

STATEMENTS on the  
EDUCATION of  
MENTALLY  
RETARDED  
CHILDREN



Adopted by the Board of Directors of the  
National Association for Retarded Children, April 1971

The following policy statements were developed by the Education Committee of NARC with the assistance of NARC headquarters staff and other resource people.

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**Policy Statements on the Education  
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**PREAMBLE**

Since its inception, the National Association for Retarded Children (NARC) has remained deeply concerned with the marked inequities which exist within the public school systems of this nation with respect to the education and training of mentally retarded persons. As early as 1953, the NARC Board of Directors adopted an Educational Bill of Rights for retarded children. This Bill of Rights was followed in 1964 by a set of guidelines in the form of policy statements intended to assist local communities in obtaining adequate educational services.

The education policy statements that follow represent a further attempt on the part of NARC to clarify its position regarding the education of all retarded persons. The present statements are prompted by the fact that large segments of the retarded population continue to be denied appropriate educational services. This denial of basic educational rights is found among persons functioning at all levels of mental retardation, but is particularly acute among severely and profoundly retarded persons.

NARC will attempt in the present document to delineate persisting problems in the education of America's mentally retarded children, as well as to provide policy statements regarding these problems. The policy statements will be consistent with the philosophy of education for all children to which this nation is committed.

**POLICY:**

The responsibility for developing appropriate educational techniques and/or modifying disruptive classroom behavior patterns rests with the school system. Failure to adapt to traditional educational models should thus not be viewed as a legitimate basis for exclusion or expulsion. Failure to learn at a level commensurate with intellectual potential is not caused by something within the child, but rather, results from the use of inappropriate educational technologies.

**PROBLEM: EDUCATIONAL RIGHTS OF THE RETARDED IN RESIDENTIAL INSTITUTIONS**

Large numbers of children in residential facilities for the retarded are deprived of the educational rights guaranteed to all other children.

**POLICY:**

The public educational agency charged with overseeing community education programs should have the responsibility for the education of mentally retarded persons who are in residential care settings. Teachers within these facilities should be certified in their field of competency according to the same criteria employed in public schools. Serious consideration should be given to providing their education within community-based school facilities.

**PROBLEM: CLASSIFICATION AND PLACEMENT IN SPECIAL EDUCATION CLASSES<sup>1</sup>**

Children are sometimes incorrectly classified as mentally retarded and assigned to special education classes because of problems which are essentially behavioral, cultural, or linguistic in nature. Other children who are mentally retarded

<sup>1</sup> Further information regarding NARC's position on classification and placement may be found in: *Classification and Placement in Special Education Classes, An NARC Position Statement*. Arlington, Texas: National Association for Retarded Children, 1970. (Reproduced in Appendix A)

do not necessarily require special class placement for optimal educational benefit.

**POLICY:**

Placement in special classes should be based upon the child's special educational needs, regardless of his diagnosis or type of disability. Special class placement for mentally retarded students may be appropriate when, in the considered opinion of an interdisciplinary evaluation team, the special curriculum of regular school class composed of age mates will not optimize the child's potential for learning and achievement as effectively as a modified curriculum directed by a teacher especially trained to work with children with impairment of learning potential. When special class placement is determined to be the appropriate course there should remain daily opportunities for the special class child to interact with regular class students in non-academic situations and in those academic areas where he can compete on an equal basis.

**PROBLEM: THE INTEGRATION-SEGREGATION ISSUE**

There remains considerable controversy and confusion regarding the relative educational value of integrating or segregating retarded children from their age peers in regular school classes.

**POLICY:**

Whenever possible the retarded child should be integrated into the mainstream of regular education. However, integration must be accomplished on an individual rather than group basis. As a guideline, the integration or segregation of retarded children from regular class students should be viewed on a continuum. Students of borderline intelligence and a portion of mildly retarded children can function in the mainstream of public education, some with and some without supportive services. Some mildly retarded and moderately retarded children should receive their basic instruction in special classes, but can be integrated into the regular education program on an individual basis in specific areas for portions of the school day. Some severe and all profoundly retarded children should receive their basic

instruction in self-contained units. Teacher aides, para-professionals, and volunteers may participate in certain aspects of the educational process, but only under the direct supervision of the classroom teacher. Under no circumstances should aides or volunteers be used to replace teachers.

**PROBLEM: THE BORDERLINE CHILD**

Many students falling within the category of "borderline mental retardation" are placed in special education classes for mentally retarded persons for want of other programs.

**POLICY:**

The "borderline" child should not be labeled as mentally retarded, and should receive special assistance through itinerant teacher or other appropriate services. The itinerant teacher would provide special materials and methods to the regular classroom teacher so that the borderline child can be retained in the regular school setting.

**PROBLEM: LACK OF STANDARD NOMENCLATURE**

The field of special education appears to be burdened by a number of unfortunate misnomers which carry with them destructive implications regarding the learning abilities of retarded children. These labels connote group expectancies or generate self-fulfilling prophecies regarding ability limits which decrease the probability of optimal individual achievement.

**POLICY:**

The terms "educatable," "trainable," and "sub-trainable" should be replaced by the AAMD classification of **borderline, mild, moderate, severe** and **profound** mental retardation. In addition, there are serious inconsistencies in terminology from state to state, concerning the definition of mental retardation and categories therein, as well as discrepancies in standards of eligibility for services and legal descriptions of competence. The NARC recommends that the problem be viewed as national in scope. In order to provide

comprehensive service, NARC supports comprehensive planning of terminology and nomenclature on topics such as severity and age-eligibility concepts.

**PROBLEM: STUDENT MOBILITY WITHIN THE EDUCATIONAL PROGRAM**

Promotion or upward mobility from one school level to the next (e.g., primary to intermediate) has been typically based upon student age and length of time at a given level rather than achievement criteria.

**POLICY:**

Specific achievement outcomes must be spelled out for each level of retardation and for each component of the curriculum. A child should continue at his school level until these minimal outcomes or expectancies have been attained. If a child appears to be retained at a particular school level for an inordinate time period, the accuracy of his placement and/or the teacher's effectiveness and appropriateness of curriculum content must be re-evaluated.

**PROBLEM: PROVISIONS FOR THE EARLY EDUCATION OF MENTALLY RETARDED PERSONS**

Entrance into school programs has in many cases been significantly delayed for mentally retarded persons on the grounds that they need longer to attain the mental age levels prerequisite to success in school programs.

**POLICY:**

The public schools should provide services for children according to their educational needs, regardless of age. Research indicates that the best time to ameliorate a child's developmental disabilities is within the period from birth through the early childhood years. Retarded children can profit from formal public school experiences as early as age two, and a commitment should be made by the public schools to initiate home care training programs of infants with special needs in the first year of life.

**PROBLEM: NEED FOR CONTINUING EDUCATIONAL SERVICES**

Although the validity of continuing education for normal adults seems now generally accepted, the relative lack of such programs for retarded persons suggests a widespread belief that persons with below average intelligence somehow cease to learn beyond the age of approximately 20 years.

**POLICY:**

Education is a life-long experience. NARC believes that young retarded persons should have the opportunity to develop further during adulthood by means of programs of continuing education. The rapidly changing environment in which most retarded adults must live necessitates continuing education to insure competence in handling problems of daily living.

**PROBLEM: APPROPRIATENESS AND SCOPE OF SCHOOL CURRICULA**

There has been little or no attempt to develop school curricula for all levels of retarded students, particularly the severely and profoundly retarded. Present-day curricula for mentally retarded persons frequently represent a simplified version of curricula originally intended for the "average" school student.

**POLICY:**

Curricula for mentally retarded students should be designed with the intention of providing an individualized educational experience for all retarded persons. A test of curricular adequacy for any level of retardation is that the educational plan should allow students to: (1) increase the complexity of their behaviors; (2) increase personal control over their environment; and (3) attain behavioral characteristics which are culturally designated as "normal." Classroom activities and teaching materials should be relevant to the chronological or social age of the child. Curricula should be geared toward the practical aspects of daily living and effective integration into the community. Obviously, an early emphasis upon vocational skills is essential. Curricula should

also stress the effective use of leisure time via generic community recreational and social outlets.

**PROBLEM: EXTENT OF FAMILY INVOLVEMENT IN THE EDUCATIONAL PROCESS**

It is not uncommon for educational plans to be formulated without the benefit of input or goal-setting by parents of the school children who are the consumers of the educational service.

**POLICY:**

Provisions should be made for ongoing communication between educators and family members in order to insure that what is taught has relevance to the activities of daily living in the home setting. In addition to goal-setting, the family should be involved in the educational process by carry through in the home (e.g., homework) which reinforces and facilitates transfer of school learning to community life.

**PROBLEM: QUALIFICATIONS OF SPECIAL EDUCATION TEACHERS**

Current teacher education programs vary considerably across the nation, and frequently restrict teacher preparation to the educational needs of the "average" student only. Even course work for teachers of the exceptional child rarely covers training technologies appropriate for use with severely and profoundly retarded students.

**POLICY:**

Teachers of retarded children should be highly qualified individuals who are especially trained to deal with the full range of educational needs of all retarded persons. Special education teachers should meet at least the same technical and personal qualifications as their counterparts working with non-retarded pupils. In this regard, there is a definite need to develop national standards for teachers of retarded persons, and teacher certification requirements in mental retardation should be standardized nationally, making teacher certificates valid on a reciprocal basis in any and all states. Cultural

dissonance is often produced when teachers from middle class backgrounds are placed in special education classes comprised primarily of children from poverty sectors. It would thus seem that specialized training should be provided in colleges and universities to equip young teachers to function effectively in low-income areas.

**PROBLEM: CLASS SIZE, COMPOSITION, AND  
TEACHER-PUPIL RATIOS**

In many instances class size, composition, and teacher-pupil ratios are inadequate, and are determined administratively without regard to individual student needs.

**POLICY:**

School policy regarding class size, composition, and teacher-pupil ratios should allow considerable flexibility in order to design the appropriate classroom setting for every retarded child. In general, class size can be increased as the age of the students increases. A guideline for teacher-pupil ratio in classes composed of mildly and moderately retarded students below 13 years of age should be no more than 10 students to one teacher; and, above 13 years of age the ratio might increase to 15 students to one teacher. Also, a chronological age span of not more than three years, and an instructional span of not more than three grade or achievement levels is recommended. At the same time, severely and profoundly retarded students generally require ratios of one teacher to six or eight students at all age levels, with teachers' aides as necessary, depending on accompanying handicaps such as physical disabilities or epileptic seizures.

**PROBLEM: SUPPORTIVE SERVICES**

Programs of care, education and training are not self-sufficient, and they cannot be expected to function optimally without supportive services.

**POLICY:**

Diagnostic facilities are a vital service which, to be meaningful, must be closely coordinated with other education

services. Evaluation should be seen as an ongoing responsibility of teaching and supportive personnel. Results of traditional psychometric tools (e.g., standardized intelligence tests) should be seen as cross-sections of current abilities, and considered as supplementary only to day-to-day evaluation of specific achievement outcomes.<sup>2</sup>

**POLICY:**

The public school systems and/or appropriate state agencies should have the resources to identify the retarded persons in each community in order to initiate appropriate education services for these students. That is, educational authorities should adopt an active rather than a reactive posture with respect to the identification of mentally retarded children and the delineation of their educational needs.

**POLICY:**

Whenever facilities are provided by public funds, free transportation must also be made available to all students, as needed.

**POLICY:**

In order to insure effective communication and working relationships between teachers and supportive personnel (e.g., psychologists, nurses and caseworkers) in-service education programs should be so designed as to insure a clear understanding of staff roles, responsibilities and inter-relationships.

**POLICY:**

A vital supportive activity of the school is the provision of parent (family) counseling services. Many professionals, including teachers, have traditionally viewed parents of the mentally retarded as emotionally disturbed persons primarily in need of psychotherapeutic services. This stereotype should be replaced by the concept of the typical parent of a retarded child as an intelligent and concerned individual capable of full involvement in planning and decision-making with respect to his child's current and future needs.

<sup>2</sup>*Classification and Placement in Special Education Classes, An NARC Position Statement.* Arlington, Texas: National Association for Retarded Children, 1970. (Reproduced in Appendix A)

## Appendix A

### Classification and Placement in Special Education Classes AN NARC POSITION STATEMENT

As indicated in the PCMR report, *The Six-Hour Retarded Child*, a significant number of disadvantaged children, especially in urban areas, have been mis-classified as mildly retarded and inappropriately placed in "educable" classes. Growing recognition of this problem has caused concerned parents and professionals to bring increasing pressure to bear upon the educational system and to demand that corrective measures be instituted. Inherent in this movement, however, is the danger of over-generalization to the point of assuming that all persons heretofore classified for placement in special classes for the educatable retarded can, with proper stimulation and remedial opportunities, function adequately in a regular classroom setting.

The situation is further complicated by the renewed controversy surrounding the "nature-nurture" issue as related to cognitive development and the increased popularity in some quarters of the pure environmentalist position. The theory that cognitive development is subject to genetically-based differences in rate and upper limit is considered entirely inapplicable by adherents of this school. In the extreme case it is thus posited that, in the absence of demonstrable organic deficit, children who appear to be functionally retarded can be brought up to a normal level of functional "enrichment" through the application of appropriate technologies.\* This represents an extreme swing of the pendulum away from the equally untenable position that all "subnormal" functioning is based on genetic factors and poor inheritance. In view of the above trends, NARC has developed a series of action guidelines which address themselves to the problem of mislabeling, while at the same time re-emphasizing the need to develop and maintain meaningful

\*It should be noted that the results of studies dealing with the effect of environmental factors on cognitive development are equivocal, while definitions of what constitutes a stimulating vs. a deprived environment are at best imprecise.

special education programs for those persons who are truly mildly retarded, regardless of cause.

These suggested action guidelines are being forwarded to State and Local Member Units because of our very real concern that if corrective measures for the screening, evaluation and placement of children into special classes for the mentally retarded are not significantly modified as suggested below, and the attacks which are developing are allowed to go unanswered, we run the risk of having all special classes for the mildly retarded abolished in every state of the union.

NARC agrees with the President's Committee on Mental Retardation that there are a number of children who are misdiagnosed and who should not be in special classes for the retarded. We would hasten to point out, however, that there are a large number of children who have been properly evaluated and are correctly placed in special classes for the mentally retarded. The answer to poor evaluation procedures is not the elimination of special classes for the mildly retarded, but rather the constructive modification of screening, evaluative, and placement procedures to see to it that only truly mentally retarded children are placed into special classes. We feel that the implementation of the guidelines that follow will be a significant step in that direction.

#### ACTION GUIDELINES FOR STATE AND LOCAL ASSOCIATIONS

A) Case-finding, screening and evaluation procedures for school children suspected of being mentally retarded:

- 1) No child should be classified as mentally retarded until he or she has been evaluated by an evaluation team composed of qualified diagnosticians who bring to bear skills needed to assess medical, psychological, social, educational and vocational factors, as applicable. The team should assume responsibility for proposing and interpreting an individual educational plan for the child

in the school setting, with provisions for ongoing evaluation of the child's progress and/or needs. The team should also develop suggestions for assisting the child and his family to maximize his growth potentials within his out-of-school hours;

2) The classification of retardation should not be applied until the child's adaptive behavior has been assessed in relation to the community and family situation, taking into account the cultural norms of his natural milieu. Where adaptive behavior in any life situation is found to be significantly discrepant from intellectual expectations, the label retardation should not be used, at least until further observation has justified it;

3) The classification of retardation should be applied only to those children who continue to function at a significantly subnormal level even after various remediation attempts. Special attention should also be given to the identification and treatment of debilitating physical conditions such as auditory and visual impairments, malnutrition, epileptic seizures, or other sensory-motor impairment;

4) Psychological evaluation for the purpose of classification should always include the use of individual test procedures which measure a range of skills and which are appropriate to a child's cultural and linguistic background. Testing should assess specific learning disorders, if any, and the extent to which inferior performance is due to reversible environmental factors such as repeated failure, cultural dissonance, inappropriate expectations by teachers, situational anxieties, personality disorders, or inadequate motivation;

5) A child who is suspected of being mentally handicapped should be observed in his regular class setting. However, classroom behavior alone should never be used as the criteria for labeling a child mentally retarded. Regular classroom teachers should be assisted to

ascertain the wide variety of reasons other than retardation which may contribute to inappropriate responses to the school academic environment and to underachievement. They should be assisted to implement behavior modification procedures, when appropriate, both to enhance learning and to help the child develop behavior which is more acceptable to his peers; and

6) No assessment of a child should be considered complete unless the parents have been actively involved in the evaluation process as significant observers of the child and his performance. In addition, assistance to parents in the home management problems related to optimal child development should be offered through a trained home visitor, where appropriate.

**B) Special class placement of a child who appears to be mentally retarded may be appropriate when:**

1) There is a documented history of retarded overall functioning which is substantiated through evaluation by a team of qualified diagnosticians;

2) There is consistent impairment of adaptive behavior in the child's home and community as well as in the school culture and environment;

3) There is no significant alleviation in the child's inferior performance and achievement after the modifications in school and home environments;

4) There is a significant continuing residual disability which cannot be expected to respond to environmental manipulation alone;

5) There is the considered opinion of an evaluation team that the curriculum of the regular class composed of age mates will not maximize the child's potential for learning and achievement as effectively as a modified curriculum individualized and directed by a teacher



especially trained to teach children with impairment of learning potentials; and

6) There remain daily opportunities for the special class child to interact with regular class students in non-academic situations.

**C) Compensatory and Remedial Education**

Children who are functioning at a retarded level academically but who do not meet the criteria for placement in special classes should be provided with a school experience designed to develop latent potentials and to enhance all kinds of learning. Such programs may help to prevent prolonged experiential deprivation and thus reduce the risk of the child falling into the mentally retarded group at a later age.