

Colorado Department of Education

Special Education AU Survey:

Caseload Study Year Three

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Introduction

The Individuals with Disabilities Education Improvement Act (IDEA) of 2004 defines low-incidence disabilities as “a visual or hearing impairment, or simultaneous visual and hearing impairments; a significant cognitive impairment; or any impairment for which a small number of personnel with highly specialized skills and knowledge are needed in order for children with that impairment to receive early intervention services or a free appropriate public education” (20 U.S.C. 1462 § 662(c)(3)). In the United States today, children with low-incidence disabilities comprise less than one percent of the estimated resident school-age population (US Department of Education, 2002).

This report describes the third year of a five-year study conducted by the National Center on Low-incidence Disabilities (NCLID) investigating caseload-related issues for special education teachers serving students with low-incidence disabilities. The researchers are using survey responses to explore teacher perceptions of their caseloads and factors influencing caseload configurations. This report discusses the method of investigation, shares findings from the third year of data collection, provides a summary discussing potential implications and looks ahead to future investigations.

Method

Our caseload study is part of a larger educational service evaluation effort on behalf of the Colorado Department of Education (CDE). Each year an online survey is provided to 20% of the professionals working in the field of education within the state of Colorado. At the end of the five year survey period, 100% of Colorado’s education professionals (i.e., administrators, general education teachers, special education teachers and related services personnel) will have had an opportunity to provide input on the

nature of education in that state. For a copy of the survey, contact CDE at http://www.cde.state.co.us/index_home.htm.

For this survey, participants are asked to respond to various items using several formats: a) a six-point Likert scale (e.g., strongly disagree, disagree, neutral, agree, strongly agree, and not applicable); b) check all that apply (e.g., What sorts of certifications do you have); c) choose one from a list provided (e.g., What percentage of your caseload is served through consultation only); d) fill in the blank (e.g., How many students are on your caseload); and e) narrative responses (e.g., List the top three things that would make you more likely to stay in education).

It is important to note that these results are preliminary for year three and should be viewed with caution due to low number of participants. Where appropriate, information from each of the low-incidence disability fields (i.e., sensory disabilities and severe/profound needs) may have been collapsed into a single low-incidence category. This was done for statistical purposes and for the protection of participants. As more information is added within subsequent years, previously collapsed low-incidence information may be reported as separate fields.

Year Three Results

Demographics

As of the 2005-2006 academic year (i.e., year three of this study), a total of 4,563 professionals from seventy-two school districts have participated in this study. Of the total number of respondents, 12.2% (N=556) identified themselves as special education teachers. Two hundred four (4.5%) of the 4,563 respondents indicated they had at least one of the licensures required within the state of Colorado to teach students with low-

incidence disabilities. Some of these participants, in addition to their low-incidence licensure, indicated additional certifications (e.g., Regular Teacher’s License, Moderate Needs, Early Childhood, or an additional low-incidence licensure such as Severe Needs: Cognitive). Participants with licensure in both severe needs and a sensory disability were excluded from the analysis so that mutually exclusive groups could be compared. This resulted in 197 (4.3%) total participants for Year Three of this study. Additionally, due to the low numbers of participants having licensures of either deafness or visual impairments, we collapsed these categories into a single grouping of Sensory Disabilities. Thus, Table 1 indicates the final number of participants who were used during year three of this study.

Table 1

Percent of Low-Incidence Licensed Teachers (N = 197)*

Severe/Profound (N = 174)	3.8%
Sensory (N = 23)	0.5%

*Percents based on total number of respondents (N = 4,563)

Most (95.3%) teachers licensed to work with students with low-incidence disabilities identified themselves as Caucasian, had a Master’s degree or better (81.7%), and have been teaching in the field of special education, on average, approximately 18 years (Table 2).

Caseload Results: Teachers Licensed in Low-Incidence Disabilities

For the remainder of this report, the preliminary results of questions relating directly to caseload issues will be reported. Information will include caseload configurations, factors influencing caseload size and composition, delivery of service

processes, service provision environments, and teachers who are providing instruction and support to students from differing disability categories.

Table 2

Demographic Information

Teachers of Students with Low-Incidence Disabilities (N = 171)*

	Percent	Number
Ethnicity		
American Indian/Alaskan Native	2.3	4
Black (not Hispanic)	0.6	1
Hispanic	0.6	1
Asian/Pacific Islander	1.2	2
White (not Hispanic)	95.3	163
Master's Degree or Higher	84.9	84
Average Teaching Experience	18.7	99

*Year three ethnicity data not available

A total of nine of the 47 survey items corresponded directly to the topic of caseload (Table 3). Recall that, unless a question required a short answer response (e.g., question 37), a six-point Likert scale was used to measure teacher perceptions and experiences (e.g., strongly disagree, disagree, neutral, agree, strongly agree, and not applicable).

Means were calculated to determine, on average, how teachers licensed within the fields of low-incidence disabilities responded to each item. As shown in Table 4, teachers reported that they had an average of 15.6 students on their caseload for teachers of students with severe or profound needs and an average of 20.7 students for teachers of

Table 3

Questions Relating to Caseload

Q37 - How many students are on your current caseload?

Q38 - I believe my caseload is determined by students' IEP requirements.

Q39 - I believe my caseload is influenced by my students' disability label.

Q40 - I believe my caseload is influenced by budgetary limitations.

Q41 - I believe my caseload is influenced by a lack of qualified personnel.

Q42 - I believe that time spent traveling interferes with my ability to serve students on my caseload.

Q43 - I believe my caseload is such that I am able to meet student needs.

Q44 - What percentage of your caseload is served through consultation only?

Q45 - What percentage of your total work time is spent in direct contact with students on your caseload?

Table 4

Average Number of Students on Caseload

Number of Students on Caseload - LID Licensed Teachers						
	N	Mean	Std Dev	Median	Min	Max
Severe/profound	166	15.6	8.2	14.5	0	39
Sensory	23	20.7	20.4	15.0	5	98

*Eight participants did not respond

students with sensory disabilities (i.e., teachers of students with vision loss, hearing loss, or both). Additionally, caseloads ranged in size from 0 to 98 for both groups. Again, due

to the low number of respondents with sensory licenses, results for this group should be viewed with caution.

Table 5 reports responses from teachers licensed within the low-incidence disability fields related to caseload questions 38 through 43. As these data indicate, teachers surveyed believed their caseloads were determined by student IEP requirements (56.0%) and by student disability labels (56.0%); however, a relatively substantial number of these same teachers also reported that budgetary considerations were involved in caseload determination (45.6%, contrasted with 42.4% who disagreed).

Table 5

Caseload Response Percentages (N = 197)

Caseload Survey Question	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	No Response
Caseload determined by IEP	16.0	16.8	7.2	34.4	21.6	4.0
Caseload influenced by disability label	15.2	17.6	7.2	37.6	18.4	4.0
Caseload influenced by budget	11.2	31.2	7.2	28.0	17.6	4.8
Caseload influenced by lack of qualified personnel	19.2	44.8	11.2	13.6	6.4	4.8
Travel time interferes with delivery*	21.0	19.4	7.3	4.8	2.4	45.2
Able to meet student needs	4.0	16.8	12.0	48.8	16.8	1.6

* Only those participants who travel for their caseloads responded.

These teachers also tended to report that travel time did not interfere with fulfilling their teaching responsibilities (40.4%) and that they were able to meet the needs

of the students on their caseloads (65.6%). For histograms depicting responses from questions 38 through 43, see Appendix A.

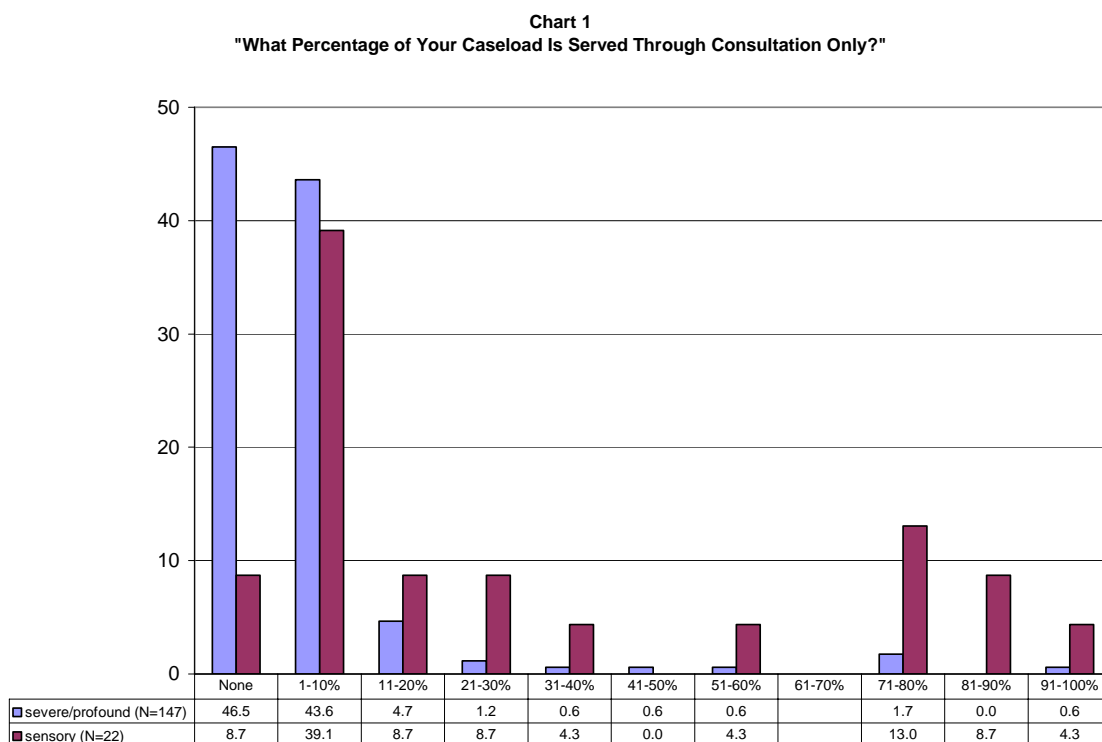
Having direct contact with students is an important aspect of teachers' responsibilities within special education. Direct contact allows teachers to provide individual instruction within a variety of environments to best meet students' individual needs. A drawback to direct instruction, however, is that students may be removed from general education classrooms depending on where direct instruction occurs. Moreover, this approach may not allow general educators to learn from special educators about ways to accommodate lessons to the needs of identified students, nor does this approach necessarily foster the processes of special educators learning from general educators' curriculum content. As a result, a second option for service delivery is consultation. Consultation allows special education teachers to educate classroom teachers and other support staff on effective strategies for satisfying students' educational demands, and keeps them in touch with the day-to-day content of instruction. Both have their place within special education and the degree either approach is used may be dictated by factors such as educational location and/or caseload configurations (Kamps & Walker, 1990; Logan & Keefe, 1997).

There were two questions from the survey that asked teachers to address how they deliver instruction to their caseload of students: a) percentage of caseload supported through consultation only, and b) percent of total work time spent in direct contact with students. As shown in Charts 1 and 2, teachers licensed in the low-incidence fields indicated that a greater percentage of their time is spent in direct contact with students, and that few teachers use consultation only to deliver support. One must bear in mind the

level of involvement teachers of students with low-incidence disabilities must have when working with students with sensory and significant needs. This level of involvement is an important factor when considering caseload configurations. Given that more teachers are spending a greater amount of time in direct contact with their students, the next area explored was the environment in which teachers are providing instructional support.

Chart 1

Consultation Only

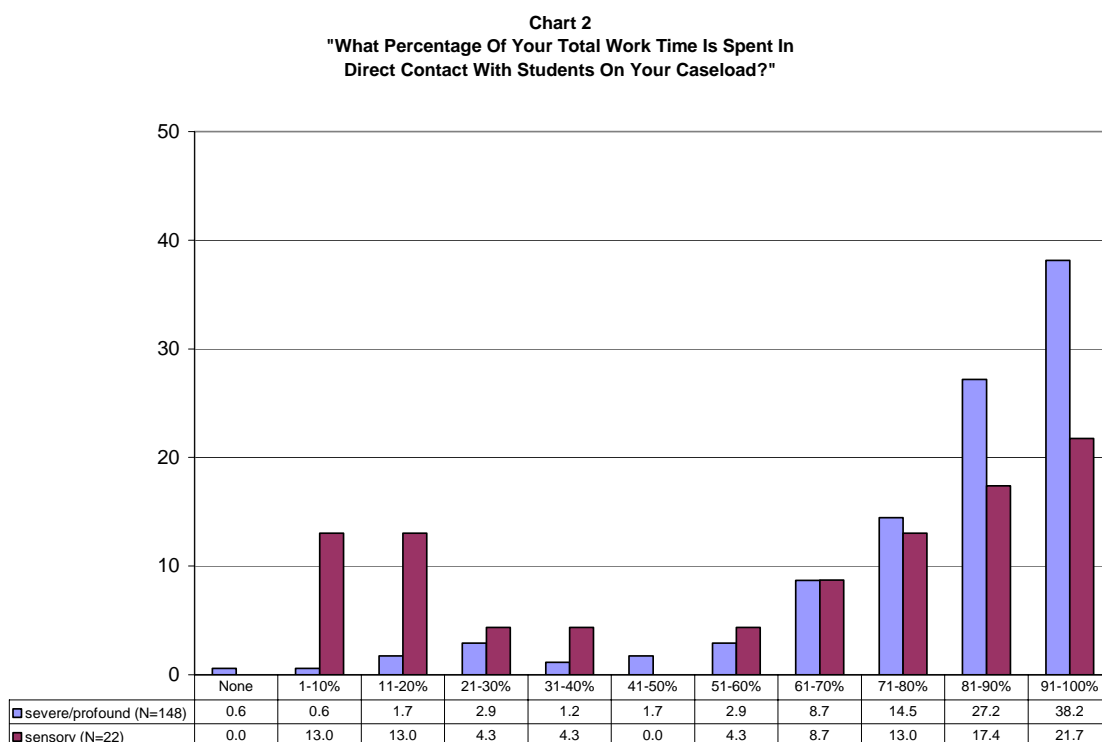


IDEA (2004) states that students should be educated in their least restrictive environment using a continuum of placement options (e.g., general education classroom, resource room, students' home school, center-based program, or residential facility). As a result, teachers licensed within the field of low-incidence disabilities may be working in

one or more of these settings. Table 6 identifies the different environments where surveyed, licensed teachers of students with low-incidence disabilities provide support and/or instruction.

Chart 2

Direct Contact



Summarizing the results shown in Table 6, when averaged, the majority (65.9%) of teachers licensed as low-incidence disability specialists reported providing instruction to students in environments *outside* the general education classroom at the student's home school. Support *within* the general education classroom (64.5%) was the second most commonly reported setting. When looking at individual disability areas, the

Table 6

Environments Where Services Provided*

Environments	Severe/Profound N = 174	Sensory N = 23
Student's regular school inside the general education classroom	63.8%	65.2%
Student's regular school outside the general education classroom	75.3%	56.5%
Center based school inside general education classroom	20.1%	30.4%
Center based school outside general education classroom	30.5%	34.8%
Separate facility	4.0%	0.0%
Residential facility	0.6%	0.0%
Community	12.6%	4.3%
Home	4.0%	13.0%
Hospital	1.7%	8.7%
Infant/Pre-school setting	2.3%	34.8%
Itinerant teacher	4.0%	43.5%

*Teachers could choose more than one environment.

opposite was found for teachers of students with sensory disabilities. That is, more teachers supported students within the general education classroom (65.2%) than outside it (56.5%). Additionally, it is noted that a larger percentage of teachers of students with sensory disabilities worked in center-based, home, infant pre-school, and itinerant environments than compared with teachers of students with severe/profound needs. This observation should be explored in subsequent studies. Considering that the average caseload is 18 students, one must recognize the possibility that there are challenges associated with providing instruction and support to students with low-incidence disabilities in these widely distributed, multiple environments. This finding coincides with the previous results regarding delivery of services (i.e., direct contact and consultation only). Again, these findings may be due to the type of services and needs that were located within the two surveyed groups for year three of this study. It is

anticipated that certain findings may change once additional years are collected and added to our overall results.

School districts must find creative and economizing avenues that use their licensed specialists to the best extent possible. Given that licensed teachers of students with low-incidence disabilities are often providing educational services to students in very different environments, we wondered whether their skills were also being stretched by requiring them to educate students for whom they have not been specifically licensed to teach. We also wondered whether other special education teachers are being required to educate students outside their licensure area. Table 7 shows the configurations of students being supported by licensed teachers from various disciplines across both high-incidence and low-incidence areas.

As shown in Table 7, our preliminary data indicate that special educators licensed from other fields (e.g., moderate and affective needs) are supporting and/or instructing students with low-incidence disabilities. Conversely, teachers licensed within the low-incidence fields are also serving students with learning disabilities, emotional disabilities, and speech-language needs. For example, 36.5% of teachers licensed as moderate or affective specialists reported working with students with hearing loss, 19.8% reported working with students with vision loss, and 38.4% reported working with students who are deaf-blind or those with multiple disabilities. Conversely, teachers specializing in vision reported working with students who are deaf or hard of hearing and students who have multiple disabilities. Taken together, these findings are similar to previous research indicating that special education teachers often work with students outside their areas of training (Giangreco & Borer, 2005).

Table 7

Percentage of Licensed Teachers Working with Different Populations of Special Needs

Students*

	Moderate/Affective N = 359	Severe/Profound N = 174	Sensory N = 23
Significantly Limited Intellectual Capacity	60.4%	79.9%	52.2%
Significant Identifiable Emotional Disability	85.8%	60.9%	47.8%
Perceptual or Communicative Disability	94.7%	77.6%	52.2%
Hearing	36.5%	33.9%	78.3%
Vision	19.8%	25.9%	34.8%
Autism	44.8%	59.2%	34.8%
Traumatic Brain Injury	38.2%	46.0%	30.4%
Other Physical Disabilities	72.7%	69.5%	39.1%
Speech-Language Disability	78.3%	75.3%	52.2%
Deafblind	4.7%	5.7%	34.8%
Other Multiple Disabilities	33.7%	60.9%	39.1%
Preschool	7.2%	6.9%	39.1%
Other (e.g., non-disabled)	2.8%	5.7%	8.7%

* Teachers could select more than one category.

Summary and Implications

Findings from the third year of this study are preliminary and the numbers of respondents are low. As a result, only the most tentative hypotheses and implications can be developed based on these data. Future years' data will aid NCLID in sculpting a more accurate picture of caseloads for teachers of students with low-incidence disabilities.

At the same time, we believe that we are in a position to advance four hypotheses, and to derive from these hypotheses a number of potential issues and implications related to the education of students who have low-incidence disabilities. These are (a) teachers licensed to serve students with low-incidence disabilities are relatively homogeneous with respect to educational attainment, years of experience, and ethnicity, and these

demographics raise a number of questions and concerns related to retention and recruitment; (b) caseload size, composition, and delivery models are highly variable across teachers, and the impacts these patterns have on educational processes and outcomes are unclear; (c) educational services are being provided in multiple settings, sometimes directly and sometimes through consultation, and the determining factors for these patterns of service delivery remain little understood; and (d) students with low-incidence disabilities are being served by teachers with and without the required credentials, and this finding raises questions about licensure and service delivery patterns for these students. These hypotheses are discussed in turn below.

Teachers licensed to serve students with low-incidence disabilities are relatively homogeneous with respect to educational attainment, years of experience, and ethnicity, and these demographics raise a number of questions and concerns related to retention and recruitment.

Of the 4,563 professionals who participated in this year's survey, 556 (12.2%) were special education teachers. Of these individuals, 197 indicated that they were licensed only to teach students who were deaf or hard of hearing, or students who are blind or visually impaired, or students with severe disabilities. More than eighty percent of teachers surveyed reported having a Master's degree or better, and they reported that they had been working in the field of education for an average of 18 years. These findings are similar to those in previous research, which indicates that teachers within the low-incidence disability fields continue to be a well-educated and a decidedly aging workforce (Ferrell, 2005; LaSasso & Wilson, 2000; Luckner & Hanks, 2003; U.S. Department of Education, 2002). Most of these teachers also identified themselves as

Caucasian, and this finding is also typical of previous research studies (Christensen, 2000; Fletcher-Carter & Paez, 1997).

We believe that there are two recruitment and retention issues that are suggested by these data. The first issue is that these data raise important questions regarding the meaning of the finding that teachers licensed in low-incidence areas average extensive years of experience as educators. Are we, for example, faced with a double-edged sword in which our teachers are veterans with long histories of teaching students with similar needs, but we can anticipate critical teacher shortages as these individuals retire? Or, alternatively, do teachers typically enter our field later in life, after they have accumulated some years of experience as teachers with other populations of students? If the latter is true, perhaps our field is blessed with a potentially refillable pool of teachers who have a wide range of experiences in other areas before finding a place for themselves serving students with low-incidence disabilities. But, inversely, maybe there are some teachers who find their way into the low-incidence fields because of difficulties they had as teachers in other areas. Such a pattern would raise concerns about school district hiring practices for teachers in our area, and it would also raise troubling concerns about the quality of education that is provided to students with low-incidence disabilities. Finally, do any of these patterns differ in systematic ways across the three areas of visual impairments, deafness, and severe disabilities? The truth may lie somewhere in the middle of these proposed patterns, but it is important to examine the fit of each of these to the actual world of teaching, because effective “retention and recruitment” solutions probably require a better understanding of these dynamics.

The second recruitment and retention issue that is raised by these data is that there is a notable absence of educators representing ethnic minorities. We hesitate to publish exact data, due to the low numbers of participants indicating they are of American Indian/Alaskan Native, African American, or Hispanic minorities. These preliminary data suggest that the recruitment and retention of teachers representing various cultural minorities continues to require our attention (Hayes & Luetke-Stahlman, 1997; Steinberg, Bain, Montoya, & Ruperto, 2002)

Caseload size, composition, and delivery models are highly variable across teachers, and the impacts these patterns have on educational processes and outcomes are unclear.

Preliminary findings from this study indicate significant variability in caseload sizes across teachers. The mean for teachers licensed to serve students with sensory disabilities was 20.7, while the mean for teachers licensed to serve students with severe/profound needs was 15.6. Across the two groups of teachers, caseload sizes varied from as few as 0 to as many as 98 students.

Previous research indicates that the number of students assigned to teacher caseloads has significant implications for both student learning and teacher attrition (Gersten, Keating, Yovanoff, & Harniss, 2001; Russ, Chiang, Rylance, & Bongers, 2001). Based upon a review of the literature, Russ and colleagues (2001) found that large caseloads and instructional group sizes negatively impacted student achievement in math and reading. Additionally, the same review found a significant correlation between teacher attrition and high caseload. For the most part, our teachers reported that they *were* able to meet the needs of their students. Yet, there was also an identifiable group of teachers who suggested that budgetary issues influenced caseload size and/or

composition: 45.6% reported budget as an issue. Future iterations of our study will further explore these questions, by examining relationships between caseload size and reported effectiveness, then examining how reported budgetary influences play into these data.

An interesting finding of this study was that a large majority of these teachers reported that travel time did not interfere with instruction. In an analysis of service delivery patterns among teachers serving students who were gifted and talented, Froman (2005) found that service delivery patterns varied dramatically between those teachers working in one school and those serving students across several schools. Although her study did not explore questions of instructional quality or effectiveness, her study did show that there were more services being provided when teachers worked in single schools as opposed to multiple sites. Our survey is not presently equipped to look at these kinds of issues in detail, but we do hope to examine in future studies the question of reported effectiveness of instruction in relation to whether teachers work in single schools or across multiple sites. This question will be added to the survey.

In regards to caseload composition, most teachers reported that their caseloads were determined by student IEPs and were influenced by disability labels. In a state that has, until very recently, had a licensure structure that was strictly categorical, the latter finding was not surprising. Yet, these data stand in stark contrast to another finding of this study, that these licensed teachers reported “providing services” to students representing many different categories of disability. Unfortunately, given the way we phrased our questions, we cannot accurately determine whether this is because caseloads are diverse in terms of disability or because teachers frequently deliver services to

students on other teachers' caseloads because of their expertise, but we suspect that it is probably a little of both.

Colorado, like a number of other states, has moved toward noncategorical licensure, and this move was partly in response to the fact that individual teachers often necessarily had to be responsible for students in categories other than those in which they possessed licensure. However, both the areas of visual impairments and deafness have chosen to retain their separate licensures. Future versions of our study will explore additional questions about service delivery patterns in relation to reported effectiveness, caseload sizes, and disability categories.

Educational services are being provided in multiple settings, sometimes directly and sometimes through consultation, and the determining factors for these patterns of service delivery remain little understood.

When asked to identify how and where services are being provided, "separate facilities" were never specified. However, both general education classes and settings outside of general education were identified by our respondents as locations where services were provided. Moreover, many of these teachers indicated that they use both consultative and direct instruction models. Nevertheless, direct instruction outside the general education classroom was predominant among this sample of teachers across all three licensure areas.

The Individuals with Disabilities Education Act (IDEA) states that students with disabilities must be educated within their least restrictive environment. The law further articulates that students with disabilities must be educated within the general education classroom to the greatest extent possible with students who are not disabled (20 USC

1412 § 612 (a)(5)(A)). Consistent with this legislation, recent research indicates that more and more students with disabilities are being educated within the general education classroom (McLeskey, Henry, & Hodges, 1998). Nevertheless, McLeskey and colleagues found that students who are deaf-blind (30.8%) and those who have multiple disabilities (26.1%) were being educated in separate schools at a higher rate than compared with students with less substantial needs (McLeskey, Henry, & Hodges, 1999). Additionally, they found that the students with low-incidence disabilities receiving their education in the general classroom for 80% or more of their school day was less when compared with other students with disabilities.

Theoretically, the setting that a child is in, whether self-contained, general education plus pull-out, or fully in general education, is determined by the student's needs and by his or her IEP team members. It would also follow from this logic that whether a teacher's services are direct instruction or consultative depend on these same factors. But we suspect that both of these remain untested assumptions, and that other factors might be involved in many student placement decisions. For example, is it possible that some significant proportion of teachers deliver services that they are comfortable delivering irrespective of what a specific student needs? Do educational teams prepare IEPs that are based on a full analysis of student needs in relation to the legal concept of restrictiveness, or do they prepare IEPs that allow them to deliver services in ways in which they feel most competent and comfortable? Do school districts make adequate provisions for the full continuum, then actively encourage their teachers to use "student need" coupled with "least restrictive" as the primary determinants of placement? Or, do districts create "programs," and encourage teachers to fit students into

these programs whenever possible? Do budgetary considerations impact placement decisions, especially given that our data suggests that teacher caseloads may be, in some cases, influenced by budgetary factors?

This study cannot begin to address all of these issues as fully as they deserve to be investigated, but we can -- in later iterations of our research -- examine some of the details of service delivery to see if there are patterns that might inform future research into these issues.

Students with low-incidence disabilities are being served by teachers with and without the required credential, and this finding raises questions about licensure and service delivery patterns for these students.

A notable finding of our study was that educators licensed from other fields (e.g., moderate and affective needs) reported that they are supporting and/or instructing students with low-incidence disabilities. As noted in our results, for example, more than 36.5% of teachers licensed as moderate or affective specialists reported serving students with hearing loss, 19.8% reported serving students with vision loss, and 38.4% reported serving students with deaf-blindness and multiple disabilities. As already noted, these findings are consistent with other research showing that teachers often work with students outside of their areas of original preparation (Giangreco & Broer, 2005).

Changing licensure categories in Colorado will alter this pattern, at least with respect to students with severe disabilities. Originally served variously by teachers prepared within one of two separate licensure areas (“severe needs - cognitive” and “profound needs”), students with severe disabilities will increasingly be supported by teachers with a “generalist” licensure, representing a collapse of the “mild/moderate” and

“severe-profound” distinctions that have driven educational practices in this state for more than a decade. But, as noted previously, vision and hearing have elected to retain their separate licensure structures.

Many unanswered questions remain about how both generalist and specialist licensure structures impact service delivery both within and outside the low-incidence field. We have been given a unique opportunity to explore in a preliminary way some of these concerns, and our future work will reflect our grappling with these issues.

Looking Ahead

The data that are collected over the next two years will be helpful in bringing to light future issues and trends related to caseload size and service delivery with respect to teachers licensed to serve students with low-incidence disability designations.

Subsequent years’ data may also aid us in articulating particular relationships between students with high- and low-incidence disabilities and those who are providing instruction and support within different educational environments. Additionally, we anticipate exploring further the role of the general education teacher in these processes. If you have questions, concerns, or would like more information regarding the results of this study or the overall project, please contact Dr. Ann Sebald ann.sebald@unco.edu or Dr. Lewis Jackson lewis.jackson@unco.edu.

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Appendix A

Questions 38 through 43

