

Individuals with Disabilities are People, First – Intervene and They will Learn

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Abstract

A major concept in special education is “people first language.” It connotes that the person’s name should precede the disability. For example, it is unacceptable to say “an autistic child.” It is more acceptable to say “a child with autism.” However, some authors in the field question the need for using a label at all; just call the child by name, for example, “Robert.” The personal perspective of people first language emphasizes the individual’s value, individuality, dignity and capabilities. This is quite a contrast to the historical perspective when individuals with disabilities were viewed as people to be pitied, feared, or ignored. Today, individuals with disabilities look for accurate portrayals that present a respectful, positive view of them as active participants of society. They are concerned about such matters as appropriate education, health care, and employment. Coinciding with the language emphasis, major advances are being made in identifying and implementing intervention strategies for accommodating individuals with disabilities in the schools. They range from strategically rearranging seats in the classroom to providing opportunities for cooperative learning, from orchestrating peer support to gaining parental participation, from teaching self-help skills to addressing transition competencies, and from mastering the social studies to understanding mathematical concepts. Facilitating the people first language and providing appropriate interventions in the instructional process make for a powerful combination in meeting the educational needs of individuals with disabilities. This paper provides a review of evidence-based literature and offers numerous strategies and tips for enabling persons with disabilities to be effective learners. The ultimate expectation is that

educating individuals with disabilities will become an exciting, beneficial experience for the student, the teacher, and others involved in the process.

Introduction

At one point in our history people thought of individuals with disabilities as “misfits.” Later, they were thought of as the “handicapped.” Today, the case is made that they are “people,” first and happen to have a disability. The contention is that if they are viewed as people first and provided proper instructional interventions, they will learn.

Accommodations in the affective domain are crucial for learning. Feelings and learning go together like hand-in-glove. What a person feels is what the person is sure to learn.

The affective domain describes learning objectives that emphasize a feeling tone, an emotion, or a degree of acceptance or rejection. Affective objectives vary from simple attention to selected phenomena to complex but internally consistent qualities of character and conscience. They include attitudes, appreciations, values, and emotional sets or biases. According to Kirk (n.d.), the affective domain can significantly enhance, inhibit or even prevent student learning. It includes factors such as student motivation, attitudes, perceptions and values. In working with students, teachers can increase their effectiveness by considering the affective domain in planning courses, delivering lectures and activities, and assessing student learning.

Of course teachers do not impact the affective domain in isolation. Kirk (n.d.) states that teachers naturally emphasize the cognitive domain; after all, students think and learn with their brains. The cognitive domain involves knowledge and the development of intellectual skills. Though not explicitly addressed in this presentation, teachers also

impact the psychomotor domain when they include physical movement, coordination, and use of motor-skill areas in their teaching (Bloom's taxonomy, n.d.). Thus, an overarching framework for viewing people first language and learning interventions for persons with disabilities might include the following tenets:

- Accommodate the affective domain to ensure academic achievement through the cognitive domain;
- Insure that impacting the affective domain includes the manner in which students deal with emotions, such as feelings, values, appreciation, enthusiasm, motivation, and attitudes;
- Insure that impacting the cognitive domain involves imparting knowledge and the development of intellectual skills;
- Understand that people with disabilities need first to feel that teachers and service providers care about them as a person; and
- Then, implement appropriate instructional interventions that will enable students to master academic skills.

To further establish a foundation and make the case for this paper, attention is given to the use of derogatory and demeaning names used among persons in general as well as persons with disabilities, advent and use of people first language, educational goals for persons with disabilities, interventions of promise in teaching persons with disabilities, and what to expect when people first language and intervention for teaching and learning come together.

Derogatory names used with ethnic groups

In spite of the vast numbers of appropriate names to describe people, society has tolerated the use of many inappropriate names, especially for certain ethnic groups and persons with disabilities. Even lists of derogatory ethnic slurs have been compiled that are, or have been, used in the English language. Some of the most common slurs or terms extracted from Wikipedia (n.d.), along with their meaning or use are presented in Table 1.

Table 1
Selected derogatory names used with ethnic groups

Ethnicity	Slur words	Meaning/Use
African descent	Aunt Jemima	Kisses up to whites
	Colored	Typically, disrespectful
	Jim Crow	Until civil rights movement
	N word	Offensive term
	Sambo	Derogatory
	Tar Baby	Offensive
	Uncle Tom	Panders to whites
European descent	Cracker	Derogatory
	Honky	Offensive
	Peckerwood	Poor whites
East Asian descent	Chinaman	Discrimination
	Oriental	Mildly offensive

As noted, African Americans have had to endure many slur words and derogatory names. Fortunately, many of the terms appear to be history, until a deep seated emotion is aroused.

Best and worst names college students have been called

Names affect feelings and emotions of students of all ages. In a survey conducted by the authors, college students revealed the best and worst names they had been called, as reported in Table 2. One can almost sense the emotion attached to the good names as well as to the bad names.

Table 2

The best and the worst names college students have been called

• Undergraduate students (N = 15)		
-Best names:	Sweetie, etc. (8)	“Real Name” (6)
	Beautiful (4)	Intelligent (3)
	Smart (3)	Pretty Girl, etc. (2)
-Worst names:	Bit- - (5)	Lil Man/Girl, etc. (5)
	Slow (3)	Shortie, etc. (3)
	Ugly (2)	Retarded (2)
		Love, etc. (4)
		Baby, etc. (3)
		Teacher’s Pet (1)
		Stupid (4)
		Lazy (2)
		Whore (2)
• Graduate students (N = 20)		
-Best names:	Best Person, etc. (6)	Beautiful (5)
	“Real Name” (3)	Smart (3)
	Great Mother, etc. (2)	Goddess, etc. (2)
-Worst names:	Bit- - (6)	Miss Mean, etc. (4)
	Fatty (2)	Goofy, etc. (2)
	Liar (1)	Miss Know It All (1)
		Intelligent (3)
		Sunshine (3)
		Sweet, etc. (2)
		N word, etc. (3)
		Fuss Box (1)
		Slut (1)

Both undergraduate and graduate students liked being called such names as Sweetie, their “Real name,” Beautiful, Intelligent, and Smart. They varied in their report of the worst names they had been called, except Bit-- was common. Here, the message should be clear. Schools and society should curtail use of the “bad” names and frequently use more appealing names. Students will definitely feel better about themselves and be in a better position to learn.

Demeaning names associated with individuals with disabilities

Language is very powerful, particularly when it comes to persons with disabilities. Foster (n.d.) states that words have a way of empowering, inspiring, motivating, and uplifting others. On the other hand, words have great power to harm, exclude and oppress individuals with disabilities from greater society. Therefore, it has become necessary to change the language and the way of referring to individuals with disabilities to avoid further oppression and segregation from full inclusion and citizenship in society.

Many labels used to define people with disabilities have extremely negative connotations and are simply misleading. Using inappropriate labels contributes to negative stereotypes and devalues the person being described. Foster (n.d.) indicates that terms such as invalid, victim, wheelchair-bound, defective, mute, crippled, special person, and patient should be avoided when speaking and writing to or about people with disabilities. Other demeaning names and terms for persons with disabilities that should not be used include:

- Ain't all There
- Blind as a Bat
- Crazy
- Cripp
- Deaf and Dumb
- Dumb as Dora
- Dummy
- Dunce
- Fool
- Four Eyes
- Handicapped
- Idiot
- Imbecile
- Loose Screws
- Mongoloid
- Rode Short Bus to School
- Special

People first language on the horizon

In 1975, Congress enacted the Education of All Handicapped Children Act (EAHCA), or Public Law 94-142. Its purpose was to open up the schools to all students with disabilities and make sure that these students had the chance to benefit from special

education. When EAHCA was reauthorized in 1990, it became the Individuals with Disabilities Education Act (IDEA), or P.L. 101-476. Two major changes in terminology had occurred, abandonment of the term handicap in favor of the term disability and “people-first” language (Turnbull, Turnbull, & Wehmeyer, 2010).

People first language recognizes that individuals with disabilities are, first and foremost, people. It emphasizes each person’s value, individuality, dignity and capabilities. Different sources (Snow, n.d.; Texas Council for Developmental Disabilities, n.d.) yielded information for Table 3 which provides guidance on what terms to use and which ones are inappropriate when talking or writing about people with disabilities.

Table 3

Terms to use/not to use when addressing persons with/without disabilities

People first language	Inappropriate language
* People/individuals with disabilities	x The handicapped; Disabled
* People/individuals without disabilities	x Normal people; Healthy people
* People with intellectual disabilities	x The mentally retarded; Retarded
* A person with autism	x The autistic
* A person who has a learning disability	x He/she is learning disabled
* A person who is deaf	x The deaf
* A person who is deaf and cannot speak	x Is deaf and dumb
* A person who uses a wheelchair	x A person who is wheelchair bound
* He/she is of small or short stature	x A dwarf or midget
* Reserved parking for people with disabilities	x Handicapped parking
* He/she receives special education services	x He/she is special ed

As noted, people first language specifies the person or individual before specifying the disability. Inappropriate language often uses the disability to specify the person or group.

Who were persons with disabilities? Historically, people with disabilities were regarded as individuals to be pitied, feared or ignored. They were portrayed as helpless victims, repulsive adversaries, heroic individuals overcoming tragedy, and charity cases who depended on others for their well being and care. But much has changed lately. New laws, disability activism and expanded coverage of disability issues have altered public awareness, knowledge and response (Texas Council for Developmental Disabilities, n.d.).

Who are persons with disabilities, now? For the most part, they are ordinary individuals with disabilities who are seeking to live ordinary lives. They are moms, dads, sons, daughters, sisters, brothers, friends, neighbors, coworkers, students, and teachers. About 54 million Americans, one out of every five individuals, have a disability. But noteworthy is the fact that their contributions enrich communities and society as they live, work, and share their lives. They are now focusing attention on tough issues that affect quality of life, such as accessible transportation, housing, affordable health care, employment opportunities, and an appropriate education (Snow, n.d.; Texas Council for Developmental Disabilities, n.d.).

People first language is more than a fad or political correctness. It is an objective way to acknowledging, communicating, and reporting on disabilities. It eliminates generalizations, assumptions, and stereotypes by focusing on the person rather than the disability. In fact, one might ask if the disability is even relevant and needs to be mentioned when referring to individuals with disabilities (Texas Council for Developmental Disabilities, n.d.). Some facts to know and points to consider regarding people first language are:

- The Education of All Handicapped Children Act (EAHCA) of 1975 was reauthorized in 1990 as the Individuals with Disabilities Education Act (IDEA);
- “People first language” has become the accepted language when referring to persons with disabilities;
- People have diseases, impairments, and disabilities, but they are not the sum product of their medical conditions; and
- People have paraplegia, Down syndrome, attention deficit hyperactive disorder, learning disabilities, and visual impairments.

Language change is good but there are still challenges

Today, the challenge is to provide individuals with disabilities access to an appropriate education and assure that they benefit from it. Special education is outcome-based. The four outcomes are: equality of opportunity, full participation, independent living, and economic self-sufficiency. IDEA establishes six principles that govern students’ education (Turnbull, Turnbull, & Wehmeyer, 2010). The principles are:

- Zero reject - prohibits schools from excluding any student with a disability;
- Nondiscriminatory evaluation - requires schools to evaluate students fairly;
- Appropriate education - requires individually tailored education for each student;
- Least restrictive environment - to educate students alongside those without disabilities to the maximum extent appropriate;
- Procedural due process - safeguards for students, including right to sue in court; and
- Parental and student participation - requires schools to collaborate with parents and adolescent students in designing and carrying out special education programs.

Heward (2009) provides future challenges and needs for professional in the field of special education that include:

- To close the research-to-practice gap;
- To increase the availability and intensity of early intervention and prevention programs;
- To help students with disabilities transition from school to adult life; and
- To improve the special education-general education partnership.

A footnote is needed at this point. It is not enough for IDEA to simply identify students with disabilities and to specify the services they have a right to receive.

Implementation of each of the six principles and meeting the other challenges, have unresolved issues. For example, for minorities with disabilities, overrepresentation/underrepresentation is very much a concern.

Interventions of promise

Children with disabilities often have memory deficits, problems with learning and applying helpful strategies, and difficulty applying what they already know to new tasks. They need interventions tailored to focus on various steps in the learning process. For example, it was found that in mathematics interventions that focused on basic skills were the most effective. More specifically, direct instruction appeared to be most effective for learning basic math facts, the use of computer assisted-instruction was beneficial when students needed to be motivated to practice certain kinds of problems, and interventions of shorter duration tended to be more effective than those implemented over a longer period of time (Kroesbergen & Van Luit, 2003).

Watson (Accommodations, n.d.) provided a checklist of strategies to help with the inclusion classroom. Strategies to use with persons with disabilities include:

- Seating them within close proximity to the teacher or the teacher's assistant;
- Eliminating as much clutter as possible and keeping distractions to a minimum;
- Providing clarifications and reminders as regularly as needed;
- Ensuring that classroom expectations are clearly understood as well as the consequences for inappropriate behaviors;
- Allowing additional "wait" time as needed; and
- Providing opportunities for cooperative learning.

It is very important to intervene as much as possible to support students at risk. Interventions may be in the form of peer support, modification of assignments, increase of one-to-one time, having working contracts, thinking in concrete terms and providing hands-on tasks, having tests done orally, capitalizing on seating arrangement, and increasing parental involvement. In teaching, if intervention strategies are working, continue to use them. If they are not working, plan for new interventions that will help students succeed (Watson, Intervention, n.d.).

For students with significant disabilities, a broad range of school experiences are especially valuable for increasing functional life skills, peer relationships, self-determination, and a sense of belonging (Swedeen, Carter, & Molfenter, 2010). Then, there are strategies for helping students with disabilities transition from school to work or postsecondary education. Kellems and Morningstar (2010) recommend that the teacher:

- Organize a peer-mentoring group in high school;
- Use video modeling to teach social skills and work-related skills;

- Use picture technology with students who are nonreaders;
- Have students use a word processor; and
- Implement community-based instruction.

As a process for accommodating persons with disabilities, or at risk of disabilities, school districts are increasingly using a more formal and systematic prereferral process called responsiveness to intervention (RTI). The idea of RTI is to provide early intervention in the form of scientifically validated instruction to all children in the school whose performance suggests they are at risk for school failure. The process involves universal screening and several levels or tiers of increasingly intensive instructional interventions before referral for assessment for special education eligibility (Heward, 2009). There are three levels or tiers of intervention to this strategy which are as follows:

- **Tier 1** - Primary intervention in the general education classroom (All students are provided evidence-based curriculum and instruction. At-risk students who continue to struggle are moved to Tier 2);
- **Tier 2** - Secondary intervention (Those struggling receive intensive small-group supplemental tutoring using a research-validated program. Those making satisfactory progress are considered remediated and return to original classroom environment; and
- **Tier 3** - Tertiary intervention (This is special education – a multifaceted evaluation is conducted to determine disability classification and special eligibility).

According to Heward (2009), RTI is designed to achieve the following purposes and benefits:

- Provide immediate instructional assistance to the child and teacher;
- Reduce the frequency of identifying children for special education whose problems do not relate to a disability;
- Prevent minor problems from worsening that would eventually require special education;
- Strengthen teachers' capacity to effectively intervene with a greater diversity of problems;
- Prevent the costly and time-consuming process of assessment for special education eligibility by solving the original problems;
- Provide IEP teams with valuable baseline data for planning and evaluating special education and related services, for students who are referred and found eligible for special education; and
- Reduction in the overidentification of minority students.

The RTI model appears to have great potential. It may very well be the wave of the future.

Outcomes when PFL and ITL come together

An overarching goal in education is to enable students to become independent and self-sufficient individuals who are able to manage their behaviors without the assistance of others (Rafferty, 2010) and to plan and prepare for the rest of their lives. This planning and preparation is especially important for students with disabilities. Kellems and Morningstar (2010) report that currently, youth with disabilities are less likely than their peers in the general population:

- To enroll in postsecondary programs (45% vs. 53%);

- To be employed after leaving school (57% vs. 66%);
- To have a checking account (46% vs. 68%); and
- To have a credit card (28% vs. 50%).

Additional findings by Heward (2009) on other key factors for persons with disabilities show that:

- Of those who complete high school, 51% receive standard diploma; and
- For overall adjustment and success in society, adults with disabilities face numerous obstacles in day-to-day living.

These data indicate the importance of better preparing students for the transition process (Kellems, & Morningstar, 2010).

Zambo (2010) found that the support adolescents receive from their friends contributes to their confidence, self-esteem, and resiliency, and that resilient adolescents set high goals for themselves and persist to meet their goals even when encountering setbacks. The position of this paper is that person first language (PFL) and appropriate interventions in teaching and learning (ITL) are crucial in developing these key attributes for success. Educators are called upon to implement the strategies and make education fly; to spread their wings and make education touch the sky. PFL and ITL may well be the wind beneath educators' wings as they make education truly beneficial for persons with disabilities. IDEA supports this position. When Congress amended IDEA in 1997 it required state and local education agencies to report outcomes. The reasoning behind outcome-based accountability is that improving education results for students with disabilities is an "essential element" of the nation's policy of ensuring equal opportunity,

full participation, independent living, and economic self-sufficiency (Turnbull, Turnbull, & Wehmeyer, 2010).

Summary and recommendations

Summary

Recognizing individuals with disabilities as people first must be fully embedded in the educational system and society in general. It costs nothing, but means so much to individuals with disabilities. When they are made to feel good about themselves, the stage is set for effective learning. It is time for America to get real in accommodating its citizens with disabilities. Make PTL and ITL come together for individuals with disabilities and all education will be elevated to a new level of effectiveness.

Recommendation – (Follow the 10 Commandments of PFL/ITL)

The concept of “ten commandments” has been used in various arenas. In biblical days commandments were given to Moses for a blessed life. In old school music the Moonglows and Keith Sweat presented commandments for a splendid love life. Here, commandments provided by the Archdiocese of Chicago (2000) for welcoming and interacting with persons with disabilities and general information from the Texas Council for Developmental Disabilities (n.d.) are fashioned into commandments for PFL/ITL.

Thus, the 10 Commandments for PFL/ITL are:

1. Never equate a person with a disability, such as referring to someone as retarded;
2. Emphasize abilities not limitations. For example, say a man walks with crutches, not he is crippled;
3. Treat a person with a disability as you would anyone else;
4. Address the individual, not an assistant, interpreter or family member;

5. Speak at a normal rate, without exaggeration or overemphasis;
6. To facilitate communication, keep paper and pencils available. Use them when helpful;
7. Allow people to do things for themselves when they want to. Do not always "do for" the person;
8. Offer assistance, but wait until the offer is accepted;
9. Respect the individual's personal space and auxiliary aids; and
10. Relax. Don't be embarrassed to use accepted, common expressions such as "See you later," "Did you hear about this" that seem to relate to the person's disability.

Educators and all involved in providing services to persons with disabilities are urged to follow the 10 Commandments of PTL/ITL. Thus, the authors end this paper with its title. Individuals with disabilities are people, first. Intervene and they will learn.

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