

# Exceptionality and Special Education



## QUESTIONS to guide your reading of this chapter...

- How can we get oriented to exceptionality and special education?
- What is the educational definition of *exceptional learners*?
- What is the prevalence of exceptional learners?
- What is the definition of *special education*?
- What are the history and origins of special education?
- What legislation and litigation have affected special education?
- What is our perspective on the reasons for optimism regarding special education?

## MISCONCEPTIONS ABOUT

### Exceptional Learners

- MYTH** Public schools may choose not to provide education for some students with disabilities.
- FACT** Federal legislation specifies that to receive federal funds, every school system must provide a free appropriate public education (FAPE) for every student, regardless of any disabling condition.
- MYTH** The causes of most disabilities are known, but little is known about how to help individuals overcome or compensate for their disabilities.
- FACT** In most cases, the causes of disabilities are not known, although progress is being made in pinpointing why many disabilities occur. More is known about the treatment of most disabilities than about their causes.
- MYTH** People with disabilities are just like everyone else.
- FACT** First, no two people are exactly alike. People with disabilities are unique individuals, just like everyone else. Often, most of their abilities are much like those of the average person who is not considered to have a disability. Nevertheless, a disability is a characteristic that is not shared by most people. It is important that disabilities be recognized for what they are, but individuals with disabilities must be seen as having many abilities—other characteristics that they share with the majority of people.
- MYTH** A disability is a handicap.
- FACT** A disability is an inability to do something, the lack of a specific capacity. A handicap, on the other hand, is a disadvantage that is imposed on an individual. A disability might or might not be a handicap, depending on the circumstances. For example, the inability to walk is not a handicap in learning to read, but it can be a handicap in getting into the stands at a ball game. Sometimes handicaps are needlessly imposed on people with disabilities. For example, a student who cannot write with a pen but can use a typewriter or word processor would be needlessly handicapped without such equipment.

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**T**he study of exceptional learners is the study of both differences and similarities. The exceptional learner differs in some way from the average. In very simple terms, such a person might have problems or special talents in thinking, seeing, hearing, speaking, socializing, or moving. More often than not, she has a combination of special abilities or disabilities. Today, more than 6 million learners with these differences have been identified in public schools throughout the United States. At least 2 of every 10 school-age students in the United States is considered exceptional. The fact that even many so-called normal students have school-related problems makes the study of exceptionality very demanding.

The study of exceptional learners is also the study of similarities. Exceptional individuals are not different from the average in every way. In fact, most exceptional learners are average in more ways than they are not. See, for example, the video ([http://www.youtube.com/watch?v=\\_rUIVxL19c0](http://www.youtube.com/watch?v=_rUIVxL19c0)) about several children who highlight the fact that their disability doesn't make them different in many aspects of their life. And although not all individuals with Down syndrome are high functioning, the following feature demonstrates how many of these individuals aspire to and attain similar life goals as the typical adolescent or young adult (<http://www.youtube.com/watch?v=VMoZhgN0V5o>). Until recently, professionals—and laypeople as well—tended to focus on the differences between exceptional and nonexceptional learners, almost to the exclusion of the ways in which all individuals are alike. Today, we give more attention to what exceptional and nonexceptional learners have in common—to similarities in their characteristics,

needs, and ways of learning. As a result, the study of exceptional learners has become more complex, and many so-called facts about children and youths with disabilities and those who have special gifts or talents have been challenged.

## Getting Oriented to Exceptional Learners and Special Education

Students of one of the hard sciences might boast about the difficulty of the subject matter because of the many facts they must remember and piece together. Students of special education face quite different problems. To be sure, they study facts, but the facts they must master are relatively few compared to the unanswered questions or ambiguities within their mind. Any study of human beings must take into account inherent ambiguities, inconsistencies, and unknowns. In the case of the individual who deviates from the norm, we must multiply all the mysteries of normal human behavior and development by those pertaining to the person's exceptionalities. Because no single theory of normal development is universally accepted, it is not at all surprising that relatively few definite statements can be made about exceptional learners and that many controversies remain (Kauffman, 2008; Kauffman & Hallahan, 2011).

### The Importance of Abilities

Many people with disabilities have abilities that go unrecognized because their disabilities become the focus of concern and distract attention from what the individual can do. We must study the disabilities of exceptional children and youths if we are to learn how to help them maximize their abilities in school. Some students with disabilities that are not obvious to the casual observer need special programs of education and related services to help them live full, happy, productive lives. However, we must not lose sight of the fact that the most important characteristics of exceptional learners are their abilities, not their disabilities.

Consider Nick Vujicic, a Serbian-Australian who was born with a rare disorder called **tetra-amelia**, which results in the absence of all four limbs. In this video about Nick, (<http://www.youtube.com/watch?v=Gc4HGQHgeFE>) you will see that despite

Nick's physical disabilities he is more like than unlike people without disabilities. He has similar life goals—aspirations for meaningful relationships, gainful employment, and participation in athletics—but he is different in that he has no arms or legs. As educators, we need to focus on both similarities and differences. Moreover, we should be inspired by individuals such as Nick Vujicic to help individuals move beyond their disabilities to reach their maximum potential (<http://www.youtube.com/watch?v=bQ0UFbU2tFU>).



We must not allow people's disabilities to keep us from recognizing their abilities or to become so much the focus of our concern that we overlook their capabilities.

### Disability Versus Handicap

We recognize an important distinction between disability and handicap: A **disability** is an inability to do something, a diminished capacity to perform in a specific way (an impairment); a **handicap**, however, is a disadvantage

imposed on an individual. Thus, a disability might or might not be a handicap, depending on the circumstances. Likewise, a handicap might or might not be caused by a disability. For example, blindness is a disability that can be anything but a handicap in the dark. In fact, in the dark, the person who has sight is the one who is handicapped. Needing to use a wheelchair might be a handicap in certain circumstances, but the disadvantage may be caused by architectural barriers or other people's reactions, not the inability to walk. Other people can handicap those who differ from themselves (in color, size, appearance, language, and so on) by stereotyping them or not giving them opportunities to do the things they are able to do. When working and living with exceptional individuals who have disabilities, we must constantly strive to separate their disabilities from the handicaps. That is, our goal should be to confine the handicaps to those characteristics and circumstances that can't be changed and to make sure that we impose no further handicaps by our attitudes or our unwillingness to accommodate their disabilities.

## Disability Versus Inability

Another important distinction is that between inability and disability. All disabilities are an inability to do something. However, not every inability to do something is a disability. That is, disability is a subset of inability: "A disability is an inability to do something that most people, with typical maturation, opportunity, or instruction, can do" (Kauffman & Hallahan, 2005a, p. 30; see also Stichter, Conroy, & Kauffman, 2008). Consider age and ability. Most 6-month-old infants cannot walk or talk, but they are not thought of as having a disability because their inability is age appropriate. However, if that inability extends well past the time when most children learn to walk and talk, then we consider their inability a disability. Consider the role of instruction. An adult's inability to read is not a reading disability if she or he has not had reading instruction. Weigh the factor of typical adult human abilities. A typical adult male might not be able to lift 400 pounds, but this isn't considered a disability, because most men simply can't lift 400 pounds. Judging inability in the context of old age, the average 70-year-old can't run 10 miles, but most 70-year-olds can walk a considerable distance. Not being able to run 10 miles is not considered a disability for a 70-year-old, but being unable to walk at all is. The point is, simply, that disability is a significant difference from what we expect most people to be able to do, given their age, opportunities, and instruction.

## Educational Definition of Exceptional Learners

For purposes of education, exceptional learners are those who require special education and related services if they are to realize their full human potential (Kauffman & Hallahan, 2005a). They require special education because they differ markedly from most students in one or more of the following ways: They may have intellectual disabilities, learning or attention disabilities, emotional or behavioral disorders, physical disabilities, disorders of communication, autism, traumatic brain injury, impaired hearing, impaired sight, or special gifts or talents. The chapters that follow define as exactly as possible what it means to have an exceptionality.

Two concepts are important to this educational definition of exceptional learners: (1) diversity of characteristics and (2) need for special education. The concept of diversity is inherent in the definition of exceptionality; the need for special education is inherent in an educational definition. Exceptional learners differ from most (typical or average) individuals in a particular way that is relevant

to their education. Their particular educationally relevant difference demands instruction that differs from what most (typical or average) learners require (Kauffman & Hallahan, 2005a; Kauffman & Konold, 2007; Stichter et al., 2008). Consider the case of Doug Landis, a successful artist who is gifted at drawing but is paralyzed from the neck down. Doug is an example of how the focus on persons with disabilities must be on what they can do rather than how they are limited. (To learn more about this successful artist, see *Up Close with Doug Landis*).

### UP close with Doug Landis

Doug Landis became quadriplegic (all four limbs are affected) in high school as a result of a wrestling accident. After Doug's accident, his brother thought he was watching too much television and challenged him to start drawing by putting a pencil in his mouth. Using a pencil attached to a mouth stick, Doug has become a major artist whose detailed line drawings of wildlife are highlighted, but he is gifted at drawing many things. He has also made short animated films. Doug is an active member of the organization Mouth and Foot Painting Artists (<http://www.mfpausa.com>), which assists artists with disabilities to meet their financial needs. Doug Landis's exquisite drawings and paintings of wildlife (<http://www.youtube.com/watch?v=55AFFtP2pSA>) illustrate how the focus on persons with disabilities must be on what they can do rather than on how they are limited. You may see Doug's art on his website (<http://www.mouthart.com>).

Sometimes seemingly obvious disabilities are never identified, and the consequences for the person and her family, as well as for the larger society, are tragic (Kauffman & Brigham, 2009). Sometimes disabilities are identified but special education is not provided, and opportunities for the child's development are thus squandered. Although early identification and intervention hold the promise of preventing many disabilities from becoming worse, preventive action often is not taken (Kauffman, 2005; Kauffman & Brigham, 2009; Stichter et al., 2008). In fact, the Centers for Disease Control and Prevention (CDC) (<http://www.cdc.gov/>) began a campaign to encourage the early identification of autism and developmental disabilities (<http://www.youtube.com/watch?v=KrUNBfyjBk>).

Special education does not always work as it should, but when it does, educators identify a student's disability early and provide effective special education in the least restrictive environment. The student's parents are involved in the decision about how to address the student's needs, and the outcome of special education is the student's improved achievement and behavior.

Students with exceptionalities are an extraordinarily diverse group in comparison to the general population, and relatively few generalizations apply to all exceptional individuals. Their exceptionalities can involve sensory, physical, cognitive, emotional, or communication abilities or any combination of these. Furthermore, exceptionalities may vary greatly in cause, degree, and effect on educational progress, and the effects may vary greatly depending on the individual's age, sex, and life circumstances. Any individual presented as an example of an "exceptional learner" is likely to be representative of exceptional learners in some respects but unrepresentative in others.

The typical student who receives special education has no immediately obvious or visible disability. He (more than half of the students served by special education are males) is in elementary or middle school and has persistent problems in learning and behaving appropriately in school. His problems are primarily academic and social or behavioral, and may not be apparent to many teachers until they have worked with him for a period of weeks or months. His problems persist despite teachers' efforts to meet his needs in the regular school program in which most students succeed. He is most likely to be described as having a learning disability or to be designated by an even broader label indicating that his academic and social progress in school is unsatisfactory owing to a disability.

By federal law, schools should not identify these exceptional students as eligible for special education until careful assessment indicates that they are unable to make satisfactory progress in the regular school program without special services designed to meet their extraordinary needs. Federal special education laws and regulations include definitions of several conditions (categories such as learning disability, autism, and hearing impairment) that might create a need for special education. These laws and regulations require that schools provide special services to meet whatever special needs are created by a disabling condition that can't be met in the regular educational program. The law doesn't require provision of special education simply because a student has a disability.

# Prevalence of Exceptional Learners

**Prevalence** refers to the percentage of a population or number of individuals having a particular exceptionality. Obviously, accurate estimates of prevalence depend on the ability to count the number of people in a given population who have a specific exceptionality.

The task of determining the number of students with exceptionalities might appear simple enough, yet the prevalence of most exceptionalities is uncertain and a matter of considerable controversy. Multiple factors make it hard to state the number of exceptional individuals with great accuracy and confidence. These factors include vagueness in definitions, frequent changes in definitions, and the role of schools in determining exceptionality—matters that we discuss in later chapters (see also Kauffman & Hallahan, 2011).

Government figures indicate that over 6.5 million students (8.5%) receive special education services in schools today (Data Accountability Center, 2013). It's important to keep in mind that the number of students served in special education is not necessarily equal to the number of students who actually have the disability. The latter is much more difficult to calculate than the former, because the federal government requires school districts to report each year the number of students with disabilities they are serving. Beginning in the mid-1970s, the number of students served by special education grew steadily, from about 3.75 million in 1976 to more than 6 million in the early 21st century. Most of the children and youths who are served by special education are between the ages of 6 and 17. Although preschoolers and youths ages 18 to 21 are being identified with increasing frequency as having disabilities, school-age children and youths in their early teens make up the bulk of the identified population.

The percentage of the special education population identified as having certain disabilities has changed considerably over several decades. For example, the number of students identified as having learning disabilities has more than doubled since the mid-1970s; these students now make up about half of the number of students receiving special education. In contrast, the percentage of students whose primary disability is speech or language impairments declined substantially (but is growing again), and the percentage identified as having intellectual disabilities is now about half of what it was in 1976. No one has an entirely satisfactory explanation of these changes. However, they might in part reflect alterations in definitions and diagnostic criteria for certain disabilities and the social acceptability of the “learning disability” label. In subsequent chapters, we discuss the prevalence of specific categories of exceptionality.

## High-Incidence and Low-Incidence Categories

Some disabilities occur with a relatively high frequency and are called *high-incidence disabilities* because they are among the most common. Learning disabilities, communication (speech and language) disorders, emotional disturbance, and mild intellectual disabilities are among those usually considered high incidence (Stichter et al., 2008). Other disabilities (such as blindness, deafness, severe intellectual disabilities, and autism) occur relatively rarely and are considered low-incidence disabilities.

Although the rates of occurrence of most of the high-incidence disabilities have remained relatively stable in the early 21st century, some of the low-incidence categories have increased dramatically. For example, the identification of **autism** or **autistic spectrum disorder** has increased dramatically since about 1995 (discussed further in Chapter 9; see also Stichter et al., 2008). In fact, some professionals speculate that it will eventually be considered a high-incidence disability. Other low-incidence categories showing a substantial increase in numbers include **traumatic brain injury (TBI)** and orthopedic impairments; much of this is due



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to increases in spinal cord injury and in survival of severe physical trauma owing to better medical care.

Much of the increase in diagnosis of autism probably represents improved identification procedures and identification of milder cases of autism, not an epidemic (National Research Council, 2001). Although some of the increase in TBI might represent better diagnosis, it might also reflect actual increases in brain injuries, as we will discuss in Chapter 13. Increases in orthopedic impairments might reflect the increasing survival rates of infants born with significant physical anomalies and of children involved in accidents. Increases in hearing and vision impairments might represent better diagnosis of these disabilities, too.

## Definition of Special Education

**Special education** means specially designed instruction that meets the unusual needs of an exceptional student and that might require special materials, teaching techniques, or equipment and/or facilities. Students with visual impairments might require reading materials in large print or braille; students with hearing impairments might require hearing aids and/or instruction in sign language; those with physical disabilities might need special equipment; those with emotional or behavioral disorders might need smaller and more highly structured classes; and students with special gifts or talents might require access to working professionals. Related services—special transportation, psychological assessment, physical and occupational therapy, medical treatment, and counseling—might be necessary if special education is to be effective. The single most important goal of special education is finding and capitalizing on exceptional students' abilities.

The best general education cannot replace special education for those who need it; special education is more precisely controlled in pace or rate, intensity, relentlessness, structure, reinforcement, teacher–pupil ratio, curriculum, and monitoring or assessment (Hallahan & Pullen, 2014). We think it's a good idea to improve the education of all children, an objective of the federal education laws of the early 21st century; however, good or reformed general education does not and cannot replace special education for those students at the extremes of the range of disabilities (Hallahan & Pullen, 2014; Kauffman & Konold, 2007; Zigmond, 2007; Zigmond & Kloo, 2011; Zigmond, Kloo, & Volonino, 2009).

## History and Origins of Special Education

There have always been exceptional learners, but there haven't always been special educational services to address their needs (see Holmes, 2004; Metzler, 2006). During the closing years of the 18th century, following the American and French Revolutions, effective procedures were devised for teaching children with sensory impairments (i.e., those who were blind or deaf; Winzer, 1993). In 1829, Samuel Gridley Howe created the first residential school for students who were blind; the curriculum focused on both traditional reading, writing, and mathematics and students' individual interests and abilities (Sapp & Hatlen, 2010). Early in

the 19th century, the first systematic attempts were made to educate “idiotic” and “insane” children—those who today are said to have **intellectual disabilities** and **emotional or behavioral disorders** (or **emotional disturbance**; Kauffman & Landrum, 2006; Stichter et al., 2008).

In the prerevolutionary era, the best that society offered most children with disabilities was protection—asylum from a cruel world into which they didn’t fit and in which they couldn’t survive with dignity, if they could survive at all. But as the ideas of democracy, individual freedom, and egalitarianism swept across America and France, a change in attitude occurred. Political reformers and leaders in medicine and education began to champion the cause of children and adults with disabilities, urging that these “imperfect” or “incomplete” individuals be taught skills that would allow them to become independent, productive citizens. These humanitarian sentiments surpassed a desire to protect and defend people with disabilities. The early leaders sought to normalize exceptional people to the greatest extent possible and confer on them the human dignity they presumably lacked.

Contemporary educational methods for exceptional children can be traced directly to techniques pioneered during the early 1800s. Many (perhaps most) of today’s vital, controversial issues have been issues ever since the dawn of special education. Some contemporary writers believe that the history of special education is critically important to understanding today’s issues and should receive more attention because of the lessons we can learn from our past (e.g., Gerber, 2011; Kauffman & Landrum, 2006). In our discussion of major historical events and trends since 1800, we comment briefly on the history of people and ideas, the growth of the discipline, professional and parent organizations, and legislation.

## People and Ideas

Most of the originators of special education were European physicians. They were primarily young, ambitious people who challenged the wisdom of the established authorities, including their own friends and mentors (Kanner, 1964; see also Kauffman & Landrum, 2006; Stichter et al., 2008).

Most historians trace the beginning of special education as we know it today to Jean-Marc-Gaspard Itard (1774–1838), a French physician who was an authority on diseases of the ear and on the education of students who are deaf. In the early 19th century, this young doctor began to educate a boy of about 12 years of age who had been found roaming naked and wild in the forests of France (sometimes referred to as the “wild child” or the “wild boy of Aveyron”). Itard’s mentor, Philippe Pinel (1745–1826), a prominent French physician who was an early advocate of humane treatment of “insane” people, advised Itard that his efforts would be unsuccessful because the boy, Victor, was a “hopeless idiot.” But Itard persevered. He did not eliminate Victor’s disabilities, but he did dramatically improve the wild child’s behavior through patient, systematic educative procedures (Itard, 1962). Recently, Mary Losure (2013) published a nonfiction book for children and adolescents that provides the history of the wild boy of Aveyron (<http://www.youtube.com/watch?v=77j6OIX66Cc>). Cases such as the wild boy of Aveyron bring into question the role of nature and nurture in human development (see the Focus on . . . The Nature–Nurture Controversy).

The ideas of the first special educators were truly revolutionary for their times. Following are some of the innovative



Special educators have the responsibility to offer not just good instruction, but also instruction that is highly individualized, intensive, relentless, urgent, and goal directed.

ideas of Itard, Édouard Séguin, and their successors that form the foundation for present-day special education:

- *Individualized instruction*, in which the child's characteristics, rather than prescribed academic content, provide the basis for teaching techniques
- *A carefully sequenced series of educational tasks*, beginning with tasks the child can perform and gradually leading to more complex learning
- *Emphasis on stimulation and awakening of the child's senses*, to make the child more aware of and responsive to educational stimuli
- *Meticulous arrangement of the child's environment*, so that the structure of the environment and the child's experience of it lead naturally to learning
- *Immediate reward for correct performance*, providing reinforcement for desirable behavior
- *Tutoring in functional skills*, to make the child as self-sufficient and productive as possible in everyday life
- *Belief that every child should be educated to the greatest extent possible*, because every child can improve to some degree

### FOCUS ON ...

## THE NATURE–NURTURE CONTROVERSY

One of the oldest controversies involving the education of exceptional learners is the extent to which nature and nurture contribute to what a child becomes. What is attributable to biological factors such as genetics and other aspects of physical endowment, and what is attributable to environmental factors such as opportunity, encouragement, and teaching? The controversial idea was part of Itard's work in the early 19th century, and is still being debated by psychologists (e.g., Pinker, 2002) and popular writers (e.g., Gladwell, 2008) today.

For many years, theoreticians tended to view the nature–nurture issue from an either/or perspective: Either you believed that heredity held the key to determining intellectual development or you believed that the environment was the all-important factor. Today, however, most authorities believe that both heredity and the environment are critical determinants of intelligence. Some scientists have tried to discover how much of intelligence is determined by heredity and how much by the environment, but many view this quest as futile. They assert that heredity and environment do not combine in an additive fashion to produce intelligence. Instead, the interaction between genes and environment results in intelligence. Laurence Steinberg of Temple University explains the interaction of genetics and the environment and its role in human behavior; he highlights the need to break down the false dichotomy between genes and the environment (<http://www.youtube.com/watch?v=j-nnJpV1iuE>).

So far, we've mentioned only European physicians who figured prominently in the rise of special education. Although much of the initial work occurred in Europe, many U.S. researchers contributed greatly during those early years. They kept informed of European developments as best they could, some of them traveling to Europe for the specific purpose of obtaining firsthand information about the education of children with disabilities.

Among the young U.S. thinkers who were concerned with the education of students with disabilities was Samuel Gridley Howe (1801–1876), an 1824 graduate of Harvard Medical School. Besides being a physician and an educator, Howe was a political and social reformer, a champion of humanitarian causes and emancipation. He was instrumental in founding the Perkins School for the Blind in Watertown, Massachusetts, and also taught students who were deaf and blind. His success in teaching Laura Bridgman, who was deaf and blind, greatly

influenced the education of Helen Keller. In the 1840s, Howe was also a force behind the organization of an experimental school for children with intellectual disabilities (mental retardation) and was personally acquainted with Séguin.

When Thomas Hopkins Gallaudet (1787–1851), a minister, was a student at Andover Theological Seminary, he tried to teach a girl who was deaf. He visited Europe to learn about educating the deaf and in 1817 established the first American residential school, in Hartford, Connecticut, for students who were deaf (now known as the American School of the Deaf). Gallaudet University in Washington, D.C., the only liberal-arts college for students who are deaf, was named in his honor.

The early years of special education were vibrant with the pulse of new ideas. It isn't possible to read the words of Itard, Séguin, Howe, and their contemporaries without being captivated by the romance, idealism, and excitement of their exploits. The results they achieved were truly remarkable for their era. Today, special education remains a vibrant field in which innovations, excitement, idealism, and controversies are the norm. Teachers of exceptional children—and that includes all teachers—must understand how and why special education emerged as a discipline (see Gerber, 2011).

## Normalization, Deinstitutionalization, and Inclusion

Among the major 20th-century ideas in special education is *normalization*, the philosophy that we should use “means which are as culturally normative as possible, in order to establish and/or maintain personal behaviors and characteristics which are as culturally normative as possible” (Wolfensberger, 1972, p. 28). With normalization, society breaks down the barriers to participation of people with disabilities in normal life. The concept of normalization was in itself important and led to related ideas, such as closing institutions and including exceptional learners in general education classrooms and schools.

Normalization continues to be a goal in special education and all other aspects of responding to disability. Breaking down barriers to participation of people with disabilities in activities with nonhandicapped individuals was one of the ideas leading to the **deinstitutionalization** movement of the late 20th century. At one time, it was common to place nearly all children and adults with intellectual disability (mental retardation) and/or mental illness in residential institutions. In the 1960s and 1970s, systematic efforts were made to move people out of institutions and back into closer contact with the community. This led to more children with disabilities being raised by their families and resulted in the closure of many institutions regardless of the nature of the problems of the people involved. Today, smaller facilities within local neighborhoods are common. Halfway houses exist for individuals with emotional difficulties, who no longer are thought to need the more isolated environment of a large institution. However, much still needs to be done to improve the quality of life for some people with disabilities who, in the past, may have been in institutions. In fact, many people who formerly would have been in institutions are now homeless or in jail (see Earley, 2006; Goin, 2007; Nomani, 2007). Increasing numbers of individuals are homeless in the United States, and cognitive and mental health disabilities are significant risk factors for homelessness (Edens, Kaspro, Tsai, & Rosenheck, 2011; Mercier & Picard, 2011).

Perhaps the most controversial issue growing out of the idea of normalization is **inclusion**. Actually inclusion, or integration, has long been an issue with all exceptional students, including those with special gifts or talents. Although historically educators built educational programming for students with disabilities on the assumption that a variety of service delivery options need to be available (Crockett & Kauffman, 1999, 2001; Kauffman, Mock, Tankersley, & Landrum, 2008), inclusion of exceptional learners in ordinary classrooms with their nonexceptional peers has become the single most important issue for some advocates. The issue of