group Accounted for by Students Classified as LD and EMR (Combined) 1970-77	42
5. Percentage of Each Racial and Ethnic Group Accounted for by Students Classified as LD and EMR 1970-77	43
6. 2x2x2 Experimental Study Design	47
7. Profile of Experimental Vignette Handicapped Child	51
8. Assignment of Experimental Vignette to Maryland Subjects	55
9. Assignment of Experimental Vignette to Virginia Subjects	56
10. Race x SES Interaction of EMR Classification Cell Means	89
11. District Racial Proportion x SES Interaction of Other Handicapping Classification Cell Means	93
12. Race x SES x District Racial Proportion Interaction of Time Placement Cell Means	96

Chapter 1

DEVELOPMENT OF THE PROBLEM

Introduction

Special educators make vital decisions daily that affect the lives of approximately twelve percent of the school aged population and their families. Typical questions that confront special educators include: Is there a handicapping condition? What is the handicapping condition? Are special services required? How and where can the best services be provided?

The derivation of solutions to questions such as these require the decision maker to employ considerable foresight and prudence. To ensure sound and suitable decisions in special education, skill and training in the decision making process is required (Burrello & Sage, 1979; Howe, 1981).

The decision making process refers to the transformation of information through a comparison of input, feedback, and memory with the plans and policies that guide the functioning of the entire system (Flynn & La Faso, 1972). There are several models for making decisions (Flynn & La Faso, 1972; Burrello & Sage, 1979; Howe, 1981). These models have two common underlying elements: consideration of all possible alternatives and selection of the perceived best alternative (Jones, 1981).

The decision making process may be employed by an individual or by a group. Maier (1967) identified the following advantages and

disadvantages to the use of the individual and to the use of the group decision making process:

(1) A group has potential which can exceed that of a superior individual functioning alone when the decision making process is used effectively.

There is more information in a group than in any of its members. Thus problems that require the utilization of knowledge should give groups an advantage over individuals. Even if one member of the group (e.g., the leader) knows much more than anyone else, the limited unique knowledge of lesser-informed individuals could serve to fill in some gaps in knowledge (Maier 1967, p. 140).

(2) A decision made by an individual requires less time for formulation, but there is often an increase in communication failure because the person who formulates the decision may not be the person to execute it. Rather, the decision may be communicated to other persons for execution.

(3) The exploration of alternatives to problem solution may hinder the formulation of the most suitable solution when an individual makes the decision. An individual may be persistent in selecting a familiar approach.

(4) Social pressure for conformity is a major force when a group makes the decision. Persons tend to desire to be accepted and thus silence any disagreement. Often, the first decision that receives some degree of consensus tends to be adopted by the group regardless of the quality of the suggestions that may follow.

(5) A dominant individual from within the group may emerge and influence the group outcome. The resulting decision would primarily be an individual decision rather than a group decision. And,

(6) Participating group members may be converted from the goal of the group-that of finding the best solution to that of an individual winning a decision. This conversion may hinder the effectiveness of the decision making process.

Decisions are made frequently in many professions, including special education. In special education, decisions are made primarily by the group process. There are many advantages and disadvantages to the use of the group process in special education. Several of them are discussed below.

In special education groups, patterns of dominance and submissiveness dictate decisions much more often than do rational considerations (Tolor, 1978). Thus, the group process may not be superior, as some persons believe, to the unilateral recommendations of the psychologists (Kehle & Guidubaldi, 1980). Special education groups or placement committees frequently only legitimize predetermined decisions (Patton, 1976). Thus, an illusory view that nonbiased child assessments are being performed by groups in special education may be created (Tolor, 1978).

Several other deficiencies have been found in the special education group decision making process. The communication network used by planning teams is informal with most information communicated

orally by many different planning team members (Yoshida, Fenton, Maxwell, & Kaufman, 1978). Interpretations of decisions tend to become less clear and less individualized as one follows placement decisions down through the special education chain of command (Harris, 1980). There is a lack of criteria to guide decision making and a lack of team planning for implementation and evaluation (Fenton, 1977). There is a need for assessment procedures, responsibilities of evaluation team members, and clarity of team report content to be established and employed by special education placement teams (Lathen, 1978).

The deficiencies of the team process in special education remains of great concern. However, Gunderson (1971) indicated that it is only by the use of such a team approach that it can be determined that the cause of the problem itself and not just a symptom is being treated. Another advantage to the use of the team process in special education includes the high degree of correlation that is found between a screening test battery and the findings of a multidisciplinary team in identifying children with potential exceptional needs (Matusiak, 1976). Also, the child study team or placement team places exceptional children in more appropriate educational placements than do individual team members (Vautour, 1976).

Although controversial, decisions in special education are made by the group process. The group, a multidisciplinary team, is often referred to as an eligibility or child study team, or as an Admission, Review, and Dismissal Committee. The Education for All Handicapped

Children Act of 1975 (Public Law 94-142) and The Rehabilitation Act of 1973 (Public Law 93-112), Section 504, specifically require that decisions about a handicapped student's educational placement be made by a team of persons who are familiar with the student, placement options, and the meaning of evaluation results (Turnbull & Turnbull, 1978). Public Law 94-142 regulations specifically declare:

(a) General. The public agency shall insure that each meeting includes the following participants:

- (1) A representative of the public agency, other than the child's teacher, who is qualified to provide, or supervise the provision of, special education.
- (2) The child's teacher.
- (3) One or both of the child's parents, subject to Sec. 121a.345.
- (4) The child, where appropriate.
- (5) Other individuals at the discretion of the parent or agency.

(b) Evaluation personnel. For a handicapped child who has been evaluated for the first time, the public agency shall insure:

- (1) That a member of the evaluation team participates in the meeting; or
- (2) That the representative of the public agency, the child's teacher, or some other person is present at the meeting, who is knowledgeable about the evaluation procedures used with the child and is familiar with the results of the evaluation (Part B Regulations, Sec. 300.344).

Persons who make decisions in special education should be cognizant of the exceptional child, prudent, and willing to devote considerable time to the process. The actions of the persons who make special education decisions are directed by the provisions of P. L. 94-142 and Section 504 of the Rehabilitation Act (See Appendices A & B).

Placement decisions and interpretation of evaluation data should:

- (1) Draw upon information from a variety of sources, including aptitude and achievement tests, teacher recommendations, physical condition, social or cultural background, and adaptive behavior;
- (2) Insure that information obtained from all of these sources is documented and carefully considered;
- (3) Insure that the placement decision is made by a group of persons, including persons knowledgeable about the child, the meaning of the evaluation data, and the placement options; and
- (4) Insure that the placement decision is made in conformity with the least restrictive environment rules in Sections 121a.550-121a.554.
 - (b) If a determination is made that a child is handicapped and needs special education and related services, an individualized education program must be developed for the child in accordance with Sections 121a.340-121a.349 of Subpart C (Part B Regulations, Section 300.533).

Although placement decisions should be based upon information from a variety of sources, including aptitude and achievement tests,

[t]hese tests supposedly are objective and allegedly do not depend on irrelevant variables like teacher prejudice or social class, but they are nevertheless subject to criticism, particularly when test results are the primary basis for assigning a disproportionate number of minority pupils - blacks or non-English speaking - to special education programs for the educable mentally retarded (EMR) or the trainable mentally retarded (TMR). The reestablishment of racially dual systems of education is threatened by such assignments, but the constitutional doctrine of equal protection under the Fourteenth Amendment comes into play to prohibit segregation by race in any school program, including special education (Turnbull & Turnbull, 1978, p. 86).

Regulations for P. L. 94-142 identify the following as guidelines for tests and other evaluation materials that are to be utilized as a source of information in the decision making process.

- (a) Tests and other evaluation materials:
 - (1) Are provided and administered in the child's native language or other mode of communication, unless it is clearly not feasible to do so;
 - (2) Have been validated for the specific purpose for which they are used;
 - (3) Are administered by trained personnel in conformance with instructions from the producer;
- (b) Tests and other evaluation materials include those tailored to assess specific areas of educational need and not merely those which are designed to provide a single general intelligence quotient;
- (c) Tests are selected and administered so as best to insure that when a test is administered to a child with impaired sensory, manual or speaking skills, the test results accurately reflect the child's aptitude or achievement level or whatever other factor the test purports to

measure, rather than reflecting the child's impaired sensory, manual, or speaking skills (except where those skills are the factors which the test purports to measure);

- (d) No single procedure is used as the sole criterion for determining an appropriate educational program for a child and placement;
- (e) The evaluation is made by a multidisciplinary team or group of persons, including at least one teacher or other specialist with knowledge in the area of suspected disability;
- (f) The child is assessed in all areas related to the suspected disability, including, where appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities (Part B Regulations, Sec. 300.532).

Many of the decisions made in special education determine if a child is identified as "normal" or as "handicapped"; as "learning disabled" or as "mentally retarded"; is educated locally while living at his home or is placed in a residential setting in another state, spends one hour or the total instructional day in a special class; or if a school system must provide a regular classroom teacher or an interpreter for the deaf. Decisions, such as these, are not always mutually agreeable and challenges to decisions may occur (Turnbull & Turnbull, 1978; Weintraub & Abeson, 1974).

Numerous challenges to decisions in special education have occurred (Turnbull & Turnbull, 1978). Such challenges have questioned the use of biased tests that do not properly account for the cultural background and experiences of the children being tested (Larry P. v.

Riles, Diana v. State Board of Education), the disproportionate number of minority children enrolled in classes for the educable mentally retarded (Larry P. v. Riles), the placement of handicapped persons in institutional settings (Wyatt v. Stickney, New York State Association for Retarded Children v. Rockefeller), and the use of IQ or aptitude tests (Larry P. v. Riles, PASE v. Hannon).

In Diana v. State Board of Education (California, 1970), Mexican American public school children alleged that they had been placed inappropriately in classes for the mentally retarded on the basis of biased intelligence test. The defendants in this case were required to utilize procedures to ensure proper placement in special classes. It was concluded in Larry P. v. Riles (California, 1979), that students had a right to proper placement and that a single test could not be used as the sole criterion for classification and placement. In PASE v. Hannon (Chicago, 1980), the court ruled that the use of IQ tests did not discriminate against black children. Wyatt v. Stickney (Alabama, 1971) involved residential mentally handicapped persons who alleged that their lives were endangered by the substandard conditions of the environment. The court ruled that it was the state's duty to habilitate or provide treatment for these citizens. In New York State Association for Retarded Children v. Rockefeller, 1973, the court ruled that the state's duty was only to prevent deterioration or harm to the residential mental patients.

Resolutions to challenges of special education decisions rely essentially upon state and federal legislation (Weintraub & Abeson, 1974; Turnbull & Turnbull, 1978; Weintraub, Abeson, Ballard, & LaVor, 1976). Most state regulations clearly specify the rights of handicapped persons. The Fifth and Fourteenth Amendments to the United States Constitution provide that a person shall not be deprived of life, liberty, or property without due process of law (Abeson & Ballard, 1976; Turnbull & Turnbull, 1978; Jones, 1981). A school's failure to identify a handicapped person can prevent him from receiving an appropriate education (Public Law 94-142, Section 601 (b)(5)). Decisions that do not classify children as handicapped who are indeed handicapped, classify children inappropriately, or result in children being placed inappropriately in classrooms for the handicapped violate substantive due process and can result in discriminatory offenses (Larry P. v. Riles; Abeson & Ballard, 1976; Turnbull & Turnbull, 1978).

Good decisions in special education identification/placement are essential. They affect the lives of hundreds of the nation's school aged population. The special education eligibility team was formulated for the primary purpose of making special education decisions. This committee consists of a school administrator, who often chairs the committee, parent, classroom teacher, and a special education teacher.

Statement of the Problem

To alleviate bias and subjectivity, Congress mandated that pertinent special education decisions be made by a multidisciplinary team

(P. L. 94-142, Section 504 of the Rehabilitation Act of 1973). This team commonly referred to as the ARD Committee or eligibility team, should formulate decisions on the basis of available information from academic tests, physical conditions, social or cultural background, and adaptive behavior that pertain to the child.

Decisions in special education have not been consistent from state to state (Annual Report to Congress on the Implementation of Public Law 94-142, 1980). Some states tend to overrepresent black children in classes for the educable mentally retarded (EMR) while underrepresenting white children in such classes. In contrast, some states tend to overrepresent white children in classes for children with specific learning disabilities (SLD), while underrepresenting black children in such classes (Keyes, 1981, Figure 1 & Figure 2).

In Figure 1, six states that approximated the national racial composition as given in the 1978-79 Office of Civil Rights (OCR) data were selected. The black state pupil enrollment in EMR classes was compared to the white state pupil enrollment in EMR classes in each of the six states. It was seen that the black state pupil enrollment in EMR classes was either equal to or surpassed the white state pupil enrollment in these classes in three of the six states. In the remaining three states, the black enrollment in EMR classes was considerably more than the percentage of black pupils enrolled in each of the three States.

Figure 2 compares the enrollment of black pupils in SLD classes with the enrollment of white pupils in SLD classes for the same six states that were compared in Figure 1. It is seen that, in contrast to the racial proportions in EMR classes, in SLD classes the black state pupil enrollment did not approximate, equal or surpass the white state pupil enrollment in SLD classes in any of the six states.

Mercer (1973) found in a study conducted in California that the Mexican American population was overrepresented by 22% in the mentally retarded population. Anglo American children were underrepresented by as much as 29% in this population. Tucker (1980) found in a study of more than fifty school districts in the southwest U.S. that 15.2% of all black students, 11.1% of all Anglo American Children, and 11.5% of all Mexican American children were in special classes for the handicapped. What factors account for these discrepancies? Why are lower SES children more inclined to be placed in special education classes (Mercer, 1973; Rubin, Krus, & Balow, 1973; Matuszek & Oakland, 1979)? Why are black children overrepresented in special education classes (Mercer, 1973; Tucker, 1980; Keyes, 1981)? Why is there a tendency for school districts with a lower percentage of black enrollment to have a greater percentage of overrepresentation of black children in special education classes (Appendix C)?

When making special education placement decisions, regular educators, special educators, and administrators tend to be subjective in their recommendations (Morris & McCauley, 1977; Fenton, 1979; Aloia,

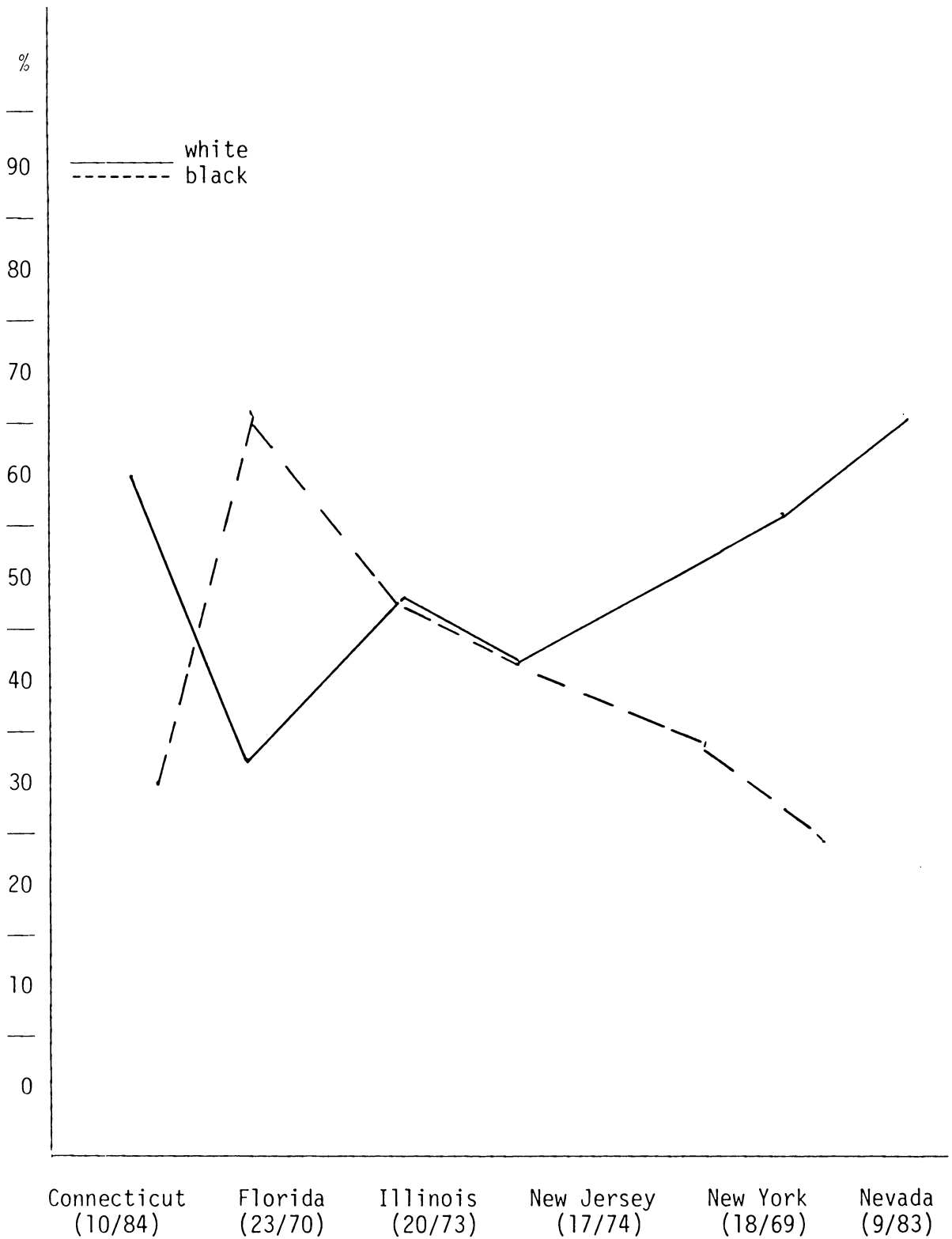


Figure 1. Comparison of the Black State Pupil Enrollment in EMR Classes to White State Pupil Enrollment in EMR Classes, 1978 (1978-79 OCR data).

() = black to white state enrollment ratio

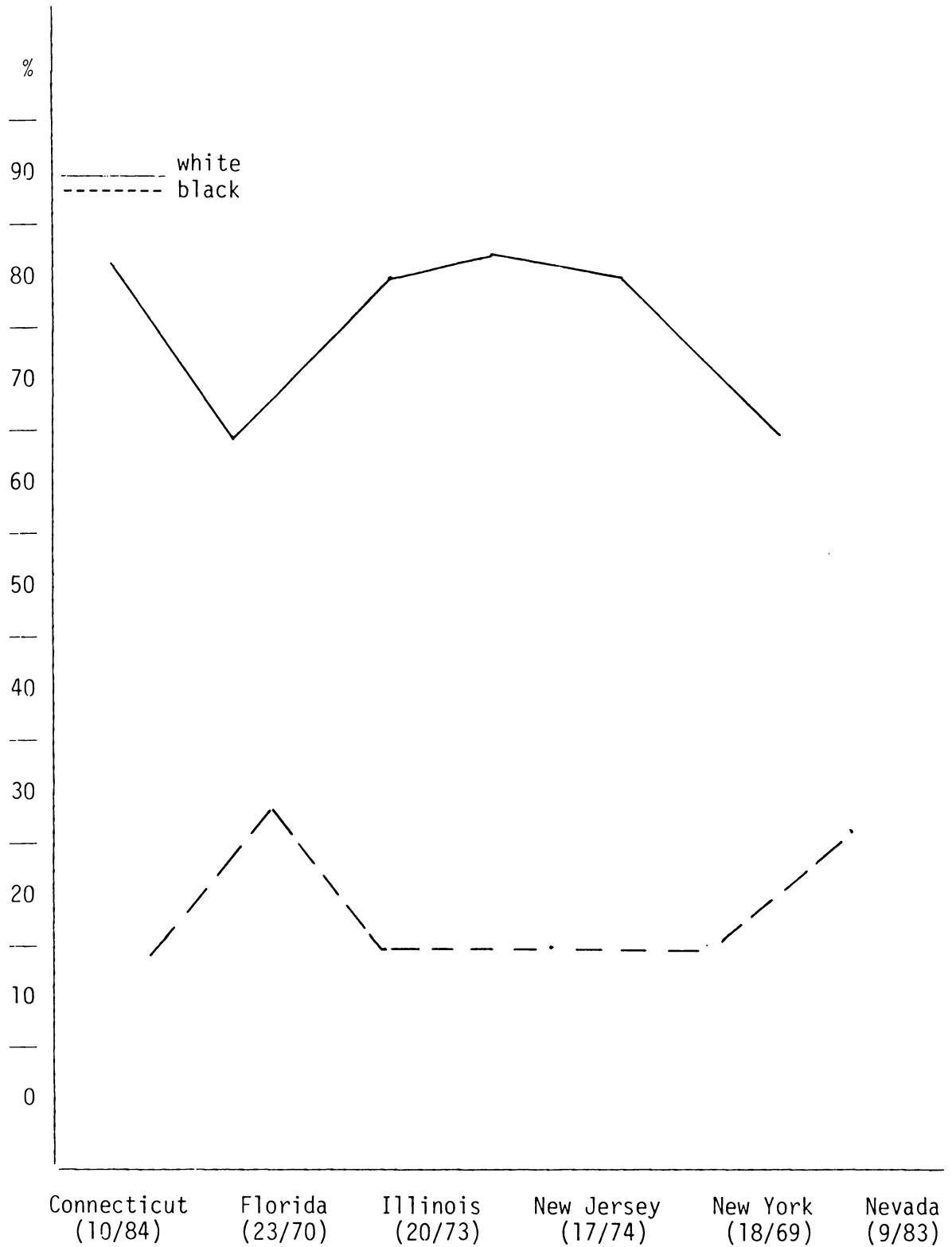


Figure 2. Comparison of the Black State Pupil Enrollment in SLD Classes to White State Pupil Enrollment in SLD Classes, 1978 (1978-79 OCR data).

() = black to white state enrollment ratio

1977; Nix, 1977). Matuszek & Oakland (1979) found that psychologists are also subjective in their special education placement recommendations.

Nearly seventeen percent of the special education placement variance is attributable to power terms (leadership) within the group (Fenton, 1979). Fenton (1979) also found in her Connecticut study that 67% of the placement decision was due to unexplained variables, 4.96% was due to rating terms (IQ, perceptual skills, language use, on-task behavior, reading level, peer relations, parent interview, and medical history), and 11.15% was due to interactive terms. She recommended that programmatic research be done to identify other factors that contribute to the unexplained variation in the special education placement decision.

The research problem that is the concern of this study is: do race of the child, socioeconomic status (SES) of the child, and racial composition of the school district account for the unexplained variation in the special education placement decision? This study is not concerned with racial bias per se, but rather with the effects of race of the child, socioeconomic status (SES) of the child, and racial composition of the school district on the placement decisions of special education eligibility team members.

Special education administrators (leaders) often serve as chairpersons of eligibility teams, especially when the decision is made to place a handicapped child in a full time special class or when the decision is made to place the child in a separate school for the handicapped. Special education leaders, as chairpersons of eligibility

teams, may influence the decisions of the group (Fenton, 1979). Special education leaders also establish and/or influence special education policies for school districts and thus may influence decisions that are made in special education at all levels throughout the school districts. This population, i.e., special education leaders, was selected for inclusion in this study because they are decision makers in special education, they serve as eligibility team members, and they tend to influence the special education decisions of other decision makers in special education.

Race of the child, socioeconomic status of the child, and racial composition of the school district were selected as independent variables for this study. Race of the child was selected because of the research which suggested an overrepresentation of black children in classes for the handicapped (Mercer, 1973; Tucker, 1980; Keyes, 1981). Socioeconomic status was selected for inclusion in this study because of the studies which found that there was an overrepresentation of children from lower SES families in classes for the handicapped (Mercer, 1973; Rubin, et al., 1973; Matuszek & Oakland, 1979). Racial composition of the school district was included as an independent variable because of the data which indicate a tendency for school districts with a lower percentage of black enrollment to have a greater percentage of overrepresentation of black children in special education classes (Appendix C). Specific handicapping classification and time placement in a special class were selected as dependent variables because a

similar discrepancy to that noted with the independent variables also was noted in the identification of a handicapping classification and the recommendation of a time placement (Mercer, 1973).

Hypotheses

A review of the literature on the placement process in special education and the researcher's experience with placement teams resulted in the formulation of the following hypotheses:

1. There will be no difference in the EMR recommendation of special education leaders in Maryland and Virginia for the white child and the EMR recommendation of special education leaders in Maryland and Virginia for the black child, $p \leq .05$.
2. There will be no difference in the EMR recommendation of special education leaders in Maryland and Virginia for the low SES child and the SLD recommendation of special education leaders in Maryland and Virginia for the low SES child, $p \leq .05$.
3. There will be no difference in the SLD recommendation of special education leaders in Maryland and Virginia for the black child and the SLD recommendation of special education leaders in Maryland and Virginia for the white child, $p \leq .05$.
4. There will be no difference in the special education placement recommendations of special education leaders in Maryland and Virginia from school districts with a greater percentage of black students and the special education placement recommendations of special education leaders in Maryland and Virginia from school districts with a lesser percentage of black pupils, $p \leq .05$.
5. There will be no difference in the amount of special education time recommended by

special education leaders in Maryland and Virginia for the low SES child and the amount of special education time recommended by special education leaders in Maryland and Virginia for the high SES child, $p \leq .05$.

6. There will be no difference in the amount of special education time recommended by special education leaders in Maryland and Virginia for the black child and the amount of special education time recommended by special education leaders in Maryland and Virginia for the white child, $p \leq .05$.
7. There will be no relationship between the identification of a handicapping classification and the recommendation of a special education placement time for special education leaders in Maryland and Virginia, $p \leq .05$.
8. There will be no two-way interactions of race of the child, SES of the child, and/or racial composition of the school district on the identification of a handicapping classification or the recommendation of a time placement in special education, $p \leq .05$.
9. There will be no three-way interaction of race of the child, SES of the child, and racial composition of the school district on the identification of a handicapping classification or the recommendation of a time placement in special education, $p \leq .05$.

Operational Definitions

The following definitions were utilized in this study.

1. Handicapping children: "means those children evaluated in accordance with Sections 121a.530-121a.534 as being mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, ortho-

pedically impaired, other health impaired, deaf-blind, multi-handicapped, or as having specific learning disabilities, who because of those impairments need special education and related services.

(b) The terms used in this definition are defined as follows:

- (1) "Deaf" means a hearing impairment which is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, which adversely affects educational performance
- (2) "Deaf-blind" means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that they cannot be accommodated in special education programs solely for deaf or blind children.
- (3) "Hard of hearing" means a hearing impairment, whether permanent or fluctuating, which adversely affects a child's educational performance but which is not included under the definition of "deaf" in this section.
- (4) "Mentally retarded" means significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period, which adversely affects a child's educational performance.
- (5) "Multihandicapped" means concomitant impairments (such as mentally retarded-blind, mentally retarded-orthopedically impaired, etc.), the combination of which causes such severe educational problems that they cannot be accommodated in special education programs solely for one of the impairments. The term does not include deaf-blind children.
- (6) "Orthopedically impaired" means a severe orthopedic impairment which adversely affects

a child's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns which cause contractures).

- (7) "Other health impaired" means (i) having an autistic condition which is manifested by severe communication and other developmental and educational problems; or (ii) having limited strength, vitality or alertness, due to chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle anemia, hemophilia, epilepsy, lead poisoning, leukemia, or diabetes, which adversely affects a child's educational performance.
- (8) "Seriously emotionally disturbed" is defined as follows:
 - (i) The term means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects 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.

- (ii) The term includes children who are schizophrenic. The term does not include children who are socially maladjusted, unless it is determined that they are seriously emotionally disturbed.
- (9) "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 to do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, of mental retardation, or of environmental, cultural, or economic disadvantage.
- (10) "Speech impaired" means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, which adversely affects a child's educational performance.
- (11) "Visually handicapped" means a visual impairment which; even with correction, adversely affects a child's educational performance. The term includes both partially seeing and blind children" (Section 300.5, Part B Rules and Regulations).

2. Admission, Review, and Dismissal Committee (Maryland Procedures): refers to a committee "...which serves with the authority of the local superintendent of schools, and is composed of the following:

- (a) A chairperson designated by the local superintendent;

- (b) Individuals who are familiar with the child's current level of functioning (these individuals shall include a special educator and interdisciplinary personnel from the local education agency and the local health department), and other public agencies, as appropriate.
 - (c) Others as deemed appropriate, such as individuals expected to become deliverers of direct service to the student.
- (2) If a student is currently being served in a nonpublic school or state funded or operated institution, representatives from that program shall be invited to provide information relating to the student's educational needs. These representatives shall be informed 10 calendar days before scheduled meetings.
- (3) The responsibilities of the committee or committees shall be as follows:
- (a) Referral.
 - (i) To receive referrals for special education services within 30 calendar days of the completion of the assessment;
 - (ii) To identify personnel and arrange for appropriate assessment procedures in accordance with Regulation .05C, and review the results of these assessments;
 - (b) Placement.
 - (i) To determine all special education level placements within the local school system;
 - (ii) To recommend all nonpublic tuition placements to the State Department of Education in accordance with Section F, below;
 - (iii) To designate individuals who will be responsible for developing the individualized education program within 30

calendar days of the committee placement decision;

- (iv) To approve the individualized education program;
- (v) To consider the logistics of transporting the student to the program when considering appropriate placements.

(c) Review.

- (i) To review pupil progress based upon the individualized education program in accordance with Section D, below;
- (ii) To recommend modifications in the individualized education program as necessary;
- (iii) To recommend dismissal from special education program, if appropriate;
- (iv) To review pupil placement decisions in cases where information not previously available is presented to the ARD Committee (Maryland State Bylaw 13.04.01, pp. 21-22).

2a. Eligibility Committee (Virginia Procedures): "Eligibility for special education programs and related services shall be determined by an eligibility committee.

1. Membership of the eligibility committee shall include, but not be limited to, school division personnel representing the disciplines providing assessment components and the administrator of the special education program, or designee. At least one school division representative serving on the eligibility committee must have either assessed or observed the child.
2. The function of the eligibility committee shall be to review the assessment components and any other special reports in order to

determine if the child has a handicapping condition which requires a special education program and related service.

3. The committee shall follow due process procedures in the determination of eligibility and assurance of confidentiality of records.
4. The eligibility committee shall have a written summary which consists of essential deliberations supporting its findings as to the eligibility of each child for a special education program and related services, signed by each committee member present:
 - a) The written summary shall be maintained in the child's confidential file; and
 - b) A summary statement of eligibility committee recommendations shall be forwarded to the IEP committee upon determination of eligibility (Virginia Department of Education, Regulations for Operation of Special Education).

3. Race: White refers to persons of the Caucasian race. Black refers to persons of African descent.

4. Socioeconomic status (SES): Refers to the prestige score of the occupation for the head of the household as obtained from prestige scores reported in the General Social Surveys, 1972-80: Cumulative Codebook for the Spring (1980). The mean prestige score was 41.75 and the standard deviation was 16.36. Prestige scores between 58 and 91 were considered as high SES, 25-57 as medium SES, and -7 to 24 as low SES (Appendix D).

5. School administrator: Anyone who has been entrusted by the local education agency to fulfill administrative tasks at the school level.

6. Special education leader/expert: A person employed by a school district or school corporation to direct, supervise, or coordinate special education services.

7. Special education teacher: A licensed teacher who works directly with special education children and/or teachers. May include itinerant teacher, resource teacher, or full-time special education teacher.

8. Recommended placement: Refers to the handicapping classification, i.e., learning disabled, educable mentally retarded, trainable mentally retarded, etc. It also refers to the amount of time per day that one is to receive special education.

9. Special education: means "specially designed instruction, at no cost to the parent, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions.

(2) The term includes speech pathology, or any other related service, if the service consists of specially designed instruction, at no cost to the parents, to meet the unique needs of a handicapped child, and is considered 'special education' rather than a 'related service' under State standards.

(3) The term also includes vocational education if it consists of specially designed instruction, at no cost to the parents, to meet the unique needs of a handicapped child.

(b) The terms in this definition are defined as follows:

(1) 'At no cost' means that all specially designed instruction is provided without charge, but does not preclude incidental fees which are

normally charged to non-handicapped students or their parents as a part of the regular education program.

- (2) 'Physical education' is defined as follows:
- (1) The term means the development of:
 - (A) Physical and motor fitness;
 - (B) Fundamental motor skills and patterns; and
 - (C) Skills in aquatics, dance, and individual and group games and sports (including intramural and lifetime sports).
 - (ii) The term includes special physical education, adapted physical education, movement education, and motor development. (20 U.S.C. 1401(16).)
 - (3) 'Vocational education' means organized educational programs which are directly related to the preparation of individuals for paid or unpaid employment, or for additional preparation for a career requiring other than a baccalaureate or advanced degree (Part B Regulations, Section 300.14).

Limitations of the Study

Although substantial effort was made to control for prevalent threats to validity and reliability, limitations to the study were identified. These limitations are presented below.

This was a study of the recommendations of special education leaders in Maryland and Virginia. These leaders often serve on eligibility teams when children are to be placed in special classes and schools. Generalizations beyond such personnel and beyond these two states cannot be made beyond this study. Recommendations of parents,

regular educators, and representatives from other agencies were not studied.

This was a study of individual decisions of special education leaders. Group decisions in special education were not studied. As leader of the eligibility team, the special education leader may have influence over the decisions of other committee persons on the special education team (Fenton, 1979).

This study utilized a description of a hypothetical handicapped child. Educational records and resource persons were not available to the team member.

Placement recommendations for one elementary boy with specifically identifiable characteristics were considered in this study. Girls or children with different cognitive, social, and physical attributes were not considered.

The final limitation of this study was that all special education leaders who received a protocol did not chose to return it. Thus, the results of the study were based upon the returns of individuals who voluntarily returned the protocols.

Significance of the Study

This study expands the information and understanding of special education practices as it attempts to document the implementation of the nondiscriminatory evaluation provisions of Public Law 94-142 and Section 504 of the Rehabilitation Act of 1973. It also aids in clarifying the enigmatic nature of the disproportionate number of

minority children assigned to special education classes and the disproportionate number of minority children in specific handicapping classifications.

This study helps to identify if school children are being placed in special classes because of their race and/or because of their socioeconomic status. It also helps to reveal if the constitutional doctrine of equal protection under the Fourteenth Amendment which prohibits such practices is being observed.

This study is significant because it helps to show if the decisions of special education leaders are affected by the racial composition of the school district more than by the educational needs of the child. It provides information on the inclinations of eligibility team members from school districts with varying percentages of minority representation.

This study helps to show if the classification of the child, e.g., educable mentally retarded, determines the special class placement of the child, e.g., three hours of special education services per day. This study also identifies areas in which the legislation and/or regulations may require amendment and/or modification. In addition, it enhances general planning and decision making in special education.

Chapter 2

REVIEW OF THE LITERATURE

Introduction

Although federal mandates have stipulated nondiscriminatory testing and the use of a multidisciplinary team for special education decision making, considerable variance continues to exist in the racial and socioeconomic composition of handicapping classifications and special class placements. A limited number of researchers have attempted to identify the source of the racial and socioeconomic differences that are found in special education placements. The research literature that is associated with special education placement decisions is presented here. The effects of the membership of the team, available data, characteristics of team members, characteristics of pupils, and the effects of labeling on special education placement decisions are discussed.

Effects of Membership on Special Education Placement Decisions

Public Law 94-142 provided a definition for the special education multidisciplinary team but did not expound on the membership of the team. Does the membership of the special education placement team affect the output of the group? The effects of team membership on special education placement decisions are discussed.

Vautour (1976) discovered in a study of 127 child study team members that an appointed team leader did not influence the team

placement decision more than the other team members influenced the decision. In contrast, Fenton (1979) in a study to determine if the decision making team's power structure influenced the selection of an educational placement, found that 16.61% of the placement decision was attributed to power terms (leadership). Differences in the research methodology of the two studies probably accounted for the contrasting findings of these two studies, i.e., although both utilized child study teams, the individual subjects were more than likely different and each study utilized different descriptions of a handicapped child.

In the absence of well defined guidelines for placement teams, team members do not all agree on the role functions of placement teams (Tufo & Francis, 1978). A survey by Fenton (1979) of the placement teams of 230 handicapped persons to determine if team members would agree on the goals of the team and if the team would be fully knowledgeable of the team's legally assigned responsibilities found that over 60% of the teams studied had less than a 3/4 majority of their members who recognized the team's responsibility to make specific decisions. Variance was noted in the identification of the role of the team by special education team members. This lack of clarity of purpose would affect placement decisions. A reduction of the dissonance among special education placement team members would enhance the team's ability to determine the essential features of proposed solutions (Spadafore, 1976).

Although placement team meetings should have at least three persons, i.e., qualified LEA representative, child's teacher and parent, the legislation does not specifically mandate a maximum number of participants. Vautour (1976) found that the size of the child study team did not affect the appropriateness of the placement decision. Unlike size, the number of applicants to be reviewed at a meeting and clarity of the program goals affected the decisions in special education of one California school district (Patton, 1976).

Subjects in a Connecticut study conducted by Yoshida, Fenton, Kaufman, & Maxwell (1978) indicated on a Likert type scale, in which of 24 planning team activities parents should participate during planning team meetings. The two activities that were identified as being appropriate for parental participation were-to present information relevant to the case and to gather information relevant to the case. Only 26.8% of the respondents indicated that parents should participate in the final decision. If planning teams organize in a manner that does not allow parents to participate in the final decision of the group, especially by due process procedures, then not only will they be in violation of the provisions of P. L. 94-142, but the decision of the team may also be influenced.

Effects of Available Data on Special Education Placement Decisions

Information from a variety of sources should be considered in special education placement decisions, including aptitude and

achievement tests, social or cultural background, and adaptive behavior. How does the availability of this information affect special education placement decisions?

Patton (1976) concluded from his study of one California school district that the amount of information considered by the special education placement team, affected the placement decision. Does the information considered have to be of a certain nature? An analysis of the recommendations of seven special education placement teams in southern Texas revealed that decisions were not influenced by social history data or psychological recommendations (Ely, Morrow, & Powell, 1976). Goldbaum (1976) found in his study of 44 placement team members that when placement teams used norm referenced data rather than criterion referenced data, they placed handicapped children in more segregated educational settings. Smith and Knoff (1981) in a study of 30 Syracuse University graduate students found that the presence of an IQ score altered placement opinions downward, i.e., toward a more restrictive placement. Other academic information, i.e., results of Bender, Goodenough and Daberon assessments and information obtained from home and school history records and AAMD Adaptive Behavior Scale results, did not influence placement decisions.

Differences noted in the findings of these studies of the effects of available data on special education placement decisions were probably due to the nature of the variables utilized in each study.

Norm referenced data, criterion referenced data, amount of information, and IQ affected placement decisions, while social history and psychologist's recommendation did not affect special education placement decisions.

Effects of Team Member Characteristics on Special Education Placement Decisions

Special education placement teams with specific composition are prone to varied educational philosophies, practices, and preferences. Such individual philosophies and differences affect special education placement decisions.

Goldbaum (1976) found that clinically trained team members placed children in more segregated settings, i.e., more hours in a special class, than educationally trained team members. Aloia, Knutson, Minner, & Van Seggern, (1977) indicated that special education teachers perceived regular education placement for a handicapped child as a threat to their profession and thus would be less inclined to recommend placement in regular education. Nix (1979) analyzed the attitudes of administrators toward special education placement and concluded that they preferred the least costly educational placement.

Thouvenelle & Rader (1980) observed in their USOE study of placement teams in five states that parents were present at a majority of the special education placement team meetings, but did not actively participate in the decision making process despite consistent effort by school staff to involve them. Special education placement decisions

are affected when parents, as team members, do not participate in the team decisions. Similarly, Lyons (1979) identified one of the problems with decision making in special education as: classroom teachers are frequently not involved in decisions. Here again, this lack of participation affects the special education placement decision.

The level of satisfaction of team members increased with higher levels of participation in the decision making process (Yoshida, Fenton, Maxwell, & Kaufman, 1978). This satisfaction of team members affects special education placement decisions. Regular education teachers were found to be the lowest in special education team participation, and thus the lowest in satisfaction. School psychologists, in contrast, ranked highest in both participation and satisfaction.

Effects of Pupil Characteristics on Special Education Placement Decisions

Special education placement decisions should be based upon several factors, including the child's physical condition, social or cultural background, adaptive behavior, and level of cognitive functioning. The severity of the handicapping condition should be a major factor in placement considerations, but not the sole determinant of the special education placement decision (Harris, 1980). The present study is concerned with two effects of pupil characteristics, specifically race and SES, on special education placement decisions. Here, a review of the literature of the effects of pupil characteristics on special education placement decisions is presented.

Pupil IQ has been found to relate significantly to the placement decision in special education, i.e., children of low scores are more inclined to be placed into special classes (Junkala, 1977; Durojaiye & Such, 1971; Matuszek & Oakland, 1979). Interestingly, Wilkes, Bireley, & Schultz (1979) in their study of 120 professional educators in the Dayton, Ohio area found that a child's behavior in the classroom had more bearing on the decision to reintegrate children (from special class to regular class) than did the student's academic performance. Similarly, Blatt (1958) found that special class children and regular class children did not significantly differ in academic status.

Durojaiye & Such (1971) obtained ratings for 36 children who were undergoing observations at an assessment house in England to determine factors that affect placement decisions. They concluded that physical appearance, possession of the basic school skills and sensory adequacy were all important factors in the determination of placement decisions in special education. Similarly, Patton (1976) examined assessment and placement methods in a California school district and concluded that the desirability of the school program affected special education decisions.

McLaughlin, Miller, & Chansky (1970) found sex differences in teachers' ratings for underprivileged retardates, but not for "their higher social class counterparts." The lower class female was found to present a more attractive picture than the lower class male. These authors studied the responses of 87 postgraduate students enrolled in

the special education program at Temple University to investigate the role of social class membership and sex on prognoses of retarded children's potential, achievement, citizenship, and employment. The respondents made predictions for two matched pairs of case histories. The lower class male child was found to be the least apt to perform socially adaptive behaviors. Scholastic achievement was perceived as being depressed in both the lower class male and lower class female child. Judgments of the future behavior of the hypothetical children in their study differed with social class.

Bergan & Smith (1966) investigated the effects of knowledge of socioeconomic status on prospective teachers' judgments of the competence and social acceptability of retarded children. Seventy-two college students rated a hypothetical child on a series of attributes designed to assess competency and social acceptability, e.g., manners, ability to get along, etc. An analysis of variance revealed that retarded children of high socioeconomic status were regarded as more competent and more socially acceptable with respect to other retarded children than retarded children of low socioeconomic status. Female retarded children were not regarded as superior to male retarded children with respect to these two attributes.

Algozzine & Yesseldyke (1979) examined the extent to which sex, socioeconomic status, physical appearance, and the nature of the referral problem affect the decision making process in special

education. One-hundred and fifty-nine subjects participated in a computer simulated decision making exercise. They concluded that the nature of the referral problem was the only factor studied that influenced special education placement decisions. When the respondents were told that the child was referred for academic difficulties, they predicted difficulties in math, but not in reading.

Rubin, Krus, & Balow (1973) studied the possible basis for differential school placement of children with similar levels of intelligence. They selected children who had been identified as having low IQ by an independent agent and followed them through the years to compare those who were assigned to special classes to those remaining in regular classroom programs. SES, intelligence, school readiness & language, school placement & behavior, and school achievement were analyzed. SES was the one factor that significantly differentiated between low IQ regular class pupils and low IQ special class pupils of both average and low IQ, with the special class subjects obtaining lower SES index scores.

The differences in the findings of the effects of sex on judgment in special education noted in these studies were probably due to differences in instrumentation. Each study utilized a different description of a hypothetical child that included different pupil characteristics. Differences in methodology also may have accounted for the differences in results.

Ethnicity, socioeconomic status, intelligence, adaptive behavior, achievement test scores, classroom achievement, language characteristics, manageability, self-concept, interpersonal relationships (with teachers, with classmates, with adults in community, and with peers in community), anxiety at home, and values of parents were studied to determine if they influence teacher's and psychologist's recommendations regarding special class placement (Matuszek and Oakland, 1979). The authors studied the responses of 129 regular teachers and school psychologists. The subjects reviewed case studies and recommended one of five educational settings, i.e., regular class, regular class with consultation, regular class with resource assistance, part-time special class, and full-time regular class. Linear model techniques revealed that IQ, achievement tests, socioeconomic status, class achievement, and home related anxiety significantly affected special education recommendations of psychologists. School psychologists did not make different recommendations on the basis of race, but recommended more special services, i.e., more time in a special class, for children of higher SES than for children of lower SES. Other variables were not significantly different for school psychologist. Six variables: class achievement, test achievement, IQ, home-related anxiety, self-concept, and adaptive behavior influenced teacher decisions. Teachers apparently do not consider either racial-ethnic or SES characteristics important when making special education placement recommendations.

Labeling and Special Education Placement Decisions

The decision making process in special education is often constrained and confined by the label under which the child is determined eligible to receive special services. The practice of labeling in special education is a controversial issue. Guskin (1974) identified the labeling controversy as a political argument between those who support the current system of special education and psychological diagnosis and those who wish to break up the current system.

Although Bullock & Rigg (1980) found that there was no significant difference in the manner of labeling exceptional children among five geographical areas in the United States, there are differences among the labels found between groups of people. MacMillian, Jones, & Aloia (1974) indicated that some of the findings from reports by Rowitz (in press) indicate that: a) minority children are overrepresented among those labeled with minimal retardation, b) children who are behavior problems in school are more likely to be labeled retarded than children who are better behaved, and c) most children labeled with minimal retardation come from low socioeconomic homes.

Tucker (1980) in his study of a representative sample of more than 50 school districts in the Southwest U.S. revealed in his analysis of the ethnic proportions of children in classes for the learning disabled that the number of children enrolled in LD classes reached about the same percentage as the number of children enrolled in EMR classes for

the first time during the 1970-1977 period in 1973 (Figure 3). When each racial group studied (Black, Mexican American, and Anglo) is looked at separately, it is seen that the percentage of the black population enrolled in EMR classes and LD classes exceeds the percentage of the Mexican American and Anglo populations enrolled in EMR classes and LD classes (Figure 4). Interestingly, the rate of increase for black children classified as LD and EMR in 1975 increased considerably more than the rate of increase for Anglo and Mexican American children classified as LD and EMR in 1975.

A larger percentage of the black population was identified as both LD and EMR during the period of 1974-77 than the percentage of Anglo or Mexican American populations identified as both LD and EMR during this period (Figure 5). In 1975, the percentage of each ethnic group identified as LD superseded the percentage of students identified as EMR for all three ethnic groups for the first time during the 1970-77 period. In 1977, the number of students identified as EMR decreased for all three ethnic groups while the percentage of each racial and ethnic group accounted for by students classified as LD increased. This finding, perhaps was due to previous litigation emphasizing the EMR label. It is expected that this finding has changed since there is now a federal ceiling on the number of LD children for which a school system can receive federal support.

The percentage of the black population accounted for by students classified as EMR consistently outnumbered the percentages of Anglo

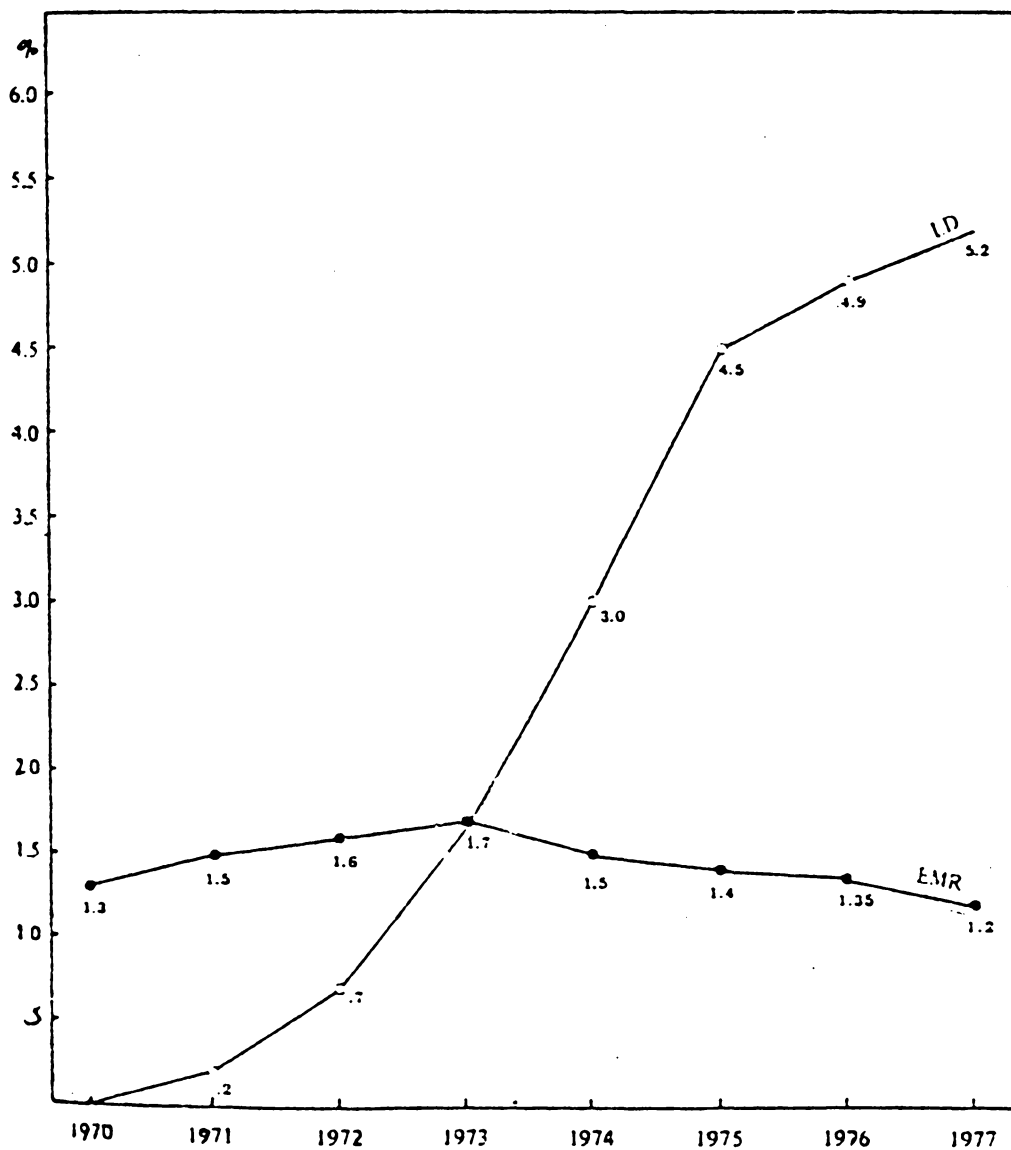


Figure 3. School population accounted for by students classified as LD and EMR 1970-77; all racial and ethnic groups combined.

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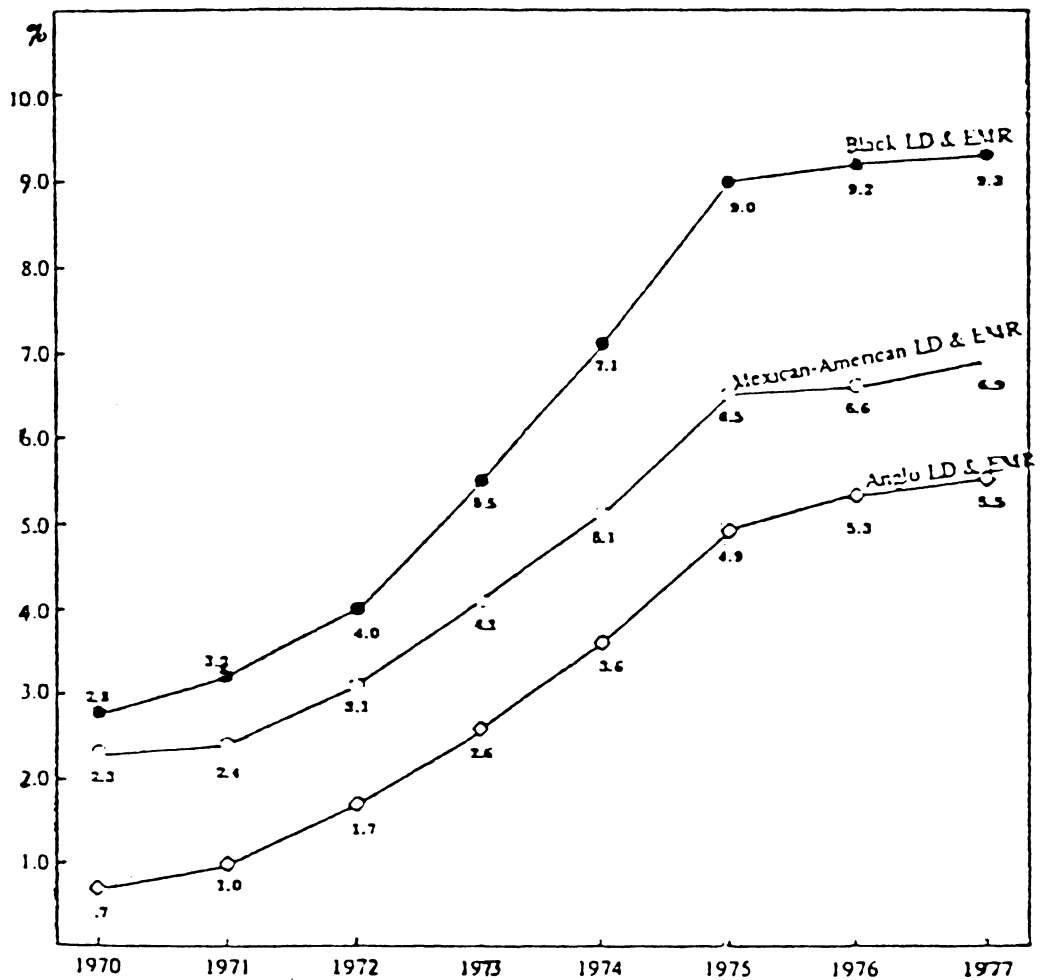


Figure 4. Percentage of each racial and ethnic group accounted for by students classified as LD and EMR (combined) 1970-77.

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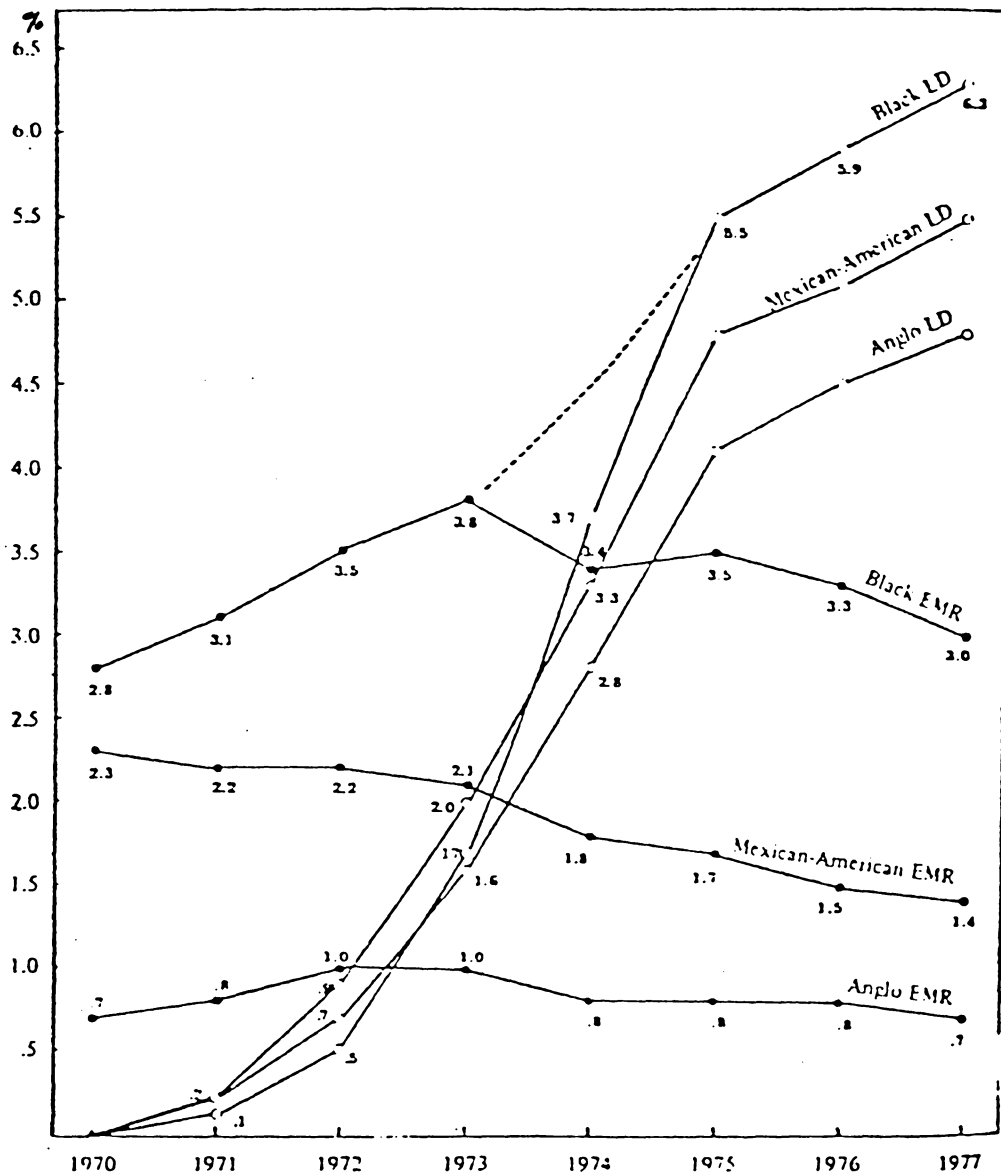


Figure 5. Percentage of each racial and ethnic group accounted for by students classified as LD and EMR 1970-77.

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and Mexican American populations accounted for by students classified as EMR. This was not true for the percentage of the black population accounted for by students classified as LD during the 1970-77 period. The percentage of black students classified as LD exceeded the percentages of Anglo and Mexican American children identified as LD in 1974-77.

Challenges to the over identification of certain racial groups in EMR classes have occurred. These challenges have focused primarily on the labeling of the mildly handicapped, such as the learning disabled and the educable mentally retarded. These children are the ones who often enter elementary schools having mastered the developmental tasks expected of them and usually will not exemplify difficulties for a couple of years (MacMillan & Meyers, 1979). Although the majority of special educators seem to hold the position that labeling has a detrimental effect (MacMillan, et al., 1974), there is no evidence to demonstrate this adverse effect of labels on children (MacMillan & Meyers, 1979).

MacMillan & Meyers (1979) identified several stages of the labeling process, including the psychological stage.

It is at this assessment stage that differentiation occurs between EMR and LD, commonly on the basis of IQ. The EMR child was considered one where the reason for the low achievement was judged to be due to sub-average general intellectual functioning, while the LD child possesses psychological-process deficits (e.g., visual or auditory perception) or has specific problems in reading, arithmetic, or other content areas not associated with general intellectual deficiencies (p. 173).

Does IQ warrant the significant role that it plays in the labeling process in special education? It was found not to predict achievement equally when white and nonwhite students were compared (Goldman & Hartig, 1976). When the three ethnic groups (Mexican American, Black, and Anglo Saxon) were combined to form a single group, the WISC IQ appeared to be an acceptable predictor of scholastic success, but when the WISC IQ was used to predict scholastic success for the minority group alone, it was of little value in the assessment of the educability of these children.

Conclusions

Limited research available on special education placement decisions include a measurement of the effects of teachers, psychologists, sex, available data, size of the team, etc. on placement decisions. A review of the literature does not reveal studies that have analyzed the effects of the racial composition of the school district on the placement decisions of leaders in special education. Although a review of the literature shows that the effects of SES and race on judgments in special education have been studied, a review of the literature does not reveal that researchers have analyzed the placement recommendations of special education leaders to determine if subjectivity is a factor in the determination of a handicapping condition and/or the classification of the handicapping condition, e.g., learning disabled or educable mentally retarded.

Chapter 3

METHODOLOGY

Introduction

This study was designed to assess the effects of race of the child, SES of the child, and racial composition of the school district on special education placement decisions. A 2x2x2 factorial design was used to test for significant effects of the independent variables- race, SES, and district racial proportion on the dependent variables- special education classification and special education time placement (Figure 6).

Description of the Data Base

Population. The accessible population consisted of special education leaders in Maryland and Virginia as identified in listings from the State Department of Education in the two states. There were a total of 155 special education leaders, i.e., persons assigned administrative responsibility for special education programs in these two states. One hundred and thirty-one were identified in Virginia and twenty-four were identified in Maryland.

Twenty-three special education leaders from Maryland were included in the study. Montgomery County's special education leader was eliminated from the study due to his familiarity with the nature of the study. One hundred and twenty-nine special education leaders were

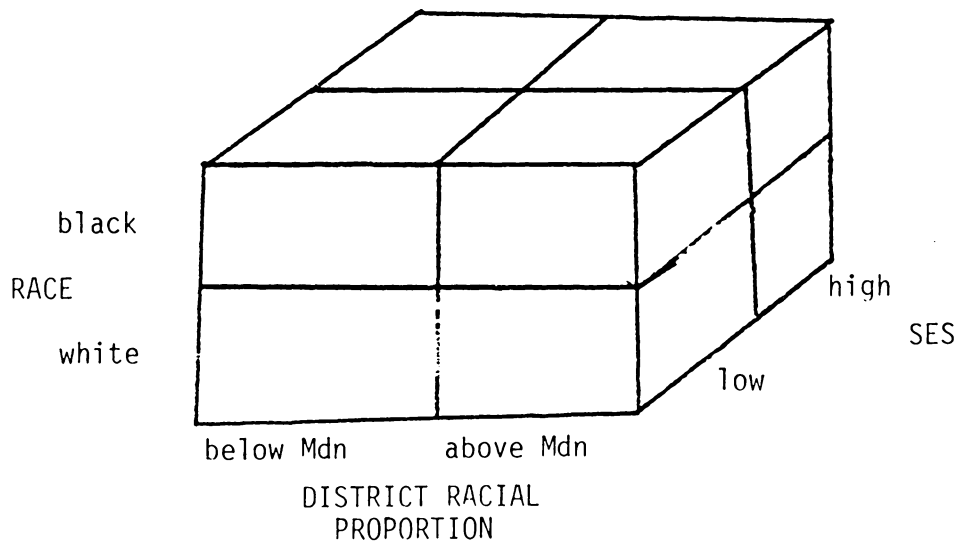


Figure 6: 2x2x2 Experimental study design.

included from Virginia. The coordinator/directors of special education from Radford City and Clifton Forge were eliminated from the study due to their familiarity with the nature of the study.

Instrumentation. Five brief and concise descriptions of special education children (vignettes) were included in this study. There were four filler vignettes and one experimental vignette (Appendix E). Filler items were utilized to decrease rater sensitivity to the experimental item and to increase reliability of the rater's recommendations. Only the responses of the subjects on the experimental vignette were included in the statistical analyses.

Vignettes are often utilized in special education research to illustrate judgments about handicapped children (Matuszek, 1979; Fenton, 1979; McLaughlin, et al., 1970; Bergan & Smith, 1966). The widely used Rucker-Gable Educational Programming Scale (RGEPS) is composed of several vignettes and was developed to measure knowledge of appropriate program placements in special education. It contains several brief descriptions of special education children. Respondents are asked to identify what they feel is the best educational placement for the children described therein.

The vignettes included in this study were similar to the vignettes of the Rucker-Gable Scale, i.e., both included concise descriptions of handicapped children. Unlike the Rucker-Gable Scale, however, the vignettes utilized in the present study were limited to descriptions of learning disabled children or educable mentally retarded children.

The vignette protocol directions included in this study indicated that the children described in the vignettes had been identified as eligible for special education services and that none of the boys had visual, hearing, language, or physical abnormalities. The subjects also were informed that all decisions would be reviewed in sixty days for appropriateness and that any recommended placement would be available.

The experimental vignette was designed to describe either an educable mentally retarded child (EMR) or a specific learning disabled (SLD) child. Efforts were taken to avoid the inclusion of characteristics that were more typical of one of the handicapping conditions, e.g., auditory tasks are very difficult for him, he prefers to play with younger children, his reading achievement score is 3.5 and math achievement score is 1.0, or his Verbal IQ is 75 and his Performance IQ is 93.

An educable mentally retarded child refers to one who has significantly subaverage general intellectual functioning that exists concurrently with deficits in adaptive behavior and which adversely affects his educational performance (Section 300.5, Part B Rules and Regulations, P. L. 94-142). A learning disabled child refers to one who has a disorder in one or more of the basic psychological processes involved in understanding or in using language, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations (Section 300.5, Part B Rules and Regulations, P. L. 94-142).

The experimental vignette utilized in this study described the following child (Figure 7):

- a) "physically apt, sociable child" - to depict a degree of normalcy
- b) "does not do any of the tasks expected of a third grader" - to indicate achievement difficulty in present placement
- c) "fair self-concept" - to show some degree of the effects of lack of achievement on self-esteem, yet not suggest an emotionally disturbed child
- d) "fair teacher/pupil relationships" - to indicate a degree of cooperation and frustration
- e) "English as native language" - to avoid placement in bilingual programs
- f) "achievement test scores ranging from grade level .5 to 2.2" -
 - level 2.2: within two years of expected grade equivalency
 - level .5: to indicate academic weaknesses
 - variance: to indicate intraindividual achievement differences
- g) "Otis Lennon IQ 71" - "paper and pencil" intelligence test
 - "Stanford-Binet IQ 75" - IQ range of 59 to 91, primarily a verbal intelligence test
 - "Full Scale WISC-R IQ 69" - IQ range of 54 to 84, measures both verbal and performance abilities, when compared with Stanford-Binet, suggests possible performance problems

The experimental vignette utilized in this study may describe an educable mentally retarded child because: 1) the IQ ranges include an

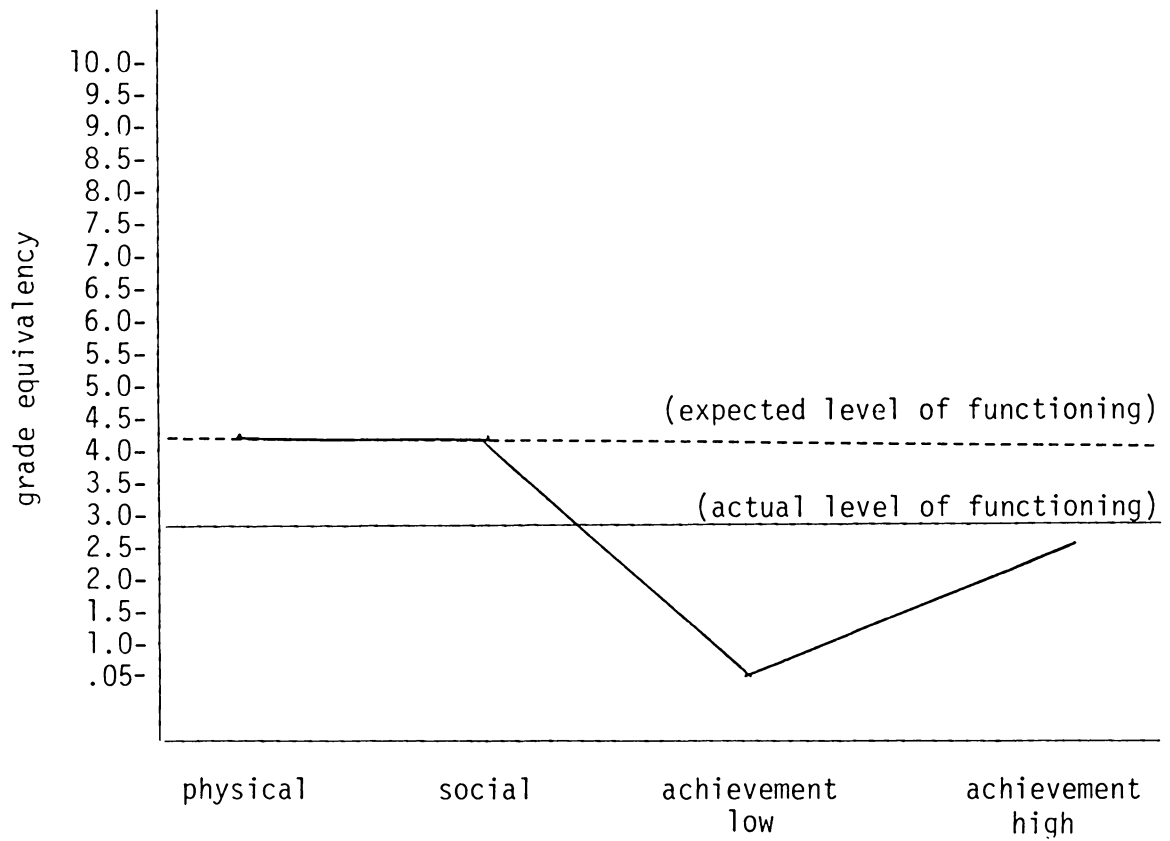


Figure 7. Profile of experimental vignette handicapped child.

IQ of 50 which has been classified as educable mentally retarded (Kirk, 1972); 2) the child described therein approximates a normal child in social and physical abilities; and 3) achievement scores are below the expected levels. In contrast, the experimental vignette may describe a learning disabled child because: 1) the IQ range falls within the normal classification and 2) substantial intraindividual differences may be noted in achievement levels. Also, test scores of learning disabled children may be suppressed due to concomitant disabilities.

The vignettes included a description of the child's language, class behavior, teacher relationships, pupil relationships, class achievement, self-concept, IQ score(s), and achievement scores. One filler vignette included the child's race and another included the child's socioeconomic status. The experimental vignette included both race and SES.

The vignettes were field tested for clarity and purpose by six eligibility team members. Three were from Maryland and three were from Virginia. Field test #1 was completed by six eligibility team members who were associates of the researcher. This field test resulted in modifications to the wording of the vignettes, stated IQ scores, and inclusion of achievement scores. Field test #2 was mailed to three eligibility team members in Virginia and three in Maryland. These persons were randomly selected from special education graduate class rosters and from the roster of the 1981 Virginia Tech Annual One Week Institute in Administration and Supervision of Special Education. One hundred percent of the persons who participated in this field test

identified the directions as being clearly stated, 75% of the field testers identified vignettes A, B, and E as sufficient, and 50% identified vignettes C & D as sufficient. The primary concern of the field testers was with the limited amount of information provided in each vignette. The directions for the vignettes were modified to include the concerns of the field testers by including certain assumptions, e.g., none of the boys have visual, hearing, language, or physical abnormalities. Field test #3 also was mailed to six persons selected from special education graduate class rosters and from the roster of the aforementioned Virginia Tech special education institute. The vignettes were rated as clear and the experimental variables were not identified.

The vignettes were arranged to make sixteen protocols. Each protocol contained a total of five vignettes. The protocols were identical with the exception of the experimental vignette and response order. The experimental vignette described a mild to moderately handicapped nine year old boy whose race and socioeconomic status varied on the protocols. Race varied as black and white. Socioeconomic status (SES) varied as high and low. The occupations utilized to depict the various levels of SES also were varied on the protocols. For an example, one protocol described high SES as a doctor, another described high SES as a university professor. This was done to prevent confounding between occupation and the rater. The response order, e.g., full time special class placement to consultation, was reversed on 50% of the protocols, e.g., consultation to full time special class placement.

The second of the four filler vignettes mentioned race as given in the experimental vignette, while the other vignettes did not mention race. SES was mentioned in only one filler vignette. This vignette described a middle SES child and was included to avoid rater sensitivity to SES as included on the experimental vignette. This item was placed #3 on the protocol and was immediately before the experimental vignette.

Methodology. A letter introducing the study and seeking participation was mailed to 23 special education leaders in Maryland and to 129 special education leaders in Virginia. Seventeen special education leaders in Maryland and 106 leaders in Virginia agreed to participate in the study.

The subjects were instructed to read each vignette, identify the handicapping condition and recommend the amount of time that the child described therein should spend in a special education class. Most possible handicapping conditions and time recommendations were available for the subject to mark as possible answers.

In an attempt to ensure an adequate representation of school districts by racial proportion in the statistical analyses, the racial composition of school districts that consented to participate in the study was taken from data available from the State Department of Maryland, the State Department of Virginia, and 1978-79 Office of Civil Rights (OCR) data. The school districts were grouped by the percentage of black pupil enrollment. The median percent of black district enrollment was calculated (22%). The 123 school districts were then

(Subjects N = 17)

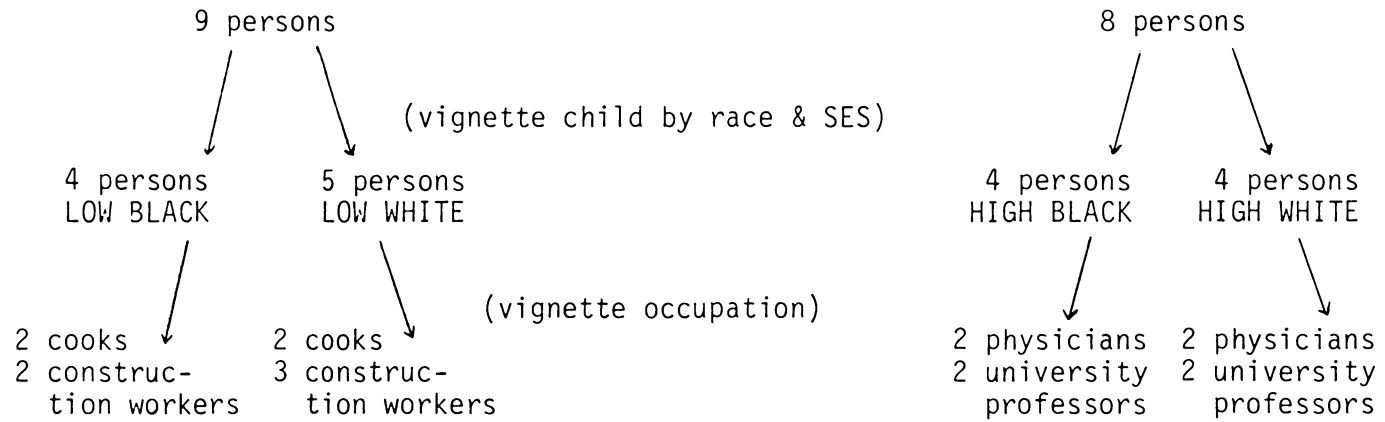


Figure 8. Assignment of experimental vignette to Maryland subjects.

(Subjects N = 106)

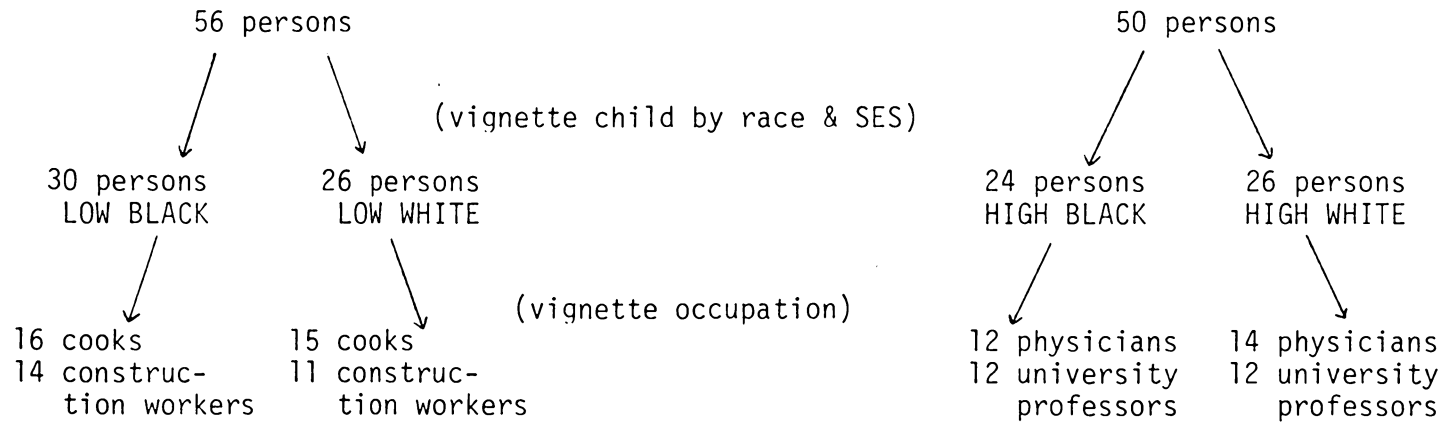


Figure 9. Assignment of experimental vignette to Virginia subjects.

divided into two groups, a 22% and above group and a below 22% group.

The protocols were then divided into 16 sets. A set for each response order for each of the following:

1. low white cook
2. low white construction worker
3. low black cook
4. low black construction worker
5. high white physician
6. high white university professor
7. high black physician
8. high black university professor

The subjects from districts above the median and those from districts below the median were randomly assigned a protocol from one of the 16 groups. Since 93% of the subjects below the median who received a letter introducing the study and indicating that a lack of response would be considered as consent to participate, did not respond, 19 more protocols were forwarded to them than to the subjects above the median. This was done to insure adequate representation of these school districts in the statistical analyses.

Sixty-five special education leaders read vignettes that described a low socioeconomic special education child. Thirty-four special education leaders read a vignette that described a low SES black child and 31 read a vignette that described a low SES white child (Figures 8 & 9). Fifty-eight special education leaders read vignettes that described a high SES child. Twenty-eight of these read a vignette that described a high SES black child and thirty read a vignette that described a high SES white child (Figures 8 & 9).

The racial composition for each school district in which the special education leader returned a protocol was determined through the use of statistical data available from the State Department of Maryland and from the State Department of Virginia. The median racial composition for returned protocols was determined. The protocols of special education leaders were then grouped according to whether they were employed by school districts that had a racial composition above the median racial composition of the population or below the median racial composition of the population. The protocols of the special education leaders were analyzed as being in one of two groups, i.e., racial composition above the median or racial composition below the median.

Chapter 4

RESULTS

Introduction

The effects of pupil race, pupil socioeconomic status, and racial composition of the school district on the special education placement decisions of special education leaders in Maryland and Virginia are determined in this study. A description of the participating subjects and correlations among predictor variables are presented. The results of the analyses are discussed as they relate to each proposed hypothesis. Of the nine hypotheses proposed, the following six were retained:

There will be no difference in the EMR recommendation of special education leaders in Maryland and Virginia for the white child and the EMR recommendation of special education leaders in Maryland and Virginia for the black child, $p \leq .05$.

There will be no difference in the SLD recommendation of special education leaders in Maryland and Virginia for the black child and the SLD recommendation of special education leaders in Maryland and Virginia for the white child, $p \leq .05$.

There will be no difference in the special education placement recommendations of special education leaders in Maryland and Virginia from school districts with a greater percentage of black students and the special education placement recommendations of special education leaders in Maryland and Virginia from school districts with a lesser percentage of black pupils, $p \leq .05$.

There will be no difference in the amount of special education time recommended by special education leaders in Maryland and Virginia for the low SES child and the amount of special education time recommended by special education leaders in Maryland and Virginia for the high SES child, $p \leq .05$.

There will be no difference in the amount of special education time recommended by special education leaders in Maryland and Virginia for the black child and the amount of special education time recommended by special education leaders in Maryland and Virginia for the white child, $p \leq .05$.

There will be no relationship between the identification of a handicapping classification and the recommendation of a special education placement time for special education leaders in Maryland and Virginia, $p \leq .05$.

These three hypotheses were rejected:

There will be no difference in the EMR recommendation of special education leaders in Maryland and Virginia for the low SES child and the SLD recommendation of special education leaders in Maryland and Virginia for the low SES child, $p \leq .05$.

There will be no two-way interactions of race of the child, SES of the child, and/or racial composition of the school district on the identification of a handicapping classification or the recommendation of a time placement in special education, $p \leq .05$.

There will be no three-way interaction of race of the child, SES of the child, and racial composition of the school district on the identification of a handicapping classification or the recommendation of a time placement in special education, $p \leq .05$.

Descriptive Analysis of Subjects

A letter introducing the study and seeking volunteers was forwarded to 152 persons (Appendix F) in Maryland and Virginia. Seventy-six persons were from school districts with a black racial proportion of 22% and above while 76 persons were from school districts with a black racial proportion below 22% (Table 1).

One subject in Virginia was responsible for four special education programs. Another subject in Virginia was responsible for three special education programs. Each subject was forwarded one protocol. One school district was listed on the state roster of persons responsible for special education programs in Virginia, but was not included in the Virginia School Census - 1980. The mailing address was the same as that given for another school district and it was assumed that one person was responsible for both special education programs. A protocol was mailed to the person.

The population was instructed to return an enclosed form if they were not willing to participate in the study. Fifty-two persons from school districts with a black racial proportion of 22% and above did not return the form while 71 persons from school districts with a black racial proportion below 22% did not return the form. These 123 persons were assumed to be volunteers and were forwarded the vignette protocols.

Sixty-six percent (N=81) of the subjects who agreed to participate in the study returned the protocols. Seventy-one percent (N=12) of the

Table 1: Number of Protocols Mailed and Number of Protocols Returned by Original Population, Volunteers, Protocols Not Included in Statistical Analyses and District Racial Proportion

District Proportion	Original Population			Volunteers			Not Included		
	M* (letter)	NR*	%NR*	M	R*	%R*	M	R	%R
22% and Above	76	52	34	52	35	43	0	0	0
Below 22%	76	71	47	71	46	57	7	7	100
Total	152	123	81	123	81	66	7	7	100

* M = Protocols mailed; R = Protocols returned; %R = the percentage of the protocols returned that were mailed; NR = no response, assumed volunteers; %NR = percent no response.

participating subjects from Maryland returned the protocols and sixty-five percent (N=69) of the participating subjects from Virginia returned the forms.

The subjects returning the forms were from school districts with a black population that ranged from zero percent (0%) of the total school district population to above seventy-five percent (75%) of the total school district population. The median percentage of black students enrolled in the participating school districts was twenty-two (22%), i.e., twenty-two percent (22%) was the median racial composition of school districts for the returned protocols. This figure was used in the statistical analyses as the median racial proportion of the school districts.

Eighty-three percent (N=67) of the subjects returning the protocols were white, two percent (N=2) were black, one percent (N=1) identified race as "other", and fourteen percent (N=11) did not specify race. Of those who did not identify race, ten were from school districts with a black student population below twenty-two percent.

Eighty-nine percent (N=72) of the subjects had an annual income above \$20,000. Six percent (N=5) had an annual income below \$20,000 and five percent (N=4) did not identify income.

Of the fourteen subjects who received a protocol describing a white construction worker, six returned the forms (Table 2). In contrast, of the sixteen subjects who received a protocol describing a black construction worker, 12 returned the forms.

Table 2: The Distribution of Protocols Mailed and Returned by District Racial Proportion, Pupil SES, and Pupil Race

District Racial Proportion	SES								Total
	high				low				
	Prof		MD		CW		C *		
	RACE				RACE				
	W	B	W	B	W	B	W	B	
Mailed	6	6	7	6	6	6	7	8	52
22% and Above	<hr/>								
Returned	5	4	5	5	3	3	5	5	35
Below 22%	<hr/>								
Mailed	8	8	9	8	8	10	10	10	71
Returned	7	6	4	2	3	9	6	9	46

* Prof = University Professor
 MD = Physician
 CW = Construction Worker
 C = Cook
 W = White
 B = Black

Of the 81 subjects returning protocols, responses from four who did not participate in eligibility team meetings (1981-82) were eliminated from the final analyses. Similarly, responses from two subjects who did not respond to one of the dependent variables and responses from one subject who did not respond to the items due to a lack of experience in special education were eliminated from the final statistical analyses. Thus, responses from 74 subjects were included in the statistical analyses. All 74 of these subjects participated in eligibility team meetings in the respective school district in 1981-82.

As shown in Table 3, response categories for age of the respondents ranged from above 45 years to below 25 years. The response categories that subjects could select to indicate participation in eligibility team meetings ranged from participation in from one to ten percent of the total district eligibility team meetings (1981-82) to participation in from 76 to 100 percent of the district eligibility team meetings (1981-82). Response categories for years of experience of respondents in special education ranged from one to five years of experience to above 20 years of experience.

Seventy-eight percent of the subjects were 35 years of age and above (Table 4). Fifty-five percent of the subjects participated in from 76 to 100 percent of the 1981-82 school district eligibility team meetings. Eighteen percent of the subjects had five years or less of experience in special education.

Table 3: Response Categories of Variables

variable	category
state	1) Maryland 2) Virginia
response order	1) LD to "other"; consultation to "other" 2) SMR to "other"; full time to "other"
subject age	1) above 45 years 2) 35-45 years 3) 25-35 years 4) below 25 years
subject sex	1) male 2) female
subject time in eligibility meetings	1) zero 2) 1-10% 3) 11-25% 4) 26-50% 5) 51-75% 6) 76-100%
pupil SES	1) high SES 2) low SES
pupil (parent) occupation	1) physician 2) university professor 3) construction worker 4) cook
racial proportion	1) above 22% 2) below 22%
subject experience*	1) 1-5 years 2) 6-10 years 3) 11-15 years 4) 16-20 years 5) above 20 years
pupil race	1) white 2) black

* Subjects recorded number of years of experience. Responses ranged from one to thirty-four years. Years of experience were grouped into intervals of five for statistical analyses.

Table 4: Number and Percent of Respondents Per Variable Level

Variable/Level	Number	Percent
State		
Maryland	12	16
Virginia	62	84
Order		
LD to Other	41	55
SMR to Other	33	45
Age		
Above 45 yrs	30	40
35-45 yrs	28	38
25-35 yrs	16	22
Below 25 yrs	0	0
Sex		
Male	34	46
Female	38	51
Not Given	2	3
Subject Experience		
1-5 yrs	13	18
6-10 yrs	14	19
11-15 yrs	19	25
16-20 yrs	13	18
Above 20 yrs	6	8
Not Given	9	12
Eligibility Meetings		
1-10%	13	18
11-25%	4	5
26-50%	5	7
51-75%	11	15
76-100%	41	55
Protocol SES		
High	38	51
Low	36	49
Protocol Occupation		
Physician	16	22
University Professor	22	29
Construction Worker	16	22
Cook	20	27
Protocol Race		
White	35	47
Black	39	53
District Proportion		
Below Median	37	50
Above Median	37	50

Handicapping classification for the child described in the experimental vignette was identified by the respondents as either educable mentally retarded (EMR), specific learning disabled (SLD), or "other" classification, i.e., other than EMR or SLD. None of the respondents identified the child as severely mentally retarded (SMR) or trainable mentally retarded (TMR). Respondents who indicated that the child should be classified as other than EMR or SLD were asked to identify the "other" classification that was felt to be appropriate for the child described in the experimental vignette. .

Six respondents indicated that the child described therein should be classified as a slow learner, five indicated that the child was not a special education child, two did not clarify the recommendation, and one respondent reported that the child should be classified as borderline. In the text of this paper, borderline, slow learner, and not a special education child were all referred to as slow learner.

The amount of time recommended by respondents for the child to spend in special classes ranged from full time special class placement to full time regular class placement with special consultation. The "other" category also was recommended by ten respondents as appropriate time placement for the child described in the experimental vignette. Seven respondents did not clarify the choice, one indicated that the child should receive regular classroom placement, one recommended regular class placement for slow learners, and one specified time placement in alternative education.

Predictor Variables

There were seven predictor variables included in this study: state, vignette response order, subject age, subject sex, subject experience, subject eligibility participation, and vignette occupation. The correlation coefficients of these variables and of the three independent variables: SES, race, and district racial proportion were computed (Table 5).

Although most of the predictor variables had a low correlation with each other, there was a moderate correlation (.63) $p \leq .05$, between state (Virginia and Maryland) and the amount of time subjects spent in school district eligibility team meetings during 1981-82. Sixty-seven percent of the Maryland subjects participated in from one to ten percent of the school districts 1981-82 eligibility team meetings. In contrast, 66% of the Virginia subjects participated in from 76 to 100 percent of the school districts 1981-82 eligibility team meetings.

These findings may be due to organizational differences between the two states, i.e., Maryland has only 24 school districts while Virginia has more than 120 school districts. Such organizational differences may result in a variation in the responsibilities of special education leaders in the two states.

As could be expected, there was a high correlation (.88) between vignette SES and vignette occupation, $p \leq .05$. There was a low moderate correlation between subject experience and subject age (-.33).

Table 5: Correlation Coefficient of Variables Used in the Statistical Analyses

Variable	State	Vignette Response Order	Subject Age	Subject Sex	Subject Experience	Subject Eligibility Participation	Vignette Race	Vignette SES	Vignette Occupation	District Racial Proportion
State	1.00	-0.09	0.15	-0.03	-0.07	0.63*	0.13	-0.05	0.04	0.13
Vignette Response Order		1.00	-0.02	0.20	0.15	-0.07	0.00	-0.10	0.01	0.06
Subject Age			1.00	-0.05	-0.33*	0.24	-0.05	-0.22	-0.15	-0.05
Subject Sex				1.00	-0.11	0.07	0.12	0.24	0.28*	0.06
Subject Experience					1.00	0.04	0.11	-0.08	-0.02	0.20
Subject Eligibility Participation						1.00	0.21	0.00	0.03	0.09
Vignette Race							1.00	0.30*	0.18	0.00
Vignette SES								1.00	0.88*	-0.17
Vignette Occupation									1.00	-0.18
District Racial Proportion										1.00

* $p \leq .05$

This finding may be due to recent emphasis on special education programs and the appropriate training and certification of persons who work in the profession. Many older persons have made recent career changes to special education which would mean that they would have limited experience in the field. In contrast, many younger persons have been employed in special education for most of their employment careers. Thus, a 30 year old person may have eight years of experience in special education while a person who is over 45 years of age may have only two years of experience in special education. There were very low correlations between race and SES (.30) and occupation and sex (.28).

Tests of Hypotheses

The statistical analyses used in this study included crosstabulation, point biserial correlation coefficient, multiple regression and a 2x2x2 analysis of variance. The dependent variable: handicapping classification, i.e., educable mentally retarded (EMR), specific learning disabled (SLD), and "other" category (slow learner), was treated as a dichotomous variable in the analysis of variance. The hierarchial approach was used to adjust for unequal cell sizes. The dependent variable: time placement, was assumed to be interval level data in the calculation of the point biserial correlation coefficient, multiple regression and the 2x2x2 analysis of variance. Here, responses for the consultation and other categories were deleted. The

resulting number of respondents for these analyses with time placement was 60. The results are presented as they relate to each hypothesis.

Hypothesis #1: There will be no difference in the EMR recommendation of special education leaders in Maryland and Virginia for the white child and the EMR recommendation of special education leaders in Maryland and Virginia for the black child.

Crosstabulation was used to determine if there were systematic differences in the identification of white children as educable mentally retarded (EMR) and the identification of black children as educable mentally retarded (EMR). This analysis showed that there were no differences in the recommendation of the educable mentally retarded (EMR) classification by race for the special education leaders in Maryland and Virginia who were included in this study (Table 6). An analysis of variance of race, SES, and district black racial proportion on the identification of the educable mentally retarded (EMR) classification yielded similar results (Table 7), i.e., race (B) was not significant ($F=1.31$).

Hypothesis #2: There will be no difference in the EMR recommendation of special education leaders in Maryland and Virginia for the low SES child and the SLD recommendation of special education leaders in Maryland and Virginia for the low SES child.

A crosstabulation of pupil socioeconomic status (SES) and the identification of a handicapping classification showed that of the 18 experimental cases identified by the respondents as specific learning disabled (SLD), 77.8% belonged to the high SES group and 22.2% belonged to the low SES group (Table 8). In contrast, of the 42 experimental

Table 6: Distribution of Respondents by Handicapping Classification and by Pupil Race

Race	<u>Handicapping Classification</u>					
	LD		EMR		Other	
	N	% in Classification	N	% in Classification	N	% in Classification
White	9	50.0	22	52.4	4	28.6
Black	9	50.0	20	47.6	10	71.4
Total	18	100.0	42	100.0	14	100.0

Table 7: Analysis of Variance Summary: EMR
 Classification by Pupil SES, Pupil
 Race, and District Racial Proportion

Source	SS	DF	MS	F
SES (A)	1.14	1	1.14	5.46*
Race (B)	.27	1	.27	1.31
District Proportion(C)	.17	1	.17	.83
A x B	1.45	1	1.45	6.93*
A x C	.63	1	.63	3.02
B x C	.67	1	.67	3.19
A x B x C	.00	1	.00	.01
Explained	4.03	7	.58	2.75*
Residual	13.81	66	.21	
Total	17.84	73	.24	

* $p \leq .05$

Table 8: Distribution of Responses by Handicapping Classification and SES

SES	<u>Handicapping Classification</u>					
	LD		EMR		Other	
	N	% in Classification	N	% in Classification	N	% in Classification
high	14	77.8	16	38.1	8	57.1
low	4	22.2	26	61.9	6	42.9
Total	18	100.0	42	100.0	14	100.0

cases identified by respondents as educable mentally retarded (EMR), 61.9% belonged to the low SES group and 38.1% belonged to the high SES group.

An analysis of variance of race, SES, and district black racial proportion on the identification of EMR classification (Table 7) and LD classification (Table 9) illustrated that SES significantly ($p \leq .05$) accounted for variance in the identification of the educable mentally retarded (EMR) classification and in the identification of the specific learning disabled (SLD) classification for the special education leaders who participated in this study. Significantly, more respondents identified the low SES child as educable mentally retarded (EMR) than identified the low SES child as specific learning disabled (SLD), $p \leq .05$.

Hypothesis #3: There will be no difference in the SLD recommendation of special education leaders in Maryland and Virginia for the black child and the SLD recommendation of special education leaders in Maryland and Virginia for the white child.

There were no significant differences in the number of respondents who identified the black child as specific learning disabled (SLD) and the number of respondents who identified the white child as specific learning disabled (SLD), $p \leq .05$ (Tables 9 & 10). This hypothesis is retained.

Hypothesis #4: There will be no difference in the special education placement recommendations of special education leaders in Maryland and Virginia from school districts with a greater percentage of black students and the special education placement recommendations of special education leaders in Maryland and Virginia from school districts with a lesser percentage of black pupils.

Table 9: Analysis of Variance Summary: LD
 Classification by Pupil SES, Pupil
 Race, and District Racial Proportion

Source	SS	DF	MS	F
SES (A)	.77	1	.77	4.60*
Race (B)	.02	1	.02	.13
District Proportion(C)	.03	1	.03	.20
A x B	.40	1	.40	2.39
A x C	.00	1	.00	.01
B x C	.17	1	.17	1.04
A x B x C	.02	1	.02	.13
Explained	1.42	7	.20	1.20
Residual	11.12	66	.17	
Total	12.54	73	.17	

* $p \leq .05$

Table 10: Distribution of Responses by Handicapping Classification and Pupil Race

Race	<u>Handicapping Classification</u>					
	LD		EMR		Other	
	N	% in Classification	N	% in Classification	N	% in Classification
White	9	50.0	22	52.4	4	28.6
Black	9	50.0	20	47.6	10	71.4
Total	18	100.0	42	100.0	14	100.0

A crosstabulation of the identification of a handicapping classification and district black racial proportion reported no systematic differences between the mean of respondents from school districts with a black racial proportion below 22% and the mean of respondents from school districts with a black racial proportion above 22% (Table 11). An analysis of variance confirmed this finding (Tables 7 & 9).

Similarly, no significant differences were noted in the responses of leaders from school districts with a black racial proportion below 22% and the responses of leaders from school districts with a black racial proportion above 22% for time placement (Table 12). Hypothesis #4 is retained.

Hypothesis #5: There will be no difference in the amount of time recommended by special education leaders in Maryland and Virginia for the low SES child and the amount of time recommended by special education leaders in Maryland and Virginia for the high SES child.

No statistical differences were noted between the mean of the amount of time recommended by special education leaders for the low SES child and the mean of the amount of time recommended by special education leaders for the high SES child -n=60, (Table 13). An analysis of variance of time placement and SES also showed that an insignificant amount of the variance in time placement was due to SES, $p \leq .05$ (Table 14).

Hypothesis #6: There will be no difference in the amount of time recommended by special education leaders in Maryland and Virginia for the black child and the amount of time recommended by special education leaders in Maryland and Virginia for the white child.

Table 11: Distribution of Responses by Handicapping Classification and by District Black Racial Proportion

District Black Racial Proportion	<u>Handicapping Classification</u>					
	LD		EMR		Other	
	N	% in Classification	N	% in Classification	N	% in Classification
Below 22%	7	38.9	24	57.1	6	42.9
Above 22%	11	61.1	18	42.9	8	57.1
Total	18	100.0	42	100.0	14	100.0

Table 12: Distribution of Respondents by District Proportion and by Time Placement

Time Recommendation	<u>District Proportion</u>			
	Below 22%		Above 22%	
	N	% of Time	N	% of Time
Consultation	2	50.0	2	50.0
1 hr	2	50.0	2	50.0
2 hrs	7	70.0	3	30.0
3 hrs	9	60.0	6	40.0
4 hrs	5	71.4	2	28.6
Full time	10	38.5	16	61.5
Other	2	25.0	6	75.0
Total	37	----	37	----

Table 13: Distribution of Responses by Time Recommendation and Pupil SES

Time Recommendation	<u>Pupil SES</u>			
	High		Low	
	N	% Assigned	N	% Assigned
Consultation	2	50.0	2	50.0
1 hr	2	50.0	2	50.0
2 hrs	7	70.0	3	30.0
3 hrs	7	46.7	8	53.3
4 hrs	5	71.4	2	28.6
Full time	11	42.3	15	57.7
Other	4	50.0	4	50.0
Total	38	----	36	----

Table 14: Analysis of Variance Summary:
 Recommendation of Special Education
 Time Placement by Pupil SES, Pupil
 Race, and School District Racial
 Proportion (n = 60)

Source	SS	DF	MS	F
SES (A)	1.07	1	1.07	0.63
Race (B)	0.17	1	0.17	0.10
District Proportion(C)	3.82	1	3.82	2.26
A x B	0.04	1	0.04	0.02
A x C	0.89	1	0.89	0.53
B x C	1.33	1	1.33	0.79
A x B x C	10.63	1	10.63	6.30*
Explained	18.92	7	2.70	1.60
Residual	87.68	52	1.69	
Total	106.60	59	1.81	

* $p \leq .05$

Statistically, the amount of time recommended for the black child to spend in a special education class was the same as the amount of time recommended for the white child to spend in a special education class, $p \leq .05$. This finding was revealed by both crosstabulation and an analysis of variance $n=60$, (Tables 14 & 15).

Hypothesis #7: There will be no relationship between the identification of a handicapping classification and the recommendation of a special education placement time for special education leaders in Maryland and Virginia.

The point biserial correlation coefficient was used to determine if there was a significant relationship between the identification of a handicapping classification and the recommendation of a special education placement time, $p \leq .05$. Point biserial correlation assumes time placement is a linearly scaled, interval variable. To satisfy this assumption, responses in the "consultation" and the "other" categories were deleted. Because the "other" handicapping classification represented a heterogeneous mixture of responses, it was deleted, and only the specific learning disabled (SLD) and the educable mentally retarded (EMR) classifications were considered.

The actual question of interest was whether the specific learning disabled (SLD) vs the educable mentally retarded (EMR) classifications was related to the time placement decision. The point biserial correlation coefficient between the dichotomous variable specific learning disabled (SLD) vs educable mentally retarded (EMR) and the continuous time placement variable was computed. The value of this correlation was $-.20$, which was not significant. Further, reanalysis

Table 15: Distribution of Responses by Pupil
Race and Time Placement

Time Recommendation	<u>Race</u>			
	N	White % Assigned	N	Black % Assigned
Consultation	0	0.0	4	100.0
1 hr	0	0.0	4	100.0
2 hrs	7	70.0	3	30.0
3 hrs	8	53.3	7	46.7
4 hrs	3	42.9	4	57.1
Full time	13	50.0	13	50.0
Other	4	50.0	4	50.0
Total	35	----	39	----

removing the consultation and other categories since they were small and a heterogeneous mixture was done. Table 16 (n=60) shows this distribution of responses by time placement and handicapping classification.

Hypothesis #8: There will be no two-way interactions of race of the child, SES of the child, and/or racial composition of the school district on the identification of a handicapping classification or the recommendation of a time placement in special education.

Pupil SES and pupil race combined accounted for a significant amount of the variance found in the identification of the educable mentally retarded (EMR) classification for these respondents ($p \leq .05$), Table 7. The low SES black child was more likely to be classified as educable mentally retarded (EMR), $M=.78$, than was the high SES black child, $M=.25$. In contrast, the high SES white child was slightly more likely to be classified as educable mentally retarded (EMR) than was the low SES white child (Table 17). Figure 10 revealed this first-order interaction.

Pupil SES and district black racial proportion combined accounted for a significant amount of variance in the identification of the "other" handicapping category, $p \leq .05$ (Table 18). Special education leaders from school districts with a black student population below 22% tended to identify the high SES child as other than the educable mentally retarded (EMR) or the specific learning disabled (SLD) classifications more than they identified the low SES child as other than the educable mentally retarded (EMR) or the specific learning disabled (SLD) classification. In contrast, special education leaders

Table 16: Distribution of Responses by Time Recommendation and Handicapping Classification (n = 60)

Time Recommendation	<u>Handicapping Classification</u>			
	EMR		LD	
	N	% Assigned	N	% Assigned
1 hr	1	25.0	3	75.0
2 hrs	5	55.6	4	44.4
3 hrs	13	92.9	1	71.1
4 hrs	5	71.4	2	28.6
5 hrs	20	76.9	6	23.1
Total	44	----	16	----

Table 17: Cell Means and Number of Respondents for EMR Classification by Pupil Race and Pupil SES*

SES	<u>Race</u>			
	White		Black	
	N	\bar{X}^{**}	N	\bar{X}^{**}
High	22	.64	16	.25
Low	13	.62	23	.78
Total	35	---	39	---

* The hierarchical approach was used to adjust for unequal cell sizes.

** Mean EMR recommendation with zero being non-EMR and one being EMR.

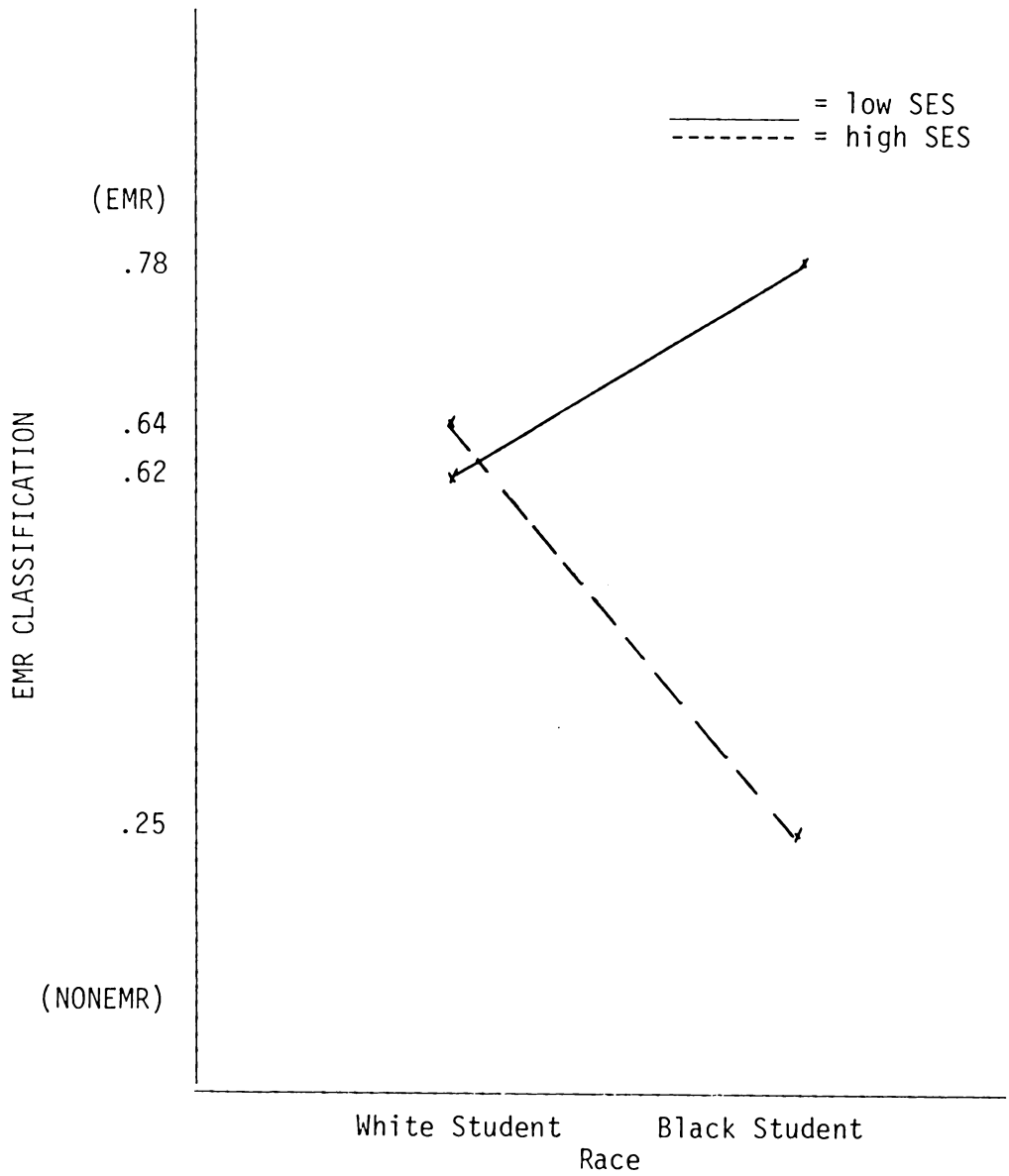


Figure 10: Race x SES interaction of EMR classification cell means.

Table 18: Analysis of Variance Summary: Recommendation of Other Category as a Handicapping Classification by Pupil SES, Pupil Race, and School District Racial Proportion

Source	SS	DF	MS	F
SES (A)	.04	1	.04	.24
Race (B)	.45	1	.45	3.02
District Proportion(C)	.05	1	.05	.37
A x B	.32	1	.32	2.20
A x C	.70	1	.70	4.71*
B x C	.16	1	.16	1.08
A x B x C	.01	1	.01	.06
Explained	1.60	7	.23	1.55
Residual	9.75	66	.15	
Total	11.35	73	.16	

* $p \leq .05$

from school districts with a black student population above 22% tended to identify the low SES child as other than the educable mentally retarded (EMR) or specific learning disabled (SLD) classifications more than they identified the high SES child as other than the educable mentally retarded (EMR) or specific learning disabled (SLD) classification (Table 19). Figure 11 revealed the first-order interaction.

Hypothesis #9: There will be no three-way interactions of race of the child, SES of the child, and racial composition of the school district on the identification of a handicapping classification or the recommendation of a time placement in special education.

As shown in Table 14 (n=60), pupil SES, pupil race, and the district black racial proportion of respondents combined accounted for a significant amount of the variance in the amount of time recommended by respondents for the child to spend in a special class, $p \leq .05$. Special education leaders from school districts with a black student population below 22% tended to recommend the greatest amount of special education time for the low SES white child and the least amount of time for the low SES black child -n=60, (Table 20). Special education leaders from school districts with a black student population above 22% tended to recommend the greatest amount of time for the low SES black child and the least amount of special education time for the high SES black child.

Special education leaders from school districts with a black student population above 22% tended to recommend more special education time for the high SES white child than for the low SES white child.

Table 19: Cell Means and Number of Respondents for Recommendation of Other Category as a Handicapping Classification by Pupil SES and School District Racial Proportion*

SES	<u>School District Racial Proportion</u>			
	Below 22%	(< Mdn)	Above 22%	(> Mdn)
	N	\bar{X}^{**}	N	\bar{X}^{**}
High	18	.28	20	.15
Low	19	.05	17	.29
Total	37	---	37	---

* The hierarchial approach was used to adjust for unequal cell sizes.

** Mean other recommendation with zero being non-other and one being other.

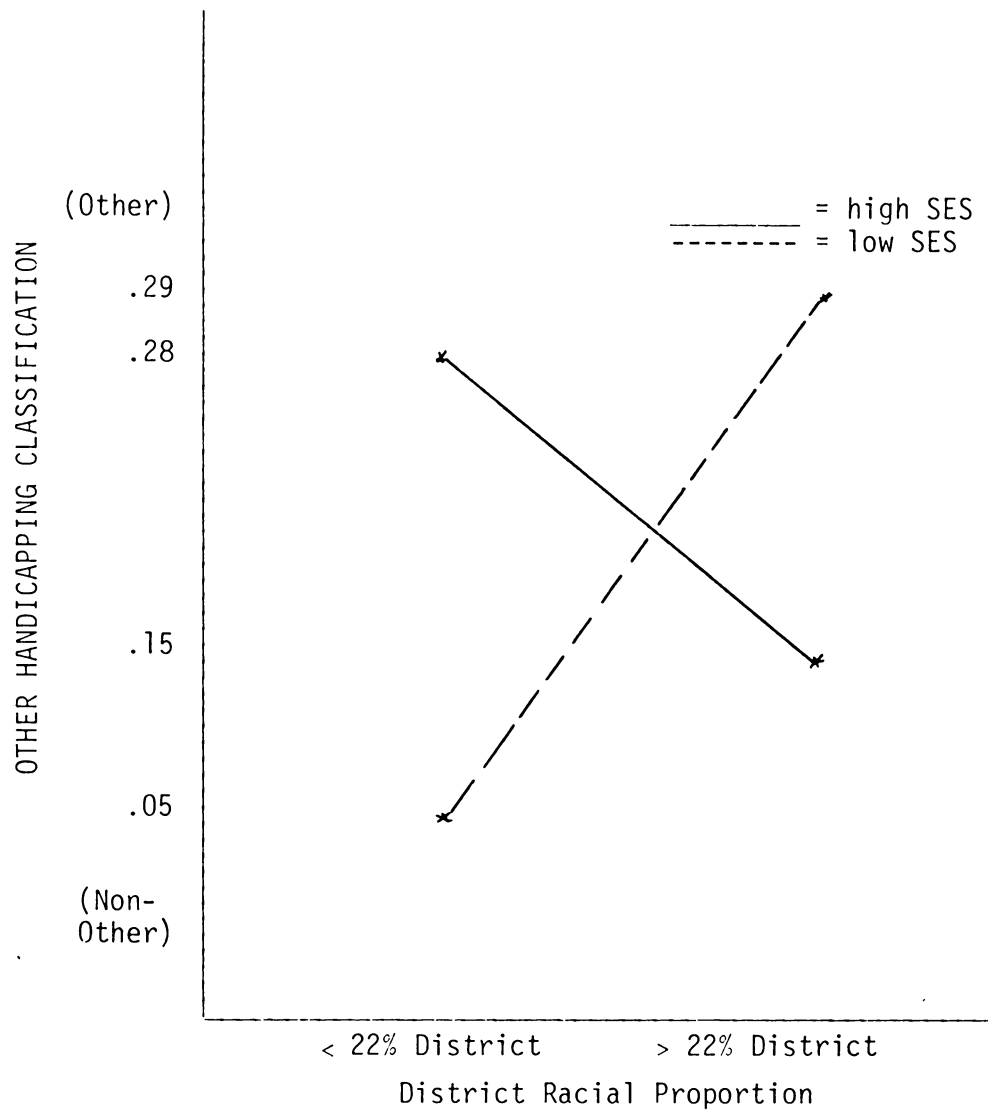


Figure 11: District racial proportion x SES interaction of other handicapping classification cell means.

Table 20: Cell Means and Number of Respondents for Recommendation of Amount of Special Education Time by Pupil SES, Pupil Race, and School District Racial Proportion (n = 60)*

SES	<u>School District Racial Proportion</u>							
	Below 22% (< Mdn)				Above 22% (> Mdn)			
	<u>white</u>		<u>black</u>		<u>white</u>		<u>black</u>	
	N	\bar{X}^{**}	N	\bar{X}^{**}	N	\bar{X}^{**}	N	\bar{X}^{**}
High	11	3.82	6	4.17	9	3.33	4	2.50
Low	4	5.00	8	3.38	7	3.29	11	4.09
Total	15	----	14	----	16	----	15	----

* The hierarchical approach was used to adjust for unequal cell sizes.

** Mean time recommendation with one being regular class placement with consultation and five being full time special class placement.

These leaders also recommended more special education time for the low SES black child than for the high SES black child. In contrast, special education leaders from school districts with a black student population below 22% tended to recommend more special education time for the low SES white child than for the high SES white child. These leaders recommended more special education time for the high SES black child than for the low SES black child.

The amount of special education time recommended by the respondents from school districts with a black student population above 22% for the high SES black child differed significantly from the amount of special education time recommended by the respondents from school districts with a black population below 22% for the low SES white child and the low SES black child, $p \leq .05$. Figure 12 (n=60) shows this second-order interaction.

Contributory Factors to Variance in Dependent Variables

Stepwise multiple regression analysis was computed to determine if state, vignette response order, respondent's age, respondent's sex, respondent's experience, percent of time spent by respondents in eligibility team meetings (1981-82), pupil SES, pupil race, and the black racial proportion of the school districts of the participating subjects accounted for variance in special education time placement. Pupil race, pupil SES, and district black racial proportion were entered on Step One of the stepwise multiple regression analysis. State, vignette response order, the amount of time spent by respondents

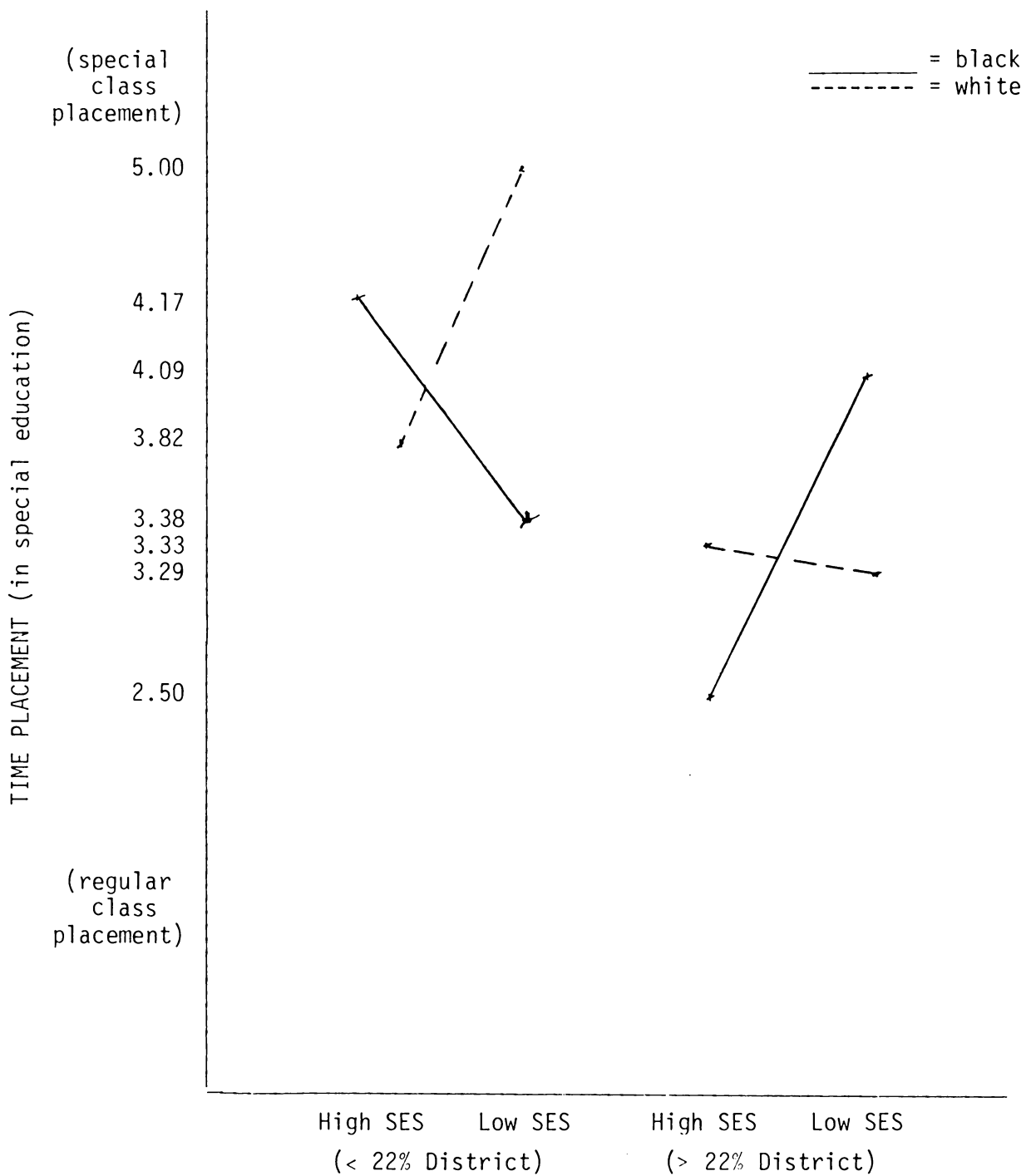


Figure 12: Race x SES x district racial proportion interaction of time placement cell means (n = 60).

in eligibility team meetings, respondent's age, respondent's sex, and respondent's experience were found to have no significant relationship and thus only one step was run.

As shown in Table 21, race, SES, and district black racial proportion did not account for a significant amount of the variance in time placement.

A significant amount of the variance in the recommendation of respondents for the EMR classification was explained by pupil SES, pupil race, and the district racial proportion of respondents ($p \leq .05$), see Table 7. These three variables accounted for nine percent (9%) of the variance found in the recommendation of the EMR classification by respondents as revealed in a Multiple Classification Analysis Table of the ANOVA of EMR classification and SES, race, and district racial proportion (Table 22).

Findings

Specific statistical analyses were conducted to determine the effects of pupil race, pupil SES, and racial composition of the school district on the special education placement decisions of special education leaders in Maryland and Virginia. The data analyses showed several significant differences in group means.

Pupil SES significantly affected the special education placement recommendations of these special education leaders for the identification of both the EMR and SLD handicapping classification

Table 21: Summary Statistics for Variables in the Time Regression Model (n = 60)

Variables	B	R ²	F
Race	-0.05	0.00	0.93
SES	0.15	0.01	
District Proportion	0.19	0.05	

p ≤ .05

Table 22: Multiple Classification Analysis of EMR
 Classification by SES, Race, and District
 Racial Proportion

Variable	N	Unadjusted		Adjusted For Independent	
		Deviation	ETA	Deviation	BETA
SES					
high	38	-.12		-.13	
low	36	.13		.14	
			.25		.28
Race					
white	35	.03		.07	
black	39	-.03		-.06	
			.07		.13
District Proportion					
below	37	.05		.05	
above	37	-.05		-.05	
			.11		.10
Multiple R Squared				.09*	
Multiple R				.30	

* $p \leq .05$

($p \leq .05$). Respondents identified the high SES child as SLD significantly more than they identified the low SES child as SLD ($p \leq .05$). In contrast, respondents identified the low SES child as EMR significantly more than they identified the high SES child as EMR ($p \leq .05$).

Pupil SES and pupil race combined significantly affected the recommendations of these respondents for the identification of the EMR classification ($p \leq .05$). The low SES black child was identified as EMR significantly more than the high SES black child was identified as EMR ($p \leq .05$). Interestingly, the high SES white child was identified as EMR significantly more often than the high SES black child ($p \leq .05$). There was a tendency for respondents to identify the high SES black child as other than the EMR or LD classification.

Pupil SES and the black racial composition of the school district combined affected the identification of the child as other than the EMR or SLD handicapping classification ($p \leq .05$). Respondents from school districts with a black student population above 22% ($> \text{Mdn}$) identified the low SES child as other than EMR or SLD significantly more than respondents from school districts with a black population below 22% ($< \text{Mdn}$) identified the low SES child as other than EMR or SLD ($p \leq .05$).

Statistical analyses revealed no significant differences in the means of the following groups for special education placement decisions as identified by special education leaders in Maryland and Virginia ($p \leq .05$).

- 1) Special education leaders from school districts with a black student population above 22% (> Mdn) and the recommendations of special education leaders from school districts with a black student population below 22% (< Mdn).
- 2) The amount of time recommended for the black child to spend in a special education class and the amount of time recommended for the white child to spend in a special education class.
- 3) The amount of time recommended for the low SES child to spend in a special education class and the amount of time recommended for the high SES child to spend in a special education class.
- 4) Special education leaders who identified the black child as EMR and special education leaders who identified the white child as EMR.
- 5) Special education leaders who identified the black child as SLD and special education leaders who identified the white child as SLD.

There was no correlation revealed between the identification of a handicapping classification and the amount of time that respondents recommended for the special education child to spend in a special class. The null hypothesis of independence was retained.

Chapter 5

DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS

Introduction

Placement decisions in special education are of concern to students, parents, teachers, school administrators, and governmental officials alike. Some concerns for special education placement decisions are shared among these persons, such as, the successful implementation of rules and regulations as they apply to handicapped persons. Other concerns are unique to each person for various reasons.

Students may be uniquely concerned because they directly experience the consequences of special education placement decisions. Parents may be concerned because they desire the most appropriate educational placement for their child. Teachers may feel that appropriate educational grouping contributes significantly to the success of an educational program. School administrators may be concerned with placement decisions because they have the responsibility of ensuring that special education rules and regulations are enforced at the local level. Governmental officials are uniquely concerned due to an ultimate responsibility to ensure the full implementation of special education state and federal regulations.

Placement decisions were a focus of concern prior to the passage of Public Law 94-142 in 1975 and they continue to be of great concern today. Much of the concern for special education placement decisions

today is the result of the overrepresentation of minority and low socioeconomic (SES) groups in special education classes.

A report published by the National Academy Press (1982) stressed that the overrepresentation of minority children in special education classes is not a problem unless: (1) the special classes are inferior to regular classes or (2) a child has been placed inappropriately in a special class. This researcher's experience has been that in many instances, either one or both of the aforementioned criteria will exist and thus contribute to the problematic nature of the overrepresentation of minority children in special education classes.

Some authors have sought to prove or disprove the benefits of special classes to children. The results of a study by Carlberg and Kavale (1980) indicated that given two children with similar academic and social characteristics, one enrolled in a special education class and the other enrolled in the regular class, the pupil enrolled in the regular class will out-perform the pupil enrolled in the special class in achievement and social adjustment. Smith (1981) stressed that the placement of pupils into special education classes result in lowered teacher expectations and thus lowered achievement.

Semmel, Gottlieb and Robinson (1979) discussed the results of a study (Project Prime) conducted in Texas to examine the relation among variations in classroom environments, child-back-ground characteristics, and the competence displayed by retarded learners in

three alternative instructional settings: regular class, special class, and resource room. The authors indicated that:

- (1) mainstreamed EMR pupils were among the lowest achievers in regular classes,
- (2) EMR pupils attentional behavior during academic tasks exceeded that of normal peers when observed in resource room,
- (3) special class EMR pupils' interactions were greater in the special class than were those of the mainstreamed EMR's.

Although there are advantages and disadvantages to the placement of children in special classes, this paper has been concerned more with factors that affect placement decisions than with what happens after a child is labeled and placed in a special class. Glass (1981) cites that ". . . most of the pupils labeled handicapped in our schools are diagnosed . . . arbitrarily as possessing such non-specific symptoms . . ." The findings of the present study tend to substantiate the conclusions of Glass, i.e., extraneous factors tend to affect special education placement decisions.

The present research was designed to determine if SES of the child, race of the child, and racial composition of the school district affect special education placement decisions. The results of data analyses were presented in Chapter 4. Here, discussion, conclusions, and recommendations have been presented as they relate to each research hypothesis.

Hypothesis #1: There will be no difference in the EMR recommendation of special education leaders in Maryland and Virginia for the white

child and the EMR recommendation of special education leaders in Maryland and Virginia for the black child.

Special education leaders in Maryland and Virginia who participated in this study did not differentiate between the white child and the black child when recommending the educable mentally retarded (EMR) classification. These findings indicate that special education leaders in Maryland and Virginia are adhering to federal and state regulations regarding nondiscriminatory practices when considering educable mentally retarded (EMR) classification and race. Matuszek and Oakland (1979) found similar results in their study of special education placement decisions. They reported that school psychologists and classroom teachers did not discriminate on the basis of race when making special education placement decisions.

Hypothesis #2: There will be no difference in the EMR recommendation of special education leaders in Maryland and Virginia for the low SES child and the SLD recommendation of special education leaders in Maryland and Virginia for the low SES child.

Statistically, the low SES child and the high SES child did not receive the same handicapping classification. The low SES child was identified by eligibility team members as educable mentally retarded (EMR) and the high SES child was identified as specific learning disabled (SLD) by the respondents in this study.

This tendency to classify low SES children as educable mentally retarded (EMR) could account for the overrepresentation of minority/low SES children in educable mentally retarded classes. A large percentage of minority children are low SES children. If special education

placement team members tend to identify low SES children as educable mentally retarded (EMR), then more minority children will be identified as educable mentally retarded (EMR). Thus, a higher percentage of minority children will be enrolled in special classes for the educable mentally retarded (EMR) than nonminority children.

Conversely, the tendency to classify high SES children as specific learning disabled (SLD) would account for the overrepresentation of white children in specific learning disabled (SLD) classes. The greater percentage of the high SES group is composed of nonminority persons. If special education placement team members tend to identify high SES children as specific learning disabled (SLD), then more nonminority children will be enrolled in special classes for the specific learning disabled (SLD) than minority children.

Other studies substantiate these findings, i.e., that SES affects decisions in special education. Bergan and Smith (1966) concluded that pupil SES affects the judgment of competence and social acceptance of handicapped persons. Rubin, et al., (1973) concluded that SES differentiates between low IQ regular class pupils and low IQ special class pupils. Matuszek & Oakland (1979) concluded that school psychologists recommend more special services for high SES pupils than for low SES pupils. McLaughlin, et al., (1970) found that social class affects the judgment of the future behavior of special education children. In contrast, Algozzine & Yesseldyke (1979) found that SES does not influence placement decisions. Similarly, Matuszek & Oakland

(1979) found that SES does not affect the placement recommendations of teachers.

The special education placement decisions of the special education leaders who participated in this study were affected by the SES of the child. This held particularly true in the identification of the educable mentally retarded (EMR) and the specific learning disabled (SLD) classifications.

These findings may have been due to several factors, including:

- (1) Perceptions of special education leaders that high SES children receive much cognitive stimulation in the home and are exposed to many enrichment activities and are least likely to be educable mentally retarded (EMR).
- (2) Litigation that has been initiated by high SES parents. Perhaps, special education leaders feel that the less negative label of specific learning disabled (SLD) will least likely result in litigation.
- (3) The definition of specific learning disability in the federal and state regulations, which states that specific learning disability does not include children who have learning problems which are primarily the result of environmental, cultural, or economic disadvantage. Perhaps, special education leaders do not feel that they can adequately rule out these factors for the low SES child, and thus, instead identify him as educable mentally retarded (EMR), i.e., subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period.

The specification of SLD as learning problems which are not primarily the result of environmental, cultural, or economic disadvantage may cause an overidentification of children as EMR.

Perhaps, the very same specifications should be included in the definition of EMR. This may help to alleviate the over identification of children as EMR.

Federal or state guidelines should include more detailed information on how a differential diagnosis between an educable mentally retarded (EMR) child and a specific learning disabled (SLD) child should be made. Such guidelines might include checklists covering objective data on a child. More clarification and specificity in the federal definitions would help eligibility team members to make more accurate and objective placement decisions.

Hypothesis #3: There will be no difference in the SLD recommendation of special education leaders in Maryland and Virginia for the black child and the SLD recommendation of special education leaders in Maryland and Virginia for the white child.

Special education leaders in Maryland and Virginia who participated in this study did not make different recommendations for the specific learning disabled classification on the basis of race, i.e., both the black child and the white child were identified as specific learning disabled (SLD) with the same frequency. Perhaps, this finding was due to federal regulations and litigation concerning nondiscriminatory evaluations.

Matuszek & Oakland (1979) obtained similar results in their study. They concluded that school psychologists and regular teachers do not make different special education recommendations on the basis of race. It is recommended that the special education leaders who participated

in this study continue not to let race influence their placement decisions.

Hypothesis #4: There will be no difference in the special education placement recommendations of special education leaders in Maryland and Virginia from school districts with a greater percentage of black students and the special education placement recommendations of special education leaders in Maryland and Virginia from school districts with a lesser percentage of black pupils.

Special education leaders from school districts that have less than 22% black pupil enrollment tend to make statistically the same special education placement recommendations as special education leaders from school districts that have more than 22% black pupil enrollment. This finding was probably due to special education leaders from both types of school districts working within the same framework of regulations and statutes. Perhaps, both school districts interpret the regulations in the same way. Further, research to determine if other special education leaders would respond as the respondents who participated in this study is recommended.

Hypothesis #5: There will be no difference in the amount of time recommended by special education leaders in Maryland and Virginia for the low SES child and the amount of time recommended by special education leaders in Maryland and Virginia for the high SES child.

Statistically, the low SES child and the high SES child were recommended by respondents to receive the same amount of time in a special education class. This finding may have been due to the special education leader's belief that a certain amount of time will be required to remediate/compensate certain academic difficulties. As would be expected because of federal and state regulations, the amount

of time recommended for a child to spend in a special class seems to be dependent upon the academic difficulties encountered by the child and not upon the SES of the child.

Several studies have shown that SES does affect decisions in special education (Bergan & Smith, 1966; Rubin, et al., 1973; McLaughlin, et al., 1970; Matuszek & Oakland, 1979). Matuszek & Oakland (1979) also found that SES does not affect the special education placement decisions of regular teachers. Algozzine and Yesseldyke (1979) had similar findings in their study, i.e., SES does not affect special education placement decisions.

It is recommended that the special education leaders who participated in this study continue to recommend the same amount of time to be spent in a special class for the low SES child as for the high SES child. The recommendation of time should not vary on the basis of SES.

Hypothesis #6: There will be no difference in the amount of time recommended by special education leaders in Maryland and Virginia for the black child and the amount of time recommended by special education leaders in Maryland and Virginia for the white child.

The black child was recommended to spend the same amount of time in a special education class as the white child by the respondents in Maryland and Virginia who participated in this study. The similarities found between the recommendations of the two groups for the amount of time recommended for the black child and for the white child may have been due to:

- (1) The perception of team members of a specific

amount of time being required to remediate/
compensate for given learning difficulties.

- (2) The inclusion of nondiscriminatory evaluation provisions in Public Law 94-142.
- (3) The emphasis that has been placed upon the overrepresentation of minority children in full time special education classes.

Matuszek & Oakland (1979) found in their study that race did not affect the special education placement decisions of school psychologists and regular teachers. It is recommended that decision makers in special education continue not to allow race to affect placement decisions.

Hypothesis #7: There will be no relationship between the identification of a handicapping classification and the recommendation of a special education placement time for special education leaders in Maryland and Virginia.

No relationship was observed between the identification of the specific learning disabled/educable mentally retarded classification and the amount of time recommended for a special education child to spend in a special class. This finding suggests that the identification of a handicapping classification does not influence the amount of time that a special education child will spend in a special class. Perhaps, the recommendation of the amount of time that a child is to spend in a special class is based primarily upon the academic needs of the child. This practice would be consistent with the least restrictive environment philosophy of Public Law 94-142. Further research is needed to determine if similar findings would be obtained if a different population and/or a different instrument were utilized.

Hypothesis #8: There will be no two-way interactions of race of the child, SES of the child, and/or racial composition of the school district on the identification of a handicapping classification or the recommendation of a time placement in special education.

Pupil SES and district racial proportion combined, significantly ($p \leq .05$) affected the recommendation of the other than educable mentally retarded (EMR) or specific learning disability (SLD) classification (slow learner). Special education leaders from school districts with a low black pupil enrollment identified the high SES child as slow learner or other than educable mentally retarded or specific learning disabled (SLD) more than they identified the low SES child as slow learner. In contrast, special education leaders from school districts with a high black pupil enrollment identified the low SES child as slow learner or other than educable mentally retarded (EMR) or specific learning disabled (SLD) more than they identified the high SES child as slow learner. For an example, special education leaders from school districts with a low black enrollment tended to identify the son of a university professor as slow learner (other) more than they identified the son of a cook as slow learner. In contrast, special education leaders from school districts with a high black enrollment tended to identify the cook's son as slow learner (other) more than they identified the university professor's son as slow learner (other).

Special education leaders from districts with a low percentage of black pupils, perhaps, feel that they can better program for the high SES child in the regular classroom than they can program for the low

SES child in the regular classroom. Thus, the high SES child was seen by the respondents as being slow learner more often than the low SES child. The reverse was true for subjects from school districts with a high black pupil enrollment. That is, the low SES child was seen by the respondents as being a slow learner more often than the high SES child.

Pupil SES and pupil race combined significantly affected the identification of the EMR classification ($p \leq .05$). There was little difference between the identification of the high SES white child as EMR and the identification of the low SES white child as EMR. However, the high SES black child was considerably less likely to be identified as EMR than the low SES black child. Although the federal and/or state definition of SLD includes specifications regarding SES, the federal and/or state definition of EMR does not. Perhaps, the high SES child was seen as being EMR less frequently than the low SES child by these respondents because of perceptions of the participants in this study of the high SES child as having well educated parents and thus less likely to be EMR.

The low SES black child was identified as EMR more than any of the other groups studied, i.e., the low SES white child, the high SES white child, and the high SES black child. Thus, for these subjects, subjectivity did appear to exist toward the low SES black child when the recommendation of EMR classification was considered. This may

account for the overrepresentation of low SES black children in special education EMR classes.

Perhaps this finding was due to the federal and/or state definitions of SLD and EMR as included in the respective guidelines. Possibly, the subjects who participated in this study found it difficult not to identify the cause of the learning problems for the low SES black child as being environmental, cultural, or economic disadvantage. Thus, the educable mentally retarded classification was identified as the most likely cause of the learning difficulties experienced by the low SES child, particularly, the low SES black child.

Perhaps the difficulty of eligibility team members to eliminate environmental, cultural, or economic disadvantage as the cause of the learning problems of low SES children contributes to the overrepresentation of minority pupils in EMR classes as shown by Mercer, 1973; Tucker, 1980; and Keyes, 1981. This same reasoning may account for the underrepresentation of minority pupils in SLD classes as revealed by these same authors. Possibly, eligibility team members are forced to recommend placement in EMR classes for low SES children because the definition of SLD as provided by federal and/or state guidelines indicate that the learning problems can not be primarily the result of environmental, cultural, or economic disadvantage. Eligibility team members may have difficulty eliminating these factors as the cause of the learning difficulties when considering the low SES

child more than when considering the high SES child. Thus, the high SES child would possibly be identified as SLD more often than the low SES child.

One possible solution to this perceived problem would be to provide more clarification in the definitions of SLD and EMR in federal and/or state guidelines. Perhaps, both definitions should indicate that the learning problems are not primarily the result of cultural or economic disadvantage. This would require eligibility team members to make a differential diagnosis for both SLD and EMR on the basis of perceived etiology of learning difficulties. Another alternative would be for federal and/or state guidelines to specify certain procedures for eligibility team members to follow when differentiating the etiology of learning problems. This would help to ensure that low SES children are not arbitrarily identified as EMR and that high SES children are not arbitrarily identified as SLD.

The special education leaders who participated in this study should review their placement procedures to ensure that their decisions are based solely upon objective data, particularly when making recommendations for the low SES black child. Although there was not much differentiation made between the recommendations for the high SES white child and the recommendations for the low SES white child, more clarity in the definitions of the handicapping conditions in federal and/or state regulations would, perhaps, enhance objective recom-

mendations. Until such time as more clarity is provided in the definitions of the aforementioned terms, it may prove beneficial to develop specific guidelines for differentiating the etiology of learning problems, i.e., guidelines for identifying environmental, cultural, or economic disadvantage as causal factors of learning difficulties.

Hypothesis #9: There will be no three-way interaction of race of the child, SES of the child, and racial composition of the school district on the identification of a handicapping classification or the recommendation of a time placement in special education.

Pupil race, pupil SES, and the racial composition of the school district combined, significantly affected the amount of time recommended by respondents for the special education child to spend in a special education class placement ($p < .05$). Special education leaders from school districts with a low black pupil enrollment tended to recommend: (1) more time for a white cook's son (low SES white) than for a black cook's son (low SES black), and (2) more time for a black university professor's son (high SES black) than for a white university professor's son (high SES white). In contrast, special education leaders from school districts with a high black pupil enrollment tended to recommend: (1) more time for a black cook's son (low SES black) than for a white cook's son (low SES white), and (2) more time for a white university professor's son (high SES white) than for a black university professor's son (high SES black).

Why might the recommendations for time placement in special education vary on the basis of SES, race, and district black racial

proportion? One reason for this might be that school districts with a low black pupil enrollment are typically small, rural school districts with limited fiscal capacity and thus fewer alternative programs, such as remedial reading programs, remedial math programs, Title I, etc. In contrast, school districts with a high black pupil enrollment are typically large urban school districts with many available alternative programs to special education.

Findings of this study show that special education leaders from school districts with a high black pupil enrollment, tended to recommend that the low SES black child spend the greatest amount of time in a special class. This may be due to a perception of this child requiring more special education time to benefit from a special program.

The high SES black child was recommended by special education leaders from school districts with a high black pupil enrollment to receive the least amount of time in a special class. Perhaps, this was due to a perception that the high SES child's needs could be met in the regular classroom or through supplementary programs.

Special education leaders from school districts with a low black pupil enrollment tended to recommend the greatest amount of special education time for the low SES white child. This finding may have been due to a perception of this child as having more severe learning problems than the other groups or to a perception that conflict resulting from such a placement would be least likely to occur. Since

leaders from this type of district, i.e., low black enrollment, tended to identify the high SES child as other than EMR or SLD, perhaps they feel that they have sufficient services available to provide increased services to the low SES white child.

In contrast, special education leaders from school districts with a low black pupil enrollment tended to recommend the least amount of time for the low SES black child. Perhaps, this was due to a perception of this child as being least likely to benefit from a special program or possibly to ability grouping within the schools that would meet the needs of this child in a regular class. This finding also could have resulted from previous and current emphasis on the overrepresentation of minority students in special classes.

The recommendations of special education leaders from school districts with a high black pupil enrollment for the high SES white child and the recommendations for the low SES white child were similar. Special education leaders from school districts with a low black pupil enrollment did not make much difference in their recommendations for the high SES black child and for the high SES white child.

Summary

This study examined extraneous factors that affect special education placement decisions, specifically, pupil race, pupil SES, and the racial composition of the school district. While SES was the single factor that significantly affected placement decisions, several

of the factors interacted with each other to significantly affect placement decisions ($p \leq .05$).

Pupil race and pupil SES combined, pupil SES and the racial composition of the school district combined, and pupil race, pupil SES, and racial composition of the school district combined, significantly affected the special education placement decisions of special education leaders in Maryland and Virginia ($p \leq .05$). Pupil race alone and the racial composition of the school district alone did not significantly affect placement decisions ($p \leq .05$).

Race, SES, and district black racial proportion did not account for a significant amount of the variance in time placement. Similarly, state, vignette response order, the amount of time spent by respondents in eligibility team meetings (1981-82), respondent's age, respondent's sex, and respondent's experience did not account for a significant amount of the variance in time placement, $p \leq .05$.

Extraneous factors do appear to affect special education placement decisions and there seems to be a dire need for methods to be developed and implemented that prevent such factors from intervening into this decision making process. Until such time that the aforementioned procedures are put into practice, children will continue to suffer the consequences of inappropriate labels and special class placement.

There is a need for further research to document other factors that may affect special education placement decisions. Factors, such

as, the availability of a program or the presence of the parents at eligibility team meetings, may be explored. Further research is needed to determine if: 1) other eligibility team members would respond as these special education leaders from Maryland and Virginia; 2) a group decision would show the same results as these individual decisions; 3) the responses of subjects would differ if the child were other than an elementary boy; and 4) to determine how SES and race, as well as other factors, are processed in decision making. Further thrust also should be toward the development of methods to ensure nondiscriminatory placement into classes for the handicapped and to explore the effects of federal definitions, especially definitions for SLD and EMR, on placement decisions.

In an attempt to prevent extraneous factors from entering into special education placement decisions, Congress mandated that decisions in special education be made by a multidisciplinary team. Specific sections were included in P. L. 94-142 to protect against the inclusion of extraneous factors in special education decision making.

The findings of this study show that factors unrelated to education play a role in the decision making process or that perhaps, the definitions provided in federal and/or state guidelines are lacking in precision and clarity. Thus, resulting in interpretations that yield discriminatory placements into special classes. Such subjectivity or discriminatory practices will probably continue to play a significant role in the determination of placement decisions in

special education until such time as an objective model to assist in the identification of a handicapping classification is introduced and implemented by eligibility team members and/or until such time as more clarity is given to the definitions of handicapping conditions in federal and/or state guidelines.

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APPENDIX A
REGULATIONS PERTAINING TO THE EDUCATION
FOR ALL HANDICAPPED CHILDREN ACT
LEAST RESTRICTIVE ENVIRONMENT

Section 300.550 General

(a) Each State educational agency shall insure that each public agency establishes and implements procedures which meet the requirements of Sections 121a.550-121a.556.

(b) Each public agency shall insure:

(1) That to the maximum extent appropriate, handicapped children, including children in public or private institutions or other care facilities, are educated with children who are not handicapped, and

(2) That special classes, separate schooling or other removal of handicapped children from the regular educational environment occurs only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactory.

(20 U.S.C. 1412(5)(B); 1414(a)(1)(C)(iv).)

Section 300.551 Continuum of alternative placements.

(a) Each public agency shall insure that a continuum of alternative placements is available to meet the needs of handicapped children for special education and related services.

(b) The continuum required under paragraph (a) of this section must:

(1) Include the alternative placements listed in the definition of special education under Section 121a.13 of Subpart A (instruction in regular classes, special classes, special schools, home instruction, and instruction, and instruction in hospitals and institutions), and

(2) Make provision for supplementary services (such as resource room or itinerant instruction) to be provided in conjunction with regular class placement.

(20 U.S.C. 1421(5)(B).)

Section 300.552 Placements

Each public agency shall insure that:

(a) Each handicapped child's educational placement:

(1) Is determined at least annually,

(2) Is based on his or her individualized education program, and

(3) Is as close as possible to the child's home;

(b) The various alternative placements included under Section 121a.551 are available to the extent necessary to implement the individualized education program for each handicapped child;

(c) Unless a handicapped child's individualized education program requires some other arrangement, the child is educated in the school which he or she would attend if not handicapped; and

(d) In selecting the least restrictive environment, consideration is given to any potential harmful effect on the child or on the quality of services which he or she needs.

(20 U.S.C. 1412(5)(B).)

Comment. Section 121a.552 includes some of the main factors which must be considered in determining the extent to which a handicapped child can be educated with children who are not handicapped. The overriding rule in this section is that placement decisions must be made on an individual basis. The section also requires each agency to have various alternative placements available in order to insure that each handicapped child receives an education which is appropriate to his or her individual needs.

The analysis of the regulations for Section 504 of the Rehabilitation Act of 1973 (45 CFR Part 84 Appendix, Paragraph 24) includes several points regarding educational placements of handicapped children which are pertinent to this section:

1. With respect to determining proper placements, the analysis states: ". . . it should be stressed that, where a handicapped child is so disruptive in a regular classroom that the education of other students is significantly impaired, the needs of the handicapped child cannot be met in that environment. Therefore regular placement would not be appropriate to his or her needs . . ."

2. With respect to placing a handicapped child in an alternate setting, the analysis states that among the factors to be considered in

placing a child is the need to place the child as close to home as possible. Recipients are required to take this factor into account in making placement decisions. The parent's right to challenge the placement of their child extends not only to placement in special classes or separate schools, but also to placement in a distant school, particularly in a residential program. An equally appropriate education program may exist closer to home; and this issue may be raised by the parent under the due process provisions of this subpart;

Section 300.553 Nonacademic settings.

In providing or arranging for the provision of nonacademic and extracurricular services and activities, including meals, recess periods, and the services and activities set forth in Section 121a.306 of Subpart C, each public agency shall insure that each handicapped child participates with nonhandicapped children in those services and activities to the maximum extent appropriate to the needs of that child.

(20 U.S.C. 1412(5)(B).)

Comment. Section 121a.553 is taken from a new requirement in the final regulations for Section 504 of the Rehabilitation Act of 1973. With respect to this requirement, the analysis of the Section 504 Regulations includes the following statement: "A new paragraph specifies that handicapped children must also be provided nonacademic services in as integrated a setting as possible. This requirement is especially important for children whose educational needs necessitate

their being solely with other handicapped children during most of each day. To the maximum extent appropriate, children in residential settings are also to be provided opportunities for participation with other children." (46 CFR Part 84 Appendix, Paragraph 24.)

Section 300.554 Children in public or private institutions.

Each state educational agency shall make arrangements with public and private institutions (such as a memorandum of agreement or special implementation procedures) as may be necessary to insure that Section 121a.550 is effectively implemented.

(20 U.S.C. 1412(5)(B).)

Comment. Under Section 612(5)(B) of the statute, the requirement to educate handicapped children with nonhandicapped children also applies to children in public and private institutions or other care facilities. Each State educational agency must insure that each applicable agency and institution in the State implements this requirement. Regardless of other reasons for institutional placement, no child in an institution who is capable of education in a regular public school setting may be denied access to an education in that setting.*

*Adopted from: Regulations Pertaining to the Education for All Handicapped Children Act (Public Law 94-142), USOE.

APPENDIX B

Public Law 93-112
93rd Congress, H. R. 8070
September 26, 1973

REHABILITATION ACT OF 1973

NONDISCRIMINATION UNDER FEDERAL GRANTS

Sec. 504. No otherwise qualified handicapped individual in the United States, as defined in Section 7 (6), shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

Sec. 7. For the purposes of this Act:

(6) The term "handicapped individual" means any individual who (A) has a physical or mental disability which for such individual constitutes or results in a substantial handicap to employment and (B) can reasonably be expected to benefit in terms of employability from vocational rehabilitation services provided pursuant to Titles I and III of this Act.

(Appendix B continues)

APPENDIX B (cont'd.)

The Rehabilitation Act of 1973
Section 504
Preschool, Elementary and Secondary, and Adult Education

The basic requirements are:

That no handicapped child can be excluded from a public education because of disability; this requirement is effective immediately.

That every handicapped child is entitled to a free appropriate education, regardless of the nature or severity of the handicap; complete compliance with this requirement must be achieved by September 1, 1978.

That handicapped students must not be segregated in public schools but must be educated with nonhandicapped students to the maximum extent appropriate to their needs.

That evaluation procedures be improved in order to avoid the inappropriate education that results from misclassification.

That procedural safeguards be established so parents and guardians can object to evaluation and placement decisions made with respect to their children.

That state or local educational agencies locate and identify unserved handicapped children.

An appropriate education can be afforded by many different methods, including use of regular classes with or without aids, depending on need; in private or public homes or institutions, or through combinations of such methods so long as handicapped and nonhandicapped

students are educated together to the maximum extent possible. The result should be to provide the education program best suited to the individual needs of handicapped people.

It should be emphasized that where a handicapped student is so disruptive that education of other students in the classroom is impaired, the student can be reassigned. A common sense rule of reason applies in such cases.

The regulation provides that school systems bear special responsibilities, in some instances, for transportation of handicapped people to and from education programs. Where placement in a public or private residential program is necessary, the school district has responsibility for the costs of the program, nonmedical care, room and board, and transportation.

*Adopted from: Section 504 of the Rehabilitation Act of 1973, Fact Sheet, Handicapped Persons, Rights Under Federal Law, July, 1977, U.S. Department of Health, Education, and Welfare, Office of the Secretary, Office of Civil Rights, Washington, D.C. 20201.

APPENDIX C
Percent Black Pupil Enrollment in Maryland

School Division	Total Population *	EMR Class **	LD Class **
Allegany	2	3	2
Anne Arundel	14	41	22
Baltimore City	78	87	77
Baltimore County	12	23	12
Calvert	31	75	53
Caroline	22	61	33
Carroll	3	6	9
Cecil	5	14	8
Charles	26	74	47
Dorchester	43	76	69
Frederick	7	37	12
Garrett	0	0	0
Harford	9	24	10
Howard	15	37	23
Kent	30	--	--
Montgomery	12	24	23
Prince George's	50	67	61
Queen Anne's	20	--	--

School Division	Total Population *	EMR Class **	LD Class **
St. Mary's	23	61	46
Somerset	47	80	56
Talbot	30	--	--
Washington	3	11	5
Wicomico	30	59	45
Worcester	37	85	48
<hr/>			
State Totals	30	60	45

*Source: Facts about Maryland Public Education, 1980-81, Maryland State Department of Education.

**Source: Directory of Elementary and Secondary School Districts, and Schools in Selected School Districts: School Year 1978-1979, OCR, USOE.

Percent Black Pupil Enrollment in Virginia

School Division	Total Population *	EMR Class **	LD Class **
Accomack	53	74	10
Albemarle	13	36	23
Alleghany	3	--	--
Amelia	42	78	11
Amherst	27	67	19
Appomattox	28	77	0
Arlington	15	37	46
Augusta	3	4	2
Bath	8	--	--
Bedford	14	40	16
Bland	.9	0	0
Botetourt	5	28	1
Brunswick	68	90	75
Buchanan	0	0	0
Buckingham	55	91	19
Campbell	17	56	20
Caroline	52	--	--
Carroll	.3	2	0
Charles City	78	92	92
Charlotte	51	76	32

School Division	Total Population *	EMR Class **	LD Class **
Chesterfield	8	39	7
Clarke	14	38	13
Craig	.3	0	4
Culpeper	25	68	13
Cumberland	51	94	14
Dickenson	.5	--	--
Dinwiddie	46	82	48
Essex	50	85	54
Fairfax	6	27	6
Fauquier	18	56	22
Floyd	4	10	11
Fluvanna	37	63	61
Franklin	16	41	12
Frederick	.9	8	0
Giles	2	5	4
Gloucester	16	48	23
Goochland	41	85	63
Grayson	4	--	--
Greene	1	--	--
Greensville	65	87	50
Halifax	51	82	52
Hanover	15	58	18

School Division	Total Population *	EMR Class **	LD Class **
Henrico	18	38	12
Henry	29	53	6
Highland	0	--	--
Isle of Wight	51	80	55
James City ***	31	--	--
King George	27	67	4
King Queen	57	86	69
King William	49	87	78
Lancaster	47	89	37
Lee	.3	--	--
Loudoun	9	50	12
Louisa	40	79	26
Lunenburg	48	79	40
Madison	22	--	--
Mathews	21	75	33
Mecklenburg	50	85	48
Middlesex	37	91	58
Montgomery	2	--	--
Nelson	31	60	0
New Kent	32	65	32
Northampton	66	89	0
Northumberland	49	92	72

School Division	Total Population *	EMR Class **	LD Class **
Nottoway	47	83	36
Orange	23	--	--
Page	3	--	--
Patrick	10	36	0
Pittsylvania	40	70	10
Powhatan	19	75	17
Prince Edward	55	94	76
Prince George	26	84	25
Prince William	8	35	9
Pulaski	7	25	13
Rappahannock	11	30	0
Richmond	39	--	--
Roanoke	2	12	2
Rockbridge	3	--	--
Rockingham	1	--	--
Russell	.9	2	2
Scott	.3	--	--
Shenandoah	1	0	0
Smyth	2	0	3
Southampton	54	97	60
Spotsylvania	16	47	15
Stafford	7	23	10

School Division	Total Population *	EMR Class **	LD Class **
Surry	77	95	57
Sussex	73	94	0
Tazewell	2	--	--
Warren	6	--	--
Washington	1	--	--
Westmoreland	59	87	62
Wise	1	--	--
Wythe	4	16	6
York	16	--	--
(Towns)			
Cape Charles	36	100	0
Colonial Beach	16	59	44
Fries	0	--	0
West Point	19	--	--
(Cities)			
Alexandria	39	82	63
Bedford City ***	26	40	16
Bristol	6	22	9
Buena Vista	4	--	--
Charlottesville	29	70	42
Chesapeake	33	72	23
Clifton Forge	19	--	--

School Division	Total Population *	EMR Class **	LD Class **
Colonial Heights	0	--	--
Covington	15	--	--
Danville	42	71	35
Emporia ***	53	--	--
Fairfax City	3	--	--
Falls Church	4	25	14
Franklin City	69	25	66
Fredericksburg	37	62	54
Galax	8	41	10
Hampton	38	62	24
Harrisonburg	6	25	9
Hopewell	24	58	36
Lexington	21	--	--
Lynchburg	30	57	32
Manassas	9	--	--
Manassas Park	5	--	--
Martinsville	4	68	37
Newport News	36	76	45
Norfolk	50	85	59
Norton	7	--	--
Petersburg	74	91	54
Poquoson	.3	--	--

School Division	Total Population *	EMR Class **	LD Class **
Portsmouth	53	78	33
Radford	11	--	--
Richmond City	73	90	74
Roanoke City	33	60	28
Salem ***	4	--	--
South Boston	47	86	60
Staunton	14	--	--
Suffolk	60	83	21
Virginia Beach	12	47	14
Waynesboro	11	--	--
Williamsburg	31	91	38
Winchester	12	28	20
State Totals	23	53	18

*Source: Virginia School Census - 1980, Division of Management Information Services, Department of Education, February, 1981.

**Source: Directory of Elementary and Secondary School Districts, and Schools in Selected School Districts: School Year 1978-1979, OCR, USOE.

***: Not included in population because not included in 1981-82 Virginia State Department listing of persons assigned responsibilities for special education programs.

APPENDIX D

PRESTIGE SCORES DISTRIBUTIONS

(Qs. 2, 5, 6; Deck 1, Cols. 16-17, 36-37, 46-47)

The prestige scores assigned to occupations in this study were taken from a rating system developed at NORC in 1963-1965 in a project on occupation prestige directed by Robert W. Hodge, Paul S. Siegel, and Peter H. Rossi. This concept of prestige is defined as the respondents' estimation of the social standing of occupations. The prestige scores in the Hodge-Siegel-Rossi study were generated by asking respondents to estimate the social standing of occupations via a nine-step ladder, printed on cardboard and presented to the respondent.

The boxes on the ladder were numbered 1-9 from bottom to top. In addition, the first, fifth, and ninth boxes were labeled "bottom," "middle," and "top," respectively. The occupational titles were printed on small cards and the occupational prestige ratings were collected by requesting respondents to sort the cards into boxes formed by the rungs of the ladder. [P. 35.]¹

Significance testing between two prestige scores, or among a group of scores, requires knowledge about the standard errors. Since there is a different standard error term for each pair of scores, Siegel has

¹Paul S. Siegel, Prestige in the American Occupational Structure. Unpublished Ph.D. dissertation, Department of Sociology, University of Chicago, March, 1971. (Available from Photoduplication Department, University of Chicago Libraries, Chicago 60637.)

provided a few values which are likely to exceed most actual standard errors. For more detail on standard error, sources of the prestige scores, and the method of translating the respondents' rankings into a standardized metric system, see Siegel, Prestige in the American Occupational Structure.

The prestige score was originally designed for use with the 1960 U.S. Census occupational codes and has been adapted to the 1970 listing as follows:

- 1) If the occupation was a new one assigned to a previously existing subdivision (e.g., Engineers within the major category "Professional, Technical, and Kindred Workers"), it received the prestige score for the general n.e.c. category of that subdivision.
- 2) If the occupation was grouped with a like occupation in 1960 but divided from it in 1970, both occupations received the same 1960 prestige score.
- 3) If this occupation was completely new to the list and was not assigned to an existing subdivision, it received the prestige score of the n.e.c. category for the major occupational division.

All adaptations are marked with a "*" next to the occupational classifications. (See Appendix F.)

- 4) The craft score was used for apprentices when the craft score was less than 41. If the craft score was greater than 41, the apprentice score of 41 was used.

Not elsewhere classified.*

*Taken from General Social Surveys, 1972-80: Cumulative Codebook for the Spring (1980).

PRESTIGE SCORE DISTRIBUTION

The mean prestige score is 41.75 and the standard deviation is 16.36. Prestige scores between 58 and 91 are considered as high SES, 25-57 as medium SES, and -7 to 24 as low SES. The prestige scores range from a score of 9 to a score of 82. Occupations were selected for the middle SES from within the socioeconomic range on the basis of the approximation of that score to the midpoint of that particular socioeconomic range. For an example, the middle SES ranges from 25 to 57. A score of 41 approximates the midpoint for this range. Thus, occupations that have a prestige score of approximately 41 were considered for inclusion in the vignettes (see attached Table).

In an attempt to maximize the variance of the occupations, extreme scores were utilized to represent high and low socioeconomic status occupations (see attached Table).

Prestige Score Distributions as Considered for
Vignette Inclusion and the Accompanying Occupation

Occupation	Prestige Score	SES Rating
Physician *	82	high
University Professor *	78	high
Judge	76	high
Lawyer	76	high
Dentist	74	high
Physicist	74	high
Astronomer	74	high
Salesman	42	medium
Mail Carrier	42	medium
Advertising Agent	42	medium
Practical Nurse	42	medium
Photographer	41	medium
Tailor	41	medium
Construction Inspector	41	medium
Public Administrator	41	medium
Buyer & Shippers, farm	41	medium
Cook *	18	low
Maids & Servants	18	low
Laundresses	18	low
Wage Worker	18	low

Occupation	Prestige Score	SES Rating
Clothing Ironer	18	low
Clothing Presser	18	low
Laundry Operator	18	low
Huckster	18	low
Peddler	18	low
Dry Cleaner Operator	18	low
Farm Laborer	18	low
Construction Laborer *	17	low
Freight Handler	17	low
Material Handler	17	low
Garbage Collector	17	low
Stockhandler	17	low
Vehicle Washer	17	low
Equipment Cleaner	17	low
Miscellaneous Laborer	17	low

*Included in vignette

Source: General Social Surveys, 1972-1980, Cumulative Codebook, July, 1980, The National Data Program for the Social Sciences, National Opinion Research Center, University of Chicago, pp. 272-283.

Appendix B

Date _____

SPECIAL EDUCATION VIGNETTE PROTOCOL

Directions: Below are brief descriptions of special education students. For each child, please identify the handicapping condition and recommend the amount of time that the child should spend in a special education class per day.

Pertinent assumptions: None of the boys have visual, hearing, language, or physical abnormalities. Any recommended placement will be available. All decisions will be reviewed in sixty days for appropriateness.

In many instances, you may require more pupil information, but please make your best judgment on the basis of the information provided. The vignettes include a description of the child's language, class behavior, teacher relationships, pupil relationships, class achievement, self-concept, IQ score(s), and achievement scores. The children have been identified as eligible for special education services.

Vignette A : Bill is a very friendly nine year old, English speaking boy who has recently learned to write his name in cursive. He has a very good relationship with his peers and teachers. He was retained in grade 2. His achievement test scores range from grade level 1.2 in reading to 2.4 in math. His Stanford-Binet IQ score is 71, Otis Lennon DIQ is 78.

Vignette B : Ken is a handsome, soft spoken nine year old white boy. English is his native language. Although he tries very hard, he cannot do assigned work. He has fair teacher/pupil relationships and his classroom behavior is good. His achievement test scores cluster around grade level 1.0. His Stanford-Binet IQ score is 70, Full Scale WISC-R IQ score is 75. He is in third grade.

Vignette C : Jimmy is a nine year old, alert, imaginative, son of an advertising agent. English is his native language. His academic performance ranges from grade level 2.0 to 3.8. His WISC-R Verbal IQ is 84, performance IQ is 99. He is in grade 3 and does not work well independently.

Vignette D : Dan is a physically apt, sociable, white nine year old son of a university professor who does not do any of the tasks expected of a third grader. His self-concept and teacher/pupil relationships are fair. He is now repeating third grade. English is his native language. His achievement test scores range from grade level .5 to 2.2. His Otis Lennon IQ score is 71, Full Scale WISC-R IQ score is 69, and his Stanford-Binet IQ score is 75.

Vignette E : Jim is an English speaking, ten year old boy who is considerably overweight. Although his class behavior and peer relations are good, his self-concept is fair. His achievement test score is 83. He does not work well in the classroom. Gross motor tasks are difficult for him.

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Vignette D : Dan is a physically apt, sociable, white nine year old physician's son who does not do any of the tasks expected of a third grader. His self-concept and teacher/pupil relationships are fair. He is now repeating third grade. English is his native language. His achievement test scores range from grade level .5 to 2.2. His Otis Lennon IQ score is 71, Full Scale WISC-R IQ score is 69, and his Stanford-Binet IQ score is 75.

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Vignette D : Dan is a physically apt, sociable, white nine year old son of a construction worker who does not do any of the tasks expected of a third grader. His self-concept and teacher/pupil relationships are fair. He is now repeating third grade. English is his native language. His achievement test scores range from grade level .5 to 2.2. His Otis Lennon IQ score is 71, Full Scale WISC-R IQ score is 69, and his Stanford-Binet IQ is 75.

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Vignette A : Bill is a very friendly nine year old, English speaking boy who has recently learned to write his name in cursive. He has a very good relationship with his peers and teachers. He was retained in grade 2. His achievement test scores range from grade level 1.2 in reading to 2.4 in math. His Stanford-Binet IQ score is 71, Otis Lennon DIQ is 78.

Vignette B : Ken is a handsome, soft spoken nine year old black boy. English is his native language. Although he tries very hard, he cannot do assigned work. He has fair teacher/pupil relationships and his classroom behavior is good. His achievement test scores cluster around grade level 1.0. His Stanford-Binet IQ score is 70, Full Scale WISC-R IQ score is 75. He is in third grade.

Vignette C : Jimmy is a nine year old, alert, imaginative, son of an advertising agent. English is his native language. His academic performance ranges from grade level 2.0 to 3.8. His WISC-R Verbal IQ is 84, performance IQ is 99. He is in grade 3 and does not work well independently.

Vignette D : Dan is a physically apt, sociable, black nine year old cook's son who does not do any of the tasks expected of a third grader. His self-concept and teacher/pupil relationships are fair. He is now repeating third grade. English is his native language. His achievement test scores range from grade level .5 to 2.2. His Otis Lennon IQ score is 71, Full Scale WISC-R score is 69, and his Stanford-Binet IQ is 75.

Vignette E : Jim is an English speaking, ten year old boy who is considerably overweight. Although his class behavior and peer relations are good, his self-concept is fair. His achievement test score is 83. He does not work well in the classroom. Gross motor tasks are difficult for him.

Date _____

SPECIAL EDUCATION VIGNETTE PROTOCOL

Directions: Below are brief descriptions of special education students. For each child, please identify the handicapping condition and recommend the amount of time that the child should spend in a special education class per day.

Pertinent assumptions: None of the boys have visual, hearing, language, or physical abnormalities. Any recommended placement will be available. All decisions will be reviewed in sixty days for appropriateness.

In many instances, you may require more pupil information, but please make your best judgment on the basis of the information provided. The vignettes include a description of the child's language, class behavior, teacher relationships, pupil relationships, class achievement, self-concept, IQ score(s), and achievement scores. The children have been identified as eligible for special education services.

Vignette A : Bill is a very friendly nine year old, English speaking boy who has recently learned to write his name in cursive. He has a very good relationship with his peers and teachers. He was retained in grade 2. His achievement test scores range from grade level 1.2 in reading to 2.4 in math. His Stanford-Binet IQ score is 71, Otis Lennon IQ is 78.

Vignette B : Ken is a handsome, soft spoken nine year old black boy. English is his native language. Although he tries very hard, he cannot do assigned work. He has fair teacher/pupil relationships and his classroom behavior is good. His achievement test scores cluster around grade level 1.0. His Stanford-Binet IQ score is 70, Full Scale WISC-R IQ score is 75. He is in third grade.

Vignette C : Jimmy is a nine year old, alert, imaginative, son of an advertising agent. English is his native language. His academic performance ranges from grade level 2.0 to 3.8. His WISC-R Verbal IQ is 84, performance IQ is 99. He is in grade 3 and does not work well independently.

Vignette D : Dan is a physically apt, sociable, black nine year old son of a construction worker who does not do any of the tasks expected of a third grader. His self-concept and teacher/pupil relationships are fair. He is now repeating third grade. English is his native language. His achievement test scores range from grade level .5 to 2.2. His Otis Lennon IQ score is 71, Full Scale WISC-R IQ score is 69, and his Stanford-Binet IQ is 75.

Vignette E : Jim is an English speaking, ten year old boy who is considerably over-weight. Although his class behavior and peer relations are good, his self-concept is fair. His achievement test score is 83. He does not work well in the classroom. Gross motor tasks are difficult for him.

SPECIAL EDUCATION VIGNETTE PROTOCOL
RESPONSE SHEET

Please complete the following information.

Present position _____ Age: above 45 yrs. ___ 35 to 45 yrs. ___
 Sex: male ___ female ___ 25 to 35 yrs. ___ below 25 yrs. ___
 Income: above \$20,000 ___ below \$20,000 ___ Race: white ___ black ___ other ___
 Years experience in special education _____
 Percentage of school district ASD/eligibility team meetings that you participated (1981-)
 zero percent ___ 1 to 10% ___ 11 to 25% ___ 26 to 50% ___ 51 to 75% ___ 76 to 100%

DIRECTIONS: Please read the vignettes on the attached sheet and shade in below the circle of your response.

Vignette A: I would classify Bill as: I would recommend Bill receives per day:

- | | |
|--|---|
| <input type="radio"/> severely mentally retarded (-4) | <input type="radio"/> full time special education class (-6) |
| <input type="radio"/> trainable mentally retarded (-3) | <input type="radio"/> regular class with 4 hrs special education (-4) |
| <input type="radio"/> educable mentally retarded (-2) | <input type="radio"/> regular class with 3 hrs special education (-3) |
| <input type="radio"/> learning disabled (-1) | <input type="radio"/> regular class with 2 hrs special education (-2) |
| <input type="radio"/> Other, specify _____ (-5) | <input type="radio"/> regular class with 1 hr special education (-1) |
| | <input type="radio"/> regular class with special consultation (4) |
| | <input type="radio"/> Other, specify _____ (-7) |

Vignette B: I would classify Ken as: I would recommend Ken receives per day:

- | | |
|--|---|
| <input type="radio"/> severely mentally retarded (-4) | <input type="radio"/> full time special education class (-6) |
| <input type="radio"/> trainable mentally retarded (-3) | <input type="radio"/> regular class with 4 hrs special education (-4) |
| <input type="radio"/> educable mentally retarded (-2) | <input type="radio"/> regular class with 3 hrs special education (-3) |
| <input type="radio"/> learning disabled (-1) | <input type="radio"/> regular class with 2 hrs special education (-2) |
| <input type="radio"/> Other, specify _____ (-5) | <input type="radio"/> regular class with 1 hr special education (-1) |
| | <input type="radio"/> regular class with special consultation (4) |
| | <input type="radio"/> Other, specify _____ (-7) |

Vignette C: I would classify Jimmy as: I would recommend Jimmy receives per day:

- | | |
|--|---|
| <input type="radio"/> severely mentally retarded (-4) | <input type="radio"/> full time special education class (-6) |
| <input type="radio"/> trainable mentally retarded (-3) | <input type="radio"/> regular class with 4 hrs special education (-4) |
| <input type="radio"/> educable mentally retarded (-2) | <input type="radio"/> regular class with 3 hrs special education (-3) |
| <input type="radio"/> learning disabled (-1) | <input type="radio"/> regular class with 2 hrs special education (-2) |
| <input type="radio"/> Other, specify _____ (-5) | <input type="radio"/> regular class with 1 hr special education (-1) |
| | <input type="radio"/> regular class with special consultation (4) |
| | <input type="radio"/> Other, specify _____ (-7) |

Vignette D: I would classify Dan as: I would recommend Dan receives per day:

- | | |
|--|---|
| <input type="radio"/> severely mentally retarded (-4) | <input type="radio"/> full time special education class (-6) |
| <input type="radio"/> trainable mentally retarded (-3) | <input type="radio"/> regular class with 4 hrs special education (-4) |
| <input type="radio"/> educable mentally retarded (-2) | <input type="radio"/> regular class with 3 hrs special education (-3) |
| <input type="radio"/> learning disabled (-1) | <input type="radio"/> regular class with 2 hrs special education (-2) |
| <input type="radio"/> Other, specify _____ (-5) | <input type="radio"/> regular class with 1 hr special education (-1) |
| | <input type="radio"/> regular class with special consultation (4) |
| | <input type="radio"/> Other, specify _____ (-7) |

Vignette E: I would classify Jim as: I would recommend Jim receives per day:

- | | |
|--|---|
| <input type="radio"/> severely mentally retarded | <input type="radio"/> full time special education class (-6) |
| <input type="radio"/> trainable mentally retarded (-3) | <input type="radio"/> regular class with 4 hrs special education (-4) |
| <input type="radio"/> educable mentally retarded (-2) | <input type="radio"/> regular class with 3 hrs special education (-3) |
| <input type="radio"/> learning disabled (-1) | <input type="radio"/> regular class with 2 hrs special education (-2) |
| <input type="radio"/> Other, specify _____ (-5) | <input type="radio"/> regular class with 1 hr special education (-1) |
| | <input type="radio"/> regular class with special consultation (4) |
| | <input type="radio"/> Other, specify _____ (-7) |

SPECIAL EDUCATION VIGNETTE PROTOCOL
RESPONSE SHEET

Please complete the following information.

Present position _____ Age: above 45 yrs. ___ 35 to 45 yrs. ___
 Sex: male ___ female ___ 25 to 35 yrs. ___ below 25 yrs. ___
 Income: above \$20,000 ___ below \$20,000 ___ Race: white ___ black ___ other ___
 Years experience in special education _____
 Percentage of school district ASD/eligibility team meetings that you participated (1981-82):
 ___ zero percent ___ 1 to 10% ___ 11 to 25% ___ 26 to 50% ___ 51 to 75% ___ 76 to 100%

DIRECTIONS: Please read the vignettes on the attached sheet and shade in below the circle of your response.

Vignette A: I would classify Bill as: I would recommend Bill receives per day:
 learning disabled (-1) regular class with special consultation (-4)
 educable mentally retarded (-2) regular class with 1 hr special education (-1)
 trainable mentally retarded (-3) regular class with 2 hrs special education (-2)
 severely mentally retarded (-4) regular class with 3 hrs special education (-3)
 other, specify _____ (-5) regular class with 4 hrs special education (-4)
 full time special education class (-6)
 other, specify _____ (-7)

Vignette B: I would classify Ken as: I would recommend Ken receives per day:
 learning disabled (-1) regular class with special consultation (-4)
 educable mentally retarded (-2) regular class with 1 hr special education (-1)
 trainable mentally retarded (-3) regular class with 2 hrs special education (-2)
 severely mentally retarded (-4) regular class with 3 hrs special education (-3)
 other, specify _____ (-5) regular class with 4 hrs special education (-4)
 full time special education class (-6)
 other, specify _____ (-7)

Vignette C: I would classify Jimmy as: I would recommend Jimmy receives per day:
 learning disabled (-1) regular class with special consultation (-4)
 educable mentally retarded (-2) regular class with 1 hr special education (-1)
 trainable mentally retarded (-3) regular class with 2 hrs special education (-2)
 severely mentally retarded (-4) regular class with 3 hrs special education (-3)
 other, specify _____ (-5) regular class with 4 hrs special education (-4)
 full time special education class (-6)
 other, specify _____ (-7)

Vignette D: I would classify Dan as: I would recommend Dan receives per day:
 learning disabled (-1) regular class with special consultation (-4)
 educable mentally retarded (-2) regular class with 1 hr special education (-1)
 trainable mentally retarded (-3) regular class with 2 hrs special education (-2)
 severely mentally retarded (-4) regular class with 3 hrs special education (-3)
 other, specify _____ (-5) regular class with 4 hrs special education (-4)
 full time special education class (-6)
 other, specify _____ (-7)

Vignette E: I would classify Jim as: I would recommend Jim receives per day:
 learning disabled (-1) regular class with special consultation (-4)
 educable mentally retarded (-2) regular class with 1 hr special education (-1)
 trainable mentally retarded (-3) regular class with 2 hrs special education (-2)
 severely mentally retarded (-4) regular class with 3 hrs special education (-3)
 other, specify _____ (-5) regular class with 4 hrs special education (-4)
 full time special education class (-6)
 other, specify _____ (-7)

APPENDIX F

18628 Mateney Road
Germantown, Maryland 20874
June 25, 1982

Dear Sir:

I am presently an employee of the Frederick County School System, Frederick, Maryland and a Virginia Tech doctoral student who is at the dissertation stage of the program. For my dissertation research, I have chosen to study the special education decision making process via the use of vignettes and special education leaders and experts in the states of Maryland and Virginia.

As a member of my chosen population, would you please consider participating in the study? As a participant in the study, you will be required to check your recommendations for children described in five brief and concise vignettes. A self-addressed, stamped envelope will be provided for you to return your response. Your responses shall be kept confidential and the final report shall not include names or the names of districts. As a participant, you shall receive a brief summary of the findings of the study within six months.

If you should have questions, please do not hesitate to contact me at (301) 972-4455. If you will be unable to participate in this study, please return the bottom section of this letter prior to July 2, 1982. If I do not hear from you, it will be assumed that you are consenting to participate in the study and a protocol shall be mailed to you within a few days.

I am grateful for your cooperation. Your continued support of the field of special education is apparent.

Sincerely,

Joyce A. H. Keyes

_____ I am sorry but I will not be able to participate in the study as described above.

Signature

APPENDIX G

18628 Mateneu Road
Germantown, Maryland 20874
July 16, 1982

Dear Sir:

I am grateful to you, a special education leader, for agreeing to participate in my dissertation research of decision-making in special education. As indicated in the initial letter describing the study, participants and school districts shall remain anonymous. Each participant will be mailed a brief description of the findings of the study within approximately six months.

Would you please read the five vignettes enclosed and identify on the response sheet both a handicapping condition and placement recommendation for each child described in the vignettes? It would be appreciated if you would return the forms in the self-addressed envelope on or before July 23, 1982.

If you should have questions or concerns, please contact me at (301) 972-4455. Again, thank you for your continued interest and support of special education.

Sincerely,

Joyce A. H. Keyes

APPENDIX H

18628 Mateney Road
 Germantown, Maryland 20874
 January 28, 1982

Dr. James A. Tucker
 Post Office Box 4471
 Austin, Texas 78765

Dear Dr. Tucker:

I am presently working on my dissertation at the Virginia Polytechnic Institute and State University. My review of the literature has brought to my attention your article "Ethnic Proportions in Classes for the Learning Disabled: Issues in Nonbiased Assessment", The Journal of Special Education Volume 14, 1980. I would very much like to include Figures one through eight in my dissertation.

Would you please grant me permission to copy those figures for inclusion in my study? The nature of my research is the special education placement of minorities and the inclusion of those figures would enhance my study immensely.

Thank you for your considerations. I shall look forward to hearing from you in the near future.

Cordially,

Joyce Ann Hester Reyes

Permission Granted!
 2/1/82

If you have an extra copy of your study - when finished - I'd be grateful for a copy.

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removed from the scanned
document. Page 2 of 2**

PUPIL SOCIOECONOMIC STATUS, PUPIL RACE,
AND RACIAL COMPOSITION OF THE SCHOOL DISTRICT
AS COMPONENTS OF THE SPECIAL EDUCATION PLACEMENT DECISION

by

Joyce A. H. Keyes

(ABSTRACT)

In an attempt to alleviate subjectivity in special education placement decisions, Congress mandated that such decisions be made by a multidisciplinary team (P.L. 94-142). Minority students are consistently overrepresented in special education classes (Mercer, 1973; Tucker, 1980; Keyes, 1981).

The research problem that was the concern of this study was: do race of the child, socioeconomic status of the child, and racial composition of the school district affect special education placement decisions? It was hypothesized that: there would be no difference in-the special education placement decisions made for white pupils and those made for black pupils; decisions made for low SES children and those made for high SES children; decisions made by special educators from school districts with a high percentage of black pupil enrollment and those made by special educators from school districts with a low percentage of black enrollment; there would be no relationship between the identification of a handicapping classification and the recommendation of time to be spent in a special class; and, that there would be no significant first or second order interactions.

Crosstabulation, 2x2x2 analysis of variance, point biserial correlation coefficient, and multiple regression analysis were used to test the hypotheses. Data were obtained from 81 school district directors of special education programs in Maryland and Virginia. These respondents made special education recommendations for a hypothetical child.

Findings observed included: no correlation between amount of time recommended and the identification of a handicapping classification; SES, race and district proportion explained a significant amount of variance in EMR classification; SES alone accounted for significant variance in EMR and LD classifications; and SES and race combined significantly affected the recommendation of EMR classification, SES and district racial proportion combined significantly affected the recommendation of the other than EMR or LD category.