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Navigating the Complexities: A Comprehensive Analysis of Special Education

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Jaycee Cribbs West

Abstract

The availability of special education is evidence of how society is coming to appreciate inclusion and diversity. This research begins a thorough examination of the complex field of special education, including its historical foundations, the range of impairments it addresses, the rules and regulations guiding its application, and the cutting-edge strategies influencing its future. To clarify the revolutionary path towards fair educational possibilities for people with disabilities by looking at historical turning points, such as the institutionalization era and the emergence of inclusive educational practices. The various impairments that are handled in special education, each with their own set of difficulties and concerns for instruction, are at the center of this investigation. It also explores the critical role that policies and procedures play in directing the practice of special education, from creating personalized learning plans to putting Response to Intervention (RTI) frameworks into practice. The cultivation of inclusive learning environments is contingent upon instructional techniques and technological integration, with cooperation between educators, parents, and other professionals playing a critical role in promoting students' holistic development. This study highlights the larger cultural commitment to equality, inclusion, and social justice in education in addition to providing a thorough review of special education. Through this investigation, light is shed on the route forward to a time when every person, regardless of ability, may prosper and reach their full potential in an inclusive learning environment.

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Thesis

Special education gives students that struggle a chance to excel in school as well as later in life. Special education's history, specialized classrooms, instructional practices, policy and procedures, and collaboration is an integral part of their success in school and beyond.

Introduction

The provision of special education is a monument to society's developing knowledge of diversity and inclusiveness, woven within the complex fabric of education. When we go into the past, we find a record of advancements and setbacks in meeting the educational requirements of people with disabilities. The trip starts in the shadow of institutionalization, when people with disabilities were pushed to the periphery and frequently placed in remote facilities disconnected from the majority by existing social conventions. The tide did, however, eventually turn as reformers and supporters fought for inclusive education, dismantling the idea of segregation and pushing for the inclusion of people with disabilities in regular classroom environments. Special education's development is reflected in larger cultural movements for equity and inclusiveness. The field of special education has seen significant changes from the days of segregated integration, when students with disabilities were frequently housed in separate classrooms or schools, to the current mainstream perspective, which supports the rights of students with diverse needs to receive an education alongside their peers. These days, inclusive education's tenets act as beacons of guidance, showing the way toward an educational system that values diversity and

recognizes each person's special talents and qualities. The many impairments that special education aims to treat are fundamental to its structure. Special education covers a wide range of disabilities, each with specific challenges and instructional considerations. These disabilities include intellectual disabilities, hearing impairments, speech or language impairments, emotional and behavioral disorders, autism spectrum disorder, traumatic brain injuries, and developmental delays.

To create successful educational interventions that meet each student's unique requirements and enable them to realize their full potential, it is essential to comprehend the subtleties of these difficulties. Policies and procedures provide as guiding frameworks, outlining the duties and responsibilities of educators, administrators, and stakeholders in guaranteeing fair educational opportunities for everyone, amongst the many difficulties and complexity of special education. Policies and procedures are essential in determining how the educational landscape is shaped, from the use of Response to Intervention (RTI) frameworks to the creation of customized learning programs suited to each student's specific requirements. Moreover, instructional practices—which include a broad range of tactics and approaches intended to accommodate a variety of learning styles and abilities—form the cornerstone of successful special education programming. To fulfill the varied requirements of their pupils, educators constantly adapt and innovate through cooperative learning, multisensory techniques, individualized education, and assistive technology integration. With the advent of digital technology, special education has a strong ally in the form of cutting-edge tools and resources that promote learning and improve accessibility. Technology has the power to completely transform the special education classroom, promoting independence, engagement, and academic achievement. This includes anything from instructional software customized to meet each

student's unique learning requirements to augmentative and alternative communication technologies. Effective special education practices also emphasize collaboration, as professionals, parents, and educators work together to promote children' complete development. The combined knowledge of many stakeholders comes together via cooperative partnerships and multidisciplinary cooperation to provide inclusive learning environments that support each learner's development and well-being. As we set out on this tour through the maze of special education, we are doing more than just academic research. It is evidence of our group's dedication to social justice, fairness, and inclusion. Come along with us as we explore the unique world of special education, revealing its mysteries and showing the way to a future in which every person, regardless of ability, may prosper.

Special Educations History

Institutionalization of People with Disabilities

The history of special education begins with institutionalization, when people with disabilities were housed in special facilities where they attended classes and lived with other people who shared their learning requirements. Additionally, institutionalization led to seclusion, cutting off those with disabilities from society at large (Francisco et al., 2020). In the United States in the early 1800s, institutionalization was popular, with the construction of specialized facilities to cater to the needs of people with disabilities. These institutes were established to teach people with disabilities how to become more independent because, in the past, disability was associated with reliance. Furthermore, at this time, religious organizations assumed responsibility for teaching people with disabilities, making special education appear charitable and beneficial. This contributed to the development of the charity model of disability (Francisco et al., 2020).

Leading individuals like Henry Barnard and Horace Mann spearheaded the introduction of public education in 1837 with the intention of "Americanizing" pupils. The curricula of facilities housing people with disabilities, however, differed from those of "regular" public schools. Since the state was responsible for education, different states created laws requiring compulsory education; yet, in public schools, classrooms were not accessible to those with disabilities in spite of these rules. Despite mandatory laws, a number of court cases in the 1890s gave public schools the authority to bar students who were judged to be weaker or different (i.e., disabled) from attending. These students could be excluded for any number of reasons, including disruption to the majority or lack of benefit to the public (Francisco et al., 2020). A change in the way society viewed children with impairments was marked at the inaugural White House Conference on Children, which took place in 1910. After being moved to special courses with a lower teacher-to-student ratio, those with impairments may get more customized instruction thought to benefit those with impairments more. The Great Depression and the reduction in financial support for the education of people with disabilities occurred at the same time as the 1930s. During this time, people believed that a person's impairment was inherited, making them believe that they would never get better, not even with special schooling.

Segregated Integration of People with Disabilities

They changed from institutionalization to segregation or "segregated integration," in which separate classrooms were created and held in ordinary school facilities. As a result, they still attend separate classrooms, people with disabilities are incorporated into the educational system (Francisco et al., 2020). Separate schools and classrooms for people with disabilities were established in the 1920s so that teachers could provide specialized education to a smaller student-teacher ratio. But during the 1930s and 1940s, financing for special education fell, and labeling

resulted in social exclusion and stigma. Additionally, it led to a curriculum that was simplified and insufficient supplies for special education schools. The Universal Declaration of Human Rights was approved by the United Nations in 1948, three years after World War II and during the Cold War. It declared that everyone should have universal protection for their fundamental human rights (Francisco et al., 2020). Some prominent academics in the field of special education in the UK, USA, and Australasia during the past forty years seem to have lost touch with the realities that face many practitioners and parents of children with special needs and disabilities. Furthermore, they have not given enough consideration to the advancements in the area of special education throughout this time, as well as the mounting body of data demonstrating the benefits of schooling for youth with disabilities and special educational needs. "Deliberate deconstruction, unfeasible reform proposals, and years of unjustified criticism from within our profession and from others have undermined good will toward special education." (Kauffman & Hornby, 2020, Pg 2). Parents' and special interest groups' actions had a major role in the federal government's increased support of special education in the 1950s and 1960s. A number of states have passed legislation permitting kids with impairments to attend classes with "normal" pupils. Brown v. The Board of Education, a historic court decision from 1954, cleared the path for laws supporting people with disabilities. People started to think that people with disabilities had the same rights as their classmates in public schools and that segregation deprived them equal opportunities. The first federal intervention in the field of special education occurred in 1958 with the passage of the Expansion of Teaching in the Education of Mentally Retarded Children Act. Up until then, all legislation pertaining to special education were state laws. As schools began to take a more humanistic approach in the 1970s, normalization beliefs began to take hold. Two historic court cases concerning the exclusion of people with

impairments from schools took place in 1972. The two instances were Mills v. Board of Education in the District of Columbia and Pennsylvania Association for Retarded Citizens (PARC) v. Pennsylvania in Pennsylvania (Francisco et al., 2020). In order to resolve the PARC case, all children with mental issues between the ages of 6 and 21 were given free public education and were required to attend school in a manner comparable to that of other pupils. However, as a result of the Mill case, the Board of Education was mandated to give all disabled children free public education and the protections of due process. With the passage of the Rehabilitation Act in 1973, Section 504 clearly established the civil rights of people with disabilities and outlawed discrimination. The Individuals with Disabilities Education Act (IDEA) is the federal law that governs special education services in the United States. It assigns states the responsibility of enforcing local special education standards. Congress approved P.L. 94-142, also known as the Education for All Handicapped Children Act (EAHCA), in 1975, marking the beginning of the IDEA's legislative history. The legislation was founded on a number of tenets that have been upheld by ensuing reauthorizations and renaming's. One of these was the "zero reject" concept, which states that all pupils have to be allowed to attend school (Dhingra & Miller, 2021).

Mainstream View on People with Disabilities

Following institutionalization, and segregation the tendency moved toward mainstreaming and normalcy before culminating in inclusion. After revisions, the Individuals with Disabilities Education Act (IDEA) replaced the Education for All Handicapped Children Act or the EAHCA in 1990. The Americans with Disabilities Act (ADA) was also passed in this year. Every person with a disability has an individual education plan, or IEP. According to IDEA, an IEP is a formal written document created for each kid who has been identified as having

special learning needs and a disability. Relevant details on the child's history, aptitudes, learning requirements, required accommodations, and desired outcomes are all included in the paper. A group of experts who oversee the child's yearly educational progress draft this document, develop it, and evaluate it (Francisco et al., 2020).

IEPs were introduced into the educational system when the legislation mandated that these guarantees be supported by a binding contract (IDEA, 2004). Because it is intended to bring together a wide range of interested parties in the cooperative endeavor of identifying a particular child's needs, historians have described to the IEP as the "centerpiece" of the EAHCA. In addition, the IEP serves as a state's official document outlining the procedural obligations owed to special education pupils. Parents now have written documentation of the previously unobtainable remedies, along with a number of deadlines and "procedural safeguards" via an official complaint procedure. Special education offered a collaborative, deliberate process for creating IEPs and defining a student's plan for free adequate public education, or FAPE (Dhingra & Miller, 2021). A concept of complete inclusion—which is now frequently embodied by the phrase "All Means All"—has been advanced by a few senior academics holding influential positions in the area of special education. According to this vision, all children, without exception, must receive an education in mainstream classes alongside peers their own age. Despite the many concerns expressed by educators and parents and the paucity of data supporting the benefits of inclusive education for certain children over traditional special education placements and services, this policy guidance has been pushed (Kauffman & Hornby, 2020).

The goal of the majority of IEP process changes has been to provide parents and kids the same negotiating leverage as school administrators. In 1997, IDEA amendments mandated that

children with disabilities who were 14 years of age or older be asked to participate in IEP sessions. In order to allow parents to participate in IEP teams, school administrators now have to take certain actions, such as setting up meeting times that work with parents' schedules and providing interpreters and translators for parents who do not speak English well or who are deaf. Parents who emphasize that a FAPE involves both procedural and substantive features have increased their relative legal strength throughout the history of IEP litigation, at least for those who can afford to file a lawsuit (Dhingra & Miller, 2021). The social model, often known as the "minority group" paradigm, which views disability as the result of a debilitating environment, gained traction around the time the ADA was passed. The Convention on the Rights of Persons with Disabilities, which was approved by the UN in 2006, represents a change in the global perception of people with disabilities as human beings with rights and fundamental freedoms. Perspectives on social justice, human rights, and educational fairness began to impact modern special education methods as a result of the paradigm shift. Although it may appear that the existing special education system does not lead to equity for people with disabilities, special education is frequently viewed as a means of achieving it. The intersectionality of inclusion and special education has various facets, including socioeconomic background, gender, and race (Francisco et al., 2020). Teachers are encouraged to envision an endless educational system in which all students with disabilities will be enrolled in general education. This means that there won't be any special schools, classrooms, or locations for any students with disabilities because regular or general education will be so adaptable and differentiated that there won't be any restrictions on how well it can accommodate and fit students with disabilities, regardless of the type or severity of their special needs. When general education becomes inclusive of everyone—"all means all," no exceptions (Kauffman & Hornby, 2020).

Types of Special Education

Intellectual disability

The phrase "intellectual disability" has been the subject of significant dispute in the USA, with many advocating for its complete replacement of the term "mental retardation." The term "intellectual disability" is viewed by the American Association on Intellectual and Developmental Disabilities (AAIDD), formerly known as the American Association on Mental Retardation (AAMR), as a progressive one that acknowledges unique bodies and permits the inclusion of societal impediments. Internationally used diagnosis guides are attempting to replace the severely antiquated word "mental retardation" with the more modern phrase "intellectual and developmental disability," in tandem with the AAIDD's endorsement of the term "intellectual disability." It is believed that the phrase "intellectual developmental disorder" will be used in 2018 (Cluley, 2017). Students with intellectual disabilities spend a significant amount of time in schools due to the push to educate them in regular and special schools, both globally and in Saudi Arabia. The need for expert assistance in educational settings has emerged as a result of the prevalence of physical health conditions among students with intellectual disabilities. These conditions include epilepsy, heart disease, diabetes, thyroid disease, endocrine system disorders, gastrointestinal disorders, dermatomycosis, eye and ear disorders, osteoporosis, and obesity. persons with intellectual impairments typically have higher rates of health issues, such as epilepsy, diabetes, asthma, and skin illnesses, than persons without intellectual disabilities (Alhammad, 2024). The preferred term in the UK for individuals with significantly diminished capacity to comprehend novel or complex information, acquire new skills, and manage independently has long been defined as learning disability. This impairment typically begins before adulthood and has long-lasting consequences on development. Although there are various

terminology that may be more preferred by specific groups, such as learning difficulties among certain self-advocates, the term "learning disability" has been widely used and accepted for more than 20 years by both those with and without learning problems. However, the phrase intellectual disability is becoming more and more common in UK professional discourse, sometimes used interchangeably with learning disability (Cluley, 2017). By the age of sixteen, all adolescents with impairments are required to start receiving transition assistance under the IDEIA (2004). The goal of transition services is to help young people become ready for life after school, including independent living, work, education, adult services, and community involvement. Activities provided by transition programs are tailored to each youth's needs, strengths, and postschool objectives. Research on transition programs and education for adolescents with IDD in public schools has been extensive; however, research on youth with intellectual disabilities in restricted settings has been scant (Hester et al., 2024). In real life, what does the term "learning disability" mean? In order to reevaluate ideas about learning disorders, this study combined focus groups with individuals who did not have learning problems and photovoice with individuals who did. Although the broader survey includes the opinions and perspectives of individuals with learning difficulties, these groups were not expressly questioned about the term "intellectual disability." It is acknowledged that the perspectives of individuals with learning impairments are crucial to this lexicon expansion. Consequently, it is strongly advised that more study delve into their perspectives (Cluley, 2017).

After school people with intellectual impairments are finding that social business is a viable way to create flexible job transitions. The protracted periods of work adjustment and continued supportive work settings that are characteristic for this demographic, together with the difficulties in finding appropriate and fulfilling employment matching in the traditional labor

market, have led to the adoption of this alternative. In order to create meaningful and long-lasting jobs in social enterprises, developers must address employee needs from the perspectives of human resources and skill development in addition to adhering to sound business management practices. This intersection occurs at the intersection of social programming and business management (Lysaght et al., 2022). According to the IDEIA, between 65 and 70 percent of young people who are detained have disabilities. Emotional disturbance, learning impairment, and intellectual disability are the most prevalent disabilities in the juvenile justice system. Due to inadequate screening and assessment resources while jailed, as well as a delay in school system evaluations, researchers are unable to pinpoint the exact proportion of adolescents with intellectual disability who are engaged in the judicial system. According to research, 10% of young people who are jailed have an intellectual disability diagnosis. Although this might seem like a little percentage, the proportion of children with intellectual disability in school systems is significantly higher—between 1% and 3% (Hester et al., 2024). People with intellectual impairments can now find jobs through social business, which has been widely adopted. The establishment of market-facing enterprises under the work integration social enterprise (WISE) concept aims to improve employment outcomes for members of employment-disadvantaged groups. It is not to be confused with assisted employment, which concentrates on providing personalized placement and assistance into competitive local firms. In addition, it differs from sheltered employment in a number of ways, such as emphasizing competitive work behaviors more, having integrated workforces, interacting with consumers more, and offering competitive pay plans. Apart from the conventional and well-known WISE model, a variation of social enterprise that merges the concepts of self-employment and entrepreneurship is becoming more and more well-liked (Lysaght et al., 2022).

Speech, language, and hearing impairments

Young children with speech or language impairments (SLIs) are more likely to have abnormal development, which can include diminished cognitive, behavioral, and academic performance. Children with SLIs who are in elementary school have a higher chance of developing behavioral and literacy difficulties, as well as increased bullying and feelings of loneliness. Children with SLIs have poorer odds of finishing high school, higher unemployment rates, and, if they do find work, lower-paying jobs as they become older. The prevalence of combined speech and language delays in preschool-aged children ranges from 5% to 8%, while language delays range from 2% to 19%. Untreated speech and language delays have persistence rates of 40% to 60%. Children who receive the necessary identification, interventions, and services by kindergarten demonstrate significantly improved speech and language abilities (Morgan et al., 2017). Three obstacles might stand in the way of speech-language-hearing researchers utilizing secondary data sets to look into pertinent study topics. First, there's a chance that many data sets don't contain enough people with speech-language or hearing problems to allow for relevant studies with these subgroups. This might be because there are few instances of these delays in the sample as a whole, or because selection procedures frequently prevent these people from taking part. Second, due of high sample sizes or purposeful sampling techniques that specifically target these individuals, investigations may include a sufficient number of subjects that are of interest to speech-language-hearing researchers. But there might be doubts about how well research sample results translate to a broader population, which calls into question the study's external validity of the results. Third, information regarding the various contexts (such as households, educational settings, and schools) in which growth takes place, thorough evaluations of inputs, the stages and results of development, and the kinds of assistance that children with

special needs receive may not have been included in data gathered as part of earlier studies that looked at the overall health and growth of children (Mashburn & Myers, 2010). A permanent hearing impairment known as sensorineural hearing loss (SNHL) is brought on by an issue with the cochlea or auditory nerve. The typical hearing threshold of people with mild to severe hearing loss is between 21 and 70 dB. As a result, although their hearing is diminished, individuals still have residual hearing that is usable without the use of hearing aids or cochlear implants. According to recent estimates, 1.7% to 6.2% of children between the ages of 5 and 14 worldwide have substantial hearing loss, while 0.2% to 1.7% have mild losses. Relatively little is known about the outcomes of children with mild or moderate SNHL (MMHL), despite the high incidence of this illness (Halliday et al., 2017). Less than half of children with SLIs who require therapy actually receive it, despite the fact that young children should be routinely assessed for any speech or language difficulties. A sizable and quickly expanding portion of children in the United States are members of racial, ethnic, and linguistic minorities. Minority children with SLIs may be more unlikely to be discovered and get treatment, including special education, while having a higher chance of developing SLI symptoms. Minority children may consequently be disproportionately prone to endure the aftereffects of untreated SLIs as a result of their unmet treatment needs. For instance, the behavioral issues of minority children are more likely to be criminalized than those of white children, which makes them harder to treat. The increased probability of undiagnosed and hence untreated disability among minority children has been proposed as a partial explanation for the performance disparities observed in the United States (Morgan et al., 2017). A nationwide study of children who are representative of the population of children in the United States who started kindergarten in 1998 was prompted by recently occurring societal shifts in the country, including an increase in the number of working mothers,

a rise in the proportion of single-parent families, changing demographics, and an increase in the number of children with special needs. The study was started to better understand the intricate processes of children's development and to pinpoint the roles that families, classrooms, and schools play in fostering positive learning environments. It was carried out by the U.S. Department of Education and the National Center for Education Statistics (NCES), with support from other departments within the U.S. Department of Health and Human Services and the U.S. Department of Agriculture (Mashburn & Myers, 2010). Growing up with MMHL exposes adolescents to a very different linguistic environment than does growing up with normal hearing. SNHL not only causes hearing thresholds to rise, but it also broadens auditory filtration and alters how sounds are processed. Individuals with even modest or moderate levels of SNHL are therefore likely to have a speech signal that is distorted or degraded, often quieter, and with crucial acoustic signals that are within or close to the threshold. This has been somewhat addressed by the implementation of universal newborn hearing screening programs in many industrialized nations, which have identified SNHL in infancy in certain children (Halliday et al., 2017). The amount of information that the field now knows regarding which children in the US are receiving special education assistance for SLIs is very limited. This includes the degree to which racial, ethnic, and language usage discrepancies currently exist. In general, there is currently insufficient data available to academics and practitioners about the risk factors for SLIs to direct early screening and intervention initiatives. This is true even though the US Preventive Services Task Force has repeatedly called for epidemiological research to improve SLI screening, assessment, and care provision for this particularly vulnerable group of kids. Studies that have already been conducted on the subject of racial, ethnic, or linguistic disparities have either used convenience samples or neglected to take into consideration confounding variables

that may exist, such as the socioeconomic status of the family, the age and marital status of the mother, health insurance coverage, preterm, birth weight, academic functioning, and behavioral self-regulation. It is crucial to account for these variables since they would otherwise account for differences that were first linked to racial, ethnic, or linguistic differences in children. For instance, low birth weight is more common among minority children, and this may raise the risk of SLIs in and of itself. Because most of the research that currently analyze population-based data employed non-U.S. samples, they might not be able to generalize to the increasingly diverse school-aged population in the United States (Morgan et al., 2017). It is particularly important to determine if racial, ethnic, and language usage discrepancies in SLI identification persist by kindergarten in the United States for the sake of policy, research, and practice. Federal policy makers have increased efforts to decrease what is thought to be disproportionate overrepresentation in special education due to widespread misidentification based on children's race or ethnicity. This is despite some studies finding that racial, ethnic, and language minority children are less likely to receive school-based services for SLIs among children displaying similar clinical needs. proving that, in the United States, under identification and service receipt for special education needs (SLIs) are occurring or may be growing due to factors including as race, ethnicity, and language use—especially in kindergarten, when these services may be most beneficial (Morgan et al., 2017).

Emotional Behavior Disorder

A landmark study was released in 1991 in reaction to mounting criticism of special education and worries about the low outcomes for kids with emotional-behavioral disorders (EBD) and others who are at risk but are not considered eligible for treatment. the top concerns and produced a list of suggestions grounded in factual understanding. Prevalence estimates

showed that only around one-third of individuals in need received help, which was one of the main problems found. Moreover, the identification of kids with the most severe issues was sometimes done too late, once the environment had become less flexible (Mitchell et al., 2018). In the US, special education services are provided to an estimated 353,000 kids who have emotional-behavioral disorders (EBD). Of the kids, 118,255 (34%) spend a minimum of half of their day in a learning setting that is more restricted than the general education classroom. For kids with more demanding requirements, these placements—also known as self-contained settings—offer a more customized and flexible learning environment. Results for disabled kids in special education-specific settings are still inferior to those in general education classrooms, notwithstanding these modifications. Students with EBDs in self-contained settings face 65% of out-of-school suspensions, 19% face expulsion, and 17% face arrests. Research on students with EBDs has shown that their educational achievements are frequently subpar (Gersib & Mason, 2023). Classroom behavior issues make instructors and students more stressed, interfere with the flow of the lesson, obstruct learning objectives and learning processes, and have a bad impact on the school atmosphere. Students that exhibit problematic conduct also frequently internalize issues like anxiety and/or withdrawal, which puts them at risk for dropping out of school and failing their classes. Educational professionals typically worry a lot about difficulties in managing the behavior of children with EBD in the classroom since these difficulties affect the kid and the classroom as a whole (Sanches-Ferreira et al., 2021). The Department of Education has prioritized improving the identification of and services to students with or at risk for emotional or behavioral problems for more than 40 years, despite the fact that students with identified EBD make up a small percentage of the general population and of all students with disabilities. Given that the results for children with EBD remain among the poorest when

compared to normally developing children and children eligible for services in other categories of impairment, attention has been justified to this particular category of disability (Mitchell et al., 2018). When opposed to alternative education environments centered on discipline or general education, the self-contained classroom offers a distinct learning environment. For kids with EBDs, the main purpose of the self-contained classroom is to help them develop self-management skills that will enhance their social, emotional, and academic functioning. These classrooms provide a flexible structure with fewer pupils in each, all while meeting the objectives of individual education programs (IEPs). Despite their diversity, a large number of kids in self-contained EBD placements exhibit aggressive behaviors that are uncommon in regular classroom environments. The intensity of problematic behaviors that may arise in a self-contained EBD classroom is typically not addressed by behavioral treatments, despite the fact that many of them are a component of universal positive behavior interventions and supports. (Gersib & Mason, 2023). Common strategies for dealing with problematic behaviors in schools are mostly behavioral and academic in nature. Students with difficult, disruptive, or troublesome behaviors might benefit from behavioral treatments such as self-management techniques, antecedent-based tactics, and consequence-based strategies. All three strategies are included in the ideal behavioral protocol, which aims to promote and support students' appropriate/alternative behavior while anticipating and mitigating the impacts of disruptive behavior. In short, contingency management tactics promote and encourage proper behavior and/or deal with disruptive behavior when it arises, whereas antecedent strategies use behavior management techniques that lessen the possibility of problematic behaviors develop (Sanches-Ferreira et al., 2021). A range of placements within the least restrictive environment (LRE) includes self-contained classrooms. These include special education classrooms in

neighborhood schools, alternative schools, day treatment centers, residential placements, and juvenile justice facilities that provide special education services to students. approximately half (52.5%) of the approximately 100,000 kids with EBDs enrolled in self-contained settings do so in self-contained classrooms, followed by separate schools (37.5%), residential placements (4%), correctional institutions (3.5%), and hospitals (2.5%). Furthermore, there are significant differences in the organization and use of EBPs amongst self-contained classrooms for kids with EBDs. While IEPs compel children to work toward certain goals, such as social skills or arithmetic, there are no rules or regulations about how to set up a classroom for students with particular emotional and behavioral needs. (Gersib & Mason, 2023). Modifications to the environment that increase structure and predictability, decrease distractions, establish goals, establish routines, and offer rewards are examples of interventions that may help stop inappropriate behaviors that typically escalate when reprimands and referrals are the only forms of treatment. Moreover, children with EBD frequently form unfavorable connections and may appear gregarious and outgoing on the outside due to their aggressive manner and tendency to defy the norms. The research shows that social skills training programs can assist raise poor self-esteem that results from recurring disappointments, failures, and unsatisfactory interpersonal connections among kids with EBD, who frequently struggle with classmates and instructors During small group tutoring or cooperative learning activities where the student participates actively in social interactions, the instructor can support the integration of the student with EBD; this can start the process of erasing the label that has been placed on the kid (Sanches-Ferreira et al., 2021). The severe lack of educators who are willing and able to work with kids who have EBD was a connected issue. Within a few years, over one-third of those who were certified to teach students with EBD departed the profession. Critical shortages of related service workers,

who work with teachers to offer the necessary mental health and other assistance, were also identified. Lack of competent staff was linked to a general disregard for best practices, which in turn caused kids with EBD to do poorly in regular school programs. One of the reasons that successful methods were not widely implemented was the bias or perception that kids with EBD chose to behave badly and that, as a result, control, containment, or punishment was the proper course of action (Mitchell et al., 2018).

Autism

A significant conundrum that impacts families, experts, and legislators is whether or not schooling environments for children on the autism spectrum should be inclusive or specialized. Even though human rights conventions and educational policies emphasize the value of offering learning opportunities in the least restrictive setting appropriate for a child's needs, it is generally accepted that successful education for autistic students requires more than just their physical integration into mainstream classrooms. According to a number of research, when autism-specific techniques and supports are not offered, children on the spectrum who attend inclusive schools do worse than their classmates who are not autistic. Additionally, individuals may have unfavorable experiences with peers that make their social communication issues worse rather than better (Vivanti et al., 2022). The inclusion movement's primary goal is to encourage the integration of children with disabilities into mainstream classrooms at nearby schools. This directive raises concerns concerning the development of impaired children as well as how inclusion should be implemented. These kinds of inquiries are crucial for autistic children, whose requirements necessitate a highly specialized education. The most popular justifications for including impaired students in the classroom are that it fosters their social, emotional, and cognitive growth and gives them the chance to create reciprocal relationships with their

classmates (Yianni-Coudurier et al., 2008). There has long been discussion on whether schools should accept students with impairments, such as autism spectrum disorder (ASD), in inclusive settings or in special ones. The rising proportion of children receiving an ASD diagnosis means that early intervention programs must take this problem into consideration. Human rights issues surrounding the inclusion vs segregation of people with disabilities and the effects of inclusive versus special settings on the practical and efficient implementation of ASD early intervention programs are important aspects of this discussion (Vivanti et al., 2018). Given that children on the autism spectrum exhibit variability in their preferred learning environments, learning resources, motivation, and capacity to interact, mimic, and pick up skills from their peers, it is conceivable that educational interventions for autistic children with particular traits would be more effective in inclusive settings as opposed to specialized ones. For instance, compared to autistic children who are less socially engaged, kids who exhibit greater social initiative and interest about their peers may gain more from the chance to socialize in inclusive environments (Vivanti et al., 2022). Present research results documented in scholarly works fail to offer definitive proof of the efficacy of inclusion in conventional classroom environments or specialized learning environments. Nonetheless, children with intellectual disabilities have been the focus of this study more often than those with autism. However, despite the fact that the kids themselves expressed feeling more alone, they saw that these kids' social skills improved more in the traditional classroom. On the other hand, special education settings were where children with intellectual disabilities utilized language more frequently than inclusion settings. Comparative studies have indicated that inclusion may have a favorable impact on the development of social skills in early children, even though they have not shown that inclusion is advantageous for young children's overall development (Yianni-Coudurier et al., 2008). In contrast to specialized

learning environments, inclusive classrooms give kids with ASD the chance to practice their emerging abilities through ongoing interactions with peers who are typically developing. These peers, as opposed to those with ASD, are more likely to be receptive to social cues and to provide rich and appropriate social-communicative input. In general, interactions with capable peers who serve as role models may be beneficial in a number of important areas, including language, imitation, and cooperative involvement. On the other hand, there are arguments in favor of customized settings, such as the idea that autism-friendly learning environments and instructional strategies that are tailored to each student's specific requirements and learning preferences better accommodate the peculiar qualities of children with ASD. The notion that inclusive settings are not intended to address the unique needs of students with ASD, given the heterogeneity of strengths and needs within this population; and the possibility that people with ASD might experience peer rejection within inclusive settings, thereby exacerbating their social difficulties. Another commonly expressed worry is that in inclusive environments, instructors may become less focused on their normally developing pupils due to the responsibilities of meeting the educational requirements of children with ASD (Vivanti et al., 2018). Certain research has concentrated on the impact of inclusion on the development of autistic children. The interventional setting had no effect on the children's progress. As opposed to this, preschoolers with autism who are enrolled in an inclusive setting and get help from certain educational methodologies have demonstrated behavioral and adaptive growth. For children with autism, the amount of hours attended each week appears to be a decisive factor in their growth, regardless of the interventional environment. Research comparing kids enrolled in various intervention programs shows quantifiable improvement in educational programs lasting 25 to 30 hours per week (Yianni-Coudurier et al., 2008). Scientific study has provided support for this idea,

showing that children on the autistic spectrum who are more socially driven are less likely to exhibit behaviors related to school refusal. Additionally, educators, parents, and clinical professionals believe that a child's social behavior—along with their emotional, cognitive, and sensory traits—is a crucial component of their ability to successfully interact in inclusive environments (Vivanti et al., 2022).

Traumatic brain injury

There has been an increase in the number of school-age children with traumatic brain injury (TBI) who are designated for special education services under the Individuals with Disabilities Education Act (IDEA, 2004) and who reenter the educational system. The number of verified pupils rose by 68% in 2018 compared to 2000. Researchers and professional educators concur that despite an increase in the number of kids receiving TBI and the special education services that follow in schools, this demographic is probably underrepresented and neglected academically. Despite the fact that 145,000 children suffer from TBI that causes permanent damage, according to IDEA, some of these pupils are eligible for special education assistance. For instance, the U.S. Department of Education said that just 27,000 TBI children received special education assistance under IDEA for the 2017–2018 school year. In a recent poll, it was discovered that more than half (25 out of 49) of state special education directors admitted that their state's TBI statistics were inaccurate. There are probably a number of reasons for the discrepancy between the number of pediatric TBIs in the US and the pupils who are actually serviced by school systems, including difficulties in identifying and evaluating TBIs for assistance (Harvey et al., 2020). Traumatic brain injury (TBI) claims the lives of up to 10 million individuals globally each year, necessitating hospitalization or even death. There are still documented significant peaks of occurrence for those between the ages of 15 and 24 in these

terrible data. As they go along academic courses to potential employment and vocations, this younger group views education as a crucial life role. In fact, there is a growing chance that people would need to continue their education after completing secondary school, which is driving up educational standards. By the time they were 24 years old, over 90% of the cohort had engaged in post-school study and training. Secondary or postsecondary students make up at least one in four rehabilitation admissions, and after their stay in rehabilitation, more than half of them usually return to school. Therefore, after a traumatic brain injury (TBI), being able to successfully participate in research is probably a useful rehabilitation aim for adolescents and young adults (Mealings et al., 2019). Traumatic brain injury (TBI) victims may exhibit behavioral, emotional, cognitive, physical, and cognitive-communication problems. The latter refers to communication difficulties that arise from underlying cognitive impairments, particularly in the areas of attention, memory, organization, information processing, problem-solving, and executive functions. These difficulties can arise in any area of communication, including understanding, speaking, reading, writing, conversation, and social interaction. The discourse skills that follow a severe traumatic brain injury have been the focus of current research in the field of cognitive-communication rehabilitation since these abilities are critical for everyday activities. Three months following a severe traumatic brain injury, 85% of the 57 participants showed signs of narrative discourse impairment, and six months later, 66% of the participants still had problems up to a year after a severe traumatic brain injury, narrative discourse predicted psychosocial outcomes in terms of involvement in job and leisure activities, relationships, and living skills. It has been demonstrated that chronic cognitive-communication issues can be linked to poor psychological, occupational, academic, and interpersonal results, thus it is crucial to understand this knowledge. Professionals in the area have determined that

people with cognitive-communication impairments require a speech-language pathologist (SLP) to deliver a suitable rehabilitation program; starting this process early may improve the chances of a positive outcome. The treatment plan should, in accordance with the consensus of experts, address the patient's unique needs and goals, consider their premorbid communication status and current cognitive abilities, train communication partners in conversational skills, and be implemented within the context of their daily activities to encourage generalization (LeBlanc et al., 2020). Studies on the long-term effects of traumatic brain injury (TBI) reveal the intricate, ongoing, and diverse effects on both the injured person and their family. These diverse challenges may have an impact on kids' ability to manage and their ability to return to school if at all. Students have articulated the common challenges they face in returning to their studies in a clear and concise manner. These challenges include cognitive changes that impact memory, concentration, and organizational skills; emotional changes such as mood swings, feelings of loss, and reduced self-confidence; physical changes like persistent headaches, reduced mobility, and decreased use of the dominant hand; and psycho-social changes like feeling misunderstood, having trouble making or maintaining friends, and bullying and teasing. Rehabilitative physicians and educators have long grappled with how best to assist students' return to study after traumatic brain injury (TBI), as seen by the abundance of research that dates back to the 1980s. Two major studies provide an overview of this study. The first one addressed themes and suggestions for teaching TBI students (Mealings et al., 2019). Screening this domain early can help identify the issues that need to be addressed in order to provide suitable rehabilitation programs for cognitive-communication impairments following traumatic brain injury. Less research has been done on these abnormalities following mild traumatic brain injury (mTBI), despite a large body of knowledge about moderate or severe TBI. The research on mTBI that are

now available describe a range of cognitive communication issues following either an uncomplicated mTBI, with no indication of intracerebral lesions on computed tomographic (CT) scan imaging, or a severe mTBI, with intracerebral lesions detected on the CT scan. Problems with verbal fluency, word reading, narrative writing, confrontation naming, and narrative discourse were noted in investigations including individuals with simple mTBI. Additionally, compared to an orthopedic group, individuals with simple mTBI had a tendency toward higher reaction times for oral phrase comprehension, according to recent research (LeBlanc et al., 2020). For a variety of reasons, students who have traumatic brain injuries are not usually obvious. Some of these explanations may include the brain injury's categorization, associated impairments, precise account of the damage, and/or time of start, albeit this is not a restricted list. Here are a few succinct explanations of them. First, the TBI may have been caused by an incident that happened before the kid was old enough to attend school, and it might not have been disclosed at the time the child started attending. The likelihood that non-accidental trauma—like abuse or neglect—being underreported is a second factor. Furthermore, it can be challenging to follow adolescents who have traumatic brain injuries (TBIs) since some may already be getting assistance for a main handicap at the time of the TBI. TBI frequently coexists with other medical disorders. In such cases, the formal qualifying category would not change, but services might carry on with modifications and adjustments made as necessary for the newly acquired traits connected to the TBI. If the new TBI diagnosis is not included into the student's educational file, subsequent teachers might not be aware of the co-occurring TBI and might incorrectly attribute learning challenges as a result (Harvey et al., 2020).

Applied Behavior Analysis

Applied behavior analysis (ABA) is a science that uses systematic application of behavioral analysis concepts to enhance social and personal capacities and observational assessments to identify the factors causing behavioral changes. ICT could be essential in providing the technical assistance required for observational evaluations. ICT can offer sophisticated ways to define a continuous, context-aware monitoring system that may be utilized for a real-time, remote behavior evaluation. By utilizing experimental data (behavioral observation assessment methodologies) to inform decision-making, the applied behavior analysis (ABA) approach places an emphasis on quantifiable and observable behaviors. Information and communication technology (ICT) becomes a very useful tool for improving the methodology's efficacy and efficiency (Jayousi et al., 2023). The study of human behavior is applied in ABA to tackle significant societal concerns. It includes an array of techniques and methods that have been thoroughly documented in the research literature as efficacious and, in several instances, as "evidence based," including task analysis, discrete trial instruction, and reinforcement. Recent years have seen a proliferation of evidence from researchers and practitioners demonstrating the effectiveness of ABA in meeting the behavioral and educational demands of kids receiving special education services. In programs intended to educate kids in regular and special education a range of skills, academics, and adaptability, positive reinforcement has been employed extensively. Researchers have used positive reinforcement to teach a wide range of educational objectives, including communication (Trump et al., 2018). The science of applied behavior analysis, or ABA, uses techniques based on well-established behavioral principles to improve socially measurable results. It also uses experimentation—that is, gathering data and comparing performance under at least two conditions—to determine which variables—like intervention and

instructional elements—need to be improved. For more than 70 years, this methodical approach to intervention and teaching has been utilized to enhance results for people who require help. Its methods have garnered a great deal of support from the scientific community; they have been widely accepted across disciplines; they have been applied to assist educators, families, and kids with a variety of support requirements; and they have developed and frequently improved over time (Pennington, 2022). The behavior analysis field is widely recognized for its strong dependence on the gathering and assessment of data. An ethical duty to guarantee that students with disabilities get services, including access to therapeutic settings and successful interventions, justifies the dependence on statistics. Specifically, since memory and subjective perceptions are inaccurate, objective assessment of student development is essential to guaranteeing the delivery of effective training. A behavior analyst would probably train a teacher to keep track of, in real time, how long a student spends not in their seat because the instructor's memory may be impacted by a variety of factors in the classroom (Trump et al., 2018). Finally, it has been shown that behavior analysis techniques are quite successful. Many of these methods have been found to be very effective and evidence-based strategies for helping children with a variety of assistance requirements. In educational settings, practices like picture exchange communication, functional assessment, model-lead-test, response prompting, and picture exchange have become commonplace. These practices give students fresh chances to learn and form meaningful relationships. The most crucial requirement of ABA is that teachers commit to regularly assessing student progress and the efficacy of their instruction in order to minimize the amount of time that kids are exposed to ineffective methods. When data show that children are not making enough progress, ABA urges teachers to make systematic adjustments in their

instruction and then use data to assess how well their pupils are responding to those adjustments (Pennington, 2022).

Policies and Procedures

Response to intervention

Response to Intervention (RTI) is a school restructuring initiative that has led to a renewed emphasis on data-driven decision-making in the classroom and evidence-based practice. It also acts as a gateway to identifying pupils nationwide who have specific learning impairments. RTI has the potential to be a tool for educational equity because of its many opportunities to enhance student achievement (Petricone, 2020). Response to intervention (RTI) is the foundation of the alternative model. Its main elements are research-based interventions, fidelity of educational interventions, universal assessment, high-quality classroom instruction, and ongoing progress monitoring. Although the number of support tiers varies, these models offer a fundamental framework that permits different implementation strategies. This strategy has the uniqueness of increasing the degree of the intervention in proportion to the severity of the students' requirements (Arias-Gundín & Llamazares, 2021). Teachers assist students who are having difficulty with a subject or skill by using the RTI procedure. In order to promote success, teachers really use interventions with kids who are failing. It's crucial to remember that RTI is regarded as a general education tactic. However, general education practices employ the RTI process—which identifies and supports—to intervene before referring a kid to special education. Consequently, improving RTI's effectiveness has a significant impact on students' performance in both general education and special education settings (Hurlbut et al., 2023).

The academic subject of specific educational challenges has seen changes in recent years, which has directly affected the detection and treatment of these issues. Based on a comparison of

a student's academic accomplishment and learning potential, the IQ-achievement discrepancy model has been utilized up until now to identify students who display learning problems. Educators and academics have questioned this strategy, which relies on waiting for the kid to fail, as a means of diagnosing and identifying individuals who have learning impairments. Empirical models have generated debate and, in the end, resulted in their rejection and replacement due to concerns about their validity, limits, and high error rate (Arias-Gundín & Llamazares, 2021). RTI's relationship to the special education identification process is crucial for assisting kids who do not react to previously implemented interventions, even if it is not used to identify students with special needs. Furthermore, let's say a pupil ignores the first several interventions. If the student is still resistant to intervention, many RTI teams offer progressively more intensive interventions, which are then used to determine if the student has a specific learning disability (SLD). A specific learning disability, as defined by the Individuals with Disabilities Education Act (IDEA), is a disorder in one or more fundamental psychological processes involved in comprehending or using language, spoken or written. This disorder may show up as an imperfect capacity for listening, thinking, speaking, reading, writing, spelling, or performing mathematical calculations (Hurlbut et al., 2023).

Tier 1: Each student in a class receives evidence-based, broadly applicable, hands-on, preventive education. Subject-specific agendas are used to deliver education, and it is during these that potentially troublesome students are identified. Since tracking progress is just as crucial as identification, it needs to be flexible and capable to gauge any shifts in student performance. As a result, all students undergo evaluations three times a year: at the start, midpoint, and conclusion of the academic year (Arias-Gundín & Llamazares, 2021). The fundamental curriculum that all pupils get is referred to as Tier 1. In Tier I, educators utilize

assessments to guide instruction for the entire class and pinpoint children who might need more specialized help from their teachers (Petricone, 2020).

Tier 2: Supplemental teaching given to small groups of pupils who are not meeting Tier 1 goals is referred to as Tier 2. Students who do not react in Tier 2 are sent to Tier 3, where they get more customized, intense assistance (Petricone, 2020). A more specific instruction meant to meet the requirements of the student in order to accomplish goals. It is taught to students who did not respond well to Tier 1 in small, homogenous groups of three to six people. This early intervention is proactive in nature, with the goal being to identify pupils who may present challenges. It consists of a very short intervention that enables students to be guided toward success. These are usually 40-minute lessons held every day, with a monthly progress check (Arias-Gundín & Llamazares, 2021).

Tier 3: Centered around customized, highly focused intervention, administered either one-on-one or in small, uniform groups consisting of no more than three pupils. At this level, weekly monitoring with predetermined goals and 60-minute daily sessions are recommended. The model's three-tier structure is not particularly revolutionary, allowing researchers to modify it as needed (Arias-Gundín & Llamazares, 2021). Explicit, evidence-based, scaffolded instruction that is targeted and offers regular opportunity for progress assessment are among the Tier 3 treatments (Petricone, 2020).

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Research on the connection between effective teaching and successful student learning outcomes is expanding. More qualitative studies are needed, according to researchers and theorists, in order to comprehend how teacher efficacy beliefs function and to fill the knowledge gap about the sources of teacher effectiveness. Exploring the origins of teacher efficacy via research might provide light on how efficacy grows and provide suggestions for improving individual and group efficacy among educators (Petricone, 2020). To address the over- and under-identification of students with possible learning problems, researchers and legislators developed RTI. Under this strategy, kids who are deemed to be at-risk are identified through a sequence of screening procedures, following which they receive teaching and interventions in the general education classroom that are grounded in science or research. If a student persists in exhibiting academic difficulties, these interventions usually escalate in terms of intensity, frequency, and length through RTI tiers or intervention levels. A kid is given consideration for a special education evaluation to establish eligibility as a student with an SLD if, over time, consistent progress monitoring demonstrates that they are not responding to scientifically based instruction (Hurlbut et al., 2023).

The Next Steps After RTI: Individualized Education Programs

If the RTI plan fails and you need more aid, then you will be referred for testing to obtain an Individualized Education Program (IEPs). Every student with a disability who is qualified for special education and associated services must have an IEP meeting at least once a year, according to the Individuals with Disabilities Education Act (IDEA, 2004). Determining an educational plan that fulfills the unique requirements and takes the target student's interests and

preferences into consideration is the aim of these team discussions. IDEA (2004) also requires parents, teachers of special education, general education teachers, associated support providers, and a representative of the local education agency to attend IEP sessions (Sanderson & Goldman, 2020). The IEP is one of the most important and primary educational techniques in education that involves students with special education needs, and it is employed by the majority of schools worldwide. The purpose of the IEP is to provide written documentation that is expressly intended to authenticate the outcomes of choices made by a multidisciplinary group on the educational requirements and assistance programs that children with special education needs require. Children with special education needs can benefit from the special education system and planned interventions or assistance via the execution of an IEP (Rashid & Wong, 2022). Having sufficient descriptions of a child's current levels of academic attainment and functional performance is one of the essential components of creating an effective IEP. The needs, interests, and strengths of a child are detailed in these descriptions, which serve as the basis for IEPs. They also offer details on how a child's condition impacts their engagement with the program. Having all of this information is crucial for creating objectives and goal statements that clearly outline what is expected of the pupils. Certain qualities are necessary for goal statements and objectives to be effective. This study aims to shed light on the qualities of successful goals and objective statements as well as what kinds of descriptions may be inferred from a child's current level of accomplishment (Karnas, 2020). IEP preparation is challenging because of the personalized nature of IEPs and the duty special educators have to direct kids' learning plans. Procedure protections, current academic and functional performance levels, transition assistance, assessment participation, associated services, program adjustments, extended school year, and other issues must all be included in one comprehensive document. IEPs must also be compliant,

which means they must have all the elements mandated by state and federal laws, and they should ideally be of high quality, which means they should be based on the needs of the student, have defined deadlines and roles for service providers, and have quantifiable, clear goals and objectives. The following areas still struggle with non-compliance and poor quality: current levels, yearly targets, short-term objectives, and particularly created training (Blasko et al., 2024). Although the IEP was created with good intentions, it seems that in practical implementation, it has failed, especially when it comes to helping kids who are struggling with a combination of mental disorders, behavioral problems, and learning difficulties. Although the IEP application process is meant to be open and inclusive, it frequently turns into a maze of false information and poor advice for parents and guardians, which leaves many pupils ineligible for no reason at all. The absence of access to the disciplinary procedures and safeguards found in IEPs can seriously harm these children' educational experiences (Gupta et al., 2023). The legal fallout from IEP mistakes frequently hurts school districts because it requires them to go through drawn-out and expensive due process hearings and resolutions. Compensatory education was offered as a remedy for IEP mistakes 100% of the time, according to a recent review of due process hearings. Proactive steps such as implementing appropriate transition evaluations, having observable, measurable, and results-oriented postsecondary goals, and connecting IEP goals, activities, and services can help cut down on this costly process. It's unclear how educating special educators on writing compliant IEPs would affect the quality of IEPs, even if it could make satisfying legal criteria more likely (Blasko et al., 2024). Many common errors have been made when creating IEP goals. These errors include establishing unrealistic expectations, not being aware of the current levels of academic accomplishment and functional performance of the children, not offering enough detail, and not individualizing the kid sufficiently. Usually, the

goal statements are created with the target behaviors in mind, which will be attained in a year. Though they pertain to the short-term statements that might be used to support long-term goal statements, objectives are quite similar to goal statements in that they represent stages toward achieving the latter (Karnas, 2020). Concerningly, claims of discrimination by educators, improper IEP plan amendments, or inadequate remedies have resulted in a sizable number of cases being brought to court. This emphasizes how critical it is to do a comprehensive evaluation of the IEP and hold talks about systemic improvement afterward. This review's primary goal is to examine the IEP's structural shortcomings through a thorough analysis of the literature, as opposed to suggesting any particular fixes or enhancements. It is envisaged that shedding light on these problems would pave the way for more study, changes to the law, and—above all—the creation of an educational system that is more inclusive and equal (Gupta et al., 2023). The quality of the IEP and how it is implemented determines how well children with disabilities are educated. A few essential components determine the effectiveness of an early intervention plan (EIP), including obtaining sufficient data on a child's current academic performance and creating goals and objectives with specific qualities. Each letter of the acronym SMART stands for these qualities: precise, measurable, achievable, realistic/result-oriented, and time-bound. A goal statement ought to be achievable for the child and precise enough to be measured. To ensure that instructors put in enough work and dedication to meet the objective within the allotted time, the goal statement should also be reasonable. Therefore, it is advised that instructors make sure they acquire sufficient data regarding a child's current academic success and set goals while creating IEPs. and goals with the stated traits. Creating daily activity matrix also assists teachers in supervising and directing daily activities that address the objectives. When creating IEPs, instructors may find this study's sample aim and objective statements useful. To further help

instructors understand how an activity matrix is created and what may be included in one, a sample daily activity matrix is also included (Karnas, 2020).

Technology in the Special Education Classroom

In recent years, a number of research studies have focused on the use of technology in the education of children with special needs. The phrase "special needs" covers a broad spectrum of impairments, and the educational needs of the impacted children pose a significant interdisciplinary challenge to the research community (Gallud et al., 2021.) Digital technologies help kids build skills including problem-solving, thinking structure development, and process comprehension—abilities that will necessitate professional performance. They are also getting ready for a future that will be more uncertain and dynamic and in which technology will be indispensable. The skills and traits that students gain will be crucial to their success in the workplace (Haleem et al., 2022). Effective online class management should be the teacher's main role in holding the students accountable for their misconduct. When it comes to efficient online class administration, the instructor's empathy and conscientiousness toward the students matter just as much as a set of guidelines and protocols. Classroom management is a topic that has been extensively researched, and many instructors like spending a lot of time on it. Nonetheless, a lot of educators discover that in actuality, classroom management is challenging. The teaching and learning process will be facilitated by effective classroom management as it will make the classroom easier to manage (Siti Noor Aneeis et al., 2023).

As the Internet has developed, so too have the opportunities for students with varying learning needs. It can also encourage engagement, motivation, and personalized learning by allowing students to create interactive content. Technology can provide effective writing support

for students with special needs. One of the most extensively researched areas is the application of technology-enhanced learning to the educational process for individuals with autism. They look at how learning tools are now provided to individuals with autism and offer suggestions for future technology design as well as the need for more study. Not just software design can be used to improve learning for those with autism (Gallud et al., 2021). According to a recent review, mobile technologies have been linked to increased standardized writing assessment scores, the use of more frequent and complex language, the development of increasingly complex structures in published writing outputs, and the efficiency and quality of letter formations. A increasing amount of research has demonstrated that students are inspired to generate more ideas by mobile technology, which they attribute to the unique aspects of the applications (Wen & Walters, 2022).

Incorporating digital tools like computers and other devices empowers students to take charge of the learning process and take a more proactive approach. A learning efficiency can be approved by the teacher, who also acts as a guide throughout this procedure. Learners can submit their own material or acquire the necessary knowledge by using the abundance of digital resources. The newest online tools help students create material, work together, evaluate one another's work, and progress toward co-learning. Digital technologies facilitate the use of learning-optimizing strategies in the classroom, such as gamification and flipped classrooms. As a didactic tool, learning landscapes have developed that combines many approaches and allows for the pre-sending of unique itineraries to each learner. Technology enhances the inspiration of the training (Haleem et al., 2022). Given the rapid advancement of technology, educators must learn how to use a variety of devices, including tablets and smartphones, or risk becoming marginalized. In order to make sure that their teaching materials are current, interesting, and dynamic, educators must also make full use of all internet resources. There's more to technology

than just watching animated movies and playing video games. The benefits depend on how educators, parents, and students use technology to advance learning. Students' interest in learning increases and the quality of the educational experience is enhanced when technology is employed properly. One of the main factors contributing to the accessibility and quicker adoption of digital learning has been the development of e-learning systems that are compatible with new smart devices, such phones and tablets (Haleem et al., 2022) If technology is employed in the classroom, kids may become more interested in what they are studying. Since today's youth are accustomed to using electronic devices, introducing them into the classroom would surely help to spark their curiosity and increase their engagement levels. Students have an interesting learning experience when technology is incorporated into the classroom, which keeps them focused and engaged in the material. The use of computers, projectors, and other state-of-the-art technology in the classroom has the potential to make learning engaging and enjoyable for students. By assigning assignments that use digital resources, oral presentations, and group projects, teachers may make their students' education more dynamic and interesting (Haleem et al., 2022). The amount of research that has been done under the title "Special Needs Education" has decreased during the last five years. This fall is reflected in the shape of the downhill slope before falling to 68 articles in 2019, 59 articles in 2020, and 18 items in 2021, there were 157 articles in 2017 and 98 pieces in 2018. Over the previous five years, from 2017 to 2021, the average number of articles published that are pertinent to the term "Special Needs Education" has been 80 articles a year (Husaeni et al., 2022).

Collaboration

Collaboration is the act of people working together toward shared objectives. It includes friends, family, professionals, and people with disabilities joining together to pursue and realize a

common purpose. Collaborative team members may greatly enhance the collaborative planning process since they bring a variety of life experiences and viewpoints to the table. For the purpose of developing inclusive, successful, and significant programs and services for students with and without disabilities, a collaborative team's members must share resources, knowledge, viewpoints, and duties. In order to develop a clear sense of purpose, values, and goals, collaboration involves bringing people together in a way that each team member agrees to utilize their heart, mind, and hands. (Solone et al., 2020). To successfully educate children in a comprehensive education system with a varied student body, teamwork between all program personnel and educators is necessary. While these kinds of collaborations are advantageous for all students, kids with disabilities particularly benefit from them. Actually, studies have shown that staff readiness and lack of teamwork can have a detrimental effect on the execution of Individualized Education Plans (IEPs) (Alhossyan, 2023). One instructor assumes the lead in the classroom while the other circulates the room observing or helping pupils. This approach is known as "one teach, one assist.” Station teaching is a method in which two teachers lecture students at various learning stations while dividing the course material between them. Teaching in parallel involves two teachers splitting the class up into two diverse groups and having them teach the same material in two separate areas of the classroom. A teacher may temporarily separate a small group for specialized education as part of an alternative teaching strategy. When two instructors work together, they share equal responsibility for the learning process. Examples of this include role-playing, modeling, and taking turns during instruction (Paulsrud & Nilholm, 2020). Building communities that are inclusive requires developing and providing opportunities for individuals with and without disabilities to interact, learn from, and support one another. People with disabilities have historically faced discrimination and forced segregation from

society. Tragically, a significant portion of the disabled population still lives, works, and attends school in segregated, isolated environments despite American lawsuits and laws meant to end this kind of rejection and discrimination. This can result in a life filled with loneliness, a lowered sense of self-worth, and a sense of helplessness. Even if there is still opposition to inclusive initiatives, a growing number of American school districts and schools are adopting more inclusive policies, which has created a pressing demand for more deliberate and efficient cooperation strategies (Solone et al., 2020). Three types of meetings for consultation: Using their expertise in special education, the special education teacher provides valuable guidance to individual pupils during counseling sessions. Through reflective talks, the special education teacher attempts to change the attention from the student to the teacher by getting the normal teacher to reflect on themselves. Professional exchanges are what define cooperative talks. While the ordinary teacher gives information about the subject matter or the group of students, the special education teacher contributes expertise regarding kids with disabilities or learning challenges. These discussions involve reflection as well, but the reflections are shared by the two professors. Comparable forms of cooperative consultations have also been conducted, and they are frequently seen as the cornerstone of co-teaching. Co-teaching has also been based on similar collaborative consultations, which are frequently seen as its cornerstone (Paulsrud & Nilholm, 2020). When every student in a school is working on the same curriculum and subject in an age-appropriate classroom with access to customized accommodations, modifications, services, and supports as required, it is known as inclusion. Important components of inclusive education include cooperation, a strong and supportive school culture, family and community collaborations, and inclusive academic and behavioral instruction. Research-based strategies including co-teaching, peer tutoring, effective teaching techniques, accommodations and

adjustments, teamwork, and democratic classroom conditions that encourage all students' learning and engagement are used to create inclusive classroom (Solone et al., 2020). the importance of supporting general education and special education teachers' collaboration in order to best serve kids with disabilities. In particular, the research that we were able to locate on the subject of teacher cooperation consistently shown that this approach enhanced the learning and academic achievements of this particular student body. These research' findings also highlight how crucial it is for administrators of schools and other decision-makers to endeavor to eliminate any barriers to teacher cooperation (Alhossyan, 2023). The improvement of inclusive education is a primary goal of the current global education system, and as such, the educational system ought to accommodate the variety of all students. This was declared in the Salamanca Declaration more than 25 years ago. Teachers who practice inclusive education must acknowledge variety as a natural aspect of human nature and have their pupils ready to engage in inclusive social settings after they graduate. Obstacles and problems that teachers and school administrators must deal with. Important research demonstrates that inclusive teaching by educators engaged in cooperative professional development has stronger and longer-lasting impacts (Holmqvist & Lelinge, 2020). The investigations found a few variables that influence how cooperatively the two teacher populations are with one another. Most general education instructors collaborate with their special education counterparts during the IEP process to the fullest extent possible. The investigations also revealed that instructors frequently voiced a want to participate in professional development courses that would enable them to better control student conduct and modify the curriculum to suit the requirements of their pupils. Additionally, there should be a decent amount of cooperation across instructors, particularly when it comes to organizing and creating IEPs. Special education instructors are unable to effectively interact with

general education teachers because they do not have enough time to create and prepare IEPs. It was suggested that digital technology might facilitate improved teacher-to-teacher contact in certain research that revealed instructors lack the time to participate in co-teaching (Alhossyan, 2023).

Conclusion

In conclusion, our trip through the intricate network of special education has brought light on the ongoing dedication to equality, inclusion, and social justice in addition to the difficulties and successes encountered in this ever-evolving area. The history of special education, from the gloom of institutionalization to the enlightenment of inclusive education, is a reflection of larger social movements that value and acknowledge the diversity of individuals. It became clear as we made our way through the historical turning points, legal frameworks, instructional innovations, and technological developments that have shaped the field of special education that our shared commitment to provide equitable learning opportunities for everyone is steadfast. The wide range of disorders that fall under the umbrella of special education, from developmental delays to intellectual disabilities, highlight the significance of individualized treatments and nurturing settings in order to maximize the potential of every person. Policies and procedures serve as foundations for defining the roles of educators, administrators, and partners in creating inclusive educational settings. The dedication to fulfilling each learner's specific requirements is further emphasized by innovative and adaptable educational approaches. Collaborative partnerships and the use of assistive technology augment the effectiveness of special education programs, enabling persons with varying abilities to flourish academically, socially, and emotionally. Our investigation of special education goes beyond scholarly study; it is an embodiment of our shared quest for inclusion, justice, and fairness in society. We are

constantly reminded of the significant influence our work has on the lives of people with disabilities and their families when we consider the intricacies and opportunities in this profession. We pave the path for a future in which every individual, regardless of ability, may prosper and actively contribute to society via our research, advocacy, and teamwork. As we navigate the complex world of special education, we not only overcome its challenges but also reinforce our common goal of building a more just and inclusive society. Let's keep pushing for diversity, accessibility, and empowerment as a team to make sure that special education fulfills its promise in every aspect of our educational system. Since we embrace the diversity of people, we genuinely represent the spirit of education, which enables every person to realize their greatest potential and flourish.

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