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Disproportionality of African American Children in Special Education

Definition and Dimensions

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Discussions and considerations about the disproportionality of students from diverse racial and ethnic backgrounds in special education have persisted for more than four decades. Since the publication of Dunn's groundbreaking paper in 1968, scholars have formulated well-grounded theories, followed by rigorous inquiries into the meaning and impact of disproportionate representation of particular students in special education. The *special education* label suggests that there is some disorder within the child and, accordingly, a need for more resources such as specialized instruction and other therapeutic interventions. Ideally, special education will improve pupil performance; however, positive outcomes have been seriously questioned for many students (e.g., Donovan & Cross, 2002; Dunn, 1968). Some authorities posit that disability diagnoses are likely to result in lowered expectations, thereby reducing special education simply to a place where students are sent when they do not perform (Meyer & Patton, 2001) rather than a service elevating learners to higher levels of performance.

Children with disabilities may be viewed according to two major categories: (1) high incidence and (2) low incidence. High-incidence disabilities are also referred to as mild disabilities and include the subcategories of learning disabilities (LD), emotionally disturbed (ED), mild mental retardation (MMR), and speech and language disorders. Low-incidence disabilities are more severe in nature and include conditions such as sensory disorders (visual and hearing impairments), moderate to severe mental retardation, physical disabilities, and autism. The high- and low-incidence categories might also be distinguished, respectively, by "clinical judgment" and biological factors (Harry & Klinger, 2006). That is, the diagnosis for mild disabilities is relatively subjective, while low-incidence disabilities are based on medical assessments. Harry and Klinger further offered the opinion that high-incidence

disabilities are rather arbitrary but often viewed as a permanent state.

Minority students, particularly African, Hispanic, and Native Americans, typically have higher rates of special education identification compared with their European American counterparts (e.g., Valenzuela, Copeland, Qi, & Park, 2006). Donovan and Cross (2002) gave the following special education identification rates according to racial/ethnic groups: 5% Asian/Pacific Islander, 11% Hispanics, 12% Whites, 13% American Indian, and 14% Blacks. Although African Americans have a greater representation in every disability area, the disproportionality is particularly pronounced in the high-incidence areas (Harry & Klingner, 2006).

High-Incidence Disproportionality

Mental retardation is the area of greatest overrepresentation. African Americans make up 17% of the general pupil population but comprise 33% of all the students assigned to programs for the mentally retarded (Donovan & Cross, 2002). This means that 2.64% of African American students are so diagnosed, compared with 1.18% of European American students, and that African American students are more than twice as likely as European Americans to be labeled *mentally retarded.* Although these are national data, the percentages can vary greatly according to region. In Virginia, for example, African Americans make up 20% of the student population, 28% of the special education population but 51% of the students in programs for MMR (Ladner & Hammons, 2001). Another variation noted by these and other authors (e.g., Oswald, Coutinho, Best, & Singh, 1999; Valenzuela et al., 2006) is that the percentages of African American special education students may be greater in districts where the overall African American population is lower and/or the district is more affluent.

Such findings underscore the subjectivity that enters in the process of identifying students for mild disabilities. Harry and Klingner (2006) cited the National Academy of Sciences (NAS) panel, pointing out the extreme difficulties of attempting to diagnose students with mild disabilities when complex issues of culture and quality schooling enter in. Harry and Klinger used this NAS position as the focus of their book and stated,

> We argue that the process of determining children's eligibility for special education is anything but a science. Rather, it is the result of social forces that intertwine to construct an identity of "disability" for children whom the regular-education system finds too difficult to serve. (p. 9)

Not only are African American students overrepresented in special education programs, they also tend to receive the most restrictive educational placements. Documentation from various sources points out that compared with their European American counterparts, African American students with disabilities are much less likely to be educated in settings where they access general education conditions and curriculum (e.g., Fierros & Conroy, 2002; Skiba, Poloni-Staudinger, Gallini, Simmons, & Feggins-Azzis, 2006; Valenzuela et al., 2006). Fierros and Conroy, for example, reported 1998 Office of Civil Rights data showing only 37% of African American students in special education were taught in inclusive settings, while 33% were served in substantially self-contained classes. In contrast, 55% of European American students were taught in inclusive settings, with only 16% restricted to self-contained classes. Similarly, in a review of statewide data in Indiana, Skiba et al. (2006) found that African American students in ED were 1.2 times more likely to be taught in self-contained special classes compared with their European American peers, those in MMR 1.5 times more likely, and those in LD 3.2 times more likely. Stated differently, African Americans made up 13% of the students in special education but only represented 8.4% of those in general education settings, while they made up 27% of those in separate classes. In their analyses of these data, the authors highlighted the finding that the greatest discrepancies and restrictiveness were in categories that typically provide services in less restrictive settings (e.g., LD). According to Skiba et al. (2006), this outcome argues against the notion espoused by the Office of Special Education Programs that the greater restrictiveness of African American students is likely due to their tendency to fall in disability categories that tend to provide services in more restrictive categories. In every disability category, African American students are found disproportionately in the most restrictive settings (Skiba et al., 2006).

Beyond classroom restrictiveness, other researchers note that compared with their European American counterparts, African American students with ED were found to receive fewer appropriate services such as counseling (Osher, Woodruff, & Sims, 2002) and more likely to be referred to the juvenile justice system (Parrish, 2002). These findings relative to restrictiveness appear to be in violation of IDEA 2004, which is predicated on the principle of least restrictive environments for students with disabilities. Ferri and Connor (2005) asserted that because the least restrictive environment provisions of IDEA are interpreted on a case-by-case basis, they offer a loophole to avoid integrated placements. They also viewed this as a civil rights issue and equated the lack of inclusion of African American students with the lack of progress for desegregation. The basis for this restrictiveness is unclear but needs to be explored along with the reasons for special education disproportionality.

Disproportionality and Gender

Researchers consistently point out that males are more likely to be identified for special education compared with females (Coutinho & Oswald, 2005; Wehmeyer & Schwartz, 2001), with African American males being the most vulnerable. Ferri and Connor (2005) reported that African American males are two times as likely to be labeled MR in 38 states, ED in 29 states, and LD in 8 states. Although the ratios vary by region and state, the data generally show males are 1.5 times, 2 times, and 3 times more likely to be placed in MR, LD, and ED programs, respectively, compared with females (Coutinho & Oswald, 2005). The greater representation of males in special education is often explained according to (1) biological factors, considering that males are more prone than females to certain physical conditions (e.g., birth defects) that are likely to lead to disabilities; (2) externalizing behaviors where males tend to be more active and disruptive in the classroom; and (3) referral bias in that referring teachers may have unrealistic expectations of males (Wehmeyer & Schwartz, 2001). The empirical data on gender differences in special education are limited, but some of the existing research suggests irregularities related more to females than to males (Coutinho & Oswald, 2005; DuPaul et al., 2006; Wehmeyer & Schwartz, 2001).

Wehmeyer and Schwartz (2001) examined the special education placement records in three school districts to determine gender differences in admission decisions. Findings indicated that girls displayed more significant deficits in terms of IQ scores, were admitted at a slightly older age than males, and were placed in more restrictive settings, leading the researchers to conclude that males were not overidentified but rather females were being underserved. Concern for underserved females is expressed as well by other researchers who advise that male preponderance may be due to dual disabilities, especially accompanied by attention deficit/hyperactivity disorder, which is more common among males. These researchers surmise that since externalizing behavior problems are found less among girls, school personnel are reluctant to identify and address girls' more common internalizing emotional problems. Nevertheless, underidentification of females does not necessarily rule out the legitimate concern for the tremendous risk status of African American males. Not only are they the number one candidate for special education, but, compared with their European American male peers, African American males are more likely to be suspended at a younger age, receive lengthier suspensions, be tracked into low-ability classes, be retained in their grade levels, programmed into punishment facilities, and given more pathological labels than warranted (e.g., Coutinho, Oswald, & Forness, 2002; Irvine, 1990; Oakes, 1994).

Discipline or punishment appears to be a key factor related to African American males and special education disproportionality. Skiba and colleagues (e.g., Skiba, Michael, Nardo, & Peterson, 2002; Skiba, Poloni-Staudinger, Simmons, Feggins-Azzis, & Chung, 2005) found school suspension to be related more consistently than other factors to special education disproportionality and found that African American males are disproportionately referred for disciplinary actions. On a smaller scale, Lo and Cartledge (2007), for instance, studied the disciplinary referral patterns for one urban elementary school and noted that African American males (compared with African American females and European American males and females) emerged with the greatest

disciplinary risk. Another observation was that over a 2-year period, disciplinary referrals for students at the greatest risk systematically escalated. That is, students did not evidence expected improvements, but, rather, their social behaviors (based on disciplinary referrals) progressively deteriorated. These findings suggest that these excessively punitive procedures are most likely exacerbating problem behaviors and increasing the African American males' risk for exclusion and special education placement. Research is needed to more clearly establish these relationships and, more important, identify interventions effective in bringing about more successful school adjustments for African American males.

Disproportionality and Poverty

Poverty, which disproportionately affects African American children, is considered to be a major factor in the overrepresentation of African American children in special education (Osher et al., 2004). Nearly half of African American children are reported to live below the poverty line (Watkins & Kurtz, 2001). Donovan and Cross (2002) offered the idea that poverty creates stress factors that suppress cognitive development. Typical stressors include a higher incidence of lead toxins, low birth weight births, and maternal health issues such as hypertension and diabetes. They also noted that impoverished children are more likely to attend poverty schools that often provide less adequate teachers and fewer resources. Additionally, as noted by Blanchett, Mumford, and Beachum (2005), schools of the poor are characterized by a high teacher turnover, limited technology, fewer specialists, and fewer advanced courses. An obvious implication is that children of poverty, affected by various environmental/physical factors that minimize their social and intellectual potential, enter inadequate schools that further aggravate their deficiencies rather than enhance their abilities. There is an assumption of a relationship between poverty and special education because there is a relationship between poverty and school failure (Skiba et al., 2005). Despite the obvious logic of this position, the role that poverty plays in the overrepresentation of African American children in special education is not entirely clear.

Oswald et al. (1999), for example, found that disproportionality within the category of ED was greater for African American students in more affluent districts than in low-income ones. These researchers found a direct relationship between poverty and MMR (i.e., MMR increased with poverty), but, conversely, levels of SED did not increase with poverty. Along the same lines, Ladner and Hammons (2001) documented greater disproportionality in counties with lower numbers of minority students.

In an effort to determine the relative contributions of race and poverty to disproportionality, Skiba et al. (2005) similarly found some influence of poverty in that levels of MMR were found to increase proportionately as poverty increased. On the other hand, there was an inverse relationship between poverty and LD, with the levels of LD decreasing as poverty increased. Poverty was not found to relate to either ED or moderate mental retardation. The only factor that consistently related to disproportionality in these categories was district suspension-expulsion rates. The weak influence of poverty in this and other studies underscores the complexity of race, poverty, and special education referral, making it nearly impossible to ferret out any one contributing factor. Nevertheless, race consistently remains powerful and salient, so that Skiba et al. concluded that

> the continued significance of race as a predictor of special education disability identification regardless of controls for a variety of other variables leads us to agree with those who contend that the process of special education referral and identification remains to some extent discriminatory. (p. 142)

The work of Skiba and other researchers (e.g., Ladner & Hammons, 2001) underscores the influence of poverty in disability. However, the equivocal nature of this research means that we cannot rule out other factors such as systemic and cultural biases (Osher et al., 2004).

Factors Contributing to Disproportionality

In discussing factors contributing to disproportionality, issues of racial bias and institutional racism come to the forefront. These racial tones

cannot be ignored, but at the same time, there is a need for reasoned analysis to determine why one condition (in this case special education placement) would disproportionately impact one particular race. Accordingly, we must examine variables that uniquely confront African American children, factors that may be within a child, within the school, or within the larger society. For the purpose of this chapter, we organize this discussion as follows: (a) factors placing students at-risk, (b) assessment, (c) teacher attitudes and expectations, and (d) social justice.

Factors Placing Students at Risk

For the past two decades, school reform has been one of the most critical issues facing society in general and educators in particular. Since the publication of *A Nation at Risk* (National Commission on Excellence in Education, 1983), there has been a heightened awareness of certain sects of the general student population that do not meet academic standards. Students of color are particularly vulnerable to this charge (e.g., African American) and are often targeted for special education referral. Almost immediately after the publication of the report, the term *at risk* became synonymous with urban dwelling, poor, low-achieving students in a number of the most populous school districts in the largest American cities (Winfield, 1991). At issue here is the etiology of underachievement. Is it possible that students themselves have innate deficits that are at best difficult to remediate or at worst impossible? One of the earliest notions about "within"-student deficits is expressed through the *cultural disadvantage theory.* Allen and Boykin (1992) stated that the advocates of this theory hold that African American students are subject to school failure because their home environments (i.e., parents) do not engage in the necessary intellectual interactions leading to the development of cognitive skills appropriate for academic achievement. Gardner and Miranda (2001) highlighted similar and extended notions held about African American children. The proposed shortcomings of African American students do not stop with parents but extend beyond the individual home to the entire community. Thus, African American communities are alleged to function as ineffective networks for facilitating the knowledge and skills necessary for school. As noted previously in this chapter, African Americans are more vulnerable to poorer birthing, health, and economic conditions than are their European American peers (Donovan & Cross, 2002). However, "finger pointing" and placing blame on students, parents, and entire communities is nonproductive and possibly contributes to the problem of overrepresentation (Arnold & Lassmann, 2003; Patton, 1998).

The previously noted conditions are considered to lead to the most commonly identified within-child factors of cognitive deficits as manifested in academic underachievement. Academic achievement is one of the most reliable predictors of referral to special education (Hosp & Reschly, 2004). In a meta-analysis of the relevant literature, Hosp and Reschley (2003) not only found academic underachievement to influence special education considerations most but also that African American students were the number one candidates for placement, followed by Latino students. They found European American students were the least likely to be deemed in need of services even after initial referral. Since academic achievement is a function of many factors, one questions how much of the poor achievement of African American students is due to deficits within the child or to poor schooling. One also questions the role of bias—that is, why referrals are more likely to lead to placements for African American students than for other groups.

Assessment

One of the foundations of special education is assessment. The positivist tradition in science assumes the existence of an objective "truth" that can be determined based on the scientific method. A number of scholars have questioned the "objective" measures of intelligence and behavior that lead to the overwhelming number of African American students in special education. Thus, the role of assessment must be examined to gain further insight into the disproportionality issue.

Teaching and learning are fundamental to the educational process. Educators responsible for instructing students in content and skill development must continuously evaluate the progress of their students. In short, assessment is a necessary component of the teaching and learning process. Measured gains or failure to learn content knowledge and appropriately utilize skills

are two of the most cited reasons for initial referral to special education. Referral for special education services involves two different phases of the entire special education process, but these are inextricably linked nonetheless. A large part of the disproportionality issue begins with the initial referral and the assessment associated with the referral. Educators are faced with a sizeable challenge. If students do not make adequate academic progress, then several critical questions must be posed. First, educators must question the root cause of the deficiency in progress. Can the lack of progress be attributed to an innate deficit (e.g., low intelligence)? Can the lack of progress be attributed to environmental factors (e.g., lack of parental support or conditions associated with poverty)? Often, one question not asked, but still plausible, is, can the lack of progress be attributed to the absence of a rich educational experience (e.g., ineffective instruction)? The sparse availability of quality educational services in large urban school districts has been well documented (Roderick, 2003; Waxman & Huang, 1997), and quite often educators fail to question the integrity or quality of educational interventions as a possible determining factor for special education referral. This lack of self-evaluation has led some to question the influence of bias in the assessment process to yield a disproportionate number of African American students in special education.

Schools rely heavily on testing, and standardized tests are often the basis for most special education placements. Over the years, there has been much controversy over IQ tests, with many advocates arguing that these tests are biased and not valid for culturally and linguistically diverse (CLD) learners (e.g., de la Cruz, 1996). Some other authorities contend, however, that the issue is not bias but rather cultural loading (Flanagan & Ortiz, 2001). That is, intelligence tests are technologically sound and appropriately normed, but the items are developed and normed on one cultural group and given to children in another culture. They offer the explanation that simple differences in a child's cultural background can result in a lowered score. Skiba, Knesting, and Bush (2002) similarly argued that the problem is not with the psychometrics of the tests but that the tests are conducted under conditions of social inequities that consistently undermine the performance of minority students. They contended that "cultural competence in assessment is based on awareness of the social and historical forces that continue to depress the academic performance of minorities" (p. 75). Working toward educational equity is one means for reducing assessment bias and discrepancies.

Multidisciplinary teams (MDTs) were mandated in the Education for All Handicapped Education Act of 1975 (EHA) as a means to reduce inappropriate and discriminatory referral and placement in special education (Friend & Bursuck, 2006). MDTs were intended to circumvent the potentially unfair and biased use of one test and one decision maker for special education placements. Although they are an improvement over pre-EHA conditions, a biasing effect is still evident. An ethnographic study of MDT meetings by Knotek (2003), for instance, revealed that teachers' concerns were generally more negative than those of any of the other team members, perhaps due to the close contact teachers share with students. Another interesting finding was the apparent linking of demographic variables to expectations of academic performance. For example, the study was conducted in a rural area where many families lived in modular or "trailer" homes. Children from families who lived in "single-wide trailer" homes were thought to be beyond intervention. One of the most interesting findings also has support from previous work, *confirmatory bias.* This is the apparent strong correlation between a teacher's initial judgment and later eligibility decisions. The phenomenon has been cited as a solid indicator of reliable teacher professional judgment or a clear sign of the inadequacy of the current system (Hosp & Reschly, 2004; Oswald & Coutinho, 1999; Warner, Dede, Garvan, & Conway, 2002).

In the wake of large-scale school reform efforts, assessment has also been discussed as a means of ensuring that students who are referred for special education services can be offered assistance in the general education setting, thereby reducing the overall numbers of children served under the "umbrella" of special education services. Traditional assessment practices have been called into question as a means to accomplish this goal. Some have proposed instead the creation of culturally responsive performance-based assessment procedures to include authentic measures leading to valid and reliable measures of student performance (Gordon, 1999; Harry & Klingner, 2006; Hood, 1998; Lee, 1998).

Teacher Attitudes and Expectations

Educators and administrators play a vital role in determining students' academic success or failure (Jacobson, 2000). The attitudes and expectations these professionals maintain about their students' current performance, motivation, and future potential is another factor contributing to the disproportionate representation of African American students in special education. The relationship between student and teacher is a vital one for many students of color. For a number of children, learning is a collective process, characterized by a genuine need to view learning experiences from a broad context, enabling them to make connections between content and the environment (Gay, 2004). If teachers espouse a tentative or negative attitude about a student's potential, it is possible that students sense this and underperform. The combined factors of bias, attitude, and expectations can actually cloud the decision-making process in regard to objective measures of genuine learning needs. Several scholars have highlighted the manifestation of expectations and attitudes by documenting the following: (a) *movement styles* or the way in which students of color use body language to communicate is often misunderstood by educators and administrators from the dominant culture (Neal, McCray, & Webb-Johnson, 2001); (b) *differentiated expectations* or simply expecting that students from diverse backgrounds will not perform based solely on demographic features (e.g., race or ethnicity; Warren, 2002); and (c) *negative teacher-student interactions*, characterized by less time spent on students' questions (Casteel, 2000), less positive verbal press bestowed on African American students (Casteel, 1998), and less satisfaction with overall school experiences as early as the third grade (Baker, 1999). The lowered expectations based on demographic variables alone indicate that the referral process is not based on sound professional judgment but rather preconceived notions about race.

Social Justice

It is almost impossible to overstate the impact and importance of the disproportionate issue of African American students in special education (Arnold & Lassmann, 2003). The current state of educational affairs would seem to suggest that one sect of the student population is incapable of learning and making acceptable academic progress. This notion is clearly counter to the basic premise of the American educational system, "all students can learn." Even the more liberal notion of "all students can learn something" seems to be challenged by the alarming number of African American students who do not complete 12 years of formal education. The impact of culture on teaching and learning must be brought to the front and center of education (Nieto, 2000). Patton and Townsend (1999) encouraged educators to come to terms with the very real presence of "power and privilege," influencing the selection of curriculum, development and implementation of school-wide programming, and instructional methods used in individual classrooms. The presence and promotion of dominant cultural beliefs about the nature of schooling often comes into direct conflict with the learning, movement, and cognitive styles of African American students (Parsons, 2003).

A large portion of this nation's teaching force is made up of European American females. Much of this population lacks the direct experience as well as the technical knowledge of effective instructional methodology for CLD student populations (Voltz, Brazil, & Scott, 2003). Although there is no evidence to support educators of one particular race or ethnicity as being incapable of teaching a student from a different race or ethnicity, there is a distinct knowledge that is required to teach all children, especially those from diverse cultural and linguistic backgrounds (Howard, 2001).

The organization of schools must also be examined as a contributing factor to the overall state of education for African American students in special education. One of the concerns is the convenient practice existing in schools that may benefit adults and undermine the education and civil rights of children. For example, debates continue about the effectiveness of tracking (see Grossman, Utley, & Obiakor, 2003, for pros and cons of tracking), and yet there is no clear consensus whether the practice should remain or be jettisoned from educational practice altogether. Some authorities speculate that tracking and special education are used to avoid the mandates of *Brown vs. Board of Education* (Ferri & Connor, 2005) and that designations such as *LD* and *dyslexia* were long used by European American parents as a way to explain the poor performance

of their children but also to avoid mixing their children with minorities (Ferri & Connor, 2005; Harry & Klingner, 2006). Early in her public school career the first author directly experienced this type of integration resistance on the part of many European American parents in a large urban district. Several classrooms for students with LD had been constructed in the basement of one predominately White elementary school. The parents strongly protested against the addition of these classes and did not relent until they learned that most of the special education students were White and that few, if any, of the Black children would be integrated into the all-White general education classes. Another, not uncommon, incident was when a school psychologist argued against the placement of a European American middle-class student into the program for students with MMR because this child came from a more sophisticated background compared with most of the children placed in such programs. The school psychologist felt that these classes would not permit this youngster to grow, as would be the case if he remained in the programs for children with LD, who were predominately European American. The clear implication was that programs for children with MMR were the domains of the poor and the minority, where the expectations for progress were minimal.

Another related example is that many administrators will assign teachers to classes based on an attempt to reward or even punish educators for past deeds. This practice neglects the needs of children, especially those with the greatest needs, who are quite often paired with the least qualified of the teaching staff (Stringfield, 1997). Borderline students exposed to inadequate teaching conditions will be further marginalized and placed at an even greater risk for special education programming. The social injustice found in the educational system for African American students requires a fundamental change. The inequities need to be recognized and greater effort put forth to provide early and effective instruction for all students.

Addressing Disproportionality

Legislative Interventions and Disproportionality

The latest reauthorization of the Individuals with Disabilities Education Improvement Act (IDEA/IDEIA—previously known as the Education of the Handicapped Act, 94–142) of 2004 includes some provisions that specifically target the disproportionality of minority students. The latest bill permits schools to determine LD eligibility without relying on the IQ discrepancy model. As noted previously in this chapter, IQ testing has long been considered discriminatory against minorities, particularly African Americans. One alternative and potentially promising model that has received much attention is response to intervention. Within this model, interventionists systematically use a series of interventions with learners who evidence risk markers for LD. Over a period of time, learners who fail to respond to these interventions and do not make substantial academic progress may be viewed as having specific LD and are programmed accordingly. Additionally, the 2004 authorization provides for professional development funds so that school personnel may acquire skills relative to effective instruction and positive behavioral interventions to limit the overidentification of students. Ostensibly, this provision is aimed at general educators who need to become more skilled in teaching and managing the behaviors of low-performing students, whose problem behaviors are aggravated by inadequate schooling and poor classroom management. Disability designations for many African American students may well be a function of the instructional failure of the school.

A third provision of IDEA 2004 is that school districts with significant rates of disproportionality are expected to implement pre-referral programs that could minimize the overidentification problem. Such programs are expected to provide well-designed effective interventions that will enable at-risk learners to be maintained in general education programs. Although these specifications are made through special education legislation, the professional implications are mainly for general rather than special educators. The goal is not simply to reduce the numbers of children placed in special education but, more important, to ensure school programs that result in academic and social competence.

Another legislative act that includes provisions for disproportionality is No Child Left Behind (NCLB), formerly the Elementary and Secondary Education Act of 1965. The law attempts to reduce racial achievement disparities and disproportionality by educational

accountability. The principal tool of accountability is through statewide tests where all students in Grades 3 through 8 are tested annually in reading and math. This testing includes minorities, students with disabilities, and students who are English language learners, who are expected to make adequate yearly progress until they display competence in year 2014. Districts are expected to disaggregate their test data so the progress of these subgroups can be monitored. Prior to NCLB, students with disabilities typically were excluded from large-scale testing. This policy often led to placing low-performing students in special education to avoid including their poor test scores in the school's test data. If these children's skills are not assessed, there is little pressure to enhance their performance—thus, there is little accountability. NCLB is intended to remove the incentive to either over- or misidentify students with disabilities as well as to ignore the lack of progress of students with disabilities. Despite these laudable goals, NCLB has been severely criticized (e.g., Meier & Wood, 2004). One of the most common criticisms by both educators and policymakers is the lack of funds allocated by the law to fund these mandates. Meier and Wood pointed out that the law failed to equalize the funding. Some of the wealthiest districts in the country spend at least 10 times more than the poorest districts on education. It is not realistic to expect poor and minority students to progress commensurately with their more affluent peers when they are being taught in inadequate schools.

Another concern pertains to "high-stakes" testing intended to increase accountability. These tests are labeled *high stakes* because they have contingencies attached to them. Some of the contingencies are placed on students so that students are not permitted to matriculate through school or to graduate if they do not pass state tests. Several authorities complain that these conditions unfairly punish students for the failures of schools and the larger society in that students are held accountable for material that they have not been taught (La Roche & Shriberg, 2004). A related issue is that NCLB causes schools and teachers to focus on test-taking skills rather than addressing individual learning needs. The data on the beneficial effects of high stakes testing are equivocal (Rosenshine, 2003). There is no question that accountability is important to curbing the problems of overidentification for African American students; whether the current testing procedures will help achieve that goal is yet to be determined.

Early Interventions

For children at the greatest risk, early intervention needs to parallel, if not exceed, those services that are currently available to families of infants with low-incidence disorders such as sensory disabilities, Down syndrome, and autism. CLD children born into families with specific markers associated with severe school failure (e.g., extreme poverty, premature parenting, parent criminality, family disorganization) need to be targeted, as well, for early intervention. These interventions should include family support/education, health services, sustained high-quality care, and cognitive stimulation. Preschool children from this population need access to high-quality preschool programs. Recent scientific reports indicate that quality early childhood child care has lasting effects. Campbell, Pungello, Miller-Johnson, Burchinal, and Ramey (2001) found high-quality early childhood child care to have a lasting effect on cognitive and academic development even into adulthood. Similarly, for slightly older children, Conyers, Reynolds, and Ou (2003) reported that 4- and 5-year-olds who participated in half-day preschool had 32% fewer special education placements than did their nonparticipating peers. Discrepancies between the two groups were noted as early as first grade, and treatment students who did experience special education had fewer years of placement than did those without preschool experience. An important emphasis needs to be placed on high-quality early learning programs. In some cases the school programs for many low-income children are of such poor quality that its developmental impact is questionable (Horm, 2003).

Teachers of young at-risk children need to be able to provide explicit, systematic, and intensive instruction to reduce or eliminate learning problems. Teachers need to be able to identify children at the greatest risk, to assess their learning needs, and to implement empirically validated curricula effectively to remedy or minimize potential learning problems. There is a real need to upgrade teacher preparation programs of young children so that teachers can skillfully apply valid early interventions before learning and behavior problems take root. Stress needs to be placed not only on remediation for

those at risk for school failure but also on stimulating the cognitive abilities of youngsters who show promise of giftedness.

Intervening in the Referral Process

An important step in addressing the overidentification of African American children in special education is intervening at the point of referral. If prevention strategies in the form of early childhood intervention have not been employed, school personnel need to pursue high-quality interventions at the point of referral considerations. There is evidence that nearly 90% of referred children will be placed and that the teacher's decision greatly influences whether a child will eventually be removed from the general education classroom (Harry, Klingner, Sturges, & Moore, 2002). Prior to assessing the child, an assessment of environmental and instructional factors needs to take place. Influential environmental factors include (a) working conditions within the school system; (b) pressures within the school; and (c) the ecology of the classroom. Quality assessments need to be comprehensive and thorough, taking into consideration the ecology of the child as well as behavioral and cognitive factors. Loe and Miranda (2002) pointed out that in urban areas, partly due to large caseloads, thorough evaluations are often sacrificed in the interest of expediency. Information about the student's classroom is extremely important. For example, behaviorally vulnerable boys enrolled in disorderly first grade classrooms show trajectories of increasingly aggressive behavior (Harry et al., 2002). Classroom discipline needs to enter into the referral intervention because the classroom decorum indicates the degree to which classroom disruption may be contributing to the target child's behavior or cognitive problems. It is also important to note the quality and quantity of instruction the student receives.

There is legitimate concern regarding the perceptions and skills of teachers of urban students. Some studies show that teachers are more likely to refer minority students to special education (e.g., Riccio, Ochoa, Garza, & Nero, 2003). Other researchers point out that urban teachers are more likely than their suburban counterparts to have questionable qualifications, experience, preparation, commitments, and pupil expectations (Kozleski, Sobel, & Taylor, 2003; Pang & Sablan, 1998; Skiba, Simmons, Ritter, Kohler, & Wu, 2003). These concerns justify the scrutiny of school and teacher factors before labeling and placing African American students in special education. After assessing the teacher's experience, instructional skill, management skill, and pupil perceptions, and the quality of the instruction provided the student previously by this teacher, in some cases, the most appropriate steps might be first to place the student in another general education classroom with a highly qualified teacher.

Once the teacher's qualifications are ascertained, the next step would be to proceed with instructional interventions within the general education classroom. Gravois and Rosenfield (2006) discussed the importance of instructional consultation teams in reducing the disproportionate referrals of minority students. The teams in their study focused on how to solve problems and structure interventions to help students become successful in the classroom. Teachers in 13 schools were trained and coached in interventions for their referred students. The results showed that minority students in the treatment schools, as compared with the controls, were much less likely to be referred or placed in special education. Longitudinal research would be of interest in such studies to determine if students who are maintained in general education continue to make progress and if they outperform their peers in nonintervention schools.

Effective Instruction

Too often African American children, especially poor children, enter the schooling process with one half of the language and academic readiness of their more affluent peers (Hart & Risley, 1995, 1999). Their unreadiness sets the occasion for a path of increasingly greater failure. After a sufficient period of failure, the schools will initiate the process of labeling and special education placement. Schools are challenged to interrupt this cycle and redirect these students onto a more productive path through effective instruction. The importance of challenging curricula, effective teaching, and robust learning cannot be overemphasized. Rosenshine (1987, 2002) identified seven components shown to be effective in the existing research. He noted that good instruction consisted of *clear academic focus* and *clear learning goals* (called

pinpoints). Instructors need to know exactly what they are trying to accomplish and how the learner will exhibit the targeted behavior. A clear goal, for example, would be to know that you expect the learner to read 60 correct words per minute with comprehension at the end of first grade. *Comprehensive content coverage* requires that students are taught all the relevant curriculum material and there is *ongoing monitoring of student performance.* The fifth and sixth components are *high rates of overt responding* and *immediate student feedback.* The *immediate and complete correlation of errors* are important to make sure that students have high rates of correct responding and the instruction is *fast paced.*

An important research finding in recent years is that poor instruction in urban classrooms is characterized by few opportunities for students to respond to the instructional material (Arreaga-Mayer & Greenwood, 1986). Arreaga-Mayer and Greenwood proposed that for urban students to receive the same number of opportunities as students in the suburbs they would have to remain in school for the entire summer. Active student responses that can be produced in various forms (e.g., choral responding, response cards, peer tutoring, repeated readings, and direct instruction) have been shown to be effective in increasing academic performance as well as student attendance (Heward, 2006; Lambert, Cartledge, Lo, & Heward, 2006).

The lessons of good, active student responding are characterized by high rates of oral and written student responses and are so tightly structured that students are constantly engaged in academic responding with limited opportunities to act otherwise. For primary-aged children, a good model of these principles can be seen in the Early Reading Intervention (Simmons & Kame'enui, 2003) program. This scripted curriculum has been used successfully to reduce the reading risk of kindergarten and first-grade children (e.g., Musti-Rao & Cartledge, 2007; Simmons et al., 2002). Since a combination of reading and behavior problems is the number one reason for referral to special education, it is imperative that school personnel be able to intervene effectively in these areas. Another model that employs these features for a broader age range is Direct Instruction (DI; e.g., Engelmann, Becker, Carnine, & Gersten, 1988). DI has been researched over several decades with consistently positive reports, particularly with low-income African American students. Many reports from DI schools evidence high academic achievement, good discipline, eager learning, and purposeful academic responding in African American students (Lindsay, 2004; Nadler, 1998; Raspberry, 1998).

An extremely important outcome noted in many of these DI schools is a reduced reliance on special education in restrictive, self-contained classes/schools. As noted in a previous publication (Cartledge, 1999), the first author was greatly encouraged when she observed urban African American males identified with behavior problems fully integrated into general education DI classes. The classes were so highly structured and well taught that the typical uninformed observer could not easily pick out the students diagnosed with behavior disorders.

Behavior Management

A major factor in improving the schooling and overall success of African American students is to empower school personnel to be *proactive* rather than reactive. This means that school personnel must become skilled in behavior management strategies that enable them to create school environments that motivate students to act according to school and classroom rules, as well as foster positive interpersonal interactions with peers and authority figures. A promising model that has emerged in recent years is Positive Behavior Interventions Supports (PBIS; e.g., Lewis & Sugai, 1999). In contrast to the zero-tolerance policies that emphasize punishing instead of positive consequences, PBIS is designed to stress positive incentives to motivate students to be socially appropriate. PBIS is designed to provide (1) *primary interventions,* where all students are taught school rules and positively reinforced for compliance; (2) *secondary interventions,* where students who fail to respond sufficiently to primary interventions receive more direct instruction and support through small group interventions; and (3) *tertiary interventions* for students who fail to respond to the first two levels. These are the students at the greatest risk, and individualized interventions may be effective in preventing or minimizing special education placements.

Lo and Cartledge (2006) employed tertiary interventions in the form of functional behavior assessments (FBAs) and behavior intervention

plans (BIPs) to reduce and prevent the special education risk for four African American males. A functional assessment indicated that the function of the disruptive behavior for all four students was to gain teacher attention. Intervention involved teaching the students how to solicit teacher attention appropriately and how to monitor their own behavior. Reductions in classroom disruptive behaviors were observed for all students. Furthermore, students were either maintained in general education settings or were not referred for more restrictive special education settings. Behavioral interventions are extremely important for young children, before maladaptive behavior patterns are permitted to metastasize. Many teachers are unskilled in behavior management strategies and tend to resort only to punishing or exclusion practices, which are often counterproductive. Yurick and Cartledge (2006), for example, coached a kindergarten teacher to use a token economy combined with precision requests (Rhode, Jenson, & Reavis, 1992) to reduce the total disruptive behaviors of eight males (seven African American and one European American). The children were first taught the expected behaviors and then rewarded when they complied. The data from this intervention showed that disruptive behaviors declined when the token economy was introduced but declined even further when the teacher began using precision requests. That is, the teacher learned firm and precise ways to deliver directions to noncompliant children through a systematic procedure that resulted in reductive measures for nonresponding. A critical understanding with these findings is the importance of teachers developing key management skills that help African American children, particularly males, become more adaptive in their behavior and more successful in the classroom.

Parental Advocacy

Parents of African American students need to be vigilant about the schooling of their children. Parents need to become familiar with the developmental milestones from infancy to determine if their children are developing in an age-appropriate manner. If delays are noted, parents should not hesitate to seek professional assistance because early interventions are key to ameliorating disabilities. Even if a child appears to be developing typically, parents need to make sure their children are making satisfactory progress in all school programs, including preschool. For instance, on entering kindergarten the parent should request a readiness assessment (e.g., Dynamic Indicators of Basic Early Literacy; Good & Kaminsky, 2002) to make sure the child is performing at benchmark. If not, interventions need to be implemented immediately and monitored closely. Even if at benchmark, the parent needs to request a midyear assessment to make certain the child is making expected progress. If not, intensive interventions are in order. The interventions are to be delivered by the school with reinforcement at home. Parents need to insist on interventions and should not be made to feel guilty for their child's lack of progress. Nor should they have to assume full responsibility for remedying their child's learning problems. African American parents need to build alliances with other parents and parent organizations that will help them identify resources and advocate for their children. In addition to parent organizations for all children with special needs (e.g., Pacer Center; www.pacer .org/about .htm), there are national organizations that focus exclusively on African American children (e.g., National Association for the Education of African American Children with Learning Disabilities; www.charityadvantage .com/aacld/HomePage.asp). These organizations encourage parents to utilize the legal process to obtain the services needed to promote their children's success.

Professional Development

Children are labeled and placed in special education programs only after an extended period of failure in general education classrooms. For many children improvements in school performance can be brought about through increased teacher support and effective instruction/behavior management practices. Preservice and in-service training for general education teachers needs to be designed to equip personnel with critical competencies in teaching reading and social skills. The emphasis is on these abilities because deficits in these areas are most predictive of special education referrals/placements for African American students.

Cultural Competence

School personnel need to acquire an understanding of children's backgrounds so that they accurately and effectively perceive children's behaviors, display respect for children and their culture, design strategies effective in helping children become most adaptive in their behavior, and acquire skill in recruiting and involving CLD families in the schooling process. Teachers who are able to incorporate cultural understanding into effective instruction strategies are best equipped to ward off disproportionate special education for African American learners.

Conclusions

The disproportionate placement of African American students in special education is a long-standing complex issue. It is also part of a larger problem related to the disparity in academic achievement between African American and European American students. Many factors including inadequate instruction, inappropriate assessments, low expectations, poverty, and racism seem to help account for this phenomenon, but delineating exact causes may be an extremely time-consuming, futile exercise. Efforts aimed at prevention and early intervention are probably most meaningful and productive. The research literature is replete with good evidence of effective instructional and behavior interventions that greatly reduce the need for special placements. The focus needs to be placed on educators who resist acquiring the cultural, instructional, and management competencies needed to remedy this problem.

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Disproportionality occurs when students are: Â· Overrepresented in special education services due to inappropriate referrals to special education. Overrepresentation can occur in classification, placement, and suspension. Â· Underrepresented in intervention services, resources, access to programs, and rigorous curriculum and instructionâ€”either through placements in more restrictive special education services or through discipline policies that remove students from school (NEA Truth in Labeling, 2007).Â (1998). Power, language and the education of African-American children. Boston, MA: Beacon Press. Pollock, M. (2004). Colormute: Race talk dilemmas in an American school. Princeton, NJ: Princeton University Press.