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CRITICAL ISSUES IN EDUCATIONAL PLACEMENT FOR CHILDREN WITH MENTAL RETARDATION*

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ABSTRACT

Some issues regarding educational placement for mentally retarded children are first, identified based on two recent studies carried out in Taiwan and the analysis of special education practices in different countries/regions. The major issues include mainstreaming implementation for children with mild handicaps and placement criteria for moderately and severely handicapped children.

The factors which influence practices and impede the success of educational placement for mentally retarded children are classified into two categories: the quantity of resources and the quality of placements. Resources are discussed in terms of economic conditions, legal status, professional training, and educational planning in the given social settings. In regard to the placement factors, identification procedures, definition and conceptual framework of mainstreaming, environmental factors of cultural and social background, attitudes of parent, teacher, and peer toward the retarded, and administrative and professional support are discussed.

Finally, a model of optimum placement for mentally retarded children is proposed. Focuses on Multiple and Individualized Placements and the principle of "form follows function" are involved in this model. Mentally retarded children are believed to receive proper education only if multiple placement resources such as resource rooms, special classes, special schools, and institutions are available and implemented in accordance with the individual needs of the mentally retarded children. The form of special education services must be selected with the concern of the child's severity of handicapping conditions, the flexibility of transition, the positive interaction between the child and peers, active parental participation, and the physical accessibility of services.

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Issues Raised from Taiwan Experience

In Taiwan, Republic of China, special education services are provided to gifted and talented students as well as to individuals with one or more of the following handicap(s): mental retardation, visual impairment, auditory impairment, speech and language disorders, physical handicaps, chronic illness, emotional or behavioral disorders, learning disabilities, multiple handicaps, and other handicaps (e.g., facial impairment, autism). Under the Law of Special Education (1984), all handicapped children with ages ranging from six to fifteen have the same rights as those of their normal peers. They receive free education and are entitled to special education placement in the form of regular classes, resource rooms, special classes, or special schools at the elementary or junior high school levels. Other forms of special education services, such as homebound instruction and training in institutions or centers, are provided for school-age (6-15 years old) children who are in severe, profound, or multiple handicapping conditions. Special education is also extended to handicapped children who are at the preschool and senior high school levels. For example, no school can refuse entrance to those handicapped students who complete compulsory education and are qualified to continue their advanced studies. In addition to special education programs, related services are delivered, in accordance with social welfare services, to those who need special equipment or devices, financial assistance, transportation or rehabilitation

services. Special education or related services have to be individually designed to meet the unique needs of the handicapped and their families.

In order to examine the implementation and needs of special education services, two large-scale studies were carried out recently in Taiwan. One already completed was entitled, "Educational Placement for School-age Handicapped Children in Taiwan, R.O.C." (Wu et al., 1990). The second one which is still ongoing is, "The Second National Prevalence Survey Study for Handicapped Children." (Wu et al., in press) The preliminary results from the second study showed that the enrolment rate of all school-age children is 99.82%, while approximately six thousand children, accounting for .18% of the total number in this age-group (about 3.5 million), failed to receive any form of education. Among those unenrolled, about half are handicapped. The total number of handicapped children being preliminarily screened is 114,541, or 3.27% of all school-age children. Among them, 32,764, or .94% of the total and 28.60% of the handicapped, fell into the category of mental retardation. 50.66% of the retarded are placed in regular classes, 26.38% in special classes, and only 2.45% in special schools. The result is shown in Table 1.

The first study (Wu, et al., 1990) revealed that the number of special classes for moderately and severely retarded children in Taiwan have increased considerably in recent years, and so have the institutions. In contrast, such placements for the mildly retarded are decreasing. It appears that most of the mildly retarded

TABLE 1. The Second National Prevalence Survey Study of Exceptional Children, Taiwan, Republic of China 1991, (Preliminary Result)

Handicapped Total	MR Total	Placement of MR Children	
114,541 (3.27%)	32,764 (.94%)	Regular Class	16,615 (50.66%)
		Resource Room	2,978 (9.09%)
Note:		Special Class	8,642 (26.38%)
Target population : 6-15		Special School	803 (2.45%)
years of age, about 3.5		Institution	2,562 (7.82%)
million in total.		Homebound	372 (1.14%)
		Un-enrolled	792 (2.42%)

are being "mainstreamed" into regular classes. A high proportion of special education resources is being devoted to the care of the more severely retarded, but this seems to be not so successful, and it holds true for mainstreamed education.

Some issues regarding educational placement for children with mental retardation have, therefore, been identified from the two studies. The major issues include the appropriateness of the implementation of mainstreaming for children with mild mental retardation and the placement criteria for moderately and severely retarded children. The questions addressed are as follows : Why the majority of mildly mentally retarded children are placed in regular classes? What are the effects of mainstreaming programs? For the placement of children with moderate and severe mental retardation, who should be in charge and where should they be educated?

Comparisons Among Different Countries

The Taiwan experience with regard to the educational placement for children with mental retardation is somewhat

unique in the Asian area, and even in the world. Only 2.41% of children with mental retardation are not in any educational placement. This seems to be comparable to that of any developed country. However, the majority of the mentally retarded are placed in regular classes. This proportion is much higher than that of the United States, one of the pioneering advocates of mainstreaming. In terms of special education delivery, Taiwan appears to rely, as does the United States, more on special classes than special schools/institutions. This is quite different from Japan, which has almost an equivalent number of children with mental retardation in both forms of special education. This comparison is shown in Table 2.

In Taiwan, there are only 3 special schools for the mentally retarded for the time being. This is fewer than there are in many Asian countries/regions, such as Singapore, Hong Kong, Japan, Korea, and Mainland China. It is apparent that Taiwan has, in comparison with other Asian countries/regions, adopted different forms of special education services for the mentally retarded. It would appear that Taiwan tends to be more in favor of mainstreaming than other Asian

TABLE 2. A Rough Comparison of Educational Placement for Children with Mental Retardation in Three Countries

	Taiwan (ROC)	U.S.A	Japan
Regular Class	50.66%	3.06%	
Resource Room	9.09%	25.29%	
Special Class	26.38%	55.81%	50.25%
Special School	2.45%	12.02%	49.75%
Institution	7.82%	3.40%	
Homebound	3.56%	.41%	

Sources : (1)U.S. Department of Education (1988) . *To assure the free appropriate public education of all handicapped children : Tenth annual report to Congress on the implementation of the Education of the Handicapped Act*. Washington, D. C.
 (2)Japan Ministry of Education, Science and Culture (1991) . *Special Education in Japan*.

Note : Approximated percentages of MR children being served in total school-age population are as follows : Taiwan, .83% (excluding those in institution and at home) ; USA, 1.68% ; Japan, .74%.

countries. What are the reasons? What does this mean?

It seems also apparent that some countries/regions are in favor of special schools or institutions (e. g., Singapore). Others, prefer special classes in the regular school (e. g., Taiwan), and some (e. g., Hong Kong and Japan) use both. Though mainstreaming placement seems to be an ideal model, yet it is less preferred in the Asian area. We may also ask the same questions: What are the reasons? What does it imply?

Based on a rough comparison of educational placement for children with mental retardation among different countries, the issues raised here are as follows: What are the factors that influence the types of educational placement for children with mental retardation in different countries/regions? What is the current status of mainstreaming? What are the criteria

which determine the success or failure of educational placement?

Factors Influencing the Practices of Educational Placement

The factors which influence the practices and which impede the success of educational placement for children with mental retardation can be classified into two categories - the quantity of resources and the quality of placement. The question which addresses the quantity of resources is, "Are the placement resources available to children with special needs?" The question which addresses the quality of placement, "Is the placement appropriate to the individual's needs?" The former is related to the provision of the various facilities, while the latter, requires differential placements based on individual

differences.

The factors related to the provision of placement resources are as follows:

1. Economic conditions. Special education is a costly investment. In a poorer society, it is impossible to provide "enough" special education services for those with handicap (s). Its major struggle is still in trying to increase student enrolment and providing enough classes for ordinary students.

2. Legal status. Whether there is a law which grants educational rights for children with handicaps in a given country / region would affect the provision of special education services. In the United States, Public Law 94-142 (1975) grants to all handicapped children the right to a free and appropriate public education - the so called "Policy of Zero Reject." This policy is similar to the traditional Chinese philosophy of education: "There should be no discrimination in the light of education." (有教無類). This philosophy is reflected in the Constitution of the Republic of China (1947) and was strengthened in the Law of Special Education (1984). Such measures resulted in an increase of governmental funds for special education and special education delivery, especially for special classes. In Japan, the rapid increase of the number of schools for the handicapped is related to a law of compulsory / free education for the handicapped in 1978. Similar situations have occurred in many other countries.

3. Professional training. Special education teachers, along with other professionals such as speech therapists, physical therapists, occupational therapists, psychologists, counselors, and social

workers, are needed in education for special needs children. The training and provision of these personnel would influence the establishment of new special education programs. The shortage of special education professionals seems to be one of the biggest problems in many countries. For example, in Taiwan, the shortage of special education teachers and other professionals has greatly impeded the effectiveness of the recently established special education programs for moderately and severely retarded children in regular school settings.

4. Educational planning. In order to improve and promote the implementation of special education, a "Five-Year Promotion Plan for Special Education," the second one of its kind in 15 years, is now under way in Taiwan, R.O.C. It is estimated that, in the coming five years, a total amount of 10 billion N.T. dollars (approximately US\$400 million) will be devoted to this project. It appears that the priority of special education in the administration is often overlooked and varies in country by country, region by region, and even county by county.

Factors related to the quality of placement are as follows:

1. Identification procedures. This is related to the problem of definition, criteria, and assessment instruments. According to the American Association on Mental Retardation (AAMR),

"Mental retardation refers to significantly subaverage general intelligence functioning resulting in or associated with concurrent impairments in adaptive behavior and manifested during the development period." (Grossman,

1983, p.1)

Thus, for a diagnosis of mental retardation, two aspects must be present: a measured level of intellectual functioning as indicated by an IQ of 70 or below and

an impairment in adaptive behavior.

According to the level of IQ, there are different subgroups of mental retardation as summarized in Table 3.

TABLE 3. Levels of Severity in Mental Retardation

AAMD (Grossman, 1983)		Educational Expectations (Chinn, Drew, & Logan et al., 1979)		Piagetian stages of cognitive development (MacMillan, 1982)
Levels	IQ	Description	IQ	Stages
Mild	50-55 to app.70	Educable	50-75	Concrete operations
Moderate	35-40 to 50-55	Trainable	20-49	Preoperational
Severe	20-25 to 35-40	Custodial	below 20	Sensorimotor
Profound	Below 20 or 25			

The determination of "significantly subaverage general intellectual functioning" raises questions about the validity and reliability for assessment instruments and the influences of ethnic/cultural factors on test performance. Poor and/or biased assessment would lead to a poor and/or biased placement for special needs children.

The assessment of "impairments in adaptive behavior" likewise presents a challenge. Variations in behavior may be related to age, a particular situation, and cultural background (Schoel, 1985). Subjective judgement may lead to a false classification and/or biased placement, too.

2. Labeling problem. Diagnosis leads to classification and labeling; we have to identify the problem in order to remediate it (Kirk & Gallagher, 1989). But many people question the end product of the classification, the label that attaches to the child. In fact, labeling has both negative and positive effects. Galla-

gher (1976) described several problems involved in labeling children by their exceptionalities as follows: (1)the label becomes the person, (2)the label affects self-image, (3)labels can increase subgroup discrimination. He also indicated some reasons that labeling is effective: (1)differential treatment, (2)search for etiology, (3)obtaining needed resources for treatment. Therefore, although the impact of labeling should not be overlooked, its complicated effects should not be ignored either.

3. The Concept of mainstreaming. This is a controversial issue. Mainstream education has been advocated by many scholars for a long time and is widely implemented in the United States, and many western countries, yet it is not well adopted in the Asian area and there are people who question its effect. The research data also show divergent results. In considering mainstreaming or integration an ideal model of educational placement, it seems that there is "true"

mainstreaming and "false" mainstreaming when the concept is put into practice. The former leads to an appropriate placement in the least restrictive environment, while the latter leads to a biased placement in a truly restrictive setting such as a regular classroom.

Most definitions of mainstreaming share similar concepts which include (1) the involvement of handicapped students as part of the regular educational program, and (2) an emphasis on the social and instructional aspects of the integration process (Wood, 1989).

What is mainstreaming and what is not? According to Wood (1989), mainstreaming is

- *Providing educational opportunities for handicapped students equal to those of their nonhandicapped peers.*

- *Teaching handicapped and nonhandicapped students how to appreciate similarities and differences among individuals.*

- *Sharing resources, skills, and time.*

- *Sharing the educational responsibilities for the handicapped student.*

- *Providing a climate in which positive attitudes prevail.*

- *Realizing that the handicapped student belongs within the regular classroom environment and should receive support services outside this environment as needed.*

- *Creating change and realizing that change will not occur instantly.*

- *Identifying the student's strengths.*

- *Learning about the characteristics of handicapped students and how they relate to their education.*

Mainstreaming is not

- *Serving the handicapped student in*

regular classes without a well-planned support system in place.

- *Presenting regular class instruction to handicapped students without allowing for modifications when necessary.*

- *Placing all handicapped students, regardless of the degree of handicapping condition, into the regular education program.*

- *Placing at risk the progress of the nonhandicapped student.*

Kirk and Gallagher (1989) in their notable textbook, "Educating Exceptional Children (6th edition)," pointed out,

"It is not enough to release people from institutions; we also have to provide them with a positive environment. About half of the institutional population in the United States was released between 1967 and 1984. Many of these people simply disappeared into the community. There were no programs to help them adapt to their new environment. We find the same problem among youngsters who have been removed from special schools and placed in the regular classroom. Without substantial planning to help these students adapt, they have had difficulties in mainstreamed setting. (p. 161)"

4. Support system. The ingredients of successful mainstreaming programs can be summarized in a word- "support" (Mittler, 1987). This factor is related to the second element of the above definition. Lacking environmental support, its results may be harmful rather than helpful.

Mainstreaming takes not only the form of physical space mainstreaming,

but should move to social interaction mainstreaming and instructional mainstreaming (Reynolds & Birth, 1982). The psychological support from parents, teachers, peers, and other school personnel and the related supportive services are crucial to its success.

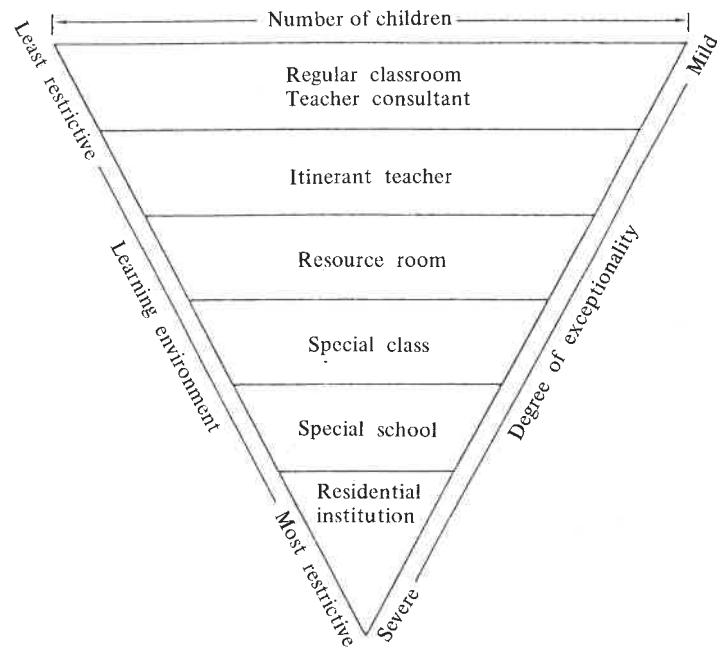
Mainstreaming as a popular alternative can be one of the most restrictive placements if personal and social competencies and the psychological support system of the classroom are not taken into consideration (Barclay, 1987).

It seems possible that in certain societies, because setting up special schools and/or special classes is costly, integration becomes popular. In this case, the placement practice is hardly appropriate in terms of meeting the individual child's needs.

A Proposed Model of Optimum Placement

With regard to optimum placement for children with handicap (s), several

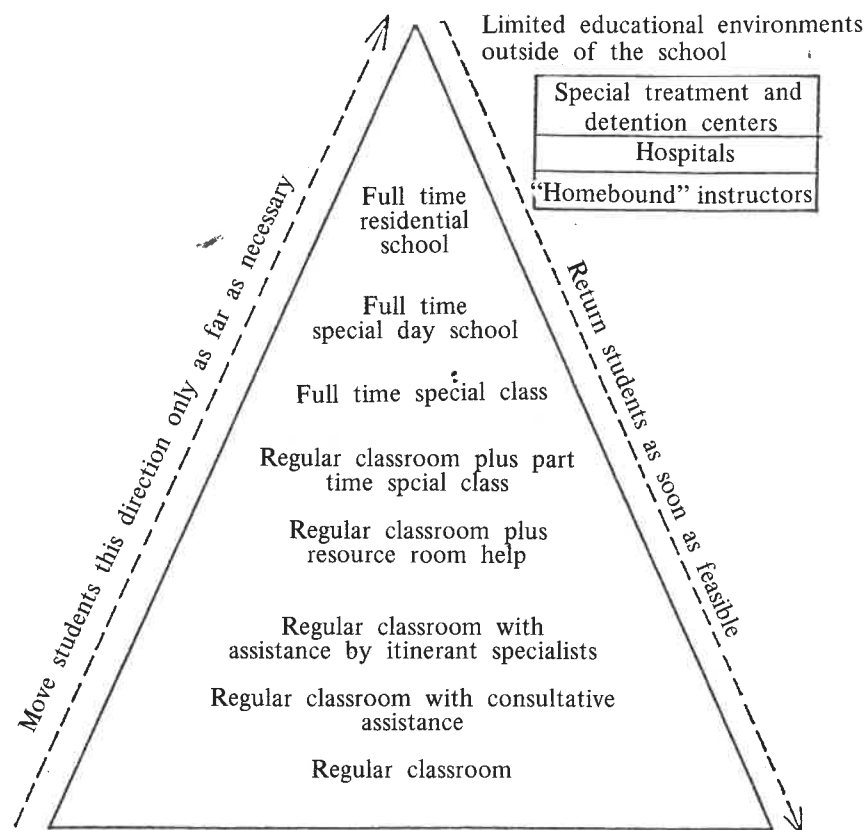
FIGURE 1. Special Learning Environments for Exceptional Children



NOTE : Hospital and homebound services provided for handicapped children who may be confined for long periods of time fall within the realm of the residential institution setting on the scale of special education learning environments.

SOURCE : Deno, E. (1970) Special education as developmental capital. *Exceptional Children*, 37, 229-237.

FIGURE 2. The Original Special Education Cascade



Source : Reynolds, M. C., & Birch, J. W. (1982). *Teaching exceptional children in all American schools*. p.49.

TABLE 4. Criteria of Least-biased Placement for MR Children

	Condition	Implementation
Individual	{ Severity of handicap	For original placement
	{ Nature of development	For later transition
	{ Sensitivity to labeling	For grouping consideration
Environmental	{ Degree of support	For integration consideration
	{ Attitude of parents	For parent participation
	{ Availability of service	For individualized educational Programming

models have already been proposed. Unlike the traditional two-box system - one for the normal, one for the special, these models are described as a cascade or continuum of instructional arrangements. Two typical models of this kind are presented here: (Figures 1 & 2) (Deno, 1970; Reynolds & Birch, 1982) :

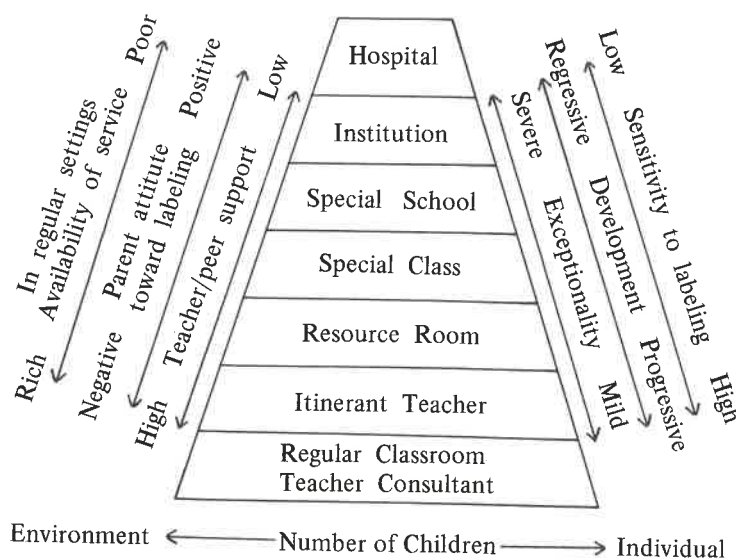
Since it is virtually impossible to totally eliminate bias in a placement system, perhaps it would be more appropriate to refer to a "least biased" placement process - one that reduces bias as much as possible (Tucker, 1980). For the "least biased" placement, we must consider both the individual and the environmental conditions. This can be shown in Table 4.

According to the principle, "form follows function," the individual child's needs should always be considered first in

this schema. The points are: (1)for original placement, we must consider the severity of handicapping condition; (2)for later transition, we must look at the nature of the child's development; (3)for grouping, we must consider the sensitivity of the child to labeling. In terms of environmental support, the points are: (1)the degree of integration must consider the degree of environmental support; (2)the degree of parent participation is related to the attitude of the parent toward the child; (3)the individualized educational program depends largely on the availability of services.

Based on the criteria of "least biased" placement and the previous notable models, a proposed model of optimum placement for children with mental retardation is illustrated as follows (Figure 3) :

FIGURE 3 A Proposed Model of Optimum Placement for MR Children



This model has some of the same favorable features as the one proposed by Reynolds and Birch (1982):

1. It proposes that support be given in regular classes as one means of meeting the special needs of children who are mainstreamed there.

2. It proposes that children not be classified and given special placements on a permanent basis but, rather, that they be moved to special stations only for as long as necessary and that they be returned to regular classes as soon as feasible. Thus, no indelible labels are attached to students. The total number of children served over time in special settings greatly exceeds the numbers served at any given time.

3. It proposes that the boundary lines between special education and regular education be renegotiated and open so that students could pass back and forth easily, as dictated by their educational needs.

4. It proposes that regular and special education staff members become more interactive or collaborative in their daily work, such as sharing responsibilities for students, rather than remaining isolated in their separated centers and classrooms.

5. It proposes that extraordinary justification be required to remove a student from the regular school environment, especially when removal would be from both home and school environments to a residential center.

6. It proposes that in order to justify the special education services in regular school settings, rich supportive services, parent cooperation, and constructive interaction in the classroom must be

provided or improved.

Conclusion

A modified model of optimum placement for children with mental retardation is proposed. The focuses on multiple and individualized placement and the principle, "form follows function" are involved in this model. Children with mental retardation are believed to receive proper education only if multiple placement resources such as resource rooms, special classes, special schools, and institutions are available and implemented in accordance with the individual needs of the mentally retarded child. The form of special education services must be selected with the concerns of the child's severity of handicapping conditions, the flexibility of the transition, the positive interaction of the child and peers, active parent participation, and the physical accessibility of services.

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智能不足兒童教育安置問題探討

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根據「國民教育階段身心障礙兒童安置狀況調查研究」（吳武典等，民79）及中（台）、美、日三國智障兒童教育安置現況之比較，可知在智障兒童教育安置上，存在著若干待解決的問題和論題，包括：安置的標準為何？回歸主流式的安置效果如何？中重度智障兒童如何安置為當？

影響智障兒童教育安置措施及其成敗的因素可概分為二大類，一為教育設施的「量」，一為教育安置的「質」。影響「量」的因素包括經濟狀況、法令規定、師資供應和教育計劃等；影響「質」的因素包括鑑定程序、標記作用、特教理念和支持系統等。

通盤檢討智障兒童的教育安置問題之後，筆者提出一個修正的最適當安置模式。其基本原理有二：(1)多元化的資源及個別化的安置；(2)功能決定形式。單一最佳安置模式（如回歸主流式的安置）是不存在的。最適當或最少偏差的安置，必須各種資源，包括隨班輔導、資源教室、特殊班、特殊學校，乃至教養機構、醫院學校等）兼籌並顧，並根據個別兒童的需要（包括嚴重程度、進步情形、自我觀念等）及環境的條件（包括社會接納、父母態度、居家遠近等）加以個別化的慎重考慮，並允許彈性的轉移和交流。

