

- Preview the PowerPoint file from this module. Enhance it as needed.
- Identify any terms to define.
- Find additional videos to supplement those listed.
- Discuss the role of the paraprofessional as it relates to this topic.
- Preview the objectives. Briefly state why each is important.



This module addresses the general characteristics of students with disabilities using categories under IDEA and recognized by the state of Oklahoma. It also addresses instructional (Universal Design for Learning and Assistive Technology) and positive interaction strategies with students in their Least Restrictive Environment.

To effectively assist in the delivery of instruction, paraprofessionals must understand not only that students learn in different ways and at different times, but that they all have the ability and the right to learn in a safe environment. Paraprofessionals recognize the multiple types of learning styles that exist among students and desire to focus on students' individual needs.

While it is important to be aware of the categories of disabilities and the characteristics associated with each, the information provided is meant to be a resource. All students learn and behave differently. It is important to get to know each student and identify their individual areas of strengths as well as weakness. Paraprofessionals cannot rely only on information related to a student's disability category.

Objectives

By the end of this module, the paraprofessional will be able to:

1. Have a basic knowledge and understanding of the disability categories recognized by the state of Oklahoma.
2. Be prepared to support students with disabilities in all learning environments.
3. Demonstrate the ability to differentiate instruction according to student needs.
4. Have the basic ability and understanding of the various uses of assistive and adaptive equipment and materials to support learning for students.
5. Demonstrate an understanding of the needs of students with limited English proficiency.

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Disability Categories and Definitions under IDEA

Autism is a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, which adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The Autism Spectrum includes: Autism, Pervasive Developmental Disorder — Not Otherwise Specified (PDD-NOS), Asperger Syndrome (AS), Rett Syndrome (girls only), and Childhood Disintegration Disorder (CDD — primarily boys).



Visit the Autism Speaks website at: www.autismspeaks.org/autism-apps. The website includes a list of apps by name, platform, and age — it even includes a user rating system! Find three (3) apps that most interest you. Describe them below:

App — _____

 App — _____

 App — _____

Deaf-Blindness disability refers to concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for children with deafness or children with blindness.



concomitant — simultaneous

Deafness is a hearing impairment that is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, that adversely affects a child's educational performance.

- Preview the website in advance. Find an alternate resource if the link has changed.

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Developmental delays —A child with a disability for children aged three through nine (or any subset of that age range, including ages three through five), may...include a child (1) who is experiencing developmental delays (DD), as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and (2) who, by reason thereof, needs special education and related service. [34 CFR §300.8(b)]

This category is used for those children ages three through nine. On or before the child's tenth birthday, a disability category must be determined for the child if the child still qualifies for special education services.

Emotional disturbance (ED) is a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

- A. An inability to learn that cannot be explained by intellectual, sensory, or health factors.
- B. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.
- C. Inappropriate types of behavior or feelings under normal circumstances.
- D. A general pervasive mood of unhappiness or depression.
- E. A tendency to develop physical symptoms or fears associated with personal or school problems. 34 CFR 300.8(c)(4)

Types of emotional disturbance include: anxiety disorders; bipolar disorder; conduct disorders; eating disorders; obsessive-compulsive disorder; psychotic disorders; and depressive disorders.



- Preview the website in advance. Find an alternate resource if the link has changed.



Learn more about different types of emotional disturbance at the National Institute of Mental Health website: www.nimh.nih.gov/health/publications/booklets.shtml

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Hearing impairment (HI) means an impairment in hearing, whether permanent or fluctuating, that adversely affects a child's educational performance. [34 CFR 300.8(c)(5)]

Conductive hearing losses are caused by diseases or obstructions in the outer or middle ear (the pathways for sound to reach the inner ear). Such losses usually affect all frequencies of hearing evenly and do not result in severe losses. A conductive hearing loss can usually be amplified with a hearing aid or corrected medically or surgically.

Sensorineural hearing losses result from damage to the sensory hair cells of the inner ear or the nerves that supply it. These hearing losses can range from mild to profound. They often affect the person's ability to hear certain frequencies more than others. As a

result, even with amplification to increase the sound level, a person with a sensorineural hearing loss may perceive distorted sounds, sometimes making the successful use of a hearing aid impossible.

A *mixed hearing loss* refers to a combination of conductive and sensorineural loss and means that a problem occurs in both the outer or middle and the inner ear. A *central hearing loss* results from damage or impairment to the nerves or nuclei of the central nervous system, either in the pathways to the brain or in the brain itself.

Intellectual disability (ID) means significantly sub-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a child's educational performance. [34 CFR 300.8(c)(6)]



Learn more about what causes an intellectual disability by watching this video: www.youtube.com/watch?v=djFJ19DF9Y

Multiple disabilities (MD) are concomitant impairments (such as intellectual disabilities-blindness or intellectual disabilities-orthopedic impairment), the combination of which causes such severe educational needs that they cannot be accommodated in special education programs solely for one of the impairments. Multiple disabilities does not include deaf-blindness. [34 CFR 300.8(c)(7)]

People with severe disabilities are those who traditionally have been labeled as having severe to profound cognitive impairments or intellectual disabilities. Now, there's a growing understanding that disabilities can affect individuals along a scale of minimal or mild to severe. It is possible to have a mild learning disability or a severe one, just as it's possible to have mild or severe autism, without a clear-cut diagnosis of intellectual disability. An individual with multiple disabilities usually has more than one significant disability, such as movement difficulties, sensory loss, and/or a behavior or emotional disorder.

- Preview the video in advance. Find an alternate video if the link has changed. The duration of this video is 3:39.

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Orthopedic impairment (OI) — The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns that cause contractures) that adversely affects a child's educational performance. [34 CFR 300.8(c) (8)]

Orthopedic impairment can take different forms:

Cerebral Palsy (CP) affects the largest group of students with orthopedic impairments in public schools. It occurs when there is an injury to the brain before, during, or after birth and results in poor motor coordination and unusual motor patterns. There are four main types of cerebral palsy:

spastic — the most common form, when there is too much muscle tone or tightness, resulting in stiff or jerky movements in the legs, arms, and/or back;

dykinetic/athetoid — affects a person's entire bodily movement; slow and uncontrollable body movements normally occur;

ataxic — involves poor coordination, balance, and perception; and

mixed — involves a combination of symptoms from the three types above.

Muscular Dystrophy occurs when voluntary muscles progressively weaken and degenerate until they no longer function. The onset of Muscular Dystrophy can occur anytime between the ages of one to adulthood and is believed to be hereditary.

Spinal Muscular Atrophy is a disease that affects the spinal cord and may result in progressive degeneration of the motor nerve cells. The severity runs from mild weakness to characteristics similar to muscular dystrophy. Spinal Muscular Atrophy is characterized in general by fatigue and clumsiness. The cause is hereditary and the age of onset is either in infancy or a later time or between the ages of 2 and 17.

Spinal Cord Injuries occur when the spinal cord is severely damaged or severed, usually resulting in partial or extensive paralysis. Spinal cord injuries are most commonly a result of an automobile or other vehicle accident. The characteristics and needs of individuals with spinal cord injuries are often similar to those with cerebral palsy.

Multiple Sclerosis is a progressive disorder where the nerve impulses to the muscles are short circuited by scar tissue. Initially mild problems may occur but as the attacks continue, a person may develop a multitude of problems. These include severe visual impairment, speech disorder, loss of bowel and bladder control, and paralysis. Symptoms may regress as remission occurs.



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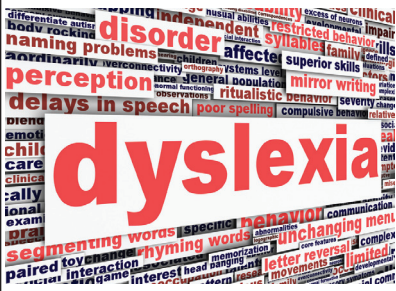
Rheumatoid Arthritis causes general fatigue and stiffness and aching of joints. Students who are affected by this may have trouble being in one position for a length of time.

Degenerative Diseases include a number of diseases which affect a person's motor development (ex. Musculoskeletal, Juvenile Rheumatoid Arthritis, Muscular Dystrophy).

Other health impairment (OHI) means (1) having limited strength, vitality, or alertness, including a heightened alertness to environmental stimuli, (2) that results in limited alertness with respect to the educational environment, that is due to chronic or acute health problems such as asthma, attention deficit disorder or attention deficit hyperactivity disorder, diabetes, epilepsy, a heart condition, hemophilia, lead poisoning, leukemia, nephritis, rheumatic fever, sickle cell anemia, and Tourette syndrome; and (3) adversely affects a child's educational performance. [34 CFR 300(c)(9)]



Visit the IRIS Center website and look for the LD and ADHD Simulation at: <http://iris.peabody.vanderbilt.edu/wp-content/uploads/2013/07/iwe003.pdf>



Specific learning disability (SLD) means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, that may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, including conditions such as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia.

Specific learning disability does not include learning problems that are primarily the result of visual, hearing, or motor disabilities, of intellectual disability, of emotional disturbance, or of environmental, cultural, or economic disadvantage. [34 CFR 300.8(c)(10)]

Speech or language impairment means a communication disorder, such as stuttering, impaired articulation, language impairments, or a voice impairment, that adversely affects a child's educational performance. [34CFR300.8(c)(11)]

Speech disorders refer to difficulties producing speech sounds or problems with voice quality. They include:

- Articulation — Where the child produces sounds incorrectly (e.g., lisp, difficulty articulating certain sounds, such as “l” or “r”);
- Fluency — Where a child's flow of speech is disrupted by sounds, syllables, and words that are repeated, prolonged, or avoided and where there may be silent blocks or inappropriate inhalation, exhalation, or phonation patterns; and
- Voice — Where the child's voice has an abnormal quality to its pitch, resonance, or loudness.

- Preview the website in advance. Find an alternate resource if the link has changed.

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- Preview the video in advance. Find an alternate video if the link has changed. The duration of this video is 10:07.
- Preview the website in advance. Find an alternate resource if the link has changed.



Learn more about stuttering by watching this video: www.youtube.com/watch?v=gSuy3JmB0p0

Language disorders refer to impairments in the ability to understand and/or use words in context, both verbally, and nonverbally. They include expressive (difficulty in expressing ideas or needs), receptive (difficulty in understanding what others are saying), and mixed (a mix of expressive and receptive difficulties).



Learn more about speech and language disorders in the school setting: www.asha.org/public/speech/development/schoolsFAQ.htm

Traumatic Brain Injury (TBI) is an acquired injury to the brain caused by an external physical force, resulting in total or partial functional disability or psychosocial impairment, or both, that adversely affects a child's educational performance. The term applies to open or closed head injuries resulting in impairments in one or more areas, such as cognition; language; memory; attention; reasoning; abstract thinking; judgment; problem-solving; sensory, perceptual, and motor abilities; psycho-social behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are congenital or degenerative, or to brain injuries induced by birth trauma. [34 CFR 300.8(c)(12)]

Types of Traumatic Brain Injury include: concussions (the most common type); penetration injury (from bullets or other objects entering the skull); contusions (bleeding that results from blows to the head); and diffuse axonal injury (damage from tearing of the brain tissue, including shaken baby syndrome and some bicycle, car or motorcycle accident injuries).

Visual Impairment (VI) (including blindness) means an impairment in vision that, even with correction, adversely affects a child's educational performance. The term includes both partial sight and blindness. [34 CFR 300.8(c)(13)]

The terms partially sighted, low vision, legally blind, and totally blind are used in the educational context to describe students with visual impairments:

- "Partially sighted" indicates some type of visual problem has resulted in a need for special education;
- "Low vision" generally refers to a severe visual impairment, not necessarily limited to distance vision. Low vision applies to all individuals with sight who are unable to read the newspaper at a normal viewing distance, even with the aid of



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eyeglasses or contact lenses. They use a combination of vision and other senses to learn, although they may require adaptations in lighting or the size of print, and, sometimes, braille;

- “Legally blind” indicates that a person has less than 20/200 vision in the better eye or a very limited field of vision (20 degrees at its widest point); and
- Totally blind students learn via braille or other non-visual media.

Visual impairment is the consequence of a functional loss of vision, rather than the eye disorder itself. Eye disorders which can lead to visual impairments can include retinal degeneration, albinism, cataracts, glaucoma, muscular problems that result in visual disturbances, corneal disorders, diabetic retinopathy, congenital disorders, and infection.



Activity 4.1
Categories, Characteristics & Strategies

Directions: At the link below, review the OSDE fact sheet for each disability category and find the information requested.



www.ok.gov/sde/disability-category

1. Autism Spectrum Disorders	
Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
2. Deaf-Blindness	
Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.

- Preview the activity in advance.
- Discuss selected results as a group. Ask for volunteers to share what they wrote.

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3. Deafness

Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
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4. Developmental Delays

Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
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5. Hearing Impairment

Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
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6. Emotional Disturbance

Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
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7. Intellectual Disability	
Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
8. Multiple Disabilities	
Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
9. Orthopedic Impairment	
Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
10. Other Health Impairment	
Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.

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10. Other Health Impairment

Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
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11. Specific Learning Disability

Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
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12. Speech or Language Impairment

Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
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13. Traumatic Brain Injury

Three (3) characteristics typical of students: a. b. c.	Three (3) teaching or instructional strategies to support students: a. b. c.
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14. Visual Impairment	
Three (3) characteristics typical of students:	Three (3) teaching or instructional strategies to support students:
a.	a.
b.	b.
c.	c.



Activity 4.2 Perceptions of Disability

Directions: Visit the IRIS Center website below and complete the module, *What Do You See? Perceptions of Disability*. Work through the sections of the module in the order shown in the STAR graphic at the website.



<http://iris.peabody.vanderbilt.edu/module/da-5/>

- Preview the activity in advance.

- Preview the activity in advance.



Activity 4.3 Disability Research Project

Directions: Complete a disability research project to understand the many factors involved in working with students with disabilities and to identify ways disabilities can affect the family unit. This activity is designed to foster a more thorough understanding of certain disabilities, how the disability affects the child and family, and the educational and long-term needs of the child.

Due Date: TBA

Project Requirements:

1. Choose a disability that has the same first letter as your first name (ex. Anna= Autism; David= Deafness). If no disability corresponds with the first letter of your name, pick the next letter in your name and continue until you find a match.
2. Imagine that you have acquired your assigned disability by the age of five and answer the following questions:
 - a. How would this disability affect your education?
 - b. How would it affect you socially?
 - c. What would be your plans after the completion of high school?
 - d. What career would you choose and why?
 - e. How might the disability affect your family?
 - f. What kind of accommodations would you need in school? At work?
3. Research the disability using sites such as the National Dissemination Center for Children with Disabilities (nichcy.org), or other disability groups (Autism Speaks, National Down Syndrome Society, National Alliance on Mental Illness, etc.). Be sure to cite your resources.
4. Select and read a book that involves your disability. Write a summary of the book. Keeping in mind what you have read, go back to the questions above and see whether you would change any of your answers. Explain why you would or would not change them.
5. Design a poster or PowerPoint presentation about your assigned disability. Include your answers to the above questions, as well as summary highlights of your book. List possible areas of strengths and weaknesses a student may have with this disability. Identify possible learning strategies and classroom accommodations to help make this child successful.
6. Prepare a 7- to 10-minute presentation to accompany your poster/PowerPoint.

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Assistive Technology (AT)

The *Special Education Handbook* (2013 Edition) defines assistive technology as follows:

Assistive technology device — Any item, piece of equipment, or product system whether acquired commercially, off a shelf, modified, or customized that is used to increase, maintain, or improve the functional capabilities of a student with a disability. Excludes surgically implanted medical devices.

Assistive technology service — Any service that directly assists a student with a disability with the assessment, selection, acquisition, or use of an assistive technology device.

- Locate this information in the *Handbook* online.



**Activity 4.4
Levels of AT**

Directions: From the table below, choose one AT tool from each category (Low, Mid, and High). Explain why each is considered an assistive technology tool.

ASSISTIVE TECHNOLOGY TOOLS		
Low	Mid	High
Pen or Pencil Grip	Digital/Tape Recorder	Alternative Keyboard
Highlighter	Calculator	Communication Devices
Cutting Tools	AlphaSmart	Communication Software
Magnifiers	Audio Books	Word Prediction
NCR Paper	Electronic Stapler	iPad/iPod
Color Filters/Overlay	Mini Book Light	Computer
Slant Board	Switch Operated Toys	Computer Software
Raised Lined Paper	Talking Calculator	Talking Word Processor
White Board		
Specialized Erasers		
Measuring Tools		



Learn more about assistive technology solutions: www.fctd.info/factsheets

- Preview the website in advance. Find an alternate resource if the link has changed.

- Preview the website in advance. Find an alternate resource if the link has changed.

Specific legislation addresses assistive technology for students with disabilities. In 1990, Public Law 101-476 — also known as the Individuals with Disabilities Education Act (IDEA) — required each public agency to ensure that assistive technology devices or assistive technology services, or both, are made available to a child with a disability if required as a part of the child's special education, related services, or supplementary aids and services.

In 1988, the Technology-Related Assistance Act — often called the Tech Act for short — was first passed by Congress. The purpose of the Tech Act is to promote awareness of, and access to, assistive technology devices and services. It has been reauthorized multiple times. (The 2004 reauthorization, Public Law 108-364, is called the Improving Access to Assistive Technology for Individuals with Disabilities Act.)



Learn more about the Tech Act, including state-level projects:
<http://nichcy.org/laws/ata>

The 2004 reauthorization of IDEA (IDEA 2004) requires Individualized Education Program (IEP) teams to consider the assistive technology needs of students during the development of an IEP. The IDEA requires schools to provide assistive technology if it is needed for a student to receive a free appropriate public education (FAPE). As with all other components of FAPE, assistive technology must be provided at no cost to parents. Schools must provide or pay for any assistive technology necessary to ensure FAPE either directly or through contract or other arrangements. Schools may not unnecessarily delay the provision of assistive technology devices and services due to funding issues if a child requires the devices and services to benefit from the IEP.

The purpose of assistive technology is to facilitate the student's participation in his or her education program and to enable the student to benefit from the program. Assistive technology should support the student in the general curriculum and in the least restrictive environment (LRE) to the greatest extent possible. The LRE is the IDEA 2004 requirement that students with disabilities, including those in public or private institutions or other care facilities, be educated with students who are nondisabled to the maximum extent appropriate.

According to the IDEA, "the IEP team shall consider whether the child requires assistive technology devices and services." The Congressional intent of this section of IDEA is to emphasize assistive technology as a means to support educational achievements. However, assistive technology is not required for all students who have an IEP. IEP teams must make decisions regarding each student's need for assistive technology on an individual basis and not solely on the disability category class of the student. The IEP team makes the decision of whether students need assistive technology in order to benefit from their educational program. Parent input and participation is important in the evaluation process; parents are members of the IEP team.

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Learn more about the consideration of assistive technology from the 2013 Technical Assistance Guide: <http://ok.gov/sde/assistive-technology>



Activity 4.5 Assistive Technology Overview

Directions: Visit the IRIS Center website below and complete the module, *Assistive Technology: An Overview*. Work through the sections of the module in the order shown in the STAR graphic at the website. Then, complete the small group activity at the link provided.



<http://iris.peabody.vanderbilt.edu/module/at/>

Small group activity: <http://iris.peabody.vanderbilt.edu/wp-content/uploads/2013/07/iwe001.pdf>

- Preview the website in advance. Find an alternate resource if the link has changed.

- Preview the activity in advance.

- Ask learners to complete the module review questions. Discuss the responses as a group.