

# ED308686 1989-00-00 Delivering Special Education: Statistics and Trends. ERIC Digest #463.

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## Delivering Special Education: Statistics and Trends. ERIC Digest #463.

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In 1975, when the U.S. Congress passed the Education for All Handicapped Children Act (EHA) guaranteeing a free and appropriate education to all children in the United States between the ages of 3 and 21, it was estimated that more than 8 million handicapped children would need services. This digest presents the most recent statistics regarding who is being served, how that population is changing, and what trends are affecting special education today.

## HOW ARE HANDICAPPED CHILDREN DEFINED FOR PURPOSES OF THIS ACT?

Handicapped children are defined by the Act as mentally retarded, hard of hearing, deaf, orthopedically impaired, other health impaired, speech and language impaired, visually handicapped, seriously emotionally disturbed, or children with specific learning disabilities who, by reason thereof, require special education and related services. (20 U.S.C. 1401 [a][1]). This definition establishes a two-pronged criterion for determining child eligibility under the Act. The first is whether the child actually has one or more of the disabilities listed. The second is whether the child requires special education and related services. Not all children who have a disability require special education; many are able to and should attend school without any program modification.

## WHO ARE THE STUDENTS SERVED?

According to the Tenth Annual Report to Congress on the Implementation of the Education of the Handicapped Act (1988), 4,421,601 children with handicaps were served during the 1986-1987 school year. Of these, 94.2% were served under EHA. This was an increase of 1.2% over the 1985-1986 data. The number and percentage of each handicapping condition served under Chapter 1 of the Education and Consolidation Improvement Act--State Operated Programs (ECIA-SOP) and EHA Part B are shown in the accompanying table.

The most significant changes from the 1985-1986 school year were a 2.9% increase (53,758) in students with learning disabilities, a 10.8% increase (9,715) in children who were multiply handicapped, a 9.4% decrease (-5,484) in children with other health impairments, a 3.2% decrease (-21,553) in children with mental retardation, and a 17.2% decrease (-366) in children who were deaf and blind.

## HANDICAPPING CONDITION, NUMBER, PERCENTAGE

Learning Disabled, 1,926,097, 43.60%;  
Speech or Language Impaired, 1,140,422, 25.80%;

Mentally Retarded, 664,424, 15.00%;  
Emotionally Disturbed, 384,680, 8.70%;  
Multihandicapped, 99,416, 2.20%;  
Hard of Hearing and Deaf, 66,761, 1.50%;  
Orthopedically Impaired, 58,328, 1.30%;  
Other Health Impaired, 52,658, 1.20%;  
Visually Handicapped, 27,049, .61%;  
Deaf-Blind, 1,766, .04%.

## WHERE ARE THESE STUDENTS RECEIVING THEIR SPECIAL EDUCATION?

During the 1985-1986 school year, the majority of children and youth with handicaps received special education and related services in settings with nonhandicapped students. Over 26% received special education primarily in regular classes. An additional 41% received special education and related services primarily in resource rooms, while 24% received special education and related services in separate classes within a regular education building. These three settings accounted for over 92% of the placements; thus, most students with handicaps were being educated in buildings with their nonhandicapped peers. The remaining children and youth were educated in public separate day school facilities (3.8%), private separate day school facilities (1.6%), public residential facilities (1.0%), private residential facilities (0.4%), correctional facilities (0.3%), and homebound or hospital environments (0.8%).

## HOW MANY TEACHERS ARE NEEDED?

During 1985-1986, 291,954 special education teachers reportedly served children with handicaps. This was an increase of 6% over the 1984-1985 school year. Furthermore, an additional 27,474 teachers were needed to fill vacancies, especially in the areas of learning disabilities, mental retardation, emotional disturbance, and speech or language disabilities. These four categories accounted for 87% of all teachers needed. Approximately 10% of the teachers were needed for the categories of other health impaired, hard of hearing and deaf, multihandicapped, orthopedically impaired, visually handicapped, and deaf-blind.

## WHAT STUDENTS WITH HANDICAPS ARE DROPPING OUT?

Office of Special Education Programs data for the 1985-1986 school year showed that 56,156 handicapped students aged 16 through 21 dropped out of high school before completing their education, at an average of 321 students a day. This number represented about 26% of the total existing population of handicapped students. The figure reflects an estimate of those who were actually known to have dropped out and does not include youth who simply stopped coming to school or whose status was unknown.

Age data for students with handicaps who drop out of high school show that 75% of those accounted for are dropping out between the ages of 16 and 18, at a rate of a quarter of the population per year. The remaining 25% drop out between the ages of 19 and 21. Students with learning disabilities are more inclined to drop out of school than those from other disability groups; 26,644 such students dropped out of school during the 1985-86 school year. Taken together, the number of students with emotional disturbances and mental retardation who drop out approximately equals the number of students with learning disabilities who drop out.

## WHAT ARE THE TRENDS IN SPECIAL EDUCATION TODAY?

Two important trends are apparent in special education today. First, children with handicaps are receiving special education services earlier. This trend reflects a recognition that a child's ability to learn in school depends on skills he or she learned as a toddler, for example, communicating with others or exploring the environment. Since handicaps can delay the acquisition of these skills, early special education is needed to provide a foundation for future learning. To identify these young children and treat their disabilities, special educators are working closely with hospitals, medical personnel, therapists, and social workers. Family services are being provided to help parents understand their child's handicap and its treatment, and preschool education is being provided in homes and preschool educational centers. For many children, early educational treatment of handicapping conditions can reduce or eliminate the need for intensive special services later.

Second, although in the past many people with handicaps were considered unable to contribute to society through gainful employment, today it is recognized that even individuals with severe handicaps are willing and able to work. Schools are assessing the abilities and talents of students with handicaps and matching these abilities with potential occupations. More training in vocational skills is being provided to students with handicaps, and programs are being provided to assist them in the transition from school to community life and work.

It is likely that emphasis on serving the needs of exceptional children will continue and the information derived from current research will improve special educational services even more in the future.

### RESOURCES

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