The Value and Effectiveness that an Inclusive Setting has on Students with Down Syndrome

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Introduction

Inclusion has been a subject that educators have pondered on since the establishment of teaching children with special needs. People that successfully support inclusion are concerned with the high costs of special education, but are successfully willing to educate children with special needs in the least restrictive environment with whatever accommodations and/or modifications needed to best suit the specific student. Those that oppose inclusion feel that there is not enough time, resources and materials to take on special education students in a general education classroom. They believe it takes away from the general education students as well as the children with special needs. Many people feel that teachers lack the knowledge and experience to integrate and accommodate special need students into the classroom.

There are several benefits and challenges towards the inclusion of specifically including students with Down syndrome into a general education setting. According to the Wisconsin Education Association Council (WEAC, 2007) inclusion is a term, which expresses commitment to educate each child, to the maximum extent appropriate, in the school and classroom he or she would otherwise attend. It involves bringing the support services to the child and requires only that child will benefit from being in the class. Overall inclusion is a term we have been striving to achieve. (This paper focuses on the value and effectiveness of inclusion, the benefits and challenges, parent/guardian and educator beliefs, and the most effective teaching strategies to successfully educate children with Down syndrome in a general education setting.)
The value and effectiveness that an Inclusive Setting has on Students with Down Syndrome

Down syndrome is also known as Trisomy 21, which is a genetic condition that causes delays in both physical and intellectual development. Down syndrome affects about every 1 in about 800 babies. People with Down syndrome have an extra chromosome making up 47, rather than 46 chromosomes, which is the amount of normal functioning genetic chromosomes (Scott, 2008).

Down syndrome is usually diagnosed at birth or shortly after. Initially the diagnosis is based on physical characteristics, which include low muscle tone (hyptonia), small ears, a single crease across the palm of the hand, a large protruding tongue, a slightly flattened facile profile, and upward slanted, almond shaped eyes. The major causes of Down syndrome are still unknown but we do know that it is caused by an error during cell division, called nondisjunction. Down syndrome may also be caused by the maternal age of the parents. Many children with Down syndrome have health complications beyond usual child illnesses. Approximately 40% of children with Down syndrome have congenital heart defects. Some of these defects require surgery while others require intense monitoring. They are more susceptible to illness, infections, respiratory, vision, and hearing problems. With proper medical care people with Down syndrome can lead a healthy life. The average life expectancy for people with Down syndrome is about 55 years of age, while some people live well into their sixties and seventies (Scott, 2008).

Many people have preconceived notions of people with Down syndrome and they should not be judged off of appearance. People with Down syndrome have many talents and gifts and should be given the opportunity and encouragement to develop them. The majority of children with Down syndrome have mild to moderate impairments. They are more like other children
than they are different. Early intervention services may include physical, speech and
developmental therapies. Most children attend public schools; some are placed in the general
education setting while some are placed in special education classrooms depending on their
needs and the severity of their disability (National Center for Learning Disabilities, 2008).

Once a child with Down syndrome turns 3 years old, he or she is guaranteed educational
services under the Individuals with Disabilities Education Act (IDEA). Also, under No Child
Left Behind (NCLB) “all children have a fair, equal and significant opportunity to obtain a high
quality education” (Savich, 2008, p.3). Since the reauthorization in 2003, IDEA has “ensured
that all students with disabilities receive a full array of placement options and a full continuum of
services” (Savich, 2008, p.6). The reauthorization of IDEA in December of 2004 mandates that
“each state must establish procedures to assure that, to the maximum extent appropriate; children
with disabilities...are educated with children who are not disabled, unless the nature and severity
of the disability is such that education in the regular classes with the use of supplementary aids
and services cannot be achieved satisfactorily”, and that everyone is entitled to a free
appropriate public education (FAPE). Under section 504 of the Rehabilitation Act of 1973,
students must be placed in the least restrictive environment that will provide the greatest
exposure to an interaction with the general education students and person without disabilities
(National Center for Learning Disabilities, 2008).

There are several different environments students can be placed depending on the
severity of his/her disability. It is important to understand the common terminologies including
inclusion, self contained and mainstreaming.

Inclusion consists of placing disabled or learning impaired students in general education
classrooms and integrating their learning experience with students in the general education
classes (Turnball, Turnball, Shank, & Smith, 2004). Inclusion is made up of four components: all students receive their education in their home school; placement is based on the concept of natural proportion; there is learning and teaching restructuring so that supports can be created for special education in general education setting; and/or placement is grade/age appropriate. Inclusion remains to be a controversial topic because it relates to the educational and social values, as well as to the child’s sense of individual worth. Proponents of inclusion generally favor newer forms of education service delivery (Schultz-Stout, 2001).

Mainstreaming on the other hand has been referred to the selective placement of special education students in one or more “regular” education classes based on his/her skills. Proponents of mainstreaming generally assume that a student must earn his or her opportunity to be placed in a regular education environment by demonstrating an ability to keep up with assigned work (Schultz-Stout, 2001).

Over the years there have been great debates on the most appropriate placement for children with disabilities. With the new legislation under the Individuals with Disabilities Education Act (IDEA), No Child Left Behind (NCLB), Free Appropriate Public Education (FAPE), and Least Restrictive Environment (LRE), inclusion is the place where students will begin their schooling and if needed there is a continuum of services that will be considered to best suit the student.

There are many benefits and challenges with the inclusion of children with Down syndrome into a general education classroom. While inclusion is what we are supposed to be working towards in the educational setting, it is still controversial. Outsiders looking in who oppose this topic do not have the knowledge and awareness of what can be done in and out of
schools for these children. Parents, teachers, administrators and students, themselves, all have an opinion on the topic of inclusion.

Children with Down syndrome have a wide range of functional differences and learning styles that usually require more planning of curricular choices and experiences, compared to that of a general education student. This means that children with Down syndrome have been historically placed in segregated educational settings, consisting of specialized services and smaller groupings. Sometimes due to their language, motor, and social skill differences that often characterize students with Down syndrome, this may affect the teacher’s choices of instructional methods and behavior management strategies. Inclusion teachers have found that individual and small group instruction improves the learning capacity of children with developmental disabilities. Because general education classes are normally larger than self contained or special education classrooms, many feel that an inclusion classroom is not the best placement for a student with Down syndrome. There are a lot more educational learning opportunities including direct instruction, the use of small group and individual instruction that inhibits the development of these students’ social skills and ultimate functioning as members of a community.

Challenges with Inclusion and Children with Down syndrome

There are several challenges with integrating children with Down syndrome into a general education classroom. Many believe that it is not beneficial to place students in a full time general education setting because it may prevent the student from receiving intensive and individualized attention and teaching (Andrews, Carnin, Coutinho, Edgar, Forness, Fuchs, et al., 2000; Macmillan, Gresham & Forness, 1996). Moreover, a general education setting may weaken and dispel the individualized attention that they would receive in a special education
class. When speaking on behalf of inclusion, costs are always a topic of debate. It costs more to educate students with disabilities than those without a disability. According to the 2005 United State Special Education Expenditures Program (SEEP), it costs 1.6 times more to educate a student with disabilities than it does to educate a student with no disability (Savich, 2008).

Overall the cost of keeping a student in an inclusion classroom is cheaper than placing that child in a special education classroom.

Secondly, students with disabilities have to take the same mandated tests as students without disabilities. This raises the questions, “Is it fair because a child has a special need.” It does not mean that they do not have the ability to do well and succeed on standardized tests. Statistics have shown that many students with a disability can keep up with their peers at their grade level and perform with success on the same assessments and tests (Smith, 2004). If children with disabilities need special testing accommodations, they can be included on the children’s Individual Education Plan (IEP) and provided during standardized tests. During 2000-2001 the United States Department of Education data has shown a greater number of students with disabilities in special education whose disability does not impact or affect their cognitive or intellectual ability (Savich, 2008).

Another drawback of including children with Down syndrome is that many believe that students with disabilities hold school districts back unfairly. There are several expectations that exist which allow school districts to exclude the test results or scores of disabled students from the accountability regiment of No Child Left Behind (Savich, 2008). School districts are allowed to exclude scores of disabled students if the number of students is too small to yield statistically verifiable information. Under NCLB and since it was revised in 1997, states are required to make
available alternate assessments and they are pushing for greater inclusion, and less exclusion (Savich, 2008).

Lastly, educators have to devote more time and attention to students with disabilities, who are more likely to need individualized attention compared to students without a disability. Teachers may also need more time planning lessons in order to adapt the lesson to meet the student’s needs. Some teachers lack the knowledge, training, resources, and other necessary supports to successfully teach students with disabilities.

Benefits with Inclusion and Children with Down syndrome

There are many positive aspects of teaching children with Down syndrome in an inclusion classroom. Inclusion has resulted in greater communication skills, greater social competence, and greater developmental skills. Disabled students also feel more socially accepted in the general education setting and interact with their peers at a much higher level versus being in a self-contained classroom (Savich, 2008). Students and teachers learn tolerance by developing and fostering a sense of community where diversity and differences are valued (Wolpert, 2001). Inclusion also offers students with disabilities a more active part in the student body; segregation being avoided. Costs to school districts are also much lower over time compared to teaching a student with a disability in a special education classroom.

Inclusion has dismantled children with disabilities from being segregated from the general education population, which is a goal under IDEA and No Child Left Behind (Savich, 2008). Overall inclusion of disabled children into the general education setting results in greater empathy, greater social cohesion, and a greater sense of diversity.
Parent/Guardian Feelings on Inclusion

Parental involvement and engagement is the best way to ensure that a child with a disability is receiving the appropriate services guaranteed under the Individuals with Disabilities Education Act (IDEA). Parents have choices and a voice in the direction of his/her child’s education. Parents need to be involved in their child’s individual education program (IEP) process and work closely with service care providers. With parental involvement the process will ensure the best quality education for the child.

Early intervention is also a critical element and building block for children with Down syndrome. Families can help begin and accelerate their child into the routine of daily living. Families can assist their child throughout different programs to build upon necessary skills such as gross and fine motor skills. As a parent helps his or her child work through various stages of development, it is important because it will help the child with their speech development, reading, practicing, and encouragement throughout his/her life’s development.

Parental input is the pathway to their child’s education. Studies have shown that parental involvement of children with Down syndrome’s most desired placement for their child is in an inclusive setting as the ideal program (Alkin, Bauminger, Freeman, Kasar, 1999). In addition, studies have shown that parents of children with Down syndrome whose child is currently in general education would rather have their child in a more inclusive placement compared to parents of children in special education (Hodapp, Freeman, Kasari, 1998). Parents of children with Down syndrome have highly recommended the general education placement as most suitable for his/her child because of the social experience and “normalcy” that their child gains (Hodapp et al., 1998). Including that their child’s self acceptance and self concept has greatly increased due to the interaction in a general education classroom. Many parent/guardians have
expressed that their child's peers set examples, are good role models, accepting, and forgiving (Alkin et al., 1999). Socially, children with Down syndrome or anything “different” of that matter are at greater risk for being teased and picked on. Through educating their peers on accepting differences and diversity this social normalcy can be achieved.

Overall the inclusion classroom outweighs the special education classroom. There are areas that parents feel can be improved, including additional classroom aides, extra tutoring, and smaller class sizes (Hodapp et al., 1998). The concerns that parents share is the teachers level of knowledge about disabilities, more and better adaptation of the curriculum and a need for more inclusion (Alkin et al., 1999). Many parents feel that a general education placement is most suitable especially at an earlier age. As a child begins to mature sometimes the schoolwork becomes too difficult. In response, many parents feel that a more structured environment, through special education, is needed to best suit their children.

- The Benefits of Inclusion for Parents are:
  - More encouraged to actively participate in the community.
  - Awareness of disabilities.
  - Knowledge of typical disability.
  - Ability to receive additional help, instruction and information (Pros of Inclusion, 2008)

Educators Beliefs on Successfully Including Students with Down syndrome

Research has shown that general education teachers have mixed feelings with regard to the feasibility of balancing the demands of teaching the included students with their other classroom duties (Wolpert, 2001). The inclusion of students with Down syndrome may require the adaptation of use of alternative classroom resources, materials, and methods. This may be
frustrating and tedious to the general education teacher. Moreover, some teachers have been found to enjoy this cumbersome experience of integrating students with Down syndrome into their teaching environment (Wolpert, 2008). Educator's philosophies on inclusion have differed between issues of curriculum change, classifications and labels, assessments, discipline and management, and teacher education. Throughout time there have been numerous disagreements amongst parents, general educators, special educators, psychologists, administrators, and related service professionals on the topic of inclusion (Wolpert, 2001). Over time research studies have found that there have been great academic outcomes for students with developmental disabilities when placed in the general education setting (Wolpert, 2001). With a growing concern for diversity in education with all the different developmental and learning needs, inclusion has been most widely accepted as the moral, legal, and practical way to approach special education reform (Wolpert, 2001).

Most Effective Learning Arrangements for Including Students with Down Syndrome

The most effective learning arrangement for an inclusion classroom with a student with Down syndrome is individual and small group instruction. In an inclusion classroom peer tutors, computers instruction and drill and team teaching are also strategies that are useful and effective (Wolpert, 2001). Computer assisted instruction is beneficial for the overall class because it is interactive, non-threatening, students can work at their own pace, and the programs usually involve small, sequential steps with a lot of repetition and drill (Wolpert, 2001).

The most effective place for instruction at the intermediate and upper grade levels is at the student's desk area using an overhead projector, blackboard/whiteboard. For primary grades using more informal seating arrangements such as sitting on the carpet or circle time has been found to be most effective (Wolpert, 2001).
The most effective materials used when teaching specific topics are different manipulatives and hands on activities. The use of computers, paper/pencil tasks, and textbooks are also sometimes effective (Wolpert, 2001). Workbooks were found to be very ineffective when teaching students with Down syndrome, in that workbooks can be heavily dependent on language and comprehension, which is a major problem area for students with Down syndrome (Wolpert, 2001). Also, workbooks can sometimes have too many distractions or problems on a page. This can be very overwhelming and confusing for children with Down syndrome.

Teachers have reported that praise was the best behavior management motivator/strategy for students with Down syndrome. Other helpful strategies were home/school communication, time out, material rewards, and loss of privileges such as free time. The most ineffective strategies are informing misbehavior, reprimanding and punishment. Students with Down syndrome usually need highlighted cues and more direct instruction to link concepts of cause and effect. In other words, students with Down syndrome need to be spoken to so that they can understand the relationship between the behavioral causes and consequences. And teachers also found that class projects and participation are more preferred methods for evaluation (Wolpert, 2001).

The most common recommendations that educators have on improving the quality of their inclusion teaching environment is increased one on one instructional time, more planning time, and more information on learning characteristics and strategies that can be used when teaching students with Down syndrome. The majority of teachers who have taught children with Down syndrome explain their experience as more rewarding than they initially anticipated, both for themselves and the general classroom.
• The Benefits of Inclusion for Educators Are:
  o Awareness and appreciation of individual differences in all children.
  o Access to specialists and resources to help all children.
  o Learn new teaching techniques that can help all students.
  o More understanding of child development.
  o Work with more diverse group of children.
  o Ability to learn to use difference approaches in order to get the
    information across to every student so that it is understood by all. (Pros for
    Inclusion, 2008)

Inclusion is important because it ensures equality and nondiscrimination on the basis of
disability and allows students to receive a free appropriate public education in the least restrictive
environment (Savich, 2008). We need to focus on what is best for our students. The students
with Down syndrome benefit from inclusion in many ways. They gain language skills to use
both in and out of school, there is an acceptance that is understood and appreciated, they become
apart of a community, therefore gaining access to the real world (Savich, 2008). Not only does
the student with Down syndrome gain from the inclusion classroom but so does the educator as
well as the other students in the class. Research from the National Research Center on Learning
Disabilities has shown that inclusion classrooms build self esteem and improve self concept or
self image in students with disabilities as well as those without. The more interaction students
with disabilities have with their general education peers the more tolerance, empathy, and
understanding there is that will be fostered and developed over time.
Methodology

Subjects

There were two subjects who were compared and contrasted throughout this study. The first subject is a Caucasian girl from Rochester, New York with Down syndrome who was placed in a suburban public school in a primary general education setting at the age of 5. She is in a kindergarten classroom consisting of 21 students and one teacher. Subject 1 comes from a middle class family and lives a very "normal" life at home with her mother, father, younger brother, and younger sister. Some of her interests include dancing, reading, music, swimming, her family, helping others, doing projects, going to the YMCA, playing on her computer, which is touch screen and participating in community events.

The second subject is an eight year old Caucasian girl from Hanover Park, Illinois. She also comes from a middle class family and lives at home with her mother, father, older sister and younger sister. Subject 2 enjoys reading, crafts, and different sporting activities. Subject 2 was previously in a self contained classroom throughout her primary grades. Her parents decided that it would be in her best academic and social interests to place her in an intermediate general education setting starting in the fourth grade. She is now in a fourth grade classroom consisting of 30 students, one teacher and one aid. Subject 2 is encouraged by her family, friends, and teachers to be independent and do her best now that she is in a general education setting. Her peers have also been prepped to help her succeed in accomplishing things on her own.

The parents of these subjects believe that a general education setting will give their daughters a better chance of developing basic essential skills; such as social skills and basics to learning which will benefit their child in their respective social and academic circles.
Procedure

This study was done through several informal and formal observations, interviews with the classroom teacher and supporting staff of Subject 1 compared and contrasted to a documentary video of the life and experiences of Subject 2 in an inclusive setting.

Finding/Results

Throughout this case study it has been proven that the benefits of including students with Down syndrome into a general education classroom far outweigh the challenges. This study has shown throughout formal and informal observations, interviews, and classroom work that the two subjects throughout this case study have grown both academically and socially at a rate that surpasses where they were before integrating into a general education setting.

Both teachers reported that initially the subjects were a little frightened when they first started school. This was their first time in a general education setting and was overwhelming at first; they looked different and were socially awkward. The teacher of Subject 1 stated that “this has been a learning experience for both the students as well as myself.” The personalities of the two subjects have developed day by day; academically they have made great progress and are socially accepted by all. The two subjects of this case study have learned a great deal from their peers, as their peers have learned a great deal from them. It was observed that being around students who functioned at a higher level challenged Subject 1 and Subject 2 unlike they were challenged before. The two subjects were treated just as any other students and are held accountable for their own actions and behavior just like their peers.

Subject 1 has shown great improvements in her development of her number skills that she is very proud of. When it comes to reading, Subject 1 is showing her ability to “pretend read” with well known books. She knows approximately 65 sight words, recognizes all letters, and can
print both upper and lower case letters. Subject 1 has also shown great strides in her phonics abilities; showing her ability to correspond between letters and sounds and some rhyming practice.

In math, Subject 1 enjoys numbers and counting; she can recognize numbers up to 100, can write the numbers 0, 1, 4, and 6 without any prompts, knows some addition facts (1+ numbers, and sometimes 2+ numbers) and has also developed an understanding of the terms greater than and less than.

Since her inclusion into a general education setting Subject 1 has developed many great academic skills, as listed above, as well as many social skills that are age appropriate. She has developed a strong visual memory relative to her auditory memory, follows routines and listens well. She has developed a great memory for names, understands and enjoys calendar time, and has become extremely social and enthusiastic.

When communicating with Subject 1, it is most helpful to accompany verbal prompts with visual cues such as hand signals, provide her with a consistent daily routine such as a list on her desk and make direct eye contact, which is beneficial to her overall sense of communication.

The learning adaptations that work best with Subject 1 are avoiding distractions on busy worksheets. When given a busy worksheet, provide her with a paper to cover up the other parts that are not being worked on to avoid her from doodling. This places the focus on the assignment and provides her with visual cues especially for multi-step activities. Also, some of the physical supports given to Subject 1 were a blue wedge for her to sit on whenever she is on the carpet to support her posture and help to keep her attention.

Subject 2 started off a little differently than Subject 1. She started in a general education classroom at the intermediate level so it was a little more frightening for her because at this level
students are more judgmental. She started off the school year a little reserved but as time progressed so has she. Subject 2 has become extremely comfortable in her classroom; she is socially accepted, talkative, alert, playful and engages in all classroom and outside activities. She is also not afraid to volunteer and read in front of her entire class. Subject 2 participates in daily whole group activities and is compassionate about her work.

Subject 2 has been encouraged to become more independent. Her peers are there to assist her in situations but anything she has trouble with academically is usually differentiated so she can continue to participate in each lesson. She adjusted easily to her new educational setting, and found new capabilities daily. School staff and her parents were surprised with the progress she has made so quickly.

Subject 2 still needs assistance with her writing and reading but overall she has done better than what was expected at this point. Academically in math she has made progress with telling time and counting money. She still needs assistance with writing but not as much dictation. She has started to form her own letters, her fluency has become a lot clearer, she responds appropriately and takes ownership of her work. Subject 2 works better in small group instruction and when receiving the individualized attention it is overall more beneficial for her. Sometimes she gets confused and does not understand during whole group academic instruction.

Subject 2 loves physical education and participates in all activities. When she is taught a new skill, she attempts it; even if it is not mastered, she never gives up (i.e. such as when learning how to “bump” a volleyball, she has fun with it). She has become very social and participates in the school choir. Subject 2 becomes very excited and likes to communicate with others and shares her experiences and accomplishments. Daily routines and lists seem to help her with consistency and predictability throughout the day. It is clear through Subject 2’s effort
that she is really trying to be successful, especially in improving her writing. She is cooperative and listens to directions especially when she is given an assignment, and she makes sure it is done to be handed in on time.

Both teachers throughout this study found that when the subjects refused to work, modeling and giving time to answer was helpful, and giving a response such as “Ok, we will come back to you” (i.e. ask a few others students and then coming back to the subject). Some other tips that worked when the subject refused are: giving the student time to think about the request, tell the student it is not an optional activity, use motivators and/or preferred activities, “I will wait until you are ready,” and giving free choices as means of encouragement.

This experience has been beneficial to both subjects. Their self-esteem, overall presence, self compliments and social acceptance have increased. They can engage in age appropriate social situations and carry on age appropriate conversations with peers. They both have made friends and participate in social activities outside of school with their peers. Their families are especially proud and excited that these experiences have made their child grow. Their families now see them as individuals who have their own friends, interests, and they may have never attempted before if it was not for the inclusion into a general education setting.

Students in these two classrooms have explained that they have a better understanding about people with disabilities and that everyone is different in their own way and that these differences are what make each and everyone unique. The subject’s teachers spoke on the overall benefits not only for the student with a disability but for all the students and how they have gained an appreciation for others, and how compassionate, kind, helpful and creative they have been. One teacher explained “it is rewarding to see these parts of student personalities shine through when having a student with a disability in the classroom.”
• The Benefits of Inclusion for Children with Special Needs:
  o Peers act as role models who facilitate communication, social and adaptive behaviors.
  o Learn motor, communication and other skills in the natural setting.
  o The environment is more stimulating.
  o Experience a variety of class schedules which offers skills and knowledge they may not receive in a special education classroom.
  o Opportunities to make new friends/sharing experiences.
  o Offers a sense of belonging/membership with the classroom community.
  o Helps students become more creative by observing the ideas of others.
  (Pros for Inclusion, 2008)

• Benefits of Inclusion for Children without Special Needs:
  o Become more accepting of individual differences.
  o More comfortable/aware of children who have learning disabilities.
  o Acquire leadership skills.
  o Improves self-esteem.
  o Diversity of friendships.
  o Encourages cooperation, tolerance, and acceptance. (Pros for Inclusion, 2008)

The teachers throughout this case study explained what a rewarding experience it has been and it could not be possible without the support of staff members, administrators, the community, parents, and peers. Both subjects have learned both good and bad behaviors but
The value and effectiveness that overall the best part is that both subjects have engaged in academic and social learning with children at varying levels and have gained an acceptance through this environment.

Discussion/Conclusion

This has been a wonderful experience and case study to research. I know from my own experience that when including students with any type of disability into a general education setting it is socially rewarding. Students step outside of their “comfort zones” and open up to new experiences and become more accepting and understanding of others. Throughout my research I compared and contrasted what I had found and the results seem to match up accordingly.

Overall inclusion has resulted in greater communication skills, greater social competence, and greater developmental skills. Small group instruction is more rewarding giving students more individualized attention. Many parent/guardians have expressed that their child’s peers have set examples, are good role models, are accepting, forgiving and it provided their child with a sense of normalcy. I also found that there have been great academic outcomes for students with developmental disabilities when placed in the general education setting at both the primary level (Subject 1) and intermediate level (Subject 2). I feel there are still areas that can be improved on, including additional classroom aides, extra tutoring, smaller class sizes, and more parent/guardian involvement in their child’s academic path.

As I conducted my research I ran into a situation that there is not a large number of students with Down syndrome included in the general education setting in the Rochester area. I found one student and contacted districts around the local area but found it extremely hard to get them to disclose information. I did find that there is a higher number of students with Down syndrome included in general education classrooms in the Buffalo region.
One limitation I found in my research was the lack of participants I had to perform my case study on. If I were to perform this research again I would broaden my title to the value/effectiveness that an inclusive setting has on students with mental disabilities, which would provide me with more information and participants to work with.

My next logical step(s) for this research would be sharing my findings and getting the word out on inclusion and the benefits and rewards that it has for not only students with Down syndrome but for any student with a mental disability taking into consideration the severity of the disability.
References:


