

## But, What About...? Supporting Students With the Most Significant Disabilities

by Rae Sonnenmeir and Michael McSheehan

Julie has lived most of her 14 years in a nursing home and has many medical needs. Jeffrey has the label of autism and his challenging behaviors frequently disrupt his third grade classroom. Prior to entering second grade, Peter experienced a traumatic brain injury following brain surgery and now is not able to speak or move his body easily. Josh experiences multiple labels and a significant seizure disorder; recent evaluations suggest that his abilities are more like those

experiences. Considerations for getting students "in," for exploring how to make the experiences meaningful, and for building confidence in the teams' abilities to support students to demonstrate their abilities are illustrated through each of these student's stories.

### Getting "In": Julie and Jeffrey

Prior to entering her local middle school, Julie's educational program emphasized therapies, with no "academic" curriculum derived from the local or state curriculum standards. As her team planned for her enrollment in seventh grade, time was spent learning about "what would it take" to make her experience at the middle school successful. Through interviews, questionnaires, a review of her records, and observations, an understanding emerged of what had "worked" and "not worked" in supporting Julie in the past. Two main questions emerged as the team facilitating her transition from the nursing home placement to the middle school sorted through the information: How will we keep Julie medically stable in a non-medical environment, and how will we support Julie to participate in seventh-grade classrooms? Protocols were developed to address her medical needs. It was essential for the family and school staff to know that a plan was in place for the several "worst-case scenarios" they feared. A "question behind the question" about Julie's participation in classes was in regard to her perceived abilities; no one really knew Julie's abilities. Teachers and classmates alike adopted an attitude of "presumed competence" when interacting with Julie. Several team discussions focused on how challenging it was for professionals trained in drawing conclusions to "suspend judgment." With strong leadership from the principal and other

administrators, team schedules were adjusted to include time to plan for Julie's participation within lessons and time to debrief and reflect on those lessons. All of this work supported Julie "getting in" the middle school.

Julie's medical needs could be met within the general education classroom, but challenging behaviors raise another whole set of concerns for teachers and their ability to support students in the general education classroom. In Jeffrey's situation, many people on his team were unfamiliar with the label of autism. His behaviors were thought to be part of this label. His team felt that his behaviors needed to be "under control" before he could be included in the third grade classroom.

Jeffrey frequently rubbed his head, often upside down in his chair. A functional behavior assessment, including observations and data collection to understand the setting events and triggers, and development of hypotheses about the behaviors, revealed some interesting information for the team. It turned out that he had a toothache and once that was addressed, the behavior decreased.

Jeffrey was interested in being with his classmates but he didn't have an effective way of communicating, speaking only a few words. He often hit and scratched others. Following the functional behavior assessment, these behaviors were thought to be one way of communicating. A communication device was introduced while he was supported in the third grade classroom, recorded with messages that other third graders would say within specific activities. Once Jeffrey had a way of expressing himself with his classmates and adults, the challenging behaviors decreased. In fact, being in the general education classroom was considered to be part of Jeffrey's positive behavior support plan.

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of an 18-24 month old than those of other fourth graders. When you talk about including students with disabilities in general education classrooms, surely you don't mean these students? How could the general education classroom ever be an appropriate learning environment for them? How can the staff ever meet all of the medical needs and behavior challenges, let alone the learning needs of these students? Where will the resources come from? What will be considered meaningful learning outcomes for these students?

Not only is it right to include these students in age-appropriate classrooms, with the appropriate supports these students can engage and learn the general education curriculum. Supporting teams through enhancing their skills creates a setting in which students can demonstrate their learning and have improved outcomes from their educational

### ***Making it Meaningful: Peter***

Even when students with the most significant disabilities are "in" class, the question about how meaningful the experience is lingers. To change Peter's involvement in second grade from "parallel participant" to "engaged member," his team stepped back to explore the different ways he could communicate, such as using his eyes to make choices and using a switch connected to some voice output device. Their approach to Peter's skill development shifted from practice using special materials with his instructional assistant to practice within the classroom activities using the same materials as classmates, and with classmates as partners in learning. The teacher's academic lessons guided the selection of messages to be used for Peter's communication choices in the activities. Classmates were interested and

accepted as his selection. Topics were confirmed and additional specific story ideas were presented this way. Peter was seen as an active contributor to this piece of writing by both his classmate and his teacher. Peter's team continued to explore and describe how he used his eyes and the switch to more clearly demonstrate learning and participation in class activities. As greater clarity emerged about what seemed to be the most effective for Peter, the team was ready to move on to develop specific guidelines for how those supports should be provided.

### ***Building Team Confidence: Josh***

Julie and Jeffrey got "in." Peter was on the road from "in" to "meaningful." And then there was Josh. Josh had been included in his local elementary school since kindergarten. His classmates and teachers knew him well, though there were initially varied views on his abilities. After "suspending judgement" and engaging in a period of "exploring and describing" what might be appropriate supports, Josh's team was interested in really coming to grips with "what do we know" about how inclusion is working for Josh. They wanted to feel confident in Josh's demonstration of learning and in their own abilities to provide the supports. It became clear that Josh's learning outcomes were intricately linked to the ways in which supports were provided. For example, Josh's team learned that good seating and positioning was linked to the accuracy and reliability of his pointing. Without the use of a "Sit 'n Move" cushion and positioning with his feet on the floor and his knees and hips at right angles, Josh's pointing varied considerably, sometimes resulting in the use of his whole hand instead of his index finger. This knowledge carried over to how Josh's classmates supported him in a math lesson involving three-digit computations. Groups of students worked on solving math problems such as  $386 \times 242 = ?$  They presented Josh with choices of four possible answers to a single computation at a time (e.g.,  $6 \times 2$ )

on a dry erase board. To the classmates' surprise, Josh's first few answers were "wrong." One classmate noticed Josh was not sitting up straight and that his cushion was not in place. When the students adjusted Josh's supports, and asked him again to answer the math questions, he gave all the right answers. The team and the classmates had confidence in Josh's responses when he had the appropriate seating supports and less confidence in his responses when these supports were absent or not well provided.

### ***Conclusion: Tying It All Together***

For students who experience the most significant disabilities, meaningful learning can take place in the general education classroom when the appropriate supports are in place for *both* the students and the teams. Time is needed to learn about the student, the team, and the culture of the classroom to identify what types of supports are needed for the student and the team to be successful. Supports are best identified following a period of exploration when people can describe what does and doesn't work within the activities of the classroom. Once a clear understanding of what students and teams need has been reached, plans for implementing supports can be developed. Teams need to observe and document how accurately and reliably those supports are used and review and reflect on the outcomes, reviewing when supports are provided well and when they are not. When teams have the time and receive the support that they need, students are better supported to demonstrate their learning.

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willing participants during this exploration phase. A specific mode of communication was prioritized within each lesson. For example, during a writing lesson, students were asked to brainstorm topics with a partner. Choices were written on pieces of paper and presented one at a time to Peter as his classmate said them aloud (e.g., "Wanna write about baseball, going to grandma's house, going to the ocean, or something else"). A choice of two was presented and whichever item Peter looked at was