

CHAPTER 1: FOUNDATIONS: OVERVIEW AND HISTORY OF SPECIAL EDUCATION

INTRODUCTION

While education has existed for at least as long as written records have existed, it is only in the last 500 years or so that education has become more available, and only in the last 200 years did education start to become common for the common person. By 1918, education was compulsory in all states in the United States, but this law was not widely enforced until the 1930s, largely driven by the need for an educated workforce ([Katz, 1976](#)). Education was eventually identified as a human right by the United Nations General Assembly as part of their Universal Declaration of Human Rights, which was adopted in 1948. The right to education is specifically identified in Article 26. This document states:

"Everyone has the right to education. Education shall be free, at least in the elementary and fundamental stages. Elementary education shall be compulsory. Technical and professional education shall be made generally available and higher education shall be equally accessible to all on the basis of merit. Education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms. It shall promote understanding, tolerance and friendship among all nations, racial or religious groups, and shall further the activities of the United Nations for the maintenance of peace. Parents have a prior right to choose the kind of education that shall be given to their children." ([United Nations, 1948](#))

In the years since the Declaration of Human Rights was passed, the right to education has been reaffirmed many times. These reaffirmations include the [1960 UNESCO Convention against Discrimination in Education](#), the [1966 International Covenant on Economic, Social and Cultural Rights](#), the [1979 Convention on the Elimination of All Forms of Discrimination Against Women](#), the [1989 Convention on the Rights of the Child](#), and the [2006 Convention on the Rights of Persons with Disabilities](#).

As education became more common and even compulsory in places, students with disabilities were often left out or provided with an education that was very substandard to the education their peers received. The first programs to specifically address the needs of students with disabilities typically focused on easily identifiable disabilities such as blindness and deafness. Not only were these disabilities easy to identify, they were far more common in the times before modern health care than they are now. Later, programs developed for students with physical disabilities and for students with significantly below average intellectual ability. Eventually, programming began to develop for more subjective disability areas such as emotional impairments and learning disabilities ([IDEA, 2024](#); [Mock et al., 2001](#))

In the United States, students qualify for special education by meeting a two-pronged test. They must both have a disability that falls into one of the approved categories and they must demonstrate a need for the “specially designed instruction” provided through special education ([IDEA, 2024](#)). Currently, there are thirteen approved categories of disability for special education in the U.S. That number has varied over time and will likely continue to fluctuate in the future to reflect changing knowledge in the field. For example, the disability area of autism was not added as a special education category until 1990.

There have also been suggestions that the total number of categories should be reduced, with similar disability areas combined into a common category. For example, it has been suggested that the disability areas of visual impairment, hearing impairment, and deaf blindness could all be combined into one category entitled sensory impairment.

Detractors of this idea quite rightly point out that the supports needed for a student with blindness are very different from those needed by a student with deafness. Promoters, however, point out that there is often a lot of overlap in needs and supports across categories.

For example, some students with autism also have lower cognitive ability, which overlaps with the intellectual disability category, and students with learning disabilities, autism, and intellectual disabilities, while having many similarities and differences, could all be grouped together under the category of developmental delay.

There are many arguments both for and against the use of specific labels such as autism, learning disability, and emotional impairment. Labels can be helpful as an aid to communication and a way to identify potential needs. When a teacher is told to expect a new student on Monday and that the student has been diagnosed with cerebral palsy, the teacher can quickly identify the needs to anticipate and the questions to ask. On the other hand, the label doesn't provide everything one needs to know about that student and the fact that the child has any sort of label can automatically lead to lowered expectations. Labels can even be stigmatizing and used as an excuse to exclude students. They can lead to harmful stereotyping and even diminished self-esteem on the part of the student.

On the other hand, students have expressed that receiving a diagnosis led to a better understanding of their own learning needs and the reasons behind their learning struggles, which then resulted in an increased self-concept.

Labels are also useful for research purpose as well as in teacher preparation, and can help practitioners to identify potential interventions for a target student. For this reason, in future chapters we will consider the causes and characteristics of specific disability categories and explore the educational implications resulting from these characteristics. However, given the overlap in characteristics and needs across disability categories, we will also use a cross-categorical model for understanding appropriate applications of various strategies and interventions.

The National Down Syndrome Congress has a public relations campaign that says, "[We're more alike than different.](#)" Many of the strategies recommended will be effective with all learners regardless of whether that learner has an identified disability or not and will reflect best practices in the area of education. More importantly, however, we will also explore specific methods and strategies that can be used to address the academic and behavioral struggles which have led to our students' need for special education.



SPECIAL EDUCATION IN THE UNITED STATES

In the United States, the federal law governing special education is the Individuals with Disabilities Education Improvement Act, also referred to as IDEA or simply IDEA. This law specifies the guidelines around who receives special education and the rights and services to which students with special needs are entitled ([NASET, 2024](#)). IDEA defines special education as, “Specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability” ([IDEA, 2024](#)).

Specially designed instruction (SDI) is instruction that is specifically planned for a particular student with a disability. SDI takes into account the student’s [IEP](#) goals and their strengths and challenges while also providing access to the general education curriculum in a manner that is appropriate for that child ([Council for Exceptional Children, 2023](#)). SDI can be used to address an array of skills including academic, functional, behavioral and other learning needs. It is important to note that SDI can be provided in a variety of settings including both special education and general education classrooms as well as in community settings ([IDEA, 2024](#)).

Special education is a relatively young field in the United States, the history of which has mainly been shaped by legislation. Prior to 1950, only about 12% of children with disabilities in the United States received any form of special education. Those that did receive special education were mainly taught manual skills, as children with disabilities were often considered unable to learn academic skills ([NASET, 2024](#)). The famous [Brown v. Board of Education](#) case in 1954 set the stage for things to begin to change for many children, including those with disabilities. When the Supreme Court determined that “separate but equal” was “inherently unequal,” a legal precedent was set.

Following this ruling, parents of students with disabilities began to advocate for their children on the basis that segregation due to disability was also inherently unequal. In the 1960s, parents began requesting better educational programming for their children and some even began to take legal action when they felt their children were being discriminated against. President John F. Kennedy, whose sister Rosemary was born with an intellectual disability, also used his office to promote better education for children with disabilities.

In 1968, President Kennedy's sister Eunice Kennedy Shriver founded Special Olympics, an organization which continues today to provide opportunities for children and adults with intellectual disabilities around the world to participate in sports activities. Special Olympics currently provides opportunities for millions of athletes in more than 170 countries to participate in one or more of the more than 100,000 competitions it sponsors each year ([Special Olympics, 2024](#)).

The mission of Special Olympics is to provide year-round sports training and athletic competition in a variety of Olympic-type sports for children and adults with intellectual disabilities, giving them continuing opportunities to develop physical fitness, demonstrate courage, experience joy and participate in a sharing of gifts, skills and friendship with their families, other Special Olympics athletes and the community. ([Special Olympics, 2024](#)).

In the 1970s, legislation continued to impact special education practices around the country. The court, in the famous case *Pennsylvania Association of Retarded Citizens (PARC) v. Commonwealth of Pennsylvania*, ruled that all children, regardless of disability, had a right to a [free and appropriate public education \(FAPE\)](#). Settled in 1972, this was the first lawsuit pursuing the right to education for all students ([Public Interest Law Center, 2024](#)).

Furthermore, the court also determined that same year, in *Mills v. Board of Education of District of Columbia*, that schools could not exclude students due to not having the resources to meet the child's needs ([Disability Justice, 2023](#)).

The [Rehabilitation Act of 1973](#) is civil rights law, so it doesn't dictate special education services. It does, however, prohibit discrimination against individuals with disabilities by any institution that receives federal subsidies and grants, which includes all public elementary and secondary schools as well as most postsecondary institutions. Section 504 of this act specifically ensures equal access to all school activities for those with disabilities. While this law does not provide a path to specially designed instruction, it does codify the provision of accommodations for those with disabilities who need them in order to access educational opportunities ([Office for Civil Rights, 2006](#)).

Access to education legally assured, parents of children with disabilities took the next step and began to lobby for more than just educational access for those with disabilities. They also wanted their children to receive appropriate educational services that would address each child's learning needs. In response, congress passed [Public Law 94-142: The Education for All Handicapped Children Act \(EHA\) in 1975](#), which was signed into law by President Gerald Ford. The EHA set forth the foundation upon which our current special education practices stand. When it was passed, this law only applied to school-aged children; however, in 1976, the law was amended to include infants and toddlers with disabilities ([University of Kansas, 2021](#)).

The EHA established the federal procedural safeguards which protect the rights of parents and their child with a disability and which identify ways for schools and families to resolve any disputes they may have ([Wright & Wright, 2024](#)). This law also clearly defined "Zero Reject" to ensure that

every child, no matter how severe the disability, would receive a free and appropriate public education (FAPE). The EHA also introduced the requirements for developing an individualized education program (IEP) for every student receiving special education services and specified that parents and guardians must be involved in the planning and decision making for their child's education ([NASET, 2024](#)). Additional requirements identified in the EHA include the mandate that students be educated in the least restrictive environment (LRE) and that eligibility for special education be determined using nondiscriminatory testing.

Over the years since this law was passed, it has been reauthorized many times. Reauthorization refers to the process by which a law is amended and renewed ([NASET, 2024](#)). Multiple amendments have been added to ensure that special education programming is also extended to infants and toddlers from birth through age three. In recognition of the role of the family in the life of a young child, an individualized family service plan (IFSP), rather than an IEP, is developed for each family ([NASET, 2024](#)).

In 1990, when the EHA was reauthorized, the name was changed to The Individuals with Disabilities Education Act (IDEA) in acknowledgement of the importance of using person-first language. Person-first language puts the person first and the disability second (e.g., the child with autism) to emphasize that disability does not define the person. It is just one characteristic, among many, that the person has. In 2004, when IDEA was reauthorized again, it became [Public Law 108-446](#) and its official name changed to Individuals with Disabilities Education Improvement Act (IDEAIA), although most continue to refer to the law as IDEA ([NASET, 2024](#)).



COMPARISON OF SECTION 504 TO IDEA

Schools have an obligation to meet the needs of their students with disabilities. These students may qualify for services under Section 504 of the Rehabilitation Act (Section 504) or under the Individuals with Disabilities Education Improvement Act (IDEA). Both of these laws cover persons with disabilities, but IDEA only covers students with disabilities from ages 3-21, or until they graduate from high school, while Section 504 protects persons with disabilities of all ages. As regards the school age population, Section 504 protects the student with a disability from discrimination based on their disability and requires schools to provide appropriate accommodations to ensure that the student can participate fully in the programs and services offered to all students in the school. Section 504 protections only address accommodations and do not include the provision of special education services ([Iowa IDEA Information, 2020](#)).

IDEA, however, specifically addresses the provision of remedial special education services. Note that not all students with disabilities will qualify for special education under IDEA. In order to qualify for an IEP under IDEA, the student must both have a disability and demonstrate that specially designed

instruction is needed in order to make progress in the general education curriculum. Thus, IDEA provides access to special education services for the student with a disability. Additionally, IDEA mandates that schools identify and evaluate all students in their district who may have a disability and therefore may be in need of special education. In contrast, Section 504 does not place the burden of identification on the district and requires the student with a disability to self-identify and to provide appropriate documentation of their disability. Because Section 504 only addresses accommodations, students with 504 plans are all placed in general education while students with IEPs may be placed in a continuum of settings depending on the student needs and the determination of LRE by the IEP team.

To summarize, all students with a disability are protected from discrimination under Section 504, which mandates that schools take the necessary steps to eliminate the barriers that would prevent the student with a disability from fully participating in the activities of the school which are available to the other students. Some, but not all, of these students will also demonstrate a need for special education services in order to learn and make educational progress and these students then qualify for an IEP, which is regulated under IDEA. Essentially, the set of all students who qualify for an IEP will be contained within the set of all students with a disability who fall under Section 504 and that set will be contained within the set of all students in the school. Schools do receive federal funding for the provision of special education services under IDEA, but do not receive additional funding for the provision of the supports mandated under Section 504.



CATEGORIES OF DISABILITY UNDER IDEA

There are thirteen categories of disability under [IDEA](#) to serve children who have been diagnosed with:

- Autism
- Deafness and blindness
- Developmental delay
- Emotional disturbance
- Hearing impairments
- Intellectual disabilities
- Multiple disabilities
- Orthopedic impairments
- Other health impairments
- Specific learning disabilities
- Speech and language impairments
- Traumatic brain injury
- Visual impairments

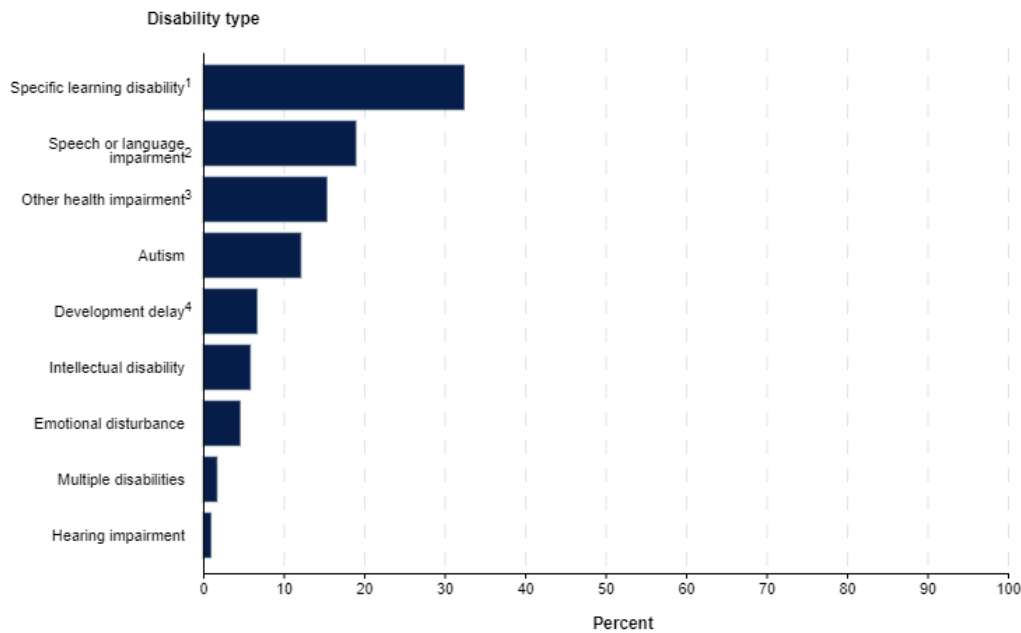
Note that the term “intellectual disability” has been adopted to replace “mental retardation.” The label “mental retardation,” often shortened to “retarded,” had become a pejorative term and many had advocated for this

change in the wording. In particular, one family, whose daughter Rosa was born with Down syndrome, worked to bring about this change which is why the law is named after their daughter ([Special Olympics, 2024](#)). With the signing of Rosa's Law by President Barack Obama in October, 2010, intellectual disability replaced mental retardation in all federal statutes ([Department of Education, 2017](#)).

Notably absent from this list are both a specific category for attention deficit hyperactivity disorder (ADHD) as well as a category for children who are gifted and talented. However, children with ADHD may be served under the Other Health Impairments category if they demonstrate a need for specially designed instruction in order to learn and make progress in the general education curriculum. This again emphasizes an important point. Not all children with disabilities qualify for special education. The child must both have a disability and demonstrate a need for special education. Children who are gifted do not meet this two-pronged test as they do not have a disability. However, if the child who is gifted also has a disability, sometimes referred to as being "twice exceptional," then the child could potentially qualify for special education ([NASSET, 2024](#)).

About 14% of children in American schools receive special education services. The largest category within special education is Specific Learning Disability (SLD), with approximately 1/3 of children in special education receiving services under this category. This is followed by Speech and Language Impairment (SLI) at 19% and Other Health Impairment (OHI) at 15%. It should be noted that OHI includes not only children with ADHD, but also children with a variety of medical conditions including asthma, epilepsy, leukemia, and diabetes. The category of autism has grown rapidly since being added to IDEA in 1990 and now accounts for 11% of children who receive special education services ([National Center for Education Statistics, 2023](#)).

Figure 2. Percentage distribution of students ages 3–21 served under the Individuals with Disabilities Education Act (IDEA), by selected disability type: School year 2021–22



¹ A specific learning disability is a disorder in one or more of the basic psychological processes involved in understanding or using spoken or written language that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations.

² Speech or language impairment is defined as a communication disorder such as stuttering, impaired articulation, a language impairment, or a voice impairment that adversely affects a child's educational performance.

³ Other health impairments include having limited strength, vitality, or alertness due to chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, or diabetes.

⁴ Although federal law does not require that states/entities and local education agencies categorize children according to developmental delay, if this category is required by state law, they are expected to report these children in the developmental delay category.

NOTE: Data are for the 50 states and the District of Columbia only. Percentages by disability type indicate the specific disability for which a child is receiving services under IDEA. If a child has multiple types of disabilities but is receiving services under IDEA for only one type of disability, then the child is categorized under that specific disability. If a child is receiving services for more than one type of IDEA-defined disability, then the child is categorized under "multiple disabilities." Orthopedic impairment, visual impairment, traumatic brain injury, and deaf-blindness are not shown because they each account for less than 0.5 percent of students served under IDEA. Due to categories not shown, detail does not sum to 100 percent.

SOURCE: U.S. Department of Education, Office of Special Education Programs, Individuals with Disabilities Education Act (IDEA) database, retrieved February 23, 2023, from <https://data.ed.gov/dataset/idea-section-618-data-products>. See *Digest of Education Statistics 2022*, table 204.30.

While the general school population is fairly equally balanced between males and females, this is not true in special education. There are approximately twice as many males in special education compared to females ([Schaeffer, 2023](#)). There are no definitive answers for why this is, but the general thinking is that it is related to behavior. The traditional explanation is that boys are more likely to act out in class and disrupt the learning process and therefore are more likely to be referred for special education ([NASSET, 2024](#)). This may or may not be the correct explanation, but the disparity between

males and females is not seen in the same way in categories that are less subjective such as blindness and deafness.



SPECIAL EDUCATION IN LATIN AMERICAN

This chapter has focused on the provision of special education in the United States. When special education is provided in other countries, there will be both similarities and differences. This document surveys special education services in several Latin American Countries.

[Special Education in Latin American Countries](#)



Foundations of Special Education (1st ed.) has been translated into Spanish. Contact the author for a copy.

CHAPTER 1: SOURCES

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