Introduction & Historical Underpinnings of Special Education:

An e-Binder Portfolio

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SED 567: Introduction & Historical Underpinnings of Special Education

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June 28, 2022

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Historical and Legal Information Surrounding Special Education

Special education has only come into existence in the last 50 years.

- 1930s: advocacy groups of parents whose children had special needs

- 1950s: laws provided teacher training for working with deaf, hard-of-hearing, or intellectually disabled children

- 1960s: funding provided for special education students

- 1970s:

    o 1973: Rehabilitation Act of 1973: granted civil rights to people with disabilities and required accommodations in schools

    o 1975: Education for all Handicapped Children Act (EHA) guaranteed and enforced the right to free, appropriate education for all children with disabilities. This was a result of the investigation into Willowbrook (Brock, 2022).

- 1997: Individuals with Disabilities Education Act (IDEA)

    o FAPE (Free and Appropriate Education) in the least restrictive environment (Brock, 2022)

    o IDEA replaced EHA

    o Centered around the idea of IEPs (Individualized Education Plans)

    o Introduced ITPs (Individualized Transition Plans) for students moving into adulthood

    o Updated about every 5 years, latest update in 2004

- 504 plan (Brock, 2022), falls under the Rehabilitation Act

- 2001 and 2004: No Child Left Behind Act (NCLB)

    o Further accountability, technological resources, funding for special education

All Star Staff (2018, March 6). A Brief History of Special Education in the United States. All Education Schools.com. https://www.alleducationschools.com/blog/history-of-special-education/

The Constructs of "Normal" and "Atypical" Behaviors (Ages 4-8)

Normal development occurs when developmental milestones are met around the expected age. Atypical development can refer to children who meet them either earlier or later or don't meet them at all (LD Online, 2022). Following are some examples of typical/atypical behaviors (Wisconsin Dept of Health Services, Nd.).

Typical	Atypical
• Likes doing new things	• Ignores other children
• Creative with make-believe	• Doesn't respond to people outside of family
• Can sing a song or say a poem	• Speaks unclearly
• Tells stories	• Doesn't use "me" and "she" correctly
• Names some colors and numbers	• Can't retell a favorite story
• Understands the idea of counting	• May lose skills they once had
• Remembers parts of a story	• Doesn't follow 3-part commands
• Understands "same" and "different"	• Shows no interest in make-believe or interactive games
• Plays board or card games	• Can't jump in place
• Hops and stands on one foot up to 2 seconds	• Has trouble scribbling
• Catches a bounced ball most of the time	• Withdrawn and not active
• Pours, cuts with supervision, mashes own food	• Responds superficially or not at all to others
• Wants to please friends	• Doesn't show a wide range of emotions
• Agrees with rules	• Doesn't know the difference between real and pretend
• Likes to sing and dance	• Doesn't talk about daily activities
• Shows sympathy for others	• Doesn't use plural or past tense properly
• Can tell what's real and what's pretend	• Doesn't draw pictures
• Counts 10 or more things	• Easily distracted, trouble focusing
• Can print some letters or numbers	• Can't brush teeth, wash, and dry hands, get dressed without hel
• Copies a shape	
• Knows about things used every day, like money and food	
• May be able to skip	
• Uses a fork and spoon	
• Uses toilet	
• Swings and climbs	
• Shows independence from family	
• Pays attention to friendships and teamwork	
• Describes experiences, feelings	

Be sensitive to what seems like atypical behavior but may be due to environmental and cultural differences – such as eye contact, speaking to adults or taking initiative (LD Online, 2022).

New Academic Vocabulary and Definitions

Child Find: IDEA mandates that school districts identify, locate, and evaluate *all* children (ages birth-21) with disabilities. This includes early intervention services and works to ensure FAPE for all students (Wright and Wright, 2019).

CSE (Committee on Special Education): known outside of NYS as the IEP Team. The team that convenes to create and monitor a student's IEP plan.

Due Process: Procedural safeguards that protect the rights of the parent/guardian and the student under IDEA (Brock, 2022).

Functional Behavioral Assessment (FBA). FBA involves systematically observing the child to determine why a behavior occurs (i.e., its purpose or function). This information is used to replace the child's inappropriate behaviors with more desirable and appropriate behaviors (Howard and Landau, 2010).

LRE (Least Restrictive Environment): Implemented by IDEA, schools are required to provide education for students in the least restrictive environment, meaning in regular classrooms in their neighborhood schools, with nondisabled children, to the maximum extent appropriate (Brock, 2022).

People-First Language: terminology used when speaking of individuals with disabilities which names the person first, and the disability second. An example would be: An individual who has a hearing impairment, rather than a hearing-impaired individual (The Iris Center, Nd.).

Prior Written Notice (PWN): IDEA stipulates parents must be notified, in advance, in writing, and in their native language, of any changes to their child's IEP plan. This would include evaluation or placement changes, among other possible changes (Brock, 2022).

Procedural Safeguards: The legal document that the school must give parents of children with exceptionalities every year, that outlines their rights regarding placement, changes to the IEP, and due process (Brock, 2022).

Social Model of disability: the social model moves away from the medical model, in which the focus is on the individual and their disabilities, and focuses instead on the barriers, societal or physical, that bars individuals with disabilities from equal opportunities (Crabtree, 2013).

> **Impairment**: an injury, illness, or other congenital condition that will affect an individual's appearance or will limit their abilities.

> **Disability**: the loss or restriction of opportunities to move in society at an equal level. It is caused by a society that doesn't take into consideration the restrictions some individuals may have.

> **Affirmation Model:** a person's impairments are seen as a core part of their being and experience. This embraces the whole self and moves further away from perceptions of impairment as a misfortune.

Stay put provision: the last agreed upon IEP is the one that stays intact until a new agreed upon IEP is developed (Brock, 2022)

Transition services and **transition services coordinator** prepares students with an IEP for the transition from high school to adulthood, starting at the age of 16 (Brock, 2022)

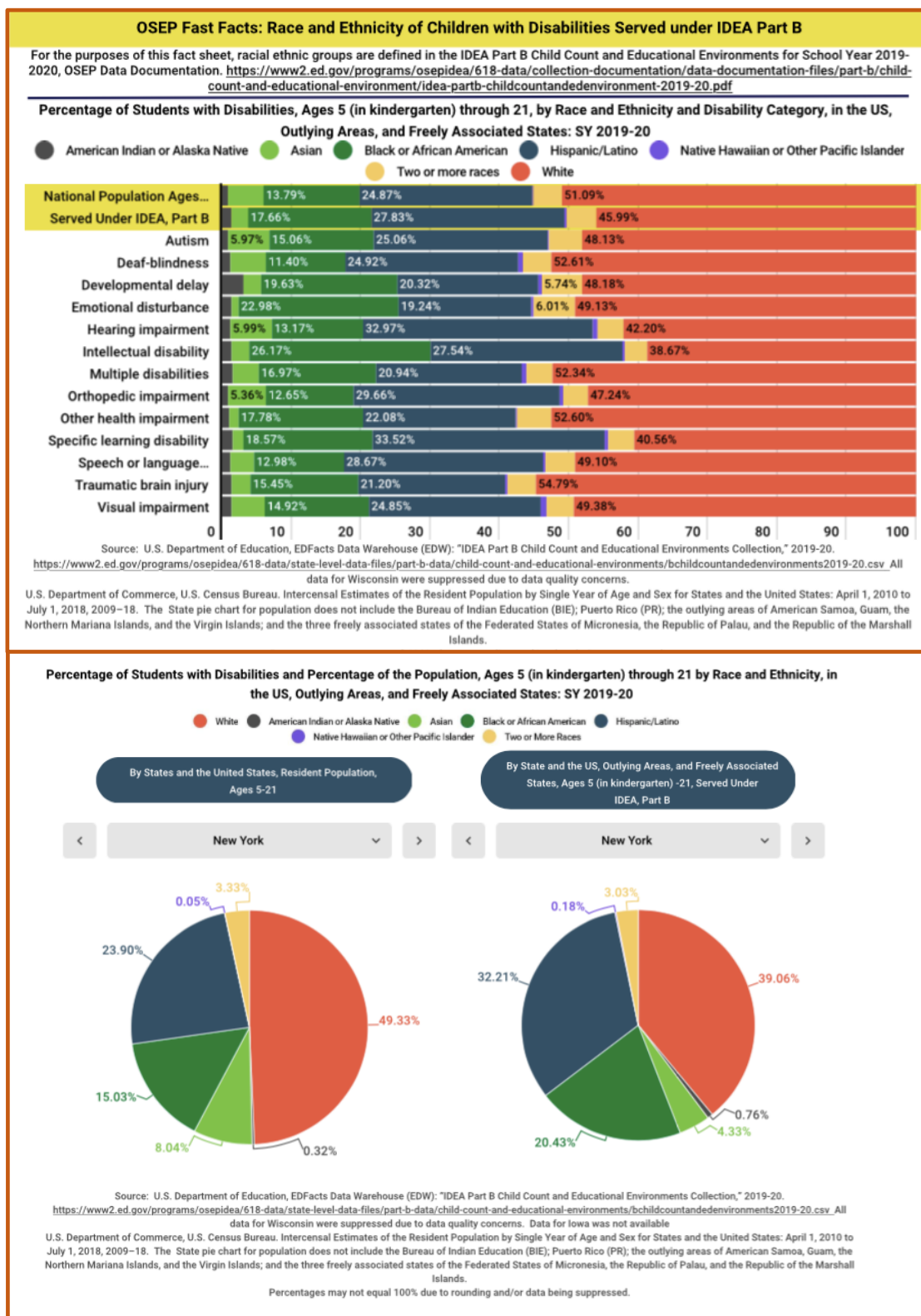# Example of Two Disabilities and their Impact on the Educational Setting

Cerebral Palsy: Cerebral palsy is in the orthopedic impairment category. It is a group of disorders that affects the brain (cerebral) and muscles (palsy is weakness of muscles), resulting in difficulties with movement, balance, and motor control. Cerebral palsy manifests in a wide variety of ways - a person may barely have any control of movements, and be in a wheelchair with lifetime support, or may simply walk with a little difficulty, but have no other problems. There is no cure for cerebral palsy, but interventions like leg braces, wheelchairs, surgery, and speech, occupational, and physical therapy can help with managing symptoms. CP is caused by abnormal brain development or damage in utero or during birth (congenital, about 85-90% of cases), or by brain damage in the early years (acquired CP) (CDC, 2022).

Impact on educational setting: physical comfort will be a major issue, and accommodations will vary depending on the severity. You may want to try different sitting arrangements: sitting on the floor or on a table. Students will need to change positions often to prevent muscle tension and pain. Students may have poor motor skills and need help holding objects, or may have assistive technologies in play (again, depending on the severity). Muscle fatigue is common, so allow students to rest as needed. Students may be in a wheelchair, in which case accommodations would need to be made in the classroom to ensure comfort and accessibility (Connor McCagg, Forum).

Dyslexia: Dyslexia is a learning disorder that involves troubles with decoding – that is, the process of reading a word - identifying speech sounds and learning how they relate to letters and words. People with dyslexia have normal intelligence and usually have normal vision. They can do well in school with a tutor or specialized education program. Dyslexia may not be diagnosed before school age, but some early symptoms may include late talking, slow to acquire new words, mixing up sounds in words or mixing up similar-sounding words, difficulty remembering letters, numbers or colors, or difficulty with rhyming. Once the child enters schools, teachers will be able to pick up the difficulty with decoding (Connor DeSantis, Forum).

Impact on educational setting: Self-esteem can be a big issue for children with dyslexia, especially if there is a delay in their diagnosis, so teachers would do well to keep that in mind. Additionally, there are assistive technologies that can be helpful – like audiobooks, text-to-speech software, dyslexia-friendly fonts, or typing with large fonts. Classroom materials like visual schedules, colored strips for marking text, notes given in advance, assigning reading buddies, or allowing extra time may all help a student with dyslexia thrive in the classroom (Dyslexia Resource, 2022).

Ethnic Prevalence Rates in Special Education

OSEP Fast Facts: Race and Ethnicity of Children with Disabilities Served under IDEA Part B

For the purposes of this fact sheet, racial ethnic groups are defined in the IDEA Part B Child Count and Educational Environments for School Year 2019-2020, OSEP Data Documentation. https://www2.ed.gov/programs/osepidea/618-data/collection-documentation/data-documentation-files/part-b/child-count-and-educational-environment/idea-partb-childcountandedenvironment-2019-20.pdf

Percentage of Students with Disabilities, Ages 5 (in kindergarten) through 21, by Race and Ethnicity and Disability Category, in the US, Outlying Areas, and Freely Associated States: SY 2019-20

Legend: American Indian or Alaska Native · Asian · Black or African American · Hispanic/Latino · Native Hawaiian or Other Pacific Islander · Two or more races · White

Category	Asian	Black or African American	Hispanic/Latino	Other	White
National Population Ages...	13.79%	24.87%			51.09%
Served Under IDEA, Part B	17.66%	27.83%			45.99%
Autism	5.97%	15.06%	25.06%		48.13%
Deaf-blindness	11.40%	24.92%			52.61%
Developmental delay	19.63%	20.32%	5.74%		48.18%
Emotional disturbance	22.98%	19.24%	6.01%		49.13%
Hearing impairment	5.99%	13.17%	32.97%		42.20%
Intellectual disability	26.17%	27.54%			38.67%
Multiple disabilities	16.97%	20.94%			52.34%
Orthopedic impairment	5.36%	12.65%	29.66%		47.24%
Other health impairment	17.78%	22.08%			52.60%
Specific learning disability	18.57%	33.52%			40.56%
Speech or language...	12.98%	28.67%			49.10%
Traumatic brain injury	15.45%	21.20%	54.79%		
Visual impairment	14.92%	24.85%			49.38%

Source: U.S. Department of Education, EDFacts Data Warehouse (EDW): "IDEA Part B Child Count and Educational Environments Collection," 2019-20. https://www2.ed.gov/programs/osepidea/618-data/state-level-data-files/part-b-data/child-count-and-educational-environments/bchildcountandedenvironments2019-20.csv All data for Wisconsin were suppressed due to data quality concerns.

U.S. Department of Commerce, U.S. Census Bureau. Intercensal Estimates of the Resident Population by Single Year of Age and Sex for States and the United States: April 1, 2010 to July 1, 2018, 2009–18. The State pie chart for population does not include the Bureau of Indian Education (BIE); Puerto Rico (PR); the outlying areas of American Samoa, Guam, the Northern Mariana Islands, and the Virgin Islands; and the three freely associated states of the Federated States of Micronesia, the Republic of Palau, and the Republic of the Marshall Islands.

Percentage of Students with Disabilities and Percentage of the Population, Ages 5 (in kindergarten) through 21 by Race and Ethnicity, in the US, Outlying Areas, and Freely Associated States: SY 2019-20

Legend: White · American Indian or Alaska Native · Asian · Black or African American · Hispanic/Latino · Native Hawaiian or Other Pacific Islander · Two or More Races

By States and the United States, Resident Population, Ages 5-21 — New York

- 49.33%
- 23.90%
- 15.03%
- 8.04%
- 0.32%
- 0.05%
- 3.33%

By State and the US, Outlying Areas, and Freely Associated States, Ages 5 (in kindergarten) -21, Served Under IDEA, Part B — New York

- 39.06%
- 32.21%
- 20.43%
- 4.33%
- 0.76%
- 0.18%
- 3.03%

Source: U.S. Department of Education, EDFacts Data Warehouse (EDW): "IDEA Part B Child Count and Educational Environments Collection," 2019-20. https://www2.ed.gov/programs/osepidea/618-data/state-level-data-files/part-b-data/child-count-and-educational-environments/bchildcountandedenvironments2019-20.csv All data for Wisconsin were suppressed due to data quality concerns. Data for Iowa was not available

U.S. Department of Commerce, U.S. Census Bureau. Intercensal Estimates of the Resident Population by Single Year of Age and Sex for States and the United States: April 1, 2010 to July 1, 2018, 2009–18. The State pie chart for population does not include the Bureau of Indian Education (BIE); Puerto Rico (PR); the outlying areas of American Samoa, Guam, the Northern Mariana Islands, and the Virgin Islands; and the three freely associated states of the Federated States of Micronesia, the Republic of Palau, and the Republic of the Marshall Islands.

Percentages may not equal 100% due to rounding and/or data being suppressed.

https://sites.ed.gov/idea/osep-fast-facts-race-and-ethnicity-of-children-with-disabilities-served-under-idea-part-b/

## Three Types of Specific Disabilities

ADHD: Attention-deficit hyperactivity disorder is one of the most common reasons a student might be referred to a mental health provider. Students with ADHD struggle with attention, impulse control, and/or overactivity. For some children, ADHD may *seem* to be daydreaming, or *seem* lethargic, or *seem* to have a cognitive deficit. This iteration would be considered *predominantly inattentive ADHD*. Other children may lack these symptoms but may struggle with hyperactivity (the sensation that they are always on the go or may be described as driven by a motor), which would be considered *predominantly hyperactive ADHD.* And still other children may exhibit a combination of these symptoms, or *combined type ADHD.* Broader indications that a child may have ADHD would be academic difficulties, conduct problems, seeming like they are ignoring the teacher (Howard and Landau, 2010). Ross Greene would label these issues "downstream," and they should be addressed in terms of finding the "upstream" concerns (Greene, 2019).

Muscular Dystrophy: Muscular dystrophy is a rare genetic disorder that affects the muscles. In one form, *Myotonic*, muscles lose the ability to relax after they contract. In another form, *Duchenne*, muscle tissue atrophies and becomes fatty tissue. The severity of muscular dystrophy varies by individual. Symptoms might include muscle weakness, pain in the joints, difficulty walking, trouble with lifting arms or with muscle fatigue, heart issues, or slurring words. A student with muscular dystrophy would likely have trouble writing, may need the classroom to be clear and uncluttered for ease of navigating. They may also struggle with motor skills or communication skills (Catherine Spangler, Forum).

Sickle Cell Anemia: Sickle cell anemia is a genetically inherited disease. Individuals with sickle cell anemia have a lower number of red blood cells, which causes anemia and fatigue. A mutation in the HBB gene that gives instructions to build the hemoglobin protein leads to sticky, sickle-shaped red blood cells (Sickle Cell Disease News, 2022). Because the cells are sticky and oddly shaped, they can get trapped in small blood vessels, a condition called vaso-occlusive crisis (VOC), which can be very painful (Sickle Cell Disease News, 2022). Sickle cell anemia doesn't cause other learning difficulties, but the fatigue and pain, and frequent doctor visits, can affect a student's performance in school. Additionally, since dehydration can trigger VOC, children will need to drink lots of water, which may lead to frequent bathroom breaks (Skyla Vanfleet, Forum).

Events Leading to Referral and Placement

3 Tiers of Support
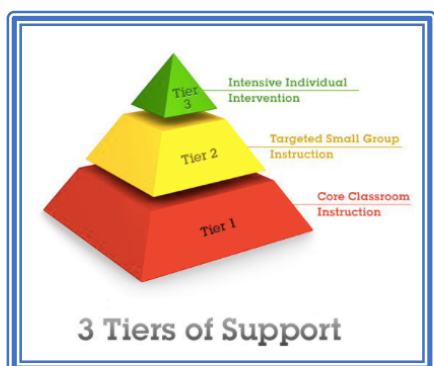
From a school counselor perspective, it helps to think of things in terms of the RTI three tier model. High-quality instruction is delivered to *all* students in tier 1. Students who struggle with instruction but do well when given a little extra help – maybe some short-term individual or group counseling, or some differentiation in instruction – may fall into the tier 2 category. If targeted instruction or short-term counseling is falling short, and the student needs additional support, this would be when the referral and placement process may begin.

School or parent may request student be evaluated.

If referral comes from school, parent must be given PWN (prior written notice) Parent must consent to evaluation.

60 calendar days

60 school days

Referral → EVALUATION → CSE Meeting & Eligibility Recommendation → Implement Plan → ANNUAL REVIEW
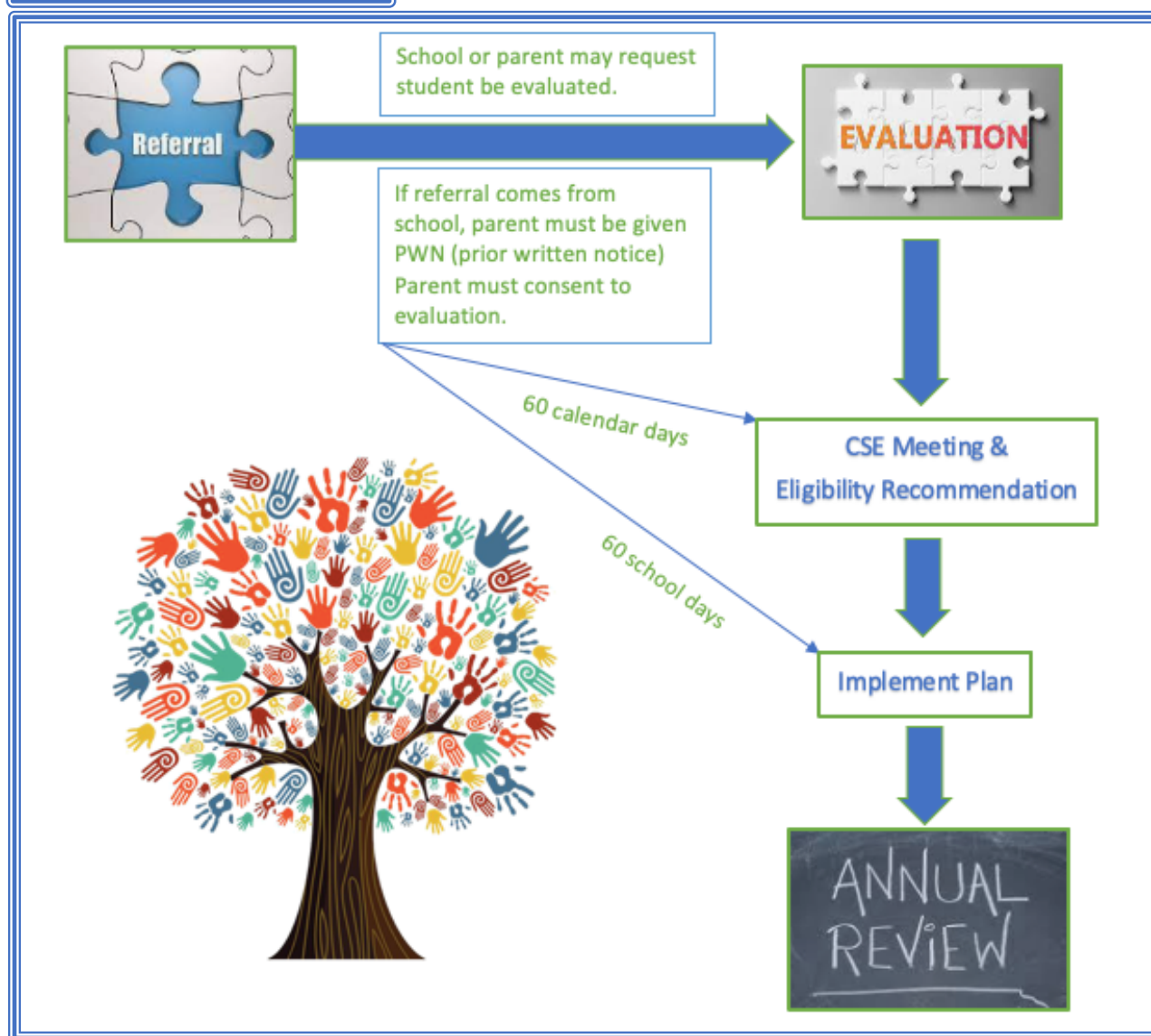
(Brock, 2022)

Rights, Responsibilities, & Roles of Students, Parents, & Schools as they Relate to Exceptional Learners

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All students are guaranteed a Free Appropriate Public Education
in the Least Restrictive Environment

Parents' rights, roles, and responsibilities:

- Delineated in detail in: The Role of Families in the Special Education Process.

Students' rights, roles, and responsibilities:

- **FAPE**: Students are guaranteed, under Section 504 of The Rehabilitation Act of 1973, the right to free appropriate public education.

- **LRE**: Students are also guaranteed, under IDEA (Individuals with Disabilities Education Act), the right to be educated in the least restrictive environment, in a general education classroom with nondisabled children to the maximum extent possible.

- **Models of disability**: Though not legally dictated, ethics demand that all students be treated with respect, compassion, and dignity, and for a student with a disability, this includes considering the social model of disability, and working from an affirmation model.

- **CSE Meetings**: if age appropriate, students are encouraged to participate in CSE meetings and advocate for their preferences and rights.

Schools' rights, roles, and responsibilities:

- **Child Find:** Schools must identify students in need of special education services. The 3-tiered response to intervention model is one approach to identifying students who need services.

- **IDEA:** schools must abide by the stipulations in IDEA and must follow the process outlined in **Events Leading to Referral and Placement** in establishing an IEP for students.

- **504 Plan:** schools must accommodate any needs laid forth in the student's 504 plan.

- **FAPE** & **LRE:** schools must provide *all* students a free appropriate public education in the least restrictive environment

- **Instruction:** teachers must deliver high-quality instruction that includes differentiated instruction, universal design for learning strategies, and accommodations for exceptional learners.

The Role of Families in the Special Education Process

The parents always have the right to request a full committee CSE meeting.

CSE Process (Brock, 2022)**:**

- Referral stage: Parent gives consent for evaluation and chooses the evaluator from the list provided by CSE.
- Evaluation, Eligibility and Recommendation stage: parent receives written notice of recommendation and a copy of the IEP.
- IEP Implementation phase: parent notified of BOE approval and gives consent for initial placement.
- Annual review: parent may request an additional review at any time.
- Reevaluation: requires parental consent unless parent doesn't respond.

Procedural Safeguards (Brock, 2022):

- Parents have the right to receive the Procedural Safeguards document annually, provided to them in their native language.
- Parents have the right to participate in all meetings and have the right to request all assessments and educational records, including email correspondence.
- Parents have the right to agree or disagree with the assessments, IDEA classification, or the placement of their child. If parents disagree with the assessment, they can request an IEE (Independent Educational Evaluation), that is usually paid for by the school.
- Assessments and evaluations must be completed within 60 calendar days (or 60 school days if an FBA is needed) but an IEE may take longer depending on the provider.
- Parents must consent to any assessments or evaluations.
- Parents have the right to prior written notice (PWN) of anything relating to the identification, evaluation, or placement of their child.
- If parents do not agree with the school's decision regarding placement or accommodations, they can file a due process complaint. Once a due process complaint is filed, they Stay in Place clause is triggered – meaning that the school adheres to the last agreed-upon IEP until the due process complaint has been resolved, either through mediation or an impartial hearing officer. The due process complaint must be resolved within 45 days. Parents can also file a state complaint, which must be resolved within 60 days.
- Parents have the right to provide home instruction but need to provide a plan and curriculum. They also must provide transportation to any services or instruction their child continues to receive at the school.

Differences in Beliefs, Traditions, and Values of Three Cultures as They Pertain to the Needs of Exceptional Students

All students will benefit from a culturally responsive classroom. While our culture is intricately woven with our identity, and some possible differences are outlined below, no culture is a homogenous unit.

Chinese:
- Confucianism and Taoism, two Chinese beliefs, embrace the idea of social harmony, balance, and responsibility, and the idea of disability is seen to be "disharmony" (Yan, et. al, 2014).
- Chinese family structure values senior members of families, so sometimes stereotypes and discrimination are passed down and maintained. Individuals with a disability may be seen as having little value in society (Yan, et. al, 2014).
- Some Chinese hold the superstition that disabilities are a punishment. Because of the belief in generational harmony, a disability may be an indictment of an entire family (Yan, et. al, 2014)..
- Reported one woman: "Being diagnosed with muscular dystrophy at age seven meant being seen by some as a form of chastisement or bad karma inflicted on my family for moral wrongs my family may have done in the past or present" (Tsao, 2009).
- Because of the stigma, children in Chinese cultures may be reluctant to seek help or special education services. One study reported that Asian Americans are 3xs less likely to seek mental health support (Yu, 2021).

Native American (Leib-Neri, 2015)**:**
- There is no language equivalent for "disability" – closest would be "being different"
- Holistic approach resists the binary idea of normal and abnormal
- This difference results from "disharmony of the spirit" and harmony can be restored – notably – even if they physical symptoms remain (think affirmation model of disability)
- Silence, slow conversation is expected, and Native Americans use signs and relatively easily incorporate deaf and elderly people into conversation
- Behavior is not standardized and there's little emphasis on conformity
- Eye contact is considered disrespectful of elders
- However, this is not to say that Native Americans do not struggle with disabilities, and they are underserved because of poverty, staffing shortages, lack of coordination between agencies, and problems identifying individuals eligible for services (NCAI, 2022).

Black Americans:
- Systemic racism=denied services, poorer outcomes (Gupta, 2021)
- May fight harder for diagnoses – especially for "invisible disabilities" like autism or ADHD, where educators are more likely to dismiss as behavior issues in black children (Gupta, 2021)
- More likely to have encounters with police officers who misinterpret their actions (a deaf person not stopping when told to). One man with autism reports carrying his autism card in his wallet because police see lack of eye contact as a threat (Gupta, 2021)
- Report it is isolating to be Black and disabled: "Many in the Black community don't understand what it is like to have a disability… White co-workers didn't understand the experience of being Black in America." (Gupta, 2021).
- One woman noted "If the old saying is that children are to be "seen and not heard," then disabled [Black] people are considered to be "unseen *and* unheard." (Miles, 2020).
- The association with disability and racism makes it harder for Black people to embrace the affirmation model of disability, rather, it feels like one more form of oppression (Miles, 2020)

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