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ABSTRACT

This descriptive study examined practices in three Texas school districts concerning referral, assessment, and placement of limited English proficient (LEP) Hispanic students in programs for the mentally retarded (MR), and their impact on effectiveness of services for the LEP population. Subjects were 61 Hispanic LEP students (grades 2-5) enrolled in MR classes during 1982-83. Data collected from student folders indicated that mean age at time of referral was 7 years 4 months, and that general lack of academic progress was the most commonly cited reason. More than 75 percent of students' families used Spanish as the primary home language. Teachers generally rated LEP MR students as having very low language proficiency in English. Information about the language used in administering standardized tests was typically not recorded. Available data suggested that the subjects were, in fact, mentally retarded, and that classification was assigned when low scores across measures left little doubt. Thus, districts seemed to identify the more severely retarded students, while mildly retarded LEP students may not be adequately served. While safeguarding schools against litigation, this practice may deprive handicapped students of needed specialized services. Based on these and other findings, recommendations for policy, practice, and research are offered.  
 (JW)

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## PART II

### CHARACTERISTICS OF LIMITED ENGLISH PROFICIENT HISPANIC STUDENTS IN PROGRAMS FOR THE MENTALLY RETARDED: IMPLICATIONS FOR POLICY, PRACTICE, AND RESEARCH

This is Part II of a research study examining special education service delivery provided by three school districts in Texas for limited English proficient Hispanics in programs for learning disabled, speech and language handicapped, and mentally retarded students. (U.S. Department of Education, Contract No. 300-83-0272)

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## I

**INTRODUCTION**

The Department of Special Education, College of Education, at The University of Texas at Austin has established a Handicapped Minority Research Institute on Language Proficiency (HMRI) to conduct research specific to exceptional limited English proficient (LEP) and bilingual students (English/Spanish). The Institute, funded under a contract with the United States Department of Education, Office of Special Education and Rehabilitative Services, is exploring the interaction of language proficiency and handicapping conditions in an effort to improve service delivery for students who qualify for both special education and special language programs such as bilingual education or English as a second language.

The following report is Part II of a larger HMRI research study which examined special education services provided by three school districts in Texas for LEP Hispanic students in programs for the learning disabled (LD), speech and language handicapped (SLH), or mentally retarded (MR). Part II addresses the identification and placement of LEP Hispanic students in MR programs; Parts I and III address the identification and placement of LEP students in LD and SLH programs respectively.

The objectives of this study were to: (a) identify the characteristics of Hispanic students referred, assessed and placed in MR programs; (b) examine district policies and practices governing special education services for LEP students; (c) determine implications for improving policies and practices in the referral, assessment and placement of these students; and (d) suggest future research directions.

**Research Questions**

The central question posed in this study was: What are local district practices related to referral, assessment, and placement of limited English proficient Hispanic students in programs for the mentally retarded and how do these practices impact on the effectiveness of services for these students? A series of related questions guided data analysis:

**Referral**

1. What actions are taken prior to referring LEP Hispanic students to special education?
2. What are the most frequent reasons for referral?
3. What are the demographic characteristics of referred students who are placed in programs for the mentally retarded?
  - a. At what age are students referred?
  - b. What are the students' school histories prior to referral?

- c. What socioeconomic status (SES) and size are students' families?
- 4. What are the language characteristics of referred students who are placed in programs for the mentally retarded?
  - a. What are students' home languages?
  - b. What are students' dominant languages and language proficiency at school?

### **Assessment**

- 1. What criteria for determining mental retardation are set by policy?
- 2. What language proficiency information is reported in initial assessments of LEP MR students? How recent is the information which is reported?
- 3. How many and what types of tests are used to determine whether a LEP child is mentally retarded?
- 4. What is the language of assessment?
- 5. How do Hispanic LEP MR children score on commonly used psychometric instruments?

### **Placement**

- 1. What are the primary and secondary handicapping conditions of Hispanic LEP MR students at the time of their initial placement in special education?
- 2. What are the recommended placement settings?
- 3. What is the amount of time recommended for special education and for related services?

### **Policy and Procedure**

- 1. What policies govern the referral process?
  - a. What are the steps involved in referral of students to special education?
  - b. Who must be involved at each step according to policy? Who is actually involved?
  - c. What types of data are required to be gathered for consideration by referral committees?<sup>1</sup>

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<sup>1</sup> Referral committees are no longer required under Texas law.



2. How do referral policies address the needs and characteristics of culturally/linguistically different students?
3. What policies govern the assessment process?
  - a. What types of data must be gathered to determine the presence of a handicapping condition?
  - b. Who conducts the assessments?
4. What special provisions are made for assessing language minority students?
5. What policies govern special education placements?
  - a. Who must be involved on placement committees?
  - b. What adaptations of the placement process occur when the student being considered is limited English proficient?
  - c. What level of agreement exists for placement committees which consider Hispanic LEP MR students?

This investigation was designed to provide a broad data base to describe the delivery of special education services to mentally retarded limited English proficient Hispanic students. It is important to note that the study was primarily exploratory and descriptive in nature and was intended to generate hypotheses, direct subsequent research efforts, and to formulate policy recommendations for the improvement of services and programs provided exceptional language minority students.

### **Definitions**

#### **Mental Retardation**

Mentally retarded students, as defined by the Texas Education Code (Texas Education Agency, 1980) are

students with significantly subaverage general intellectual functioning existing concurrently with deficiencies in adaptive behavior and manifested during the developmental period such that they cannot be adequately educated in the regular classes of the public school without the provision of special services. (p. 3)

#### **Limited English Proficiency**

The 1974 Amendment (P.L. 93-380) to the Elementary and Secondary Education Act (1965) defines limited English proficient individuals or those with limited English speaking ability as those

who (a) were not born in the United States or whose native language is other than English; and (b) . . . who come from environments where a language other than English is dominant . . . and, by reason thereof, have difficulty speaking, reading, writing and understanding instruction in the English language. (p. 566)

### **Native Language**

P.L. 93-380 defines native language, when used with reference to an individual of limited English proficiency, as

the language normally used with such individuals or, in the case of a child, the language normally used by the parents of the child.  
(p. 566)

## II

**REVIEW OF RELEVANT LITERATURE**

It has been only recently that research related to handicapped language minorities has focused on describing the effects of language proficiency on student performance. It is not surprising, then, that there is a dearth of literature which examines the prevalence of handicapping conditions among limited English proficient students or which guides identification, assessment, and development of instructional programs for these students.

**Representation of Hispanics in Special Education**

Hispanics have often been placed in special education programs in numbers which are disproportionate to their representation in the general school population. The extent of disproportionality, however, may vary by geographic region and category of exceptionality. Ortiz and Yates (1983), for example, found that Hispanic students in Texas public schools were overrepresented by 315% in classes for the learning disabled (LD) but underrepresented in other categories, including that of mental retardation (MR). Moreover, Ortiz & Yates documented that the number of Hispanics identified as mentally retarded has steadily declined since the passage of the Education for All Handicapped Children Act of 1975 (P.L. 94-142). This trend may have resulted in part from a fear of lawsuits alleging inappropriate placement of these students. Increased awareness of children's right to nonbiased assessment and the legal mandate that LEP children be tested in their dominant language also may have contributed to underrepresentation in this category because of the limited availability of bilingual assessment personnel.

A survey by the Office of Civil Rights (U.S. Department of Health, Education, and Welfare, 1978) of one-third of all public school districts in the country found that variability in the degree of disproportion in MR classes was due to ethnic group membership, geographic region, and to demographic characteristics of school districts. For example, the largest overall disproportion of minorities in classes for the educable mentally retarded occurred in southern states. The average proportion of Hispanic students was actually slightly less than that of Anglos, but this average was made up of both large positive and large negative disproportions. That is, in many districts there was a large overrepresentation of Hispanics in MR classes while, in other districts, a large underrepresentation of Hispanics was evident. It was important, then, to determine what factors might account for this discrepancy.

Data from the 1978 Office of Civil Rights survey indicated that placement trends for Hispanics were largely a function of the ethnic composition of local communities and the availability of bilingual education or other programs for LEP students (Heller, Holtzman, & Messick, 1982). For example, in communities where bilingual education or English as a Second Language (ESL) programs were not available, it appeared that special education was used as an alternative for providing instructional services for LEP children. Such a practice would result

in overrepresentation of LEP students in special education. On the other hand, school districts which serve large numbers of LEP students may withhold referral to special education until students have received native language instruction over a period of several years. Availability of bilingual education programs could result in underrepresentation of Hispanics in special education, especially in the early elementary grades.

### Assessment Practices

The implementation of new and varied assessment practices has resulted in a decline in the number of LEP children placed in MR classes. For example, in a study conducted in Arizona schools, Reschly and Jipson (1976) found that lowering the IQ cutoff score from 75 to 69 substantially reduced the numbers of Hispanics classified as MR so that they were no longer overrepresented in these classes. Fisher (1977) reported that by adding the criterion of a deficit in adaptive behavior (as measured by the Adaptive Behavior Inventory for Children (Mercer, 1979) to the requirements for calling a child mentally retarded, fewer students ultimately were placed in special classes. The emphasis on adaptive behavior was based on the premise that children who function normally at home and in their community, regardless of IQ scores, are not mentally retarded, and should not be placed in special education classes.

It is believed that a large number of LEP Hispanics ultimately qualify for special education because they are tested in their weaker language by monolingual English examiners. Swanson and DeBlassie (1979) investigated the effectiveness of three experimental conditions with a group of 90 Mexican-American students of comparable mental maturity who were administered the Wechsler Intelligence Scale for Children (Wechsler, 1949). The three conditions included: (1) assessment in English, (2) assessment in English with a translator, and (3) assessment in Spanish. Interestingly, although the highest Verbal Scale IQ scores resulted from the assessment in English, the highest Performance Scale IQ scores occurred when the assessment was conducted in Spanish. However, without specific information such as the socioeconomic status (SES) of subjects, degree of linguistic proficiency in English and Spanish etc., it is difficult to interpret these findings.

More recently, several assessment strategies have been proposed which have the potential to better ensure the appropriateness of MR placements for LEP Hispanic students. For example, alternatives to traditional IQ testing could include the Cartoon Conservation Scales (DeAvila & Havassy, 1975) which emphasize Piagetian theory. De Avila and Havassy found that differences in scores of Anglos and Hispanics were reduced when a Piagetian, as opposed to a traditional IQ test approach, was used. Another alternative is to use Feuerstein's Learning Potential Assessment Device [LPAD] (Feuerstein, 1979). An important advantage of the LPAD is that it employs an individualized remedial teaching approach in determining a child's true potential for learning. Very little work has been done thus far, however, on the validity and usefulness of this type of approach with MR children in the United States.

Emphasizing in-depth assessment and instruction by the classroom teacher could aid in reducing inappropriate referrals of LEP children to special

education. Such practices could benefit all students, regardless of whether or not they are referred to special education. Heller et al. (1982) state that the essential components of such an approach are the following: (a) use of curricula for which evidence exists concerning its effectiveness for the student subgroups in question; (b) effective implementation of the curricula with specific students; (c) documentation to suggest that adequate learning did not occur; and (d) evidence that the teacher attempted to determine the source of the difficulty in each case and that corrective measures were undertaken to alleviate the situation. This model is recommended because it places full responsibility on the classroom teacher to provide at-risk children with nonbiased, appropriate instruction before initiating a special education referral. If implemented conscientiously by teachers and other support personnel (i.e., school psychologists, speech therapists, etc.), the number of inappropriate referrals and subsequent placements of Hispanic LEP students in MR programs could be greatly reduced.

### **Sociocultural Variables Related to Referral and Placement**

Very little has been written concerning the relationship between sociocultural variables, such as sex, socioeconomic status or student's home language, and special education referral and placement. This is surprising, given that more boys than girls are placed in special education classes; a higher incidence of low SES children are labeled mentally retarded; and a large proportion of Hispanics who are placed in special education are Spanish dominant and/or LEP. These variables, then, may be important to consider in the referral and placement of LEP students. Lapouse and Weitzner (1970) found a negative relationship between SES prevalence rates and degree of mental retardation in 12 epidemiological studies. Results showed that 91% of lower SES MR children had IQs of 50 or greater while 89% of the highest SES group had IQs that were below 50. Since most children from the highest SES group had IQs which fell within the severe to profound range, it is likely that they were truly retarded. However, this conclusion is more open to question for the low SES group.

Argulewicz (1983) conducted one of the few studies in which sociocultural variables were reported separately for Anglos, Blacks, and Hispanics. The study was conducted in a large school district in Arizona and included schools of either mid-high or low SES. Results indicated that a higher percentage of Anglos than of Hispanics or Blacks were classified as MR in mid-high SES schools. While Hispanics were referred for special education at a higher rate than the other groups in the low SES schools, it was the combination of low SES schools and Spanish as a home language that was associated with MR placement. Only 2 children with English as a home language, compared to 12 children with Spanish as a home language, were placed in MR classes. Since LEP children generally come from homes where Spanish is the primary language, they could be at risk of being labeled mentally retarded.

Zucker, Prieto and Rutherford (1979) asked teachers to read through simulated case studies of second and third grade Mexican-American and Anglo children who had been placed in special education. Teachers more often recommended MR placement for Mexican-Americans than for Anglos. Since student characteristics in the case studies were equivalent except for the

manipulation of race and sex of student, teachers seemed to be discriminating against Mexican-American children. This finding is rather disturbing, given the importance assigned to teacher judgments of referred students in the special education process (Bickel, 1982; Poland, Ysseldyke, Thurlow, & Mirkin, 1979; Ortiz et al., 1985).

### **Summary**

While the proportion of LEP Hispanics receiving special education services in programs for the mentally retarded varies from region to region, there is a national trend toward underrepresentation in this category. Reasons for this underrepresentation are not clear, although the implementation of new and varied assessment practices may be reducing the numbers of children who qualify as MR. Additional research on how sociocultural variables may affect the referral and subsequent placement of language minority students in MR programs should be conducted. Of particular interest is how levels of language proficiency in the native language and/or English influence placement decisions.

### III

## METHODS AND PROCEDURES

This was a descriptive, exploratory study of special education services provided to limited English proficient (LEP) Hispanic students who were classified as mentally retarded. Eligibility folders were examined in an effort to determine why these students had been referred to special education, how they were assessed, and what initial placement decisions were made.

Originally, the research design included three urban central Texas school districts which had a large Hispanic student enrollment and well-established bilingual education and special education programs. The existence of these programs was critical given the research focus on students who were both handicapped and limited English proficient. However, there were no eligible LEP MR students in District 1 and only 7 in District 3. Consequently, all data reported in this paper refer only to District 2. To assure confidentiality, descriptive information about this district has been kept to a minimum. The district served 45,384 Hispanics, representing 69% of the general student population. Of the 5,467 Hispanic students who were served in special education programs, 902 (16.5%) were classified as mentally retarded.

### Subjects

Lists of Hispanic students enrolled in special education and of students classified as limited English proficient were cross-referenced to identify second, third, fourth, and fifth grade mentally retarded Hispanic students who were also classified as LEP. Forty students were to be selected at each grade level, but since the number of available subjects at each grade was always less than 40, all available students were included. This resulted in a sample of 61 Hispanic LEP students who were enrolled in MR classes during the 1982-83 academic year. Of these, 33 were boys and 26 were girls (with sex unknown for two additional subjects). The distribution of subjects by grade level is presented in Table 1.

### Data Collection Procedures

A data collection form was designed to capture eligibility information from student records. Of primary interest was information related to student demography, referral, assessment, and placement.

### Training of Coders

A total of 24 individuals participated in data collection, including four full-time research assistants, nine University of Texas at Austin faculty members, and 11 master's and doctoral students. The coders became familiar with the district's special education forms and were provided two one-hour training sessions relative to data collection, professionalism and confidentiality. Coders then collected practice data from selected special education folders; all trainees

**Table 1**  
**Distribution of LEP MR Subjects by Grade**

Grade	LEP MR students ( <u>n</u> = 61)	
	#	(%)
2	8	(13.1)
3	20	(32.8)
4	16	(26.2)
5	17	(27.9)



coded the same folders using the district data collection form. Their responses were checked for accuracy and, when needed, further training and practice were provided. Inter-coder reliability ranged from 70% to 93%.

### **Data Collection**

Data collection took place from March to July, 1984. The district's Director of Evaluation was the official liaison to the Institute. The district liaison notified other district personnel, primarily principals and counselors, that approval had been granted HMRI staff to examine special education records of all students in the sample.

### **Data Preparation and Analysis**

A "master" data file containing information for all the LEP MR students was constructed and verified. A corresponding control file was written, using the Statistical Package for the Social Sciences (Nie, Hull, Jenkins, Steinbrenner, & Bent, 1975). Details about individual data analyses are provided in the results section.

### **Methodological Limitations**

The results reported in this document are based on an exploratory, field-oriented, and ex post facto research methodology. Therefore, the limitations of descriptive methodology are also the limitations of this investigation. Kerlinger, and Mason and Bramble (cited in Garcia, 1984) describe these limitations:

1. The range and number of complex variables which are often studied in non-laboratory settings can result in substantial problems dealing with the identification of cause-and-effect relationships among the variables.
2. Because appropriate sampling may be problematic, there are difficulties, hazards, and limitations associated with the generalization of the results. Moreover, in a study utilizing an ex post facto methodology, the subjects have already been assigned to the program being investigated.
3. Descriptive research also has the additional limitation that the reported findings may be biased in the collection and interpretation of the data. Because this research methodology relies on a type of open-ended inquiry, there is sometimes a tendency to overlook evidence that could cause one to arrive at different interpretations or conclusions.

One final limitation of the present investigation concerns the interpretation of the findings. In research that deals with the collection of information from student folders, the results can be only as reliable and as valid as the information documented in eligibility records. As Kerlinger (cited in Garcia, 1984) warns,

. . . the records of many schools and school districts are not well kept. And in most cases no thought has been given to the research use of the records. Scores will be missing or inaccurately recorded. . . . Mean-

while, investigators must be constantly alert to possibilities of inaccuracies and the fact that school records are often not in adequate form for statistical treatment. (pp. 543-544)

Missing data may be regarded as indicating the absence of some pertinent special education action. However, drawing such a conclusion may be erroneous, as the action may have occurred but was not recorded.

The results of this study are specific to the participating district and cannot be generalized to other special education programs. However, the investigation does generate questions which must be addressed in order to improve special education services provided language minority students. These issues are identified in subsequent sections.

## IV

**RESULTS**

The following sections report the results of the examination of (a) behaviors of limited English proficient students which result in a referral to special education, (b) demographic characteristics of referred students, (c) assessment instruments and procedures used to determine the presence of mental retardation, and (d) assessment results and subjects' score patterns on commonly used assessment instruments.

**Referral**

These questions guided analysis and interpretation of information related to reasons for referral and demographic characteristics of LEP students tested and placed in programs for the mentally retarded.

1. What actions are taken prior to referring LEP Hispanic students to special education?
2. What are the most frequent reasons for referral?
3. What are the demographic characteristics of referred students who are placed in programs for the mentally retarded?
  - a. At what age are students referred?
  - b. What are the students' school histories prior to referral?
  - c. What socioeconomic status (SES) and size are students' families?
4. What are the language characteristics of referred students who are placed in programs for the mentally retarded?
  - a. What are students' home languages?
  - b. What are students' dominant languages and language proficiency at school?

**Prereferral Information**

There are no state or federal policies specific to prereferral intervention. However, there is an assumption that referrals to special education occur only when the teacher or other referral agent concludes that the child cannot be educated in the regular classroom without specialized instruction such as that provided by special educators. Policy in this district required that documentation be provided to show that other teaching strategies, alternative curricula, regular education support services and/or other remediation efforts were attempted prior to the referral.

There was little documentation of classroom adaptations or instructional modifications pursued by teachers prior to the referral. Data were missing for the majority of LEP children (47 or 77.1%). For the remainder of the students (14 or 22.9% of the subjects) referral committee members indicated that "previous educational efforts" had been attempted but there was little information as to the nature of these efforts.

### **Reasons for Referral**

Table 2 presents the most common reasons for referral of subjects for psychoeducational assessment. Many students were referred for multiple reasons; thus, the total exceeds 100 percent. Lack of academic progress in general was the most commonly cited reason for referral ( $n = 30$ , 49%). Language problems of various types were also frequent reasons for referral. For example, speech and language related reasons were cited for 26% of the children: speech (5%); poor language development or limited language (8%); unintelligible or difficult speech (7%); articulation problems (3%); and trouble comprehending (3%). Poor progress in reading was cited 13% of the time, as were high distractability and poor attention. Poor memory or retention and general immaturity or slowness were cited in 10% of the referrals.

As can be seen in Table 3, eight students were described as having a hearing disability (13.1%) while 10 were described as experiencing some type of vision problem (16.4%). Vision and hearing problems could affect the frequency of certain reasons for referral. For example, a student with a hearing disability might be referred for unintelligible or difficult speech, poor academic functioning, distractability, poor attention span, etc. Similarly, a student with a vision disability might be referred because of poor academic functioning, poor progress in reading, etc.

### **Demographic Characteristics**

**Age at referral.** The mean age at time of referral was 7 years, 4 months. An examination of Table 4 reveals that six year olds were referred most frequently (approximately 34% of the sample). Some children as young as four years and others as old as 11 years also were referred.

It is hypothesized that an inverse relationship exists between age at referral and the severity of mental retardation. In other words, younger children may exhibit more severe levels of retardation and thus are more easily identifiable, but it may take longer for parents and teachers to become aware of the retardation of older children because of its milder nature. Additional analyses would clarify whether such a relationship exists.

**Retention history.** A large number of the subjects were retained at least once (44.3%). Because data were not available for 31.2% of the sample, it is probable that the total percentage of retention exceeded 50 percent.

Of the 25 retained students for whom data were available, 24 had been retained once and one had been retained twice. First grade was the most frequently repeated grade. A total of 19 students were retained in first grade, three in second grade, two in kindergarten and one at the pre-kindergarten level. There was no information available to determine reasons for retention.

**Table 2**  
**Reasons for Referral of LEP MR Students**

Reasons for referral	LEP MR students ( <u>n</u> = 61)	
	#	(%) <sup>a</sup>
Poor academic progress or low functioning	30	(49.0)
Poor progress in reading	8	(13.0)
Highly distractable or poor attention	8	(13.0)
Poor memory or retention	6	(10.0)
General immaturity or slowness	6	(10.0)
Referred by doctor or diagnostic center	5	(8.0)
Problems with motor skills or coordination	5	(8.0)
Poor language development or limited language	5	(8.0)
Child is a behavior problem	4	(7.0)
Unintelligible or difficult speech	4	(7.0)
Referred to pinpoint problems	4	(7.0)
Referral suggested by parent	3	(5.0)
Speech	3	(5.0)
Poor progress in math	3	(5.0)
Miscellaneous	3	(5.0)
Motivation problems: frustrated, low self-confidence	3	(5.0)
Child is hyperactive	2	(3.0)
Articulation problems	2	(3.0)
Visual problems	2	(3.0)
Has trouble comprehending	2	(3.0)
Needs extra or individualized help	1	(2.0)

<sup>a</sup> Percentages equal the percentage of students for whom a referral reason was listed. Students may have had more than one reason for referral. Therefore, percentages will not sum to 100.

**Table 3**  
**Incidence of Hearing or Vision Disability**  
**Among LEP MR Students**

Status	LEP MR students ( <u>n</u> = 61)			
	Hearing disability		Vision disability	
	#	(%)	#	(%)
Yes	8	(13.1)	10	(16.4)
No	39	(62.3)	42	(68.9)
Missing data	15	(24.6)	9	(14.8)

**Table 4**  
**Age Range for LEP MR Students at Time of Referral**

Range in years/months	LEP MR students ( <u>n</u> = 59)		
	#	(%)	Cumulative (%)
4-6 to 5-0	1	(1.7)	(1.7)
5-0 to 5-6	3	(5.1)	(6.8)
5-6 to 6-0	5	(8.5)	(15.3)
6-0 to 6-6	12	(20.3)	(35.6)
6-6 to 7-0	8	(13.6)	(49.2)
7-0 to 7-6	4	(6.8)	(55.9)
7-6 to 8-0	10	(16.9)	(72.9)
8-0 to 8-6	5	(8.5)	(81.4)
8-6 to 9-0	3	(5.1)	(86.4)
9-0 to 9-6	4	(6.8)	(93.2)
9-6 to 10-0	1	(1.7)	(94.9)
10-0 to 10-6	2	(3.4)	(98.3)
10-6 to 11-0	0	(0.0)	(98.3)
11-0 to 11-6	0	(0.0)	(98.3)
11-6 to 12-0	1	(1.7)	(100.0)

Investigation of this variable would be helpful in understanding whether the lack of school success for this population could be attributed to low intellectual ability or to factors such as lack of appropriate instruction, language of instruction, or discriminatory practices in assessment and placement.

**Occupation of parents.** Information about parental occupation provides a rough index of the socioeconomic status (SES) of families. Examination of eligibility folders revealed that approximately two-thirds of the data on father's occupation, and almost one-third of the data on mother's occupation, were either missing or incomplete. Even with this caution, certain patterns can be noted (see Table 5). For example, 11.5% of all fathers and 59% of all mothers were unemployed. While the highest occupational status of mothers was at the level of unskilled worker, one or more fathers were semiskilled or skilled workers or small businessmen.

**Siblings.** The number of siblings in families ranged from none to nine (with 25% missing data). The mean number of siblings per family was 2.7 (with a standard deviation of 2.1) and the most common (modal) number of siblings was one. These numbers contradict other findings which indicate that Hispanics as a group come from larger families (Brown, Rosen, Hill & Olivas, 1980).

It was not possible to determine subjects' birth orders from the data, but one untested hypothesis is that having a mentally retarded child discourages families from having more children later. This would only be true of more severe handicaps which are diagnosed early, since parents of mild MR children might not be aware of their child's retardation.

### Language Characteristics

**Home language.** Since all students were LEP, it was expected that the majority of the families would rate themselves on the home language survey as being mainly Spanish-speaking. Of 54 families for whom data were available, more than 75% ( $n = 41$ ) of all families used Spanish as the primary home language, with an additional 7% ( $n = 4$ ) reporting both languages as primary. Four other families stated that English was their primary language.

**Teacher ratings of students' language dominance.** Information from teachers tended to confirm that Spanish was the primary home language of most of these students. In fact, as shown in Table 6, only one student was judged by teachers to be English dominant at home. However, while Spanish continued to be the dominant language of these students at school and with peers, the proportion of students judged English dominant at school was higher than the proportion of students judged English dominant at home.

Table 7 presents a comparison between students' language dominance at school and language dominance at home for 25 students for whom both types of data were available. Virtually all students were judged as coming from homes where Spanish was the dominant language. Even in cases where English was judged to be the dominant language at school, Spanish still was judged to be the dominant language at home.

**Language proficiency.** Teachers generally rated LEP MR students as having very low language proficiency in English. Of 56 students, 45 (74%) were

**Table 5**  
**Type of Occupation Held by Parents of LEP MR Students**

Occupation	LEP MR students ( <u>n</u> = 61)			
	Father		Mother	
	#	(%)	#	(%)
None, unemployed, homemaker	7	(11.5)	36	(59.0)
Unskilled worker	4	(6.6)	5	(8.2)
Semiskilled worker	4	(6.6)	0	(0.0)
Skilled worker	2	(3.3)	0	(0.0)
Small business, clerk	1	(1.6)	0	(0.0)
Insufficient information	11	(18.0)	5	(8.2)
Missing data	32	(52.4)	15	(24.6)

**Table 6**  
**Teacher Ratings of Language Dominance of LEP MR Students**

Language	LEP MR students ( <u>n</u> = 61)					
	At home		At school		With peers	
	#	(%)	#	(%)	#	(%)
English	1	(1.6)	9	(14.8)	6	(9.8)
Spanish	43	(70.5)	13	(21.3)	12	(19.7)
Both	3	(4.9)	5	(8.2)	5	(8.2)
Missing	14	(22.9)	34	(55.8)	38	(62.3)



Table 7

**Language Dominance of LEP MR Students  
at School and at Home**

(n = 25)

Language dominance at home	Language dominance at school			
	English	Spanish	Both	Total
Spanish	8	12	3	23
Both	0	0	2	2
<b>TOTAL</b>	<b>8</b>	<b>12</b>	<b>5</b>	<b>25</b>

rated as having "poor" fluency in oral language, while nine (14.8%) were rated as exhibiting only a "fair" level of oral fluency. Only two students were judged to have a "good" level of fluency.

### **Assessment**

Data related to assessment were analyzed to answer the following questions:

1. What criteria for determining mental retardation are set by policy?
2. What language proficiency information is reported in initial assessments of LEP MR students? How recent is the information which is reported?
3. How many and what types of tests are used to determine whether a LEP child is mentally retarded?
4. What is the language of assessment?
5. How do Hispanic LEP MR children score on commonly used psychometric instruments?

### **Eligibility Criteria**

The purpose of the comprehensive individual assessment is to determine (a) the presence or absence of a physical, mental, or emotional disability; (b) the presence or absence of a significant educational need; and (c) specific learning competencies of the student and the instructional and related services that could improve and maintain the student's competencies. The written report of the assessment must address specific criteria for determining the existence of a potentially handicapping condition. Criteria for determining that a student is mentally retarded include the following (District Policy Manual, 1980-81; Texas Education Agency, 1980):

A student who is mentally retarded is one who has been determined by a licensed and/or certified psychologist or an associate psychologist or an educational diagnostician to be functioning more than two standard deviations below the mean on individually administered scales of verbal ability, performance or nonverbal ability, and adaptive behavior. . . . The report of individual assessment from the professional must specify the degree of mental retardation. (District Policy Manual, p. 29; TEA, p. 22)

The written report is to summarize the findings of all assessment data, both formal and informal, and to address the degree to which results might be influenced by the students' educational background, cultural environment, or socioeconomic status.

## Language Proficiency Information

In considering the placement of limited English proficient students in special education, school districts must provide assurance that the child's problems result from a real handicapping condition and not from a lack of English proficiency. The information about Spanish and English proficiency included in the comprehensive individual assessments of LEP students which might assist in making this determination was therefore examined. Also of interest was the recency of language assessment results considered.

**Language Assessment Scales (LAS).** As reported previously, results of the Home Language Survey and of teacher ratings indicated that the subjects in this study demonstrated low levels of language proficiency in both English and in Spanish. The low ratings of student language proficiency were supported by results from the Language Assessment Scales (DeAvila & Duncan, 1977) administered in English and in Spanish. Table 8 shows the number of students who obtained scores at one of several levels on the LAS. The English proficiency results reveal that 35 of 40 students were categorized as "non-speakers" of English, the lowest level possible, and only two obtained scores high enough to be considered "limited speakers" of English. This was an expected finding since students were included in this study precisely because they were limited English proficient.

The almost identical results for Spanish proficiency, however, were somewhat surprising. The vast majority of students obtained scores low enough to be classified as "non-speakers" of Spanish. It is possible that these children had difficulty with language in general because of their low level of intelligence, yet such low functioning suggests severe to profound retardation. It is also possible that the students lacked "test-wiseness" because of their young age and/or lack of experience with tests. A third possible explanation for the low scores might be that the tests were administered incorrectly or were invalid measures of these students' language proficiency. Because of the ex post facto design of this study, it was not possible to test these hypotheses.

If students were correctly classified as "non-speakers" of both languages, then their limited language skills could hinder cognitive development. Cummins (1979) has said that a minimum level of proficiency must be reached in one's native language if the potential negative effects of bilingualism are to be avoided (the "threshold hypothesis"). A child who is severely limited in native language proficiency will be comparably limited in the second language. Conversely, to the extent that a child is proficient in the native language, it can be expected that s/he can acquire a similar level of skill in the second language.

**Recency of testing.** It is important that bilingual examiners who conduct psychological assessments have current information about a student's language proficiency both in English and Spanish so that a determination can be made regarding which language(s) to use in the evaluation. Outdated language assessments may not accurately reflect the current language proficiency of students and can result in the wrong language being chosen for test administration. Table 9 presents the number of months that elapsed between the date of the LAS administration reported in comprehensive assessments and that of the psychological evaluation. Of the 27 students for whom data were available, only 40.7% ( $n = 11$ ) had been administered the English LAS within six months prior to

**Table 8**  
**Language Assessment Scales Spanish and English Levels**  
**of LEP MR Students**

Language proficiency level	Language category	LEP MR students ( <u>n</u> = 61)			
		LAS English		LAS Spanish	
		#	(%)	#	(%)
1	Non-speakers <sup>a</sup>	35	(57.4)	30	(49.2)
2	Non-speakers	3	(4.9)	4	(6.6)
3	Limited speakers	2	(3.3)	3	(4.9)
Not administered or missing		21	(34.3)	24	(39.3)

<sup>a</sup> Language proficiency levels 1 and 2 are differentiated by using the total raw LAS score. Students who are between 5 and 11 years old are usually given the Level 1 LAS on which a raw score of 54 or less is categorized as language proficiency Level 1, and a raw score of 55 to 64 is categorized as language proficiency Level 2.

Table 9

**Frequencies for Months Elapsed Between Date of LAS Assessment  
and Psychological Assessment for LEP MR Students**

Months elapsed	English ( <u>n</u> = 27)			Spanish ( <u>n</u> = 27)		
	#	(%)	Cumulative (%)	#	(%)	Cumulative (%)
2	1	(3.7)	(3.7)	1	(4.2)	(4.2)
4	4	(14.8)	(18.5)	3	(12.5)	(16.7)
5	1	(3.7)	(22.2)	1	(4.2)	(20.9)
6	5	(18.5)	(40.7)	2	(8.3)	(29.2)
7 - 12	4	(14.8)	(55.5)	5	(20.9)	(50.1)
13 - 18	6	(22.2)	(77.7)	4	(16.7)	(66.8)
19 - 24	2	(7.4)	(85.1)	1	(4.2)	(71.0)
25 - 30	3	(11.1)	(96.2)	5	(20.9)	(91.9)
31	1	(3.8)	(100.0)	1	(4.2)	(96.1)
42	0	(0.0)	(0.0)	1	(4.2)	(100.0)
Mean = 12 months Mode = 6 months			Mean = 15.5 months Mode = 12 months			

the date of the psychological assessment. For some students, the LAS had been administered more than two years prior to the assessment. The mean number of months elapsed was 12, while the modal number of months elapsed was six.

There was an even bigger discrepancy between the date of the Spanish LAS assessment and that of the psychological assessment. Only 29.2% ( $n = 7$ ) of the students had Spanish LAS tests administered within the six months prior to psychological testing. The mean number of months elapsed was 15 1/2; the modal number of months elapsed was 12 for Spanish LAS administrations. These findings suggest that language proficiency tests are administered to comply with federal laws requiring identification of students eligible for special language programs, but that results may not be updated for the purposes of the special education assessment. Without current information on the relative language proficiency of students, assessment personnel cannot be sure that they are testing a child in his or her stronger language, nor can a teacher know that instruction is being provided in the appropriate language.

### Tests Administered

The usual battery of tests used in evaluating LEP MR students included an IQ test, an achievement test, and an adaptive behavior test. In addition, a common practice was to administer the Bender Visual Motor Gestalt Test (Koppitz, 1964). The most frequently administered IQ, achievement and adaptive behavior tests are shown in Table 10.

The Wechsler Intelligence Scale for Children-Revised [WISC-R] (Wechsler, 1974) was administered to the majority of the subjects, but the Stanford-Binet (Terman & Merrill, 1960), an older instrument, was administered to about 30% (or 18) of the children. Nonverbal tests such as the Leiter International Performance Scale (Leiter & Arthur, 1969) were administered only rarely. The Stanford-Binet measures a lower level of intellectual abilities than does the WISC-R; the Stanford-Binet begins at the two-year level while the WISC-R begins at the six-year level. Thus, the Stanford-Binet is a better instrument for measuring moderate to severe mental retardation. The Peabody Individual Achievement Test [PIAT] (Dunn & Markwardt, Jr., 1970) and/or the Wide Range Achievement Test [WRAT] (Jastak & Jastak, 1978) were administered to 87% of the children, with the newer Woodcock-Johnson Psycho-educational Battery (Woodcock & Johnson, 1977) being administered only to 11.5% ( $n = 7$ ) of the subjects.

A child cannot be placed in a class for the mentally retarded solely on the basis of low IQ scores. In addition, an adaptive behavior instrument must be administered to the mother or some other qualified individual. If scores on the adaptive behavior measure reveal inadequate functioning outside the school setting, it is possible to classify the child as MR.

The Vineland Social Maturity Scale (Doll, 1953, 1965) was the adaptive behavior instrument used in more than half of all LEP MR assessments (54.1%;  $n = 33$ ). The Adaptive Behavior Inventory for Children [ABIC] (Mercer & Lewis, 1979) was used in 16.4% ( $n = 10$ ) of the cases, with other measures being used even less frequently. The ABIC is the adaptive behavior measure included in Mercer's System of Multicultural Pluralistic Assessment, an assessment process developed specifically to help reduce the inappropriate placement of minority

**Table 10**  
**IQ, Adaptive and Achievement Tests Administered**  
**to LEP MR Students**

Tests	LEP MR students ( $n = 61$ )					
	Administered		Not administered		Missing data	
	#	(%)	#	(%)	#	(%)
<b>IQ</b>						
Stanford-Binet	18	(29.5)	42	(68.9)	1	(1.6)
WISC-R	40	(65.6)	20	(32.8)	1	(1.6)
<b>Achievement</b>						
WRAT	20	(32.8)	40	(65.6)	1	(1.6)
Woodcock-Johnson	7	(11.5)	53	(86.9)	1	(1.6)
PIAT	33	(54.1)	27	(44.3)	1	(1.6)
<b>Adaptive behavior</b>						
ABIC	10	(16.4)	50	(82.0)	1	(1.6)
AAMD	6	(9.8)	54	(88.5)	1	(1.6)
Vineland	33	(54.1)	27	(44.3)	1	(1.6)

students in programs for the retarded. Findings suggest, though, that districts continue to use older, established instruments and/or a lack of adaptation of the assessment process for students who are LEP.

The Bender Visual Motor Gestalt Test (Koppitz, 1964) was administered to approximately two-thirds ( $n = 40$ ) of the sample and the Goodenough Draw-A-Person Test (Harris, 1963) was administered to 36% ( $n = 22$ ) of the students. Both tests measure fine motor coordination and can be scored for emotional factors (e.g. aggression, hostility, frustration, etc.). The Bender also can detect perceptual problems and is sometimes used to aid in the diagnosis of cerebral dysfunction.

Tests of language proficiency are frequently administered to LEP children to determine eligibility for special language programs (bilingual education or ESL), but they are not usually part of the psychoeducational test battery. The only language proficiency test that was administered to a substantial extent in the target district was the Language Assessment Scales. A total of 32 of 61 (52.5%) students were administered this test.

### **Language of Testing**

Little information about the language used in testing-referred LEP children was found in student records. In most cases, no mention was made as to whether testing was conducted in English or in Spanish. It is assumed that tests such as the Wide Range Achievement Test and Stanford-Binet were administered in English, since standardized Spanish versions of the tests do not exist. Even to make this assumption, however, is speculative.

Three children were given the WISC-R in English, three in Spanish, and eight additional children received a "bilingual administration." It was not possible to determine whether a standardized Spanish form of the WISC-R was used or what procedures were employed to test bilingually. Therefore, whether the other-than-English testings constituted administrations of the WISC-R to which the test's norms could be legitimately applied can not be ascertained. In any event, except for the above 14 cases, information about language of assessment was not provided. Thus, it is also difficult to determine whether district personnel complied with the requirement that students be tested in their dominant language.

### **Test Results**

Results of tests administered most frequently in the participating district will be discussed in this section.

#### **Wechsler Intelligence Scale for Children-Revised (WISC-R).**

Results from the WISC-R showed some interesting patterns. More than half of the students who took the WISC-R obtained Verbal IQ scores that were in the 40s or 50s, indicating at least a moderate level of mental retardation (see Table 11). In no case did any LEP student obtain a Verbal IQ score above 70 which, in Texas, is the score below which the classification of mental retardation is permitted. Performance IQ scores were higher than Verbal IQ scores. The majority of students obtained Performance IQ scores above 60, with less than one-third having scores in the 40s and 50s. Scores open to serious question



Table 11

**Frequency Distribution of WISC-R Verbal  
and Performance Scale IQ Scores  
of LEP MR Students**

IQ score	Frequency of cases			
	Verbal ( <u>n</u> = 37)		Performance ( <u>n</u> = 40)	
	#	(%)	#	(%)
Below 45	1	(2.7)	1	(2.5)
45 - 49	3	(8.1)	3	(7.5)
50 - 54	9	(24.3)	1	(2.5)
55 - 59	7	(18.9)	7	(17.5)
60 - 64	5	(13.5)	6	(15.0)
65 - 69	10	(27.0)	9	(22.5)
70 - 74	2	(5.4)	11	(27.5)
75 or above	0	(0.0)	2	(5.0)

were those of nine students who obtained full scale scores between 70 and 75. Most likely, these students had Verbal IQ scores that were considerably lower than this, thus lowering the Full Scale IQ score below 70 as well.

Tables 12 and 13 show the means and respective standard deviations for Verbal and Performance Scale subtests of the WISC-R. A scaled score of 10 is average for the standardization sample; the standard deviation is three. Thus, Verbal Scale subtest means in almost all instances fell more than two standard deviations below the mean. Performance Scale subtest means were somewhat higher (see Table 13) but were still very low, even if one considers that Hispanics as a group tend to obtain lower scores than Anglos.

The pattern of frequency distribution of subtest scaled scores also is informative. Most of the LEP students had low scores on the Information subtest, with no student scoring above a five. This subtest, usually the most difficult one for Hispanics, is believed to be culturally biased (Cummins, 1984). However, such extremely low scores also may be indicative of limited experience in general or of low intelligence. Although not as low as the Information subtest, low scores are also evident on the other Verbal Scale subtests, with no student obtaining a score of 10 or above on any of the subtests. Even on Performance Scale subtests, very few students obtained scores of 10 or above.

**Stanford-Binet Intelligence Scales.** The Stanford-Binet was the second most frequently administered intelligence test for LEP MR students. It has the advantage of being appropriate for either very young or severely retarded children because test items begin at a mental age of 2 years, 0 months. Although the Stanford is generally viewed as a verbally loaded test, the subtests are largely nonverbal in nature at the preschool level. Table 14 provides a breakdown of the range of mental ages in six month intervals reported for the 15 LEP students who were administered this test. Nine of the students (60%) obtained mental ages between 4 years, 0 months and 4 years, 11 months; the mean mental age was 4 years, 0 months. Since the mean chronological age at time of referral was 7 years, 4 months, a large discrepancy existed between age at referral and mental age on this test. It is apparent that most, if not all, of these children obtained IQ scores that were well within the retarded range, with some falling within the moderate to severe range of retardation.

This district is serving a wide spectrum of LEP MR children, some with moderate to severe levels of retardation and others with only mild levels of retardation. Assessment data found in student records indicated that students met IQ eligibility criteria for classification as mentally retarded. However, given the paucity of Spanish language or bilingual assessments, the accuracy of the classification cannot be confirmed.

**Peabody Individual Achievement Test (PIAT).** The PIAT was the individual achievement test most commonly administered to LEP MR students in this district. Table 15 shows the range of grade standard scores obtained by these students in mathematics, reading recognition and spelling. More scores fell above 70 on this test than was the case on the WRAT. In fact, on the reading recognition subtest, 13 of 23 students obtained standard scores that were above 70. Similar results also were obtained for spelling, and grade standard scores were above 70 for 13 of 24 students. In math, this was true for 7 of 24 subjects. Table 16 shows the ranges of grade percentiles that were obtained in

**Table 12**  
**Means and Standard Deviations of WISC-R Verbal**  
**Subtest Scaled Scores of LEP MR Students**

Subtest	LEP MR students ( <u>n</u> = 37)	
	Mean	Standard deviation
Information	2.23	1.39
Similarities	3.12	2.23
Arithmetic	3.70	2.14
Vocabulary	3.37	1.98
Comprehension	4.48	2.16
Digit span	3.42	2.50

**Table 13**  
**Means and Standard Deviations of WISC-R**  
**Performance Subtest Scaled Scores**  
**of LEP MR Students**

Subtest <sup>a</sup>	LEP MR students ( <u>n</u> = 39)	
	Mean	Standard deviation
Picture completion	4.70	2.10
Picture arrangement	2.93	1.98
Object assembly	4.93	2.86
Coding	4.82	2.25

<sup>a</sup> Information on the block design subtest was not available.

**Table 14**  
**Stanford-Binet Mental Ages of LEP MR Students**

Mental age range	LEP MR students ( <u>n</u> = 15)		
	#	(%)	Cumulative (%)
2-0 to 2-6	1	(6.7)	(6.7)
2-7 to 2-11	0	(0.0)	(6.7)
3-0 to 3-6	3	(20.0)	(26.7)
3-7 to 3-11	2	(13.3)	(40.0)
4-0 to 4-6	4	(26.7)	(66.7)
4-7 to 4-11	5	(33.3)	(100.0)

Note. Mean mental age = 4 years, 0 months.

**Table 15**  
**Peabody Individual Achievement Test Grade Standard Scores  
of LEP MR Students**

PIAT grade standard score	LEP MR students ( <u>n</u> = 61)					
	Math		Reading recognition		Spelling	
	#	(%)	#	(%)	#	(%)
Below scale	9	(14.8)	9	(14.8)	6	(9.8)
65 - 69	7	(11.5)	1	(1.6)	5	(8.2)
70 - 79	4	(6.4)	7	(11.4)	5	(8.0)
80 - 89	3	(4.8)	5	(8.0)	5	(8.1)
90 - 99	0	(0.0)	0	(0.0)	3	(4.8)
100- 109	0	(0.0)	1	(1.6)	0	(0.0)
Not administered	38	(62.3)	38	(62.3)	37	(60.7)

**Table 16**  
**Peabody Individual Achievement Test Grade Percentiles**  
**of LEP MR Students**

Grade percentiles	LEP MR students ( <u>n</u> = 61)					
	Math		Reading recognition		Spelling	
	#	(%)	#	(%)	#	(%)
Below scale	7	(11.5)	7	(11.5)	6	(9.8)
1 - 9	8	(13.0)	8	(13.0)	7	(11.4)
10 - 19	3	(4.8)	1	(1.6)	4	(6.5)
20 - 29	0	(0.0)	1	(1.6)	1	(1.6)
30 - 39	0	(0.0)	0	(0.0)	1	(1.6)
40 - 49	0	(0.0)	0	(0.0)	1	(1.6)
50 - 55	0	(0.0)	1	(1.6)	0	(0.0)
Not administered	43	(70.5)	43	(70.5)	41	(67.2)

the areas of mathematics, reading recognition and spelling. All but two students obtained scores which were between the first and 39th percentiles.

While not all LEP MR students performed poorly on achievement tests, their scores, in most cases, did fall well below the mean. These scores reflect grade norms rather than age norms. Since most of the LEP MR students had been retained at least once, a more appropriate, and stricter, measure of their achievement is obtained through the use of age standard scores and percentiles. Age scores would be slightly lower than grade scores because these students are older than their grade level peers.

**Wide Range Achievement Test (WRAT).** The WRAT (Jastak & Jastak, 1978) is a commonly used individual screening instrument for reading (word recognition), spelling and mathematics. LEP students who were administered this test scored at or below the 19th percentile in reading and at or below the 32nd percentile in spelling (see Table 17). These scores are all well below average and reflect a markedly low level of achievement.

These low scores can be seen through frequency distributions of standard scores (see Table 18). A score of 85 is one standard deviation below the mean; a score of 70 is two standard deviations below the mean. Only one score above 85 was obtained on each subtest. Six of 22 students obtained scores above 70 on the reading and mathematics subtests. Performance on the spelling subtest was slightly better, with nine of 22 students obtaining scores above 70. Although the WRAT was administered only to 33% of the LEP students, these scores provide further evidence these children were low achievers.

**Adaptive behavior measures.** Results from the several adaptive measures (the Vineland Social Maturity Scale, the ABIC, and the AAMD Adaptive Behavior Scales) generally confirm an inadequate level of adaptive behavior for these LEP students. No information was available, however, about the language used by the interviewer. Since adaptive behavior scales usually are completed by interviewing the parent or guardian, it would be important to have a bilingual interviewer, when necessary. This is an especially important consideration since Spanish is the primary language of the majority of these families.

The adaptive behavior test that was the most commonly administered was the Vineland Social Maturity Scale (Doll, 1965). Results of this test are shown in Table 19. The mean age equivalent score was 5 years, 0 months, but scores ranged from the two year level to the seven year level. Seventy-five percent of the students obtained age equivalent scores that were below the six year level. Thus, it seems apparent that these LEP MR students as a group did not show age-appropriate levels of adaptive behavior. In Table 20, however, the data are presented somewhat differently through social quotients which are equivalent to standard scores and IQs. Of the 28 students who were administered the Vineland, 12 obtained social quotients of 70 or above. By definition, all students labeled MR should have adaptive behavior scores below 70, or scores more than two standard deviations below the mean. It is possible that a second adaptive behavior scale, such as the ABIC, if given, yielded scores low enough to qualify students. Investigations of whether this is a common practice are recommended.

**Table 17**  
**Wide Range Achievement Test Percentiles**  
**for Reading and Spelling Skills**  
**of LEF MR Students**

Percentiles	LEP MR students ( $n = 61$ )			
	Reading		Spelling	
	#	(%)	#	(%)
Below scale value	2	(3.3)	3	(4.9)
1 - 5	14	(22.9)	10	(16.4)
6 - 10	4	(6.6)	8	(13.1)
11 - 15	0	(0.0)	0	(0.0)
16 - 20	2	(3.3)	0	(0.0)
Over 20	0	(0.0)	1	(1.6)
Missing data	7	(11.5)	6	(9.8)
Not administered	32	(52.5)	33	(54.1)

Table 18

**Wide Range Achievement Test Reading, Spelling and  
Mathematics Standard Score Frequency Distributions  
for LEP MR Students**

Standard scores	LEP MR students ( $n = 61$ )					
	Reading		Spelling		Mathematics	
	#	(%)	#	(%)	#	(%)
Below scale value	1	(1.6)	1	(1.6)	2	(3.3)
49 and under	0	(0.0)	0	(0.0)	1	(1.6)
50 - 59	7	(11.5)	4	(6.6)	1	(1.6)
60 - 69	9	(14.7)	9	(14.7)	13	(21.3)
70 - 79	3	(4.9)	5	(8.2)	3	(4.9)
80 - 89	3	(4.9)	3	(4.9)	2	(3.3)
90 and above	0	(0.0)	1	(1.6)	1	(1.6)
Missing data	6	(9.8)	6	(9.8)	6	(9.8)
Not administered	32	(52.5)	32	(52.5)	32	(52.5)



**Table 19**  
**Vineland Social Maturity Scale Age Equivalents**  
**for LEP MR Students**

Age range (in years/months)	LEP MR students ( $\underline{n} = 32$ )		Cumulative (%)
	#	(%)	
2-7 to 2-11	2	(6.3)	(6.3)
3-0 to 3-6	1	(3.1)	(9.4)
3-7 to 3-11	4	(12.5)	(21.9)
4-0 to 4-6	3	(9.4)	(31.3)
4-7 to 4-11	4	(12.5)	(43.8)
5-0 to 5-6	8	(25.0)	(68.8)
5-7 to 5-11	2	(6.3)	(75.0)
6-0 to 6-6	4	(12.5)	(87.5)
6-7 to 6-11	3	(9.4)	(96.9)
Above 6-11	1	(3.1)	(100.0)

Note. Mean = 5 years, 0 months.

**Table 20**  
**Vineland Social Maturity Scale Social Quotients**  
**for LEP MR Students**

Social quotient	LEP MR students ( $\underline{n} = 61$ )	
	#	(%)
40 - 49	1	(1.6)
50 - 59	6	(9.8)
60 - 69	9	(14.6)
70 - 79	9	(14.8)
80 - 89	3	(4.8)
Not administered or missing	33	(54.1)

**Bender Visual Motor Gestalt Test.** The Bender Visual Motor Gestalt Test (Koppitz, 1964) provides additional evidence to suggest that the LEP students in this study were low functioning. This test measures the ability to reproduce geometric figures which are presented on cards one at a time. Errors are detected using the Koppitz Scoring System. The LEP students made between 4 and 21 errors in drawing the geometric figures. More than 8 errors indicates poor performance even for young children; 29 of 39 LEP students made 10 or more errors on this test.

### **Summary**

A number of tests were administered to the LEP MR students in this study. In the majority of cases, results from the WISC-R and Stanford-Binet indicated that the IQ scores of these children were below 70, as required for MR placement. In fact, a large proportion of these students were moderately or severely retarded, based upon IQ scores. However, since there was a lack of recent language proficiency data, it is suspected that many of these LEP children were assessed in their weaker language. Because of this element of contamination, their actual level of IQ is unknown. Subjects also showed a low level of adaptive behavior, the other criterion for MR placement. Achievement tests indicated a low level of achievement in reading, spelling and mathematics consistent with the low IQ scores. But once again, if these children had been receiving content instruction in Spanish, the use of English tests such as the WRAT could underestimate their true level of functioning in academic areas. Finally, results from the Bender, a nonverbal test of perceptual-motor development, lend support to the premise that these students are retarded.

### **Placement**

The Admission, Review, and Dismissal Committee is charged with reviewing the written findings of the comprehensive individual assessment and with determining whether the student meets eligibility criteria for special education services. The committee determines the handicapping condition, selects the most appropriate placement, and specifies the amount of time the child will spend in special education, in regular education, and in related services such as speech, physical or occupational therapy, or counseling if these services are found to be necessary. Data were analyzed to answer the following questions:

1. What are the primary and secondary handicapping conditions of Hispanic LEP MR students at the time of their initial placement in special education?
2. What are the recommended placement settings?
3. What is the amount of time recommended for special education and related services?

### **Handicapping Condition**

The primary handicapping condition of all 61 LEP subjects, during the 1982-83 school year, was mental retardation. However, some of the children had been classified under different special education categories at initial placement. Others were classified as MR with a secondary handicapping condition. A total of 45 children had always been classified as MR, with 16 (35%) of these having a communication disorder as a secondary handicapping condition. Eight children had initially been classified as speech or language handicapped, one had been initially found to be learning disabled, and seven had other classification combinations.

### **Placement Settings and Time in Special Education**

Table 21 reports the types of placement settings to which LEP students were assigned. Students were most frequently placed in self-contained classrooms; the next most used placement was the resource classroom. There were a number of other special settings to which students were assigned, but very infrequently. Because of the special nature of these settings, (i.e., residential or special day schools) it is likely that students assigned to these instructional arrangements were the most severely handicapped.

Information concerning the number of hours per week that LEP students received special education instruction is presented in Table 22. These data should be interpreted with caution, since information was available for only 16 of 61 students. Of these 16 students, only three were receiving as much as six hours of instruction per day in special education; on the other hand, all but three were assigned to special education classes for more than half of the school day (four hours or more). School districts usually place learning disabled students in resource settings for one or two hours (Ortiz et al., 1985). The fact that the MR students in this study were in special education classes for a greater number of hours may be an indication that these children are more severely involved. Unfortunately, with data for only 16 of 61 students, no conclusions are possible.

**Table 21**  
**Placements Recommended for LEP MR Students**

Setting	LEP MR students ( <u>n</u> = 61)	
	#	(%)
Self contained classroom	18	(29.5)
Resource classroom	14	(22.9)
Regular classroom	13	(21.3)
Special campus	1	(1.6)
Homebound	1	(1.6)
Hospital class	1	(1.6)
Community center	2	(3.3)
Non-public school, day program	1	(1.6)
Non-public residential school	1	(1.6)
Missing	9	(15.0)

**Table 22**  
**Number of Hours Per Week in Special  
Education Recommended for  
LEP MR Students**

Hours/week	LEP MR students ( <u>n</u> = 47)	
	#	(%)
15	3	(6.4)
20	3	(6.4)
22	2	(4.3)
25	2	(4.3)
27	2	(4.3)
28	1	(2.1)
30	3	(6.4)
Missing	31	(66.0)

## V

**DISTRICT POLICY ANALYSES**

District policies related to referral, assessment, and placement were analyzed to aid in interpretation of the findings presented in the preceding sections. Federal and State policies and guidelines regulating the provision of special education services were extrapolated from the Education for All Handicapped Children Act of 1975 (P.L. 94-142) and from the State Department's Policies and Administrative Procedures for the Education of Handicapped Students (Texas Education Agency, 1979, 1980). The district procedures manual was the source of additional policy information. Data describing district practices were obtained from student eligibility folders. The specific foci of all analyses were referral, assessment and placement policy and practice related to the district's programs for mentally retarded students. Variables investigated included mandates governing services, participants in the process, and the types of data gathered and considered from referral to placement of students. An overriding concern was the extent to which the needs and unique characteristics of the limited English proficient student were addressed and considered.

The policy analyses that follow are excerpted in part from a previous HMRI report of characteristics of learning disabled students (Ortiz et al., 1985). A review of district policies specific to services for the mentally retarded revealed that district policies and practices related to identification, assessment, and placement do not vary by handicapping condition, with a few exceptions (e.g. definitions and specific eligibility criteria).

**Referral Policy and Practice**

In Texas, referral is a component of the first stage in the child-centered educational process, child identification. A referral may be made by the parent, physician, community agencies, other appropriate individuals, groups, organizations, or school personnel. Referrals may also be the result of district-wide testing or screening provided by the district for all students.

The following questions guided analysis of policies governing referrals of LEP students to special education:

1. What policies govern the referral process?
  - a. What are the steps involved in referral of students to special education?
  - b. Who must be involved at each step according to policy? Who is actually involved?

c. What types of data are required to be gathered for consideration by referral committees?<sup>1</sup>

2. How do referral policies address the needs and characteristics of culturally/linguistically different students?

### **Prereferral**

There are no state or federal policies specific to prereferral intervention. The participating district reiterated state policy that referral data gathered include evidence of previous educational efforts and strategies as well as the results of those efforts. In addition, however, if the student being referred was in kindergarten or first grade, documentation was required to show that: (a) the student had been given sufficient opportunity for learning, (b) the curriculum had been adjusted to meet the individual needs of the student, and (c) the teaching strategies and their results were adequately documented to support the need for a referral. Campus personnel were held responsible for all remediation prior to the referral to special education.

The district's policy manual reflected desired professional practices for the referral of students to special education. However, there was a lack of policy on the needs of linguistically different students whose problems might be related to second language acquisition, cultural, economic, or other differences rather than to handicapping condition(s). There were no guidelines for documenting how these variables were accommodated to improve student achievement prior to referral.

### **Educational Liaison**

The referred student was assigned an educational liaison, designated by the principal, who became responsible for the collection of all data to be reviewed and considered in the referral process. The educational liaison was also required to participate in referral and ARD committee deliberations and decisions. The liaison was further charged with serving as the student's advocate until a decision was made regarding the student's program by referral or ARD committee action.

The educational liaison was to present the following information to the referral committee:

1. The student's current educational status, including attendance records, grades and other achievement data and classroom observations;
2. Previous educational efforts and strategies provided for the student and the results of those efforts;
3. Documentation of recent vision and hearing screenings, including available reports from evaluations conducted by vision and hearing specialists as follow-up to the screenings;

<sup>1</sup> Referral committees are no longer required under Texas law.

4. An updated health history or documentation from recent medical evaluations identifying health or medical conditions that affected the student's current educational achievement; and

5. Information reported or provided by the parents.

If the referred student was in a regular education program, the regular education staff member who identified the student as possibly having a need for special services was designated the educational liaison. In such instances, the educational liaison, who was the person requesting a change of placement or program for the child, simultaneously had to serve as the student's advocate, a role requiring considerable objectivity. This could create a potential conflict of interest, especially if the most appropriate alternative is to continue to serve the student in the regular classroom.

There were no policies requiring that the educational liaison have expertise related to language minority students. Such expertise is important in order for the advocate to be able to help evaluate data in light of unique student attributes including linguistic and cultural characteristics. Ideally, then, the educational liaison should be a bilingual professional. In the absence of such personnel, the liaison could be an English as a second language specialist. The individual selected must be able to ensure that the student's best interests and educational needs are addressed appropriately by referral committees. Being an effective child advocate requires more than simply being bilingual. The child advocate must also have training specific to the needs of the handicapped.

### **Referral Committees**

When the educational liaison had gathered immediately available information, a referral committee meeting was held to review the data. The committee was to include members who were knowledgeable of the full range of placement alternatives, as this committee decided on possible educational alternatives for each student considered. In this district, membership on this committee included (a) the educational liaison, (b) the administrator or a designated representative, (c) representatives of the regular support staff, knowledgeable in regular program resources; and (d) the special education teacher if needed. Representatives of the regular support staff could include health services, counselors or bilingual or compensatory program personnel. To insure the inclusion of special program personnel, such participation should be required.

The following alternatives were available if the committee felt that special education would not be the most appropriate placement for the student: (a) adjusting the student's educational program, (b) returning the student to the regular classroom with supportive teaching recommendations, or (c) referring the student for consideration by other special programs. The referral committee was charged with determining whether a student's identified learning problems were directly attributable to environmental factors, language proficiency, and/or lack of educational opportunities, as opposed to possible physical, mental, or emotional handicaps. The referral committee was required to report its decision in writing, signed by all members, to the initial referral source within 30 working days from the time the initial referral was received.

**Referral Committee Membership.** In practice, the number of members who were present at a given referral meeting ranged from three to seven, with the most common number being three or four. The mean number of members attending meetings was 4.25. Table 23 shows a breakdown of the types of personnel who participated in these meetings. Administrators and regular classroom teachers were present at the majority of meetings, with counselors present at more than two-thirds of these meetings. Special education teachers and educational liaisons were present less frequently, but nonetheless attended half of the meetings. The educational liaison, however, is likely to have been a regular classroom teacher as teachers are most frequently the referral agent. The presence of other persons such as speech therapists, parents, ESL teachers, and specialists in hearing impairment occurred infrequently.

District policy required that parents be notified of the referral and that the data gathered for consideration by the referral committee include information from parents. However, parents were present at only two referral committee meetings. It is critical for parents to participate on these committees to provide school personnel with their perspectives on how their child functions in the home environment, his or her current and past level of social, linguistic and developmental competence, etc. How these perspectives are obtained by district personnel, and the effects of parent participation at this stage of the special education process, should be studied. Of interest is whether participation increases or decreases the number of students referred for comprehensive assessment.

There was no documentation to suggest that bilingual education teachers or other language program personnel attended referral meetings. However, this may have been because teachers were identified only as instructional personnel with no designation of program assignment. Because only LEP children were included in this study, participation of special language program personnel is critical. Even in cases where children have been exited from bilingual education, former bilingual teachers could provide valuable information to the referral committee regarding past academic achievement in Spanish and/or English.

### **Assessment Policy and Practice**

These questions provided the framework for analysis of assessment policies:

1. What policies govern the assessment process?
  - a. What types of data must be gathered to determine the presence of a handicapping condition?
  - b. Who conducts the assessments?
2. What special provisions are made for assessing language minority students?



Table 23

## Representation on Referral Committees for LEP MR Students

Persons	LEP MR students ( <u>n</u> = 61)					
	Present		Not present		Missing data	
	#	(%)	#	(%)	#	(%)
Administrators	49	(80.3)	5	(8.2)	7	(11.5)
Regular education teachers	46	(75.4)	8	(13.1)	7	(11.5)
Counselors	41	(67.2)	12	(19.7)	8	(13.1)
Special education teachers	31	(50.8)	22	(36.1)	8	(13.1)
Educational liaisons	31	(50.8)	23	(37.7)	7	(11.5)
Speech therapists	5	(8.2)	45	(73.8)	11	(18.0)
Parents	2	(3.3)	46	(75.4)	13	(21.3)
ESL teachers	2	(3.3)	49	(80.3)	10	(16.4)
Hearing impaired program personnel	1	(1.6)	53	(86.9)	7	(11.5)
Other <sup>a</sup>	4	(6.4)	57	(93.6)	0	(0.0)
Bilingual education teachers	0	(0.0)	50	(82.0)	11	(18.0)
VH teachers	0	(0.0)	54	(88.5)	7	(11.5)

<sup>a</sup> This category included LD teacher, previous year's teacher, registered nurse, and social worker.

All assessment policies were obtained from the district's special education policy manual. The descriptions of practice are found on pages 20-36 of this report.

### **Comprehensive Individual Assessment**

Assessment of a student to determine eligibility for special education took place at the request of the referral committee. The purpose of the comprehensive individual assessment was to determine the presence or absence of a physical, mental, or emotional disability which may contribute to a student's educational need; determine the presence or absence of a significant educational deficit requiring special education instructional services; and to identify specific learning competencies in instructional and related service areas. This district used the three stage model of assessment described in state regulations, and a list of data sources relevant to each stage was included in its policy manual.

Stage I assessment included consideration of the student's functioning in at least five areas: linguistic, physical, emotional/behavioral, sociological and intellectual. Data sources included formal assessment instruments, parent interviews, pupil's cumulative records, results of district achievement tests, informal testing, etc. The policy manual indicated that language assessment could include information from the bilingual program's administration of the Language Assessment Scales or the Basic Inventory of Natural Language (Herbert, 1980).

Stage II assessment was intended to ascertain whether a significant educational deficit existed. A significant need was defined as a level of performance (developmental, academic, or behavioral) that was determined by local professional judgment to be significantly lower than that demonstrated by other students in the district or by other children of comparable age. The minimum assessment of educational performance levels consisted of individually administered, norm-referenced measures of educational performance designed to assess specific areas of educational functioning, and examples of the students' class work. A written report was required, indicating the presence or absence of a significant educational need, including the nature and severity of the need.

Assessment at Stage II was the responsibility of certified diagnostic personnel. Such personnel included, but were not limited to, educational diagnosticians, school psychologists, associate school psychologists, counselors, and/or teachers, provided each person conducted only those assessments s/he was qualified to administer.

Stage III of the assessment model consisted of the identification of learning competencies in the areas of educational need. The purpose of this stage of assessment was to provide the ARD committee with recommendations that could be used in formulating the Individual Educational Program. Assessment of learning competencies was to include criterion-referenced or competency-based measures or information. A written report was developed which described student competencies relative to identified areas of need and suggested instructional and/or learning strategies to improve and maintain the student's present competencies.

District 2 required that specific parts of the assessment of educational performance be summarized on the IEP. These included results of the Stage III assessment, an IQ score which was not more than three years old, an achievement score which was not more than three months old, and a measure of language dominance based on Language Assessment Scales scores or a parent interview. Unlike the intelligence and achievement data, no time interval was specified for the language dominance score or for interview information.

**Eligibility for MR classification.** In the case of students considered for placement in programs for the mentally retarded, the report of individual assessment was to include the degree of mental retardation. This report could include a description of the functional implications of the handicapping condition for the educational process. Eligible students were to demonstrate functioning levels of more than two standard deviations below the mean on all individually administered tests of verbal ability, performance/nonverbal ability, and adaptive behavior. Appendix A lists tests approved by the Texas Education Agency for assessments in these areas.

**Timelines.** The timelines for assessment were consistent with state policy. This district did not specify a completion date for the assessment per se, but required that the ARD meet within 30 school working days of the date of referral for comprehensive assessment. The results of the comprehensive assessment were to be available for consideration by the ARD committee.

**Personnel responsible.** The major responsibility for the gathering and synthesis of assessment data was given to the associate school psychologist or educational diagnostician, although some parts of the assessment (e.g., sociological or achievement testing) could be carried out by other personnel (e.g., visiting teachers or teachers). However, these individuals had to be qualified to conduct the required testing, interviews, or observations.

### **Placement Policy and Practice**

In analyzing district policies and practices related to special education placement of language minority students, the following questions were considered:

1. What policies govern special education placements?
  - a. Who must be involved on placement committees according to policy? Who is actually involved?
  - b. What adaptations are required when the student being considered is limited English proficient?
  - c. What level of agreement exists for placement committees which consider Hispanic LEP MR students?

## Placement Committees

The assessment process culminated in a meeting of the Admission, Review, and Dismissal (ARD) Committee. This committee determines whether the child is handicapped and whether s/he needs specialized instructional services. Committees were required to make decisions regarding referred students within 30 working days, from the time of the referral committee report. The specific responsibilities given to campus level Admission, Review, and Dismissal committees included the following:

1. Review all available data including written reports of the three stages of the individual assessment, current information provided by the parent and/or the student, and information, records, and work samples provided by school personnel;
2. Determine whether the student meets eligibility criteria because of a handicapping condition, in combination with a significant educational deficit;
3. Designate the primary handicapping condition and any secondary handicapping conditions, if appropriate;
4. Prepare a written summary of the committee's discussions and recommendations, including dates and signatures;
5. Recommend the appropriate instructional placement for the student;
6. Determine the amount of time the student will spend in special education, related services programs, or in other placement options;
7. Assure that students are not placed in special education solely because of a different language background, culture, lifestyle, or lack of previous educational or cultural opportunities;
8. Initiate development of an individualized educational program or modify existing IEPs; and
9. Conduct annual reviews of student progress and determine whether students continue to be eligible for special education services.

The requirement that assurances be provided that students were not placed in special education because of individual differences of language, culture, etc., was the only policy that was specific to language minority students.

**ARD membership.** The placement decision is to be made by a team of individuals who are knowledgeable about the student, competent in interpretation of evaluation results, aware of placement options, and who have the authority to allocate personnel and resources to meet the unique needs of students. State policy required that the Admission, Review, and Dismissal Committee include, at a minimum, a representative of (a) instruction; (b) appraisal; (c) administration; (d) the child's parent; and (e) the child, if appropriate. Specialized personnel were required to be present when the student being considered was auditorally or visually handicapped. This district's

policy also required participation of the educational liaison and that at least one participant be a representative of special education.

In this district, the most likely number of members on an ARD committee was six, with committees of four or five members also occurring frequently. No committee had less than three, nor more than eight, members. Table 24 shows that of all school personnel, administrators and appraisal staff were present most often at ARD meetings. It is common practice for an administrator, usually the principal or his designate, to chair these meetings; his or her presence is therefore necessary, as is that of a representative of appraisal who interprets test results for the committee. A representative of instruction, usually the regular or special education teacher attended these meetings only slightly less often. The special education teacher was present at about 50% of these meetings and the speech therapist was present at 10% of the meetings. It is unclear to what extent special program personnel, such as bilingual educators, were involved on these committees.

One of the problems in interpreting these data was the lack of specificity about the positions held by ARD committee members. It was not possible to determine, for example, whether the representative of instruction was a regular education or a bilingual education teacher because the program assignment was not given. Especially in the case of LEP students, it would be important for at least one member to be able to speak Spanish and to be culturally and instructionally sensitive to the unique needs of LEP Hispanic children, and/or to interpret proceedings for parents if necessary. A bilingual teacher or staff person could also help defend a LEP student against unwarranted special education placement.

**Level of agreement among committee members.** Decisions were almost always agreed to by all ARD committee members. Of a total of almost 300 signatures, there were only three instances which involved disagreement concerning committee decisions, and in no case did the dissenter change the final decision of the committee. This high level of agreement is an interesting finding given the frequently cited problems associated with serving language minorities in special education. This finding suggests that signatures indicate that participants accept the group decision. While this is appropriate, it is also important to record issues, areas of disagreement, or concerns, as these may be critical in evaluating student progress, at annual reviews, for example. Such data are also important in guiding reevaluations such as those which are required every three years by federal and state law.

### Conclusions

Because this was a descriptive study which reported information from only one school district, inferential analyses could not be conducted, and thus it is not appropriate to draw far-reaching conclusions from the findings. Available data do suggest that the subjects in this study are, in fact, mentally retarded. The district's operating policy appears to be to classify LEP children as mentally retarded when low scores across measures leave little doubt that the classification is appropriate. The existence of such a policy could also explain the small number of LEP Hispanic MR students found in the other two districts.

**Table 24**  
**Community and School Personnel Present at Initial ARD**  
**Committee Meetings for LEP MR Students**

Persons	Attendance at initial ARD (n = 61)					
	Present		Not present		Missing data	
	#	(%)	#	(%)	#	(%)
Administrators	53	(86.9)	5	(8.2)	3	(4.9)
Appraisal staff	52	(85.2)	5	(8.2)	4	(6.6)
Instructional representatives	48	(78.7)	10	(16.4)	3	(4.9)
Parents	48	(78.7)	11	(18.0)	2	(3.3)
Another person	37	(60.7)	18	(29.5)	6	(9.9)
Special education teachers	30	(49.2)	26	(42.6)	5	(8.2)
Educational liaisons	24	(39.3)	32	(52.5)	5	(8.2)
Speech therapists	10	(16.4)	47	(77.0)	4	(6.6)
Teachers of the hearing impaired	2	(3.3)	55	(90.2)	4	(6.6)
Vocational representatives	2	(3.3)	55	(90.2)	4	(6.6)

## VI

**RECOMMENDATIONS FOR POLICY, PRACTICE, AND RESEARCH**

The purpose of this report (Part II) was to describe characteristics of limited English proficient Hispanic students served in public school programs for the mentally retarded. This investigation is part of a larger study which also examined the characteristics of learning disabled and communication disordered Hispanic students. Many of the recommendations developed to guide service delivery for learning disabled populations [Part I] (Ortiz et al., 1985) are equally applicable to the mentally retarded. These recommendations, along with recommendations specific to MR populations, are summarized in the sections which follow.

**Prereferral and Referral Policy**

This study documented a high rate of retention prior to the referral of Hispanic students to special education. Subsequent placement in special education provided further evidence of their low academic achievement. To eliminate the possibility that language minority students are doing poorly in school because they have not been taught properly, assessment of causes of achievement problems should include a systematic examination of the teaching and learning environment. Understanding the nature of prior instruction is important in developing alternative strategies to improve achievement, in selecting assessment procedures, and in developing educational plans if the student is eligible for special education services. For LEP students, documentation of special language program placements is critical and should include information regarding the nature of any dual language instruction to which the student has been exposed.

Heller, Holtzman, and Messick (1982) recommend a two-phase evaluation process in which the first phase is examination of possible deficiencies in the learning environment. In phase one, evidence is collected to show that (a) schools are using curricula known to be effective for the student population being served; (b) the teacher has implemented the curriculum effectively for the student in question; (c) the child has not learned what has been taught; and that (d) when early problems were detected, there were efforts to locate the source of the difficulty and to take corrective measures. A referral for a comprehensive assessment, phase two, is appropriate when the child is unable to succeed even after the environment has been adapted and instruction has been carefully sequenced. Documentation of phase one of this assessment process provides a wealth of information for consideration by referral committees, as well as by assessment personnel if a comprehensive individual evaluation is recommended. Documentation of prior interventions also provides valuable data for development of an individual educational program if the student is eligible for special education services.

## Assessment Policy

Public Law 94-142 requires that tests and evaluations for the purpose of special education placement be conducted in the student's native language unless it is clearly not feasible to do so. Additionally, state education agencies must establish procedures to assure that (a) the assessment is multifaceted, (b) testing and evaluation procedures used to determine the presence or absence of a handicapping condition are nondiscriminatory, and (c) no single procedure is the sole criterion for determining special education eligibility. Appropriately implemented, these mandates would adequately safeguard the rights of language minority students who are potential candidates for special education services. However, despite the attention that has been given to issues related to assessment of minorities, limited progress has been made in the development of instruments or procedures which provide an accurate assessment of the true abilities of these students.

### **Native Language Assessment**

While state and district policy require that the assessment of students be conducted in their demonstrated dominant language, there is a lack of directives specific to the implementation of this mandate. Assessment of language competencies should be completed before a student is referred for a comprehensive assessment to eliminate the possibility that low functioning is the result of limited English proficiency. The results of such testing can also guide the assessor's decision about the language(s) of assessment, the tests to be administered, how the results will be interpreted, and finally, the recommendation for placement. State and local education policy should require that every language minority child receive a comprehensive language assessment in the native and the English language before being referred to special education. Assessment of language skills should reflect an understanding of current research related to language acquisition and should allow comparison of relative language proficiency in both the first and the second language.

**Evaluation of other abilities.** The strong language in P.L. 94-142 relative to assessment in the native language, and the manifest importance of native language evaluation to appropriate identification and placement, makes it clear that school districts have a specific responsibility to establish lack of feasibility in providing native language testing (R.C.S., nd). Evaluations conducted for the purpose of determining special education eligibility must be done by someone who is fluent in the child's language and who is trained in assessment of linguistically and culturally different students.

Given problems such as the lack of appropriate personnel or procedures, the "clearly not feasible" clause is open to wide interpretation by district personnel. State departments of education should establish criteria to determine when it is "clearly not feasible" to test a student in his/her native language. Local education agencies should, at a minimum, be required to document good faith efforts to find appropriate appraisal personnel. Such documentation could include the following:

1. Attempts made to locate and to contract services of bilingual assessment personnel;



2. Directories of available district personnel who can assist with testing;
3. Evidence that training has been provided for professionals, appraisal aides, or volunteers so that these individuals are more effective participants in the appraisal process;
4. Availability of a written affirmative action plan to recruit and to hire bilingual appraisal personnel to assure that language minority students have access to non-biased assessments.

Required reporting forms should include a statement justifying English-only assessments.

**Training.** The requirement that the handicapping condition be documented in the native language suggests that appraisal personnel must be bilingual. Given the lack of qualified bilingual examiners, institutions of higher education must act quickly to address this manpower shortage. Until bilingual assessment personnel are available, districts should explore alternatives such as identifying and training individuals who speak the relevant language to serve as interpreters in the assessment process to achieve more accurate assessments of LEP students. It must be stressed, however, that alternatives should be considered only after districts have exhausted all possibilities of obtaining the services of bilingual assessment professionals. The use of alternatives must be balanced by clear documentation that districts are actively working to hire or train appropriate personnel so as to prevent less ideal practices from becoming standard practices.

Because they comprise the majority of assessment personnel, monolingual assessors, like bilingual examiners, must receive training in the administration, scoring, and interpretation of tests and test scores for minority children, with a focus on gathering data that are valid, relevant, and best reflect students' true abilities. Assessment personnel should also be familiar with promising practices in the assessment of these students. School districts must show evidence that their appraisal personnel have been provided training specific to evaluation of language minority students before they can assess these students. The state department of education should develop minimum requirements for such training.

**Adaptation of test procedures.** Results should never be reported as valid indicators of a child's functioning level if the procedures under which tests were administered or scored violate the original standardization. Norms used in interpreting students' performance were developed under an established set of conditions; to change these conditions changes scores to an unknown extent. All psychoeducational reports should describe adaptations of accepted procedures, interpretations should be accordingly limited/modified, and the report should state that caution must be exercised in using reported results. Otherwise, school personnel and parents may grossly misinterpret scores because they are not properly explained by the examiner.

### Eligibility Criteria

State education agencies must develop special education eligibility criteria which are specific to language minority students. Determining eligibility for

language minority students is not as simple as determining that they meet criteria for special language programs (i.e., that they are limited English proficient) and then determining that they are also eligible for special education services. Criteria developed should assure that the child will not be placed in special education on the basis of performance in his/her weaker language. A LEP student should not be placed in special education unless evidence is presented that the handicapping condition exists in the primary language, not only in English.

When placement in programs for the mentally retarded is being considered, clear evidence must also be provided of low functioning related to adaptive behavior, both in and out of school. In the case of LEP students, it is unlikely that such evidence can be provided unless interviews with parents or guardians are conducted in the native language. Moreover, the norms or standards for judging adaptive behavior must be those of the child's family and ethnic or cultural group. Performance must be compared with that of peers of the same age who have had similar background experiences. Otherwise, there is danger that the child will be judged on the basis of his/her level of understanding of the white, middle class culture. As with language, behaviors are abnormal only if they are atypical of peers from the same cultural group and age.

### Decision-Making Committees

The emphasis of Public Law 94-142 is on the inclusion in the special education process of a variety of personnel who are skilled in interpreting available information and data derived from comprehensive evaluations. In addition, regulations also require that social and cultural background be evaluated and that these factors be ruled out as the causes of student problems. Committees must have access to individuals who can guide deliberations regarding language proficiency and other student characteristics which influence performance levels. A bilingual individual with expertise in the education of language minority students should participate on referral and placement committees.

### Referral Committees

Referral committee members serve as "gatekeepers" in special education. This committee must be able to screen away from special education those students whose problems may be related to linguistic or sociocultural variables, or to lack of opportunity to learn. Referral committees are also more likely to consider the range of alternative regular education programs available to students. ARD committees, created by special education legislation, naturally tend to emphasize the range of possible special education placements (Garcia, 1984).

State departments of education should require that districts use referral committees to determine whether a child is referred for a comprehensive assessment. A formal referral committee is no longer required by Texas law. While the elimination of this requirement is an effort to reduce the burden of paperwork and meetings, the cost effectiveness of this move is questionable. As indicated previously, the referral committee is the student's last opportunity to

be returned to the mainstream without special education intervention (testing, placement, instruction, etc.). Costs associated with the referral process are much less than those required to provide long-term special education services. Because some school districts use referral committees, the following recommendations are made.

**Parental participation.** There is no specific requirement that parents participate on referral committees. Parents must be notified of the referral; in most cases, parents also provide health-related and other information about the child's developmental history. While current policies allow additional membership at the discretion of the required members, and while this may be interpreted to include parents, parental participation at this level is rare. Yet, the information provided by parents about home and community environments is critical to distinguishing differences from handicapping conditions. In the case of students suspected of being mentally retarded, parental participation is critical. Parents can provide information about the child's out-of-school behavior and whether this behavior meets their expectations. Local policies should require parental participation at the prereferral and referral stages.

**Child advocates.** The concept of an advocate for the student in the referral process is important. To be effective in such a role, however, the educational liaison should be an individual who is objective, familiar with the student in a variety of contexts, including school and home, and who is knowledgeable about alternatives other than special education programs as well as procedures for the identification and placement of students in these programs. To safeguard the rights of students, the educational liaison or child advocate should not be the same person who made the referral.

#### **Admission, Review, and Dismissal Committees**

The ARD committee is charged with ensuring that identification and placement decisions are not made solely on the basis of factors related to linguistic differences and/or command of the English language. It is critical that ARD committees include members who are knowledgeable about linguistic issues and who are able to interpret assessment data, discuss eligibility and placement alternatives, and make recommendations that would be the most appropriate for the LEP student who is also mentally retarded. Federal and state policy should require that at least one member of the placement committee be proficient in the child's native language and possess expertise about the influence of linguistic, cultural, and other unique attributes on school and community performance.

**Assessment representative.** The impact of the social and cultural background cannot be effectively addressed unless someone with expertise in relating that background to the decisions being made is available to the placement committee. The assessment representative should be the same individual who conducted the comprehensive assessment and should have the requisite knowledge and experience to adequately interpret assessment data on LEP students.

**Other participants.** The ARD committee should include representatives from all programs in which the child is being served. Participation of such personnel will help assure that services are coordinated across programs and

that goals and objectives addressed by respective programs are consistent with the handicapping condition and other unique student needs. The position or role and the program assignment of all participants should be clearly identified on required forms. It is not sufficient to know that a person served as the representative of instruction to the ARD; it is equally important to know whether the individual represents regular education, bilingual education, migrant education, etc. Representation of such personnel will help assure that services are coordinated across programs and that goals and objectives addressed by respective programs are consistent with both the handicapping condition and other unique needs of the student.

### **Recommendations for Research**

Federal, state, and local education agencies should direct their efforts toward building a knowledge base from which theory and effective practices in serving limited English proficient, mentally retarded students may develop. The following are recommended lines of inquiry.

#### **Prevalence**

1. The small number of students identified as mentally retarded across the selected study sites supports the need for investigations which focus on the prevalence of mental retardation among Hispanics and other language minority groups. One focus of such investigations is to test the hypothesis that children who may have been identified as mentally retarded in the past are now being classified as learning disabled. Another focus is to examine reasons why districts fail to identify students in need of services and to evaluate the effectiveness of Child Find services for this population.
2. Prevalence studies should be designed to describe the characteristics of mentally retarded students classified by levels of language proficiency, rather than by ethnicity. Given the very limited information currently available on this population, it will be important for state departments of education, local school districts, and related education agencies to develop procedures for documenting and reporting handicapping conditions by language proficiency levels.
3. How prevalence rates vary by ethnic group membership, geographic region, demographic characteristics of school districts, and by availability of programs, personnel, and other resources should be investigated (Finn, 1982). Finn also suggests a need to study variance according to: (a) the availability of minority diagnostic and instructional staff; (b) policies and practices that demonstrate administrative support for the equitable treatment of ethno-linguistic minorities; (c) rural, urban, and suburban distinctions; and (d) the availability of alternative programs in which underachieving students can be served (Chapter I or compensatory education programs, for example).
4. Mental retardation from virtually all identifiable causes has a higher incidence in impoverished environments. This is the result of malnutrition, poor medical care, health hazards, etc. Long range approaches to the elimination of the "culture of poverty" as the root source of socio-psychological mental

retardation must be developed. Such approaches must be comprehensive in addressing social, economic, and other contributors to the total problem, including societal and institutional racism.

### **Prereferral**

Investigation of programs in which alternative instructional strategies are systematically implemented within the mainstream classroom for children experiencing academic failure may help reduce referral and special education placement rates. Of specific interest is the extent to which improvement in the quality of instruction in regular education, bilingual education or other special programs decreases MR placements and reduces disproportionate placement of language minority students in special education. Heller et al. (1982) also recommend monitoring of model programs which serve large numbers of minority and low income students and where prereferral strategies have resulted in placement rates lower than those projected by national or state prevalence figures.

### **Assessment**

1. Studies should be conducted to determine specific eligibility criteria for placement of students in programs for the mentally retarded. Of particular importance is the development of criteria for determining what should be considered normal adaptive behavior for culturally different individuals both in and out of school.

2. There is evidence which suggests that one reason for inappropriate classification of Hispanic students as mentally retarded is test bias, especially in the testing of children from non-English speaking homes and/or with different cultural backgrounds. Instruments and procedures appropriate for the assessment of LEP students in the native language must be developed. The development of instruments to verify the presence of mental retardation, including measures of intelligence and adaptive behavior, should be a priority. Research is also needed to evaluate the effectiveness of existing instruments including Spanish versions of intelligence or achievement tests.

3. The potential of instruments such as the Learning Potential Assessment Device [LPAD] (Feuerstein, 1979) which focus on how children learn or solve problems, rather than on a static measure of intellectual potential, seems worthy of examination. Instruments such as the LPAD establish a more direct link between assessment and instruction and represent a significant shift away from traditional assessment procedures. Such a shift is important, since there currently appears to be little adaptation of assessment procedures when a student is limited English proficient.

### **Summary**

Studies of the prevalence of handicapping conditions among Hispanics indicate that the prevalence of mental retardation is decreasing among this population and that there is a trend toward under-identification of mentally retarded students in public school programs. The most cogent finding in this study of identification, assessment, and placement of limited English proficient

students in programs for the mentally retarded was that districts seem to identify the more severely involved students while mildly retarded students are probably not being adequately served. While safeguarding schools against litigation, this practice may deprive handicapped students of specialized services critical to achieving their maximum potential. Continued investigation of these and related issues is encouraged.

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## Appendix

### Tests Approved by Texas Education Agency for Assessment of Mental Retardation

If mental retardation is suspected, assessment instruments must be selected from the following list approved by the Commissioner of Education:

#### Verbal Scales

Stanford-Binet  
 Wechsler Adult Intelligence Scale (Verbal)  
 Wechsler Intelligence Scale for Children (Verbal)  
 Wechsler Intelligence Scale for Children-Revised (Verbal)  
 Wechsler Intelligence Scale for Children-Revised (System of Multicultural Pluralistic Assessment Norms, Estimated Learning Potential)  
 Wechsler Preschool and Primary Scale of Intelligence (Verbal)  
 McCarthy Scale of Children's Abilities

#### Performance Scales

Arthur Point Scale  
 Columbia Mental Maturity Scale  
 Hiskey-Nebraska  
 Leiter International Performance Scale  
 Ravens Progressive Matrices  
 Stanford-Binet  
 Wechsler Adult Intelligence Scale (Performance)  
 Wechsler Intelligence Scale for Children (Performance)  
 Wechsler Intelligence Scale for Children-Revised (Performance)  
 Wechsler Intelligence Scale for Children-Revised (System of Multicultural Pluralistic Assessment Norms, Estimated Learning Potential)  
 Wechsler Preschool and Primary Scale of Intelligence (Performance)  
 McCarthy Scale of Children's Abilities

#### Adaptive Behavior Scales

Adaptive Behavior Inventory for Children  
 Vineland Social Maturity Scale

Professional judgment must be exercised in interpreting these instruments in accordance with guidelines provided in the test manuals.

Permission for the use of other tests on a pilot or experimental basis may be obtained through the Commissioner of Education. Suggestions for additions to this list may be submitted to the Commissioner of Education for approval.