

PERCEPTIONS AND SOCIAL ACCEPTANCE OF CHILDREN WITH DISABILITIES BY  
PARENTS OF PREKINDERGARTEN - GRADE 5 STUDENTS

A Thesis by

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The following faculty members have examined the final copy of this thesis for form and content, and recommend that it be accepted in partial fulfillment of the requirement for the degree of Master of Arts in Teaching.

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## DEDICATION

To my husband Danny, who took over so I could complete my dream of becoming a teacher; to my boys Foster, Patrick, Cody and Tucker for just being awesome; and to my mom, Dr. Sharon Mallory, who always believed in my potential.

“KNOWLEDGE is POWER”  
-Schoolhouse Rock

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## ABSTRACT

In July 1981, author Toni Morrison was quoted in Essence magazine, “I don’t think one parent can raise a child. I don’t think two parents can raise a child. You really need the whole village.” This statement could not be more accurate than in the arena of education. Understanding the needs of typically developing children in an educational setting is vital to their daily engagement in a classroom setting. Understanding the needs of children with exceptionalities requires not only understanding and dedication from a teacher to learn how to work with those children but also compassion from others; peers, families, and other professionals in order to make the most of the learning environment for those students. In a mid-sized, suburban Midwest town, 342 parents of prekindergarten through 5<sup>th</sup> grade students were surveyed to determine their perceptions of having students with various special education labels included within a regular education setting. Parental perceptions varied based on type of disability, whether or not there were emotional or behavioral issues related to the disability, and if the teacher’s time was taken away from other students because of a child with special needs being in the classroom. Overall, parents agreed that students with Individualized Education Plans should be involved in some type of regular education setting if warranted.

*Keywords:* exceptionalities, Individualized Education Plan, perceptions

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## LIST OF ABBREVIATIONS / NOMENCLATURE

### **Autism Spectrum Disorder (ASD)**

IDEA defines “autism” as “a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects a child’s educational performance” IDEA Sec. 300.8(c)(6) (<http://idea.ed.gov>).

### **Intellectually Disabled (ID)**

IDEA defines “intellectual disability” as “significantly sub average general intellectual functions, existing concurrently with deficits in adaptive behavior and manifested during IDEA Sec. 300.8(c)(1)(i) (<http://idea.ed.gov>).

### **Inclusion**

The principle that students with special needs, skill sets, and abilities should be integrated in publicly supported activities to the same extent as their non-disabled peers (Taylor, 2010, p. 48).

### **Least Restrictive Environment (LRE)**

IDEA defines Least Restrictive Environment as “to the maximum extent appropriate, children with disabilities...are educated with children who are nondisabled; and...special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and service cannot be achieved satisfactorily (<http://idea.ed.gov>).

### **Mental Retardation / Mentally Retarded (MR)**

Mental retardation means substantial limitations in age-appropriate intellectual and adaptive behavior (Heward, 2006).

### **Self-Contained (Sometimes referred to as Categorical)**

Students in a self-contained classroom are removed from the general population for all subjects to work in small groups with a special education teacher. Students will work a different academic levels and at their own pace. These classrooms are highly structured (Mauro, 2014).

## CHAPTER 1

### INTRODUCTION

We live in a world of perception, in a place where it is important to be “politically correct” and unoffending, where we are judged by the way others perceive us. These judgments are shaped by a powerful social climate and need to be accepted. When placed in social and educational situations we are, beginning at a very young age, expected to behave according to socially acceptable conventions that have been generated by adults. Perceptions precede us and they follow us, and for those students with a diagnosis of autism spectrum disorder (ASD), the perceptions associated with their diagnoses often become judgments about them, even before a child enters school as a student. All children struggle to fit in, to find their place within society, their home, and their place inside of a schoolroom. The growing population of children with ASD must fit into a world that certainly does not always understand them, and may not accept them based on any social conventions.

The onset of inclusion of children with special needs into general education classrooms generated a need to create a more compassionate climate among administrators, teachers, parents, and students. Unfortunately, a proactive approach within many educational systems to create this empathetic environment is lacking. The inclusive classroom is full of challenges. For students with autism, transition periods can be difficult; the inability to adapt to an unexpected change in schedule can set off a rage. For students with non-verbal autism or limited language abilities, adaptations must be made in order to assist them in participating in classroom activities. Many teachers are simply not prepared for this and the challenges can be overwhelming. Because of

this, biases against children being included or integrated into a regular educational setting are still prevalent. Be it a lack of understanding of the specific needs of the student or a need for more specific training to adapt a classroom environment to accommodate students with autism, there appears to be an underlying apprehension with many teachers towards incorporating these students into a regular education classroom.

Many public figures have become more vocal in creating positive recognition for exceptional children. Over the last decade, the public view of children with neurological disabilities (autism included) has changed. The word autism has become a household expression as many celebrities including football giant Dan Marino, comedy queen Jenny McCarthy, and singer Toni Braxton openly use their status to spread the word about autism awareness. Singer, songwriter Zac Brown of the Zac Brown Band has started a camp for children with intellectual disabilities called Camp Southern Ground located in Georgia. At many concert appearances he advocates for this cause and has been known to bring a special child with a gift for music onto stage to be a part of his band. Through the cheers of his fans perceptions of intellectual disabilities become more accepted in the public eye.

One of the most vocal celebrities has been Jenny McCarthy. Her passionate, and sometimes desperate, campaign to find answers for her son's autism diagnosis has led to extensive media coverage of the developmental disability over the last decade. McCarthy has written three books about her journey throughout her son's diagnosis. She has been a champion on spreading the word about early symptom recognition and changing the course of autism for her son through diet and reduction in vaccinations.

Although these changes in lifestyle have had desired results for McCarthy, her claims have been on the side of controversy. Nonetheless, her passion to help her son has opened the doors for parents everywhere to shed the stigmas related to having a child with autism. Despite the countless efforts of celebrities, parents, and educators, the overall complexity of the autism diagnosis along with the range of cognitive and behavioral issues, the perception of students with spectrum disorders is still laden with misunderstanding, confusion, and even fear and aversion.

Several studies have been conducted regarding teacher perspectives and challenges when working in an inclusive educational setting. It is the intention of this research to review the perceptions of parents of students within a school setting where there are a variety of students with special needs including students with autism, some of which may be placed in an inclusive classroom for all or part of the day. Are parents aware of the challenges that teachers and students face in an inclusive classroom? How do they perceive students with behavioral and emotional disabilities such as autism? This paper will focus on parents and their perceptions of children with special education labels, who are integrated into the general education population. How do characteristics of the behaviors of children with special needs affect the attitudes of parents when their child is in an inclusive classroom? Although there are many possibilities for a child to be placed in a special education program, this paper focuses its information on the behavioral and emotional characteristics often found on the autism spectrum.

## CHAPTER 2

### LITERATURE REVIEW

#### What is Normal Anyway?

Autism spectrum disorder/autism is a developmental disability. Many characteristic traits are often associated with the diagnosis: lack of eye contact, echolalia, humming and loud noises, repetitive movements, lack of empathy, and sometimes an inability to communicate. Many of these characteristics are seen as dysfunctional and disruptive behaviors within a regular education classroom.

As noted in their article “Is the use of labels in special education helpful?” Lauchlan and Boyle (2007) propose the idea that behavior observed as dysfunctional is seen as such because social values have been assigned to the behavior in which the behavior does not apply, deeming it undesirable or dysfunctional (p. 38). What one person observes as normal behavior another might judge as abnormal based on their personal experience and perspective. A parent who has grown up with their own personal biases towards persons with disabilities may find it difficult to adapt to having a child with behaviors that they perceive as dysfunctional. Parents and children living in a home with a child with disabilities may be more accustomed to certain behaviors than others living in a ‘typical’ household, and, therefore, be more accepting of others with behaviors that are considered to be disruptive. A student in a new classroom that has never been exposed to a child with a social impairment may not have the cognitive ability to process what they see and find themselves replicating behaviors of other students in order to gain attention from a teacher. Regardless of the situation, it is the

reaction of the teacher within a classroom setting that generally sets the tone for the environment and the responses from students and parents.

A study completed by Kasa-Hendrickson and Kluth (2005) followed five teachers with inclusive classrooms containing children with non-verbal autism for one year. The most significant findings of the study were related to the teachers' ability to adapt the classroom to fit the students with autism into their room. At the beginning of the year, certain disruptions like humming, hand movements, and self-abuse were thought of as distractions to the classroom. As they worked through these challenging times, they began to reconstruct the idea of "normal" behavior (p. 10). These teachers determined that it was necessary to re-think and create new strategies in their teaching and classroom, rather than focusing on changing student behaviors (p. 11). For these teachers, there was also a desire to have students with disabilities in their classrooms, a willingness to adapt to those students, and an understanding that inclusion does not happen overnight. It is process of thinking and re-thinking about what is needed (p. 12).

### **History of Language**

For centuries the terms 'idiot', 'moron', and 'retard' have been used interchangeably as critical and disparaging remarks made against others. It is a perception of children identified at a very young age, that being labeled with one of these derogatory terms is to be different from 'normal' and holds an implication of having limitations and deficiencies regardless of whether or not a special education diagnosis exists. The implications of labeling and the "potential negative impacts are huge. Stigmatization, bullying, reduced opportunities in life, a focus on within-child deficits to the exclusion of others, and often more significant factors including

misclassification and lowered expectations about what a 'labeled' child can achieve” (Lauchlan & Boyle, 2007, p. 41).

The term “idiot” dates back to ancient Greece. In ancient Rome, those with intellectual disabilities were often used as a source of entertainment for the wealthy that referred to such persons as “fools.” American doctor Hervey B. Wilbur became an advocate for persons with intellectual disabilities as he provided definitions of four types of “idiocy” during the eighteenth century; simulative idiocy, development is delayed, but can perform ordinary duties; higher-grade, persons who can potentially enter school and perform civic duties; lower-grade idiocy, can be taught to perform simple tasks and live in the community with support; and incurables, education and simple skills will be a struggle lifelong support will be required (Degeneffe & Terciano, 2011, 164; Minnesota Governor’s Council on Developmental Disabilities, n. d.).

In 1921, the American Association on Mental Deficiency (AAMD) created the first terminology for intellectual disability naming it “mental retardation” (Degeneffe & Terciano, 2011, p. 164). The term disabled child has its own deep rooted stigmatism and the terminology was changed sometime in the early 1950’s to “the exceptional child” as a result. Leander (1957) published his work titled *“Who is the exceptional child?”* in an effort to categorize exceptionalities based on the characteristics of the problems they may encounter. Boykin states that “exceptional children” fall into eight groups, mentally deficient and educationally retarded, socially and emotionally handicapped, gifted, nutritionally handicapped, acoustically handicapped, visually handicapped; and finally orthopedically, cardiopathic, epileptic, tubercular, and those with glandular disorders (Boykin, 1957, p. 42). Boykin advocated the need to see the

child first and the disability to follow. Elements of a child's disability might make it more difficult for them to adjust to normal life situations; however, the attitude of society can limit growth and development for these children even more (p. 42). Regardless of a disability label, a child should always be noted as a child first (child with exceptionalities), rather than being noted as an "exceptional" child. Although they may vary in some trait, an exceptional child is still a child with "needs that characterize all human beings" (p. 47). The need for acceptance and a sense of belonging, pursuit in interests, hopes, and dreams, and to live in a world of real people and real things, regardless of their social, emotional, mental, or physical obstacles or gifts exists in all children (p. 47).

As recent as 1990, persons with disabilities held a substandard status within American society and had often been treated with restrictions, limitations, and unequal treatment because of stereotypes associated with disabilities (American Disabilities Act 1990; Chapter 126, Sec. 12101. Findings and purpose, numbers 6 & 7).

Once a label has been placed on a child, the perceptions and stigmas associated with that label can be difficult to escape even if the individual achieves successes beyond their perceived potential. Not only is the label reflected on by others, the personal psychological effects associated with being labeled are also potentially harmful and can often lead to a student limiting their own destiny and a negative social identity (Lachlan & Boyle, 2007, p. 38). Disabilities often come in varying degrees of severity; however, what is often noted, and therefore perceived by the public, are those characteristics that are the most drastic. For example, the term "autistic" often elicits the perception of a child who is wild and unruly, aggressive, non-communicative, and is

lacking in social skills. In reality, these behaviors are of the most severe on the spectrum and do not apply to all persons with autism.

Mental retardation is probably the most stigmatizing diagnosis based on the history of the terminology. Again, mental retardation comes in varying levels: mild, moderate, severe, and profound (Heward, 2006, p. 1). Individuals who are closer to the profound level are often identified very early in their development while others with mild retardation are not identified until they reach a point in their school career where the work becomes too difficult to master. Some students with the mental retardation diagnosis are able to develop social skills that allow them to no longer be recognized as having a disability, while others are defined by the diagnosis for the duration of their life

The word autism stems from the Greek word “autos”, meaning “self”. Around 1911 psychologist Eugen Bleuler began using this terminology in association with schizophrenia and social withdrawal. In the 1940’s US researchers began using the term to refer to children with emotional or social problems. It was not until the 1960’s that actual symptoms became associated with the diagnosis and the association with schizophrenia was removed (<http://www.webmd.com/brain/autism/history-of-autism>).

The most recognizable characteristic of ASD is “impaired social interaction.” In the first two years, this can be distinguished by a child being incapable of making eye contact, an inability to give and receive affection, and difficulty in playing with others because of a lack of social cue awareness. However, children with an intellectual disability (also known as mental retardation or MR) also suffer from the same lack of understanding of social rules and inability to determine cause and effect. Early identification of special needs, even unnamed initially, is a necessity.

During the 1990s, Asperger syndrome became “the media’s disability du jour. Located at the ‘high end’ of the autism spectrum, it is a cultural phenomenon in the disability landscape viewed by the general public” (Conner, 2011, p. 111). Conner suggests the fluid nature of Asperger syndrome. “It bleeds into many existing classifications, defying easy containment” (p. 112). It is this author’s personal assessment that this same concept can also be applied to the full autism spectrum, as it has become the disability buzz word of the millennium.

In its recent surveillance summary report published in the CDC’s Morbidity and Mortality Weekly Report (March 2014) titled, “Prevalence of autism Spectrum Disorder among Children Aged 8 Years – Autism and Developmental Disabilities Monitoring Network, 11 Sites, United States, 2010,” the current number of children diagnosed on the autism spectrum has increased to 1 in 68 children, which is an alarming 30% increase from the report published in 2009.

As parents are noticing developmental delays in their young children and seeking professional answers, are children being placed in the autistic spectrum because it is more acceptable in today’s culture than to be labeled as intellectually disabled? With many children there can be a double diagnosis of ASD and ID, are parents with ID children using the ASD diagnosis as a blanket because it is more easily defined, and more socially accepted?

The stigmas associated with the terminology for mental retardation have been long fought by parent groups and advocates for persons with disabilities in an effort “change public perceptions about marginalized populations through the language used to describe them” (Lawson, 1992, as cited in Degeneffe & Terciano, 2011, p. 163).

Through the efforts of many, in October 2010, the Obama administration signed new legislation, titled “Rosa’s Law,” requiring the federal government and other agencies to replace the terms “mental retardation “or “mentally retarded” with the new term “intellectual disability” (ID). From the federal to the local levels, this legislation brings forth a new era in which children with intellectual disabilities no longer have the social stigma that is associated with the term retardation.

### **Incorporating Exceptional Students into Public Schools**

When the No Child Left Behind (NCLB) Act was introduced in January 2002, its focus was to “ensure that all children have a fair, equal, and significant opportunity to obtain a high-quality education” (20 USC 6301, sess 1001 as cited by Handler, 2006, p. 5-6). Subsequently, holding states and their public schools accountable for closing the achievement gaps of minority groups, English language learners, economically disadvantaged, and students with disabilities in the areas of reading and mathematics by 2014, it pushed states to have all students reaching proficient levels including those students with special needs within an inclusive classroom setting who may have severe cognitive disabilities. This was the first time in federal legislation where students with disabilities were recognized as a subgroup that had to have access to “core academic content” and their knowledge must be measured on the same standards as other student groups (20 USC 6301, sess 1001 et seq. as cited by Handler, 2006, p. 6).

NCLB potentially had some negative impacts on students with disabilities. This pressure to perform may lead to students being returned to a more restrictive environment allowing teachers to focus more on capable students in the regular education classrooms, and consequently removing those cognitively impaired students

from the overall population and potentially the standard curriculum being offered. Additionally, funding may not be adequate to provide the services needed to assist helping these students reach the achievement goals of NCLB in the regular classroom setting. Finally, according to the NCLB, in order for a student to count as a graduate, they must fulfill all requirements within a four-year time period of which many students with disabilities are not able to achieve (Schrag, 2003, p. 10).

### **Mainstreaming vs. Inclusion**

There are two types of situations in public education in the United States where a child with exceptionalities can be placed. Mainstreaming is a type of partial inclusion where a student is incorporated into specific components of a regular education classroom setting. This may be for purposes of socialization or curriculum or both, but the student does not remain in the classroom for a full day. The remainder of the day this student is placed in a separate class or resource room where they receive support services. Inclusion is when a student is fully submerged into a classroom environment and is expected to perform within the confines of the classroom. For these students in this Least Restrictive Environment, support services are often in place to assist with each individual student. For other students, all services are completed by the classroom teacher in addition to their other responsibilities.

### **Parental Viewpoints**

Parents of school-age children experience the same concerns for the welfare of their child when they enter school. They want their child to be accepted, have positive interactions with peers, and build lasting relationships. They also want to protect their

child from mockery, loneliness, and mistreatment. These common denominators are shared by all parents, regardless of the child's development.

**Typically developing students.** For parents of typically developing students having their child participate in an inclusive classroom comes with mixed feelings. Literature indicates across the board an overall feeling of acceptance of their child being inside a classroom with children with disabilities. The benefits of this include a feeling that their child has increased social cognition and prosocial behavior (Peck, Staub, Gallucci, & Schwartz, 2004; Rafferty, Boettcher, & Griffin, 2001; Yasutake & Lerner, 1997). Parents also indicate "their child's appreciation for the needs of other children increased" as well as, their acceptance of different behaviors and appearances in others (Peck et al., 2004, p. 138).

Parent comments also see a division between academic learning and social learning. Parents noted their child's perception of self was positively influenced, as well as their support of more vulnerable peers, "however, parents seldom interpreted these benefits as contributing to their child's academic learning" (Peck et al., 2004, p. 140). Negative feelings towards typical students being included in an inclusive classroom were based more on the type of disability in the room and the amount of time the teacher spent focusing on that student. Children with behavioral problems or those that were viewed as disruptive were under the greatest scrutiny. Parents felt these students took time away from their student who may require their own special assistance from the teacher which may or may not have been associated with a disability. "Parents were often quite explicit in separating the impacts of challenging and disruptive behavior from other disability issues" (p. 140). Parents also felt that it was "unjust for a child with

disabilities to receive more teacher time (and other resources) that nondisabled peers” (p. 140).

Research indicates that despite being in a room with a severely disabled peer, academic progress is not negatively affected; in fact some parents felt their student actually made positive gains throughout the school year indicating that “academic progress of non-disabled students is not generally harmed by inclusion” (Peck et al, 2004, p. 141).

**Atypically developing students.** Parents of children with a disability also indicate mixed reactions towards full inclusion of their child within a classroom and see many of the same benefits and concerns as parents of typical children. Being included in a classroom allows students with disabilities to adapt to different challenging situations and activities. It allows them to gain independence, and “helps them to become prepared to function effectively in the real world, and helps them to learn more because they have a chance to see typically developing children” (Rafferty, Boettcher, & Griffin, 2001, p. 274).

Parents of students with special needs place a higher value on the social interaction their child receives in a classroom setting, and actually see it as a “significant benefit.” Parents of typically developing children were “less attuned” to the social aspects of inclusion (Yasutake & Learner, 1997, p. 119).

Teacher education and training is also a concern for parents of special education students. “Special education parents understand the unique needs of their child and therefore they are more aware of the training and support needed for children than the non-special education parents (Yasutake & Learner, 1997, p. 119).

For parents whose children have disabilities, their child's diagnosis "may have important implications for how parents view their children and their educational experiences" (Kasari, Freeman, Bauminger, & Akin, 1999, p. 297). A parent with a student on the autism spectrum may find the large, noisy, and less structured classroom to be of particular concern where a parent of a child with Down syndrome may find this to be the ideal setting for their student to engage in age-appropriate behaviors with peers (Mesibov & Shea, 1996 as cited in Kasari et al., 1999, p. 297).

### **What Do Parents Want?**

Overall, parents of both typically and non-typically developing children share the same concerns for their children. A desire for their child to be accepted is of greatest importance to most. Often it is not the diagnostic label that elicits any major concerns, but rather it is the behaviors associated with the labels. In general, there are many benefits for all children within an inclusive classroom, both socially and academically (Yatsuke & Lerner, 1997, p. 119). Although some parents find the students with behavioral issues to be upsetting to the dynamics of the classroom, these behaviors are not always a result of a child with special needs. At any given time, a student can disrupt the balance of the classroom.

What is of the greatest benefit is how the teacher is able to control the situation to accommodate the student in need and create "a cooperative and caring community, making classrooms comfortable and accessible for all, and working through difficult moments (Kasa-Hendrickson & Kluth, 2005, p. 13).

The research questions addressed in this study were "What is the current parent perspective of special education labels, and how do they affect the attitudes of parents

of children with and without exceptionalities served in an inclusive classroom? It was hypothesized that parents would hold a more negative opinion of students with disabilities with coinciding behavioral difficulties than those that were seen as more passive. Therefore, students with more passive diagnosis would be more accepted within an inclusive classroom. It would be preferred that children with behavioral difficulties be in a functional setting away from the mainstream population.

## CHAPTER 3

### METHODOLOGY

#### Participants

Participants include the parents of all students who attended the school in a midwest urban community with a population of approximately 385 thousand citizens. This school was chosen for its convenience. The school participates school wide in the Advancement Via Individual Determination (AVID®), a college readiness program. Additionally, it has a fulltime “Newcomers” ESOL classroom for students being introduced to the English language for the first time.

#### School Demographics

Although the study took place in the 2013-2014 school year, the 2012—2013 school report card data are used to define the population of the school in that there were no major changes in the demographics between the two years. The 2012-2013 School Report card for the school indicated a total population of 349 students, half female, half male. Eighty-seven percent were economically disadvantaged. Information on ethnicity indicates 38.4% Hispanic, 46.56% White, 7.16% African American, and 8.88% Other. Additionally, the population of students with disabilities was 14.2%; the population of second language learners 49.3% (KSDE Report Card 2012-2013).

#### School-wide Services

**Special education services in the school.** Two categorical autism classrooms are located in the school. There are numerous other ways that students with special needs are incorporated into the school through interrelated special education services. With the exception of a few very low functioning students on the autism spectrum, all

other student with special needs participate in an inclusive regular education setting throughout the day. For the purpose of this study the term “inclusive” classroom indicates a minimum of one student with an identified disability participating full time in within the classroom. For some students placement is in a regular education classroom, and they are pulled from class for additional support. Several students are placed in the categorical classroom, but participate in regular classrooms for various reasons such as music, PE, and some curriculum based activities. A “categorical” autism classroom is noted as a classroom where all students having a spectrum diagnosis with an IEP plan in place. In addition to curricular learning in these classrooms, students are also working on functional life skills. In the “traditional” classroom there are no children with a known disability in the classroom.

## **Procedures**

This study adopted a cross-sectional survey research design to compare responses of parents of both typically and atypically developing students regarding their perceptions of special education services received. The survey instrument was adapted from Kern (2006) (see Appendix B) was sent home to parents of the school during the fourth quarter of the 2013-2014 school year.

**Survey.** The survey presented consisted of parental demographic information along with 21 questions based on a 5-point Likert scale. One set of questions related to general attitudes towards inclusion. A second set of questions related to attitudes towards symptoms associated with behavior disorders and intellectual disorders that appear to be similar in nature such as uneven gross/fine motor skills, extreme sensitivity to sensory stimuli, failure to comply with requests or rules, and temper tantrums. These

behaviors can occur in the regular population as well as being associated with autism (ASD), attention-deficit/hyperactivity disorder (ADHD), and oppositional defiant disorder (ODD). The third set of questions was related to other common disabilities including speech/language impairments, learning disabilities (LD), and emotionally disturbed (ED), as well as other health impaired (OHI). Several of the questions were related to the same subject matter but were written differently in order to verify the previous response.

**Survey distribution.** The survey was sent home with all pre-kindergarten through fifth grade students in their organizational tool (OT), as referred to in the AVID language and culture. Each day the students are instructed to place paperwork within their OT. The OT has specific folders for work that is to stay at home and paperwork that is to be reviewed by parents and returned to school. This distribution method was chosen based on its economy and its efficiency as teachers, students, and parents are accustomed to distributing information to and from school using this process. Because of this standard process, surveys were sent home only one time.

No teacher involvement was required other than distributing and collecting surveys. The participants were not compensated for their responses, nor did their children receive any special considerations from the classroom teachers for their parent's participation.

### **Data Analysis**

In order to get a sense of the rate of return the demographic data of participants was documented in terms of grade level, return rate, guardianship, age of respondent

and education levels. Frequency distributions were calculated by numerical response in terms of their agreement with the question items on survey.

## CHAPTER 4

### RESULTS

To examine the results of parent’s perceptions of children with special education labels being included in regular education classrooms, the information was first reviewed in terms of demographic information. Secondly, scores on individual questions were summarized by response level (strongly agree, moderately agree, neutral/no opinion, moderately disagree, strongly disagree).

#### Demographic Information

The survey was distributed to 342 to students during the 34<sup>th</sup> week of the school year. The survey was distributed to all students in both English and Spanish. Sixty nine surveys (20%) were returned, Table 1 shows the responses from each grade level (prekindergarten through grade 5).

Table 1

#### *Demographic Data of Participants*

Student Grade		Guardianship					Age of Respondent						Education Level						
Student Grade	Number Returned	Parent	Guardian	Grandparent	Foster parent	No Response	20-25	26-34	35-44	45-54	55+	No Response	Elementary	Middle/Junior High	High School	Community College	Vocational/Tech.	University	No Response
P	3	2	10	0	0	0	1	0	1	1	0	0	0	0	1	0	0	1	1
K	19	19	0	0	0	0	5	7	4	1	0	2	1		10	4	0	4	0
1	6	6	0	0	0	0	1	4	1	0	0	0	0	1	2	1	0	2	0
2	17	17	3	1	0	0	2	7	4	4	0	0	0	0	7	6	2	2	0
3	6	6	0	0	0	1	0	2	4	0	0	0	0	1	1	2	1	1	0
4	10	10	0	1	0	0	1	2	5	1	1	0	1	0	4	2	0	2	1
5	6	6	0	1	0	0	0	0	3	1	1	1	0	0	0	3	3	0	0
NR	2	2	0	0	0	1	0	0	1	0	0	1	0	0	1	0	0	0	1

NR= those reported without a student grade listed.

Table 1 shows the most responses were received from kindergarten and second grade; the least from prekindergarten. Eighty-seven percent of the respondents reported themselves as the parent of the student, 6% reported as a guardian, and 4% reported as a grandparent. Forty-six percent of the respondents were between the ages of 20 and 34. Forty-five percent were between the ages of 35-54. Three percent reported as 55 or older. Six percent did not report an age. In terms of the educational level, 6% of the respondents reported they had not received a high school education, 38% reported they attended high school, 26% attended a community college, 9% attended a vocational/technical or trade school, 17% reported attending a college or university, and 4% did not respond to the question.

Although lower than expected, but not alarming, 39% of respondents responded “yes” to the question “Prior to reading the statement above, were you familiar with the term Individualized Education Plan (IEP)?” It did not appear that educational level or age had a part in the response.

### **Frequency Distributions**

The survey document was divided into two categories with questions 1-10 relating to the first research question, “What is the current parent perspective of special education labels?” (see Table 2).

Table 2

*Survey Questions 1-10*

Question Number	Research Question: What is the current parent perspective of special education labels?
1	All students who have an Individualized Education Plan (IEP) for any reason need to receive their education in a special education classroom.
2	Students who display speech and language difficulties should be in a special education classroom.
3	Students who are performing 1-2 years below grade level should be in a special education classroom.
4	Regular education teachers have adequate training to work with students with special needs in their regular education classrooms.
5	My student can learn from a child with special needs.
6	Students with autism can learn in a regular education classroom.
7	The disability should be considered when placing a child into a regular education classroom.
8	I see no benefit in my child interacting with students with special needs.
9	Students who are diagnosed as having an intellectual disability should be in special education classrooms.
10	All efforts should be made to educate students with an Individual Education Plan (IEP) in a regular education classroom regardless of their ability or need.

Questions 11-21 related to research question two, “How do they (special education labels) affect the attitudes of parents of children with and without exceptionalities served in an inclusive classroom?” (see Table 3).

Table 3

*Survey Questions 11-21*

Question Number	Research Question: How do they (special education labels) affect the attitudes of parents of children with and without exceptionalities served in an inclusive classroom?
11	Students should not receive more attention because they have special needs.
12	Students who are verbally aggressive towards others should not be in the regular education classrooms.
13	Students who have difficulty understanding social rules should not be in a regular education classroom.
14	My student will suffer academically if they have a special needs classmate who is disruptive.
15	Teachers who support students with special needs should have more training than teachers working in situations where there are no children with special needs.
16	Students who require one-on-one adult attention for behavior should not be allowed in a regular education classroom.
17	Students with special needs should only be in a regular education classroom for academic learning.
18	It is not fair to typically developing students for a student with special needs to be placed in a regular classroom.
19	Students who are physically aggressive towards others should not be in the regular education classrooms.
20	Students with special needs require more attention from their teacher than typically developing students.
21	All students should be allowed to have a free public education regardless of their learning ability.

To examine the distribution of responses on each survey item, frequency distributions were calculated as shown in Table 4.

Table 4

*Frequency Distribution of Responses by Question Number*

	<b>1 Strongly Disagree</b>		<b>2 Moderately Disagree</b>		<b>3 Neutral / No Opinion</b>		<b>4 Moderately Agree</b>		<b>5 Strongly Agree</b>		<b>0 No Response</b>	
<b>Q1</b>	12	17.39%	10	14.49%	17	24.64%	14	20.29%	16	23.19%	0	0.00%
<b>Q2</b>	12	17.39%	14	20.29%	15	21.74%	12	17.39%	16	23.19%	0	0.00%
<b>Q3</b>	9	13.24%	6	8.82%	14	20.59%	28	41.18%	11	16.2%	1	1.47%
<b>Q4</b>	13	19.12%	16	23.53%	19	27.97%	11	16.18%	9	13.2%	1	1.47%
<b>Q5</b>	1	1.47%	4	5.88%	16	23.53%	20	29.41%	27	39.7%	1	1.47%
<b>Q6</b>	4	5.88%	11	16.18%	20	29.41%	23	33.82%	10	14.7%	1	1.47%
<b>Q7</b>	3	4.35%	5	7.25%	13	18.84%	19	27.54%	29	42.0%	0	0.00%
<b>Q8</b>	40	58.82%	6	8.82%	17	25.00%	3	4.41%	2	2.9%	1	1.47%
<b>Q9</b>	8	11.74%	14	20.59%	16	23.53%	22	32.35%	8	11.8%	1	1.47%
<b>Q10</b>	5	7.35%	18	26.47%	15	22.06%	15	22.06%	15	22.1%	1	1.47%
<b>Q11</b>	22	32.84%	28	41.79%	11	16.42%	3	4.48%	3	4.5%	2	2.99%
<b>Q12</b>	5	7.58%	11	16.67%	12	18.18%	20	30.30%	18	27.3%	3	4.55%
<b>Q13</b>	9	13.24%	17	25.00%	21	30.88%	14	20.59%	7	10.29%	1	1.47%
<b>Q14</b>	17	26.56%	12	18.75%	13	20.31%	17	26.56%	5	7.8%	5	7.81%
<b>Q15</b>	3	4.41%	5	7.35%	9	13.24%	20	29.41%	31	45.6%	1	1.47%
<b>Q16</b>	8	11.76%	21	30.88%	16	23.53%	15	22.06%	8	11.8%	1	1.47%
<b>Q17</b>	14	20.59%	17	25.00%	26	38.24%	9	13.24%	2	2.9%	1	1.47%
<b>Q18</b>	20	30.30%	16	24.24%	21	31.82%	4	6.06%	5	7.6%	3	4.55%
<b>Q19</b>	6	8.82%	4	5.97%	11	16.18%	22	32.35%	25	36.8%	1	1.47%
<b>Q20</b>	4	5.97%	4	5.97%	10	14.93%	29	43.28%	20	29.9%	2	2.99%
<b>Q21</b>	2	2.94%	0	0.00%	6	8.82%	8	11.76%	52	76.5%	1	1.47%

Note: Only three questions were answered by all 69 participants; Q1, Q2, and Q7. Adjustments were made in the calculations to reflect only those who responded, not the total number of participants.

**Perceptions of impairments.** Questions 1, 2, 3, and 9 were written to gain an understanding of parent’s perceptions of children that may or may not be on an IEP plan, but could have impairments that may be found in a regular education classroom.

For those who responded to Q1 43.48% moderately to strongly agreed that students who are on an IEP plan for any reason should receive services in a special education classroom. Of those who responded to Q2, 40.58% moderately to strongly agree that students who have speech and/or language disabilities should receive services in a special education classroom. For question Q3, 57.35% of respondents moderately to strongly agreed that students who are 1-2 years below grade level should receive services in a special education classroom. Lastly, of those who responded to Q9, 44.12% moderately to strongly agree that students who have been diagnosed with an intellectual disability should receive services in a special education classroom (see Figure 1).

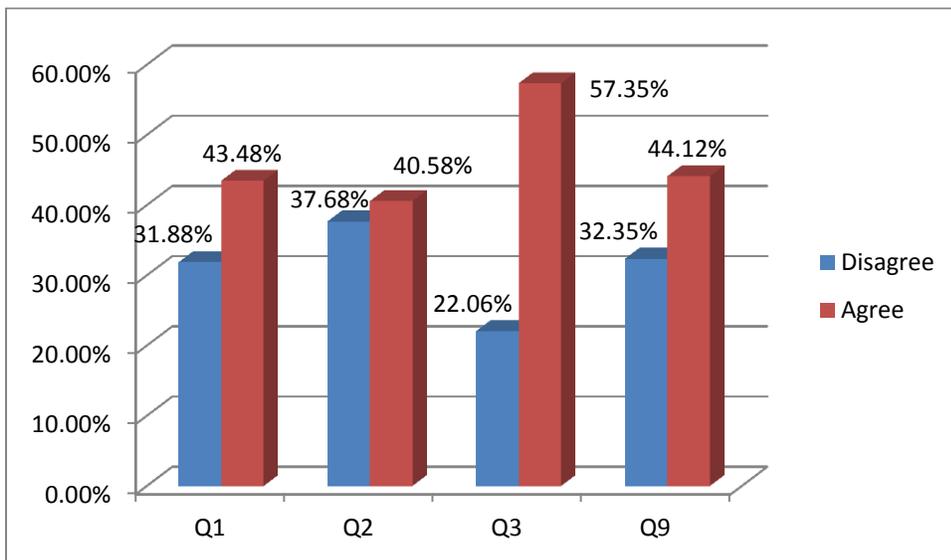


Figure 1. Inclusion regardless of ability.

Overall, It appears parents feel students receiving special education services need to receive some or all of their services outside of the regular education classroom setting.

**Value of the disability.** Questions 6, 7, and 10 were written to determine if parents place a value on a known disability and if it should be used to determine a child's placement within an inclusive setting. For those who responded to Q6, 48.53% moderately to strongly agreed that students with a diagnosis of autism can learn in a regular education classroom. Responses to Q7 showed that 69.57% of parents moderately to strongly agreed that the disability should be considered when placing a student in a regular education classroom. Lastly, of those who responded to Q10, 44.12% moderately to strongly agreed that all efforts should be made to educate students with an Individual Education Plan (IEP) in a regular education classroom regardless of their ability or need

(see Figure 2).

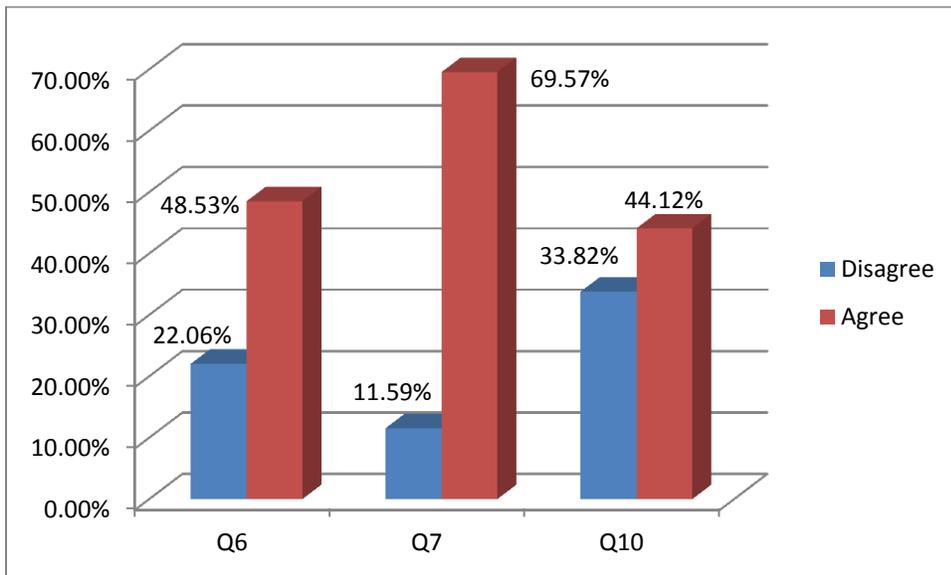


Figure 2. Inclusion regardless of ability or need.

Unfortunately this data is to some extent contradictory to itself. Although parents agreed that students who are on an IEP, or are one-to-two grade levels below their grade level, have a special needs such as speech/language difficulties, and/or an intellectual delay should receive services in a special education classroom setting, they

also agreed that all efforts should be made for students on an IEP to be placed in a regular education setting if possible. The findings also conclude that students with a disability such as autism or other can and should be allowed to learn in an inclusive regular education classroom if the behaviors associated with the disability are not disruptive to the classroom environment.

**Interaction between students.** Questions 5, 18, and 8 related to the value of having typically developing students interacting with atypically developing students. Responses to the following questions were in line with literature relating to the topics. In regards to interactions between typically and atypically developing students, 69.12% of parent responses to Q5 moderately to strongly agree that regular education students do benefit, and can learn, from interactions with students with special needs (see Figure 3). Response to Q18, showed that 54.55% of respondents to moderately to strongly disagree that it is not fair to typically developing students for a student with special needs to be placed in a regular classroom. Of those who responded to Q8, 67.65% moderately to strongly disagree with the statement there is “no benefit from my child interacting with a student with special needs” (see Figure 4).

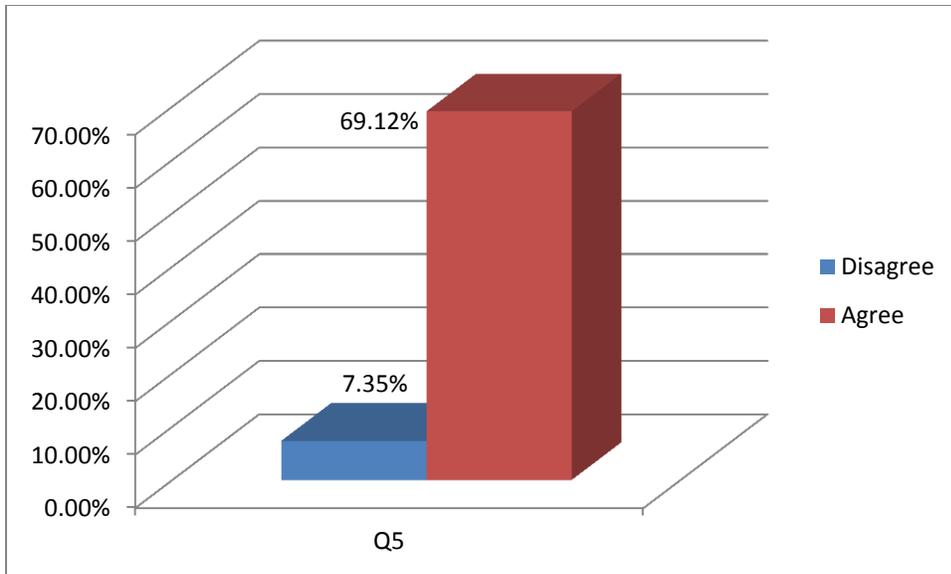


Figure 3: Ability to learn from students with special needs.

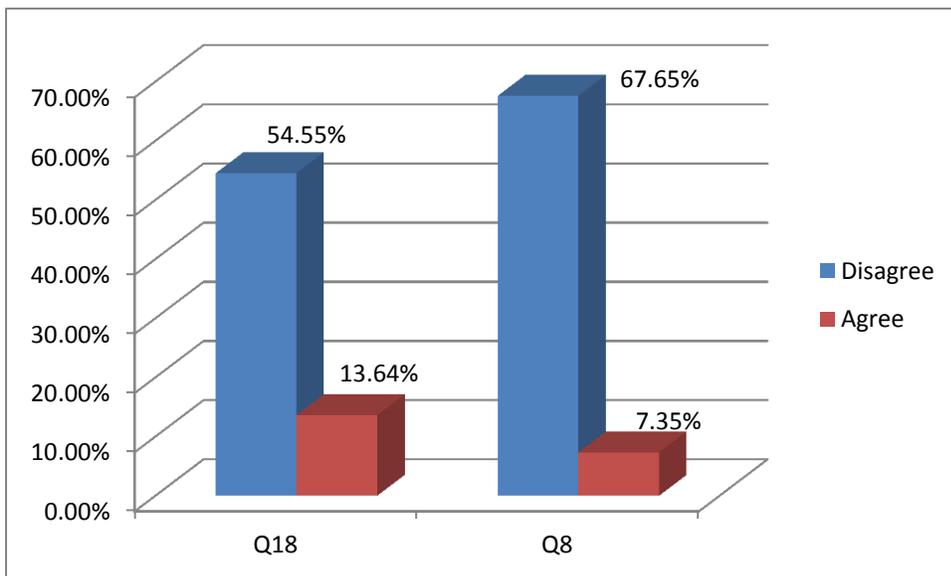


Figure 4: Relevance of interaction between students.

The findings displayed in Figure 3 convey a positive perception of the interaction between typically and atypically developing students. Parents overwhelmingly agree their students will benefit from interactions with students with special needs. Figure 4 reiterates the point of Figure 3. The disagreement with the questions actually reflects

positively regarding the benefits of typically and atypically developing student interactions.

**Behaviors.** Questions 12, 13, 14, and 19 portrayed student behaviors such as verbal and physical aggression, lack of understanding of social rules, and other disruptive behaviors that can be found in regular education by typically developing students, but more frequently found in self-contained special education classrooms. Respondents to questions 12 (57.58%) and 19 (69.12%) moderately to strongly agree that students who show verbal aggression and/or physical aggression towards others should not be placed in a regular education setting; 38.24% of respondents to Q13 moderately to strongly disagree that a student without basic social skills should not be located in a regular education classroom. Additionally, 45% respondents to Q14 moderately to strongly agreed that their student would not suffer academically if they have a disruptive classmate (see Figure 5).

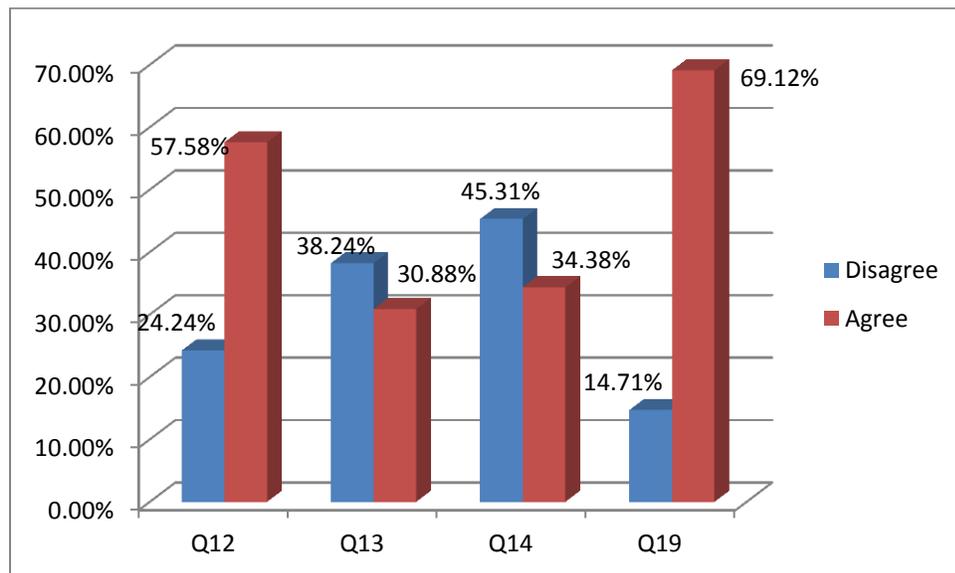


Figure 5: Symptoms associated with behavior.

Interestingly enough, although parents agreed that students with aggressive behaviors or that are lacking in social skills should not be placed in a regular education

classroom, however, they do not feel that their students will suffer academically if a disruptive student within the classroom.

**Adequate teacher training.** Respondents showed overwhelming understanding of the time that is required by teachers when working with students with special needs. Question 20 asked specifically if students with special needs require more adult attention than their typically developing counterparts, 73.13% of respondents moderately to strongly agree that atypically developing children require more attention from an adult during class time. Although the question is worded as negative, the result is positive with 74.63% of respondents to Q11 moderately to strongly disagreeing that a student with special needs should not receive more attention in the classroom. Of the respondents to Q16 42.65%, moderately to strongly disagree that students requiring one-on-one attention from a paraprofessional or least restricted environment aid should not be allowed in a regular classroom setting.

Questions 4 and 15 asked if those teachers working with students receiving special education services should have more training than those teaching regular education students only; and if teachers in regular education classrooms did indeed have adequate training to serve their special education students. In regards to teachers needing more specific training to work with special education students, 75% of respondents to Q15 moderately to strongly agree that teachers need additional training in order to properly serve the special ed. population of students. When answering Q4, only 29.41% of the respondents moderately to strongly agree that regular education teachers have proper training to work with those students receiving special education services within their classroom setting (see Figure 6).

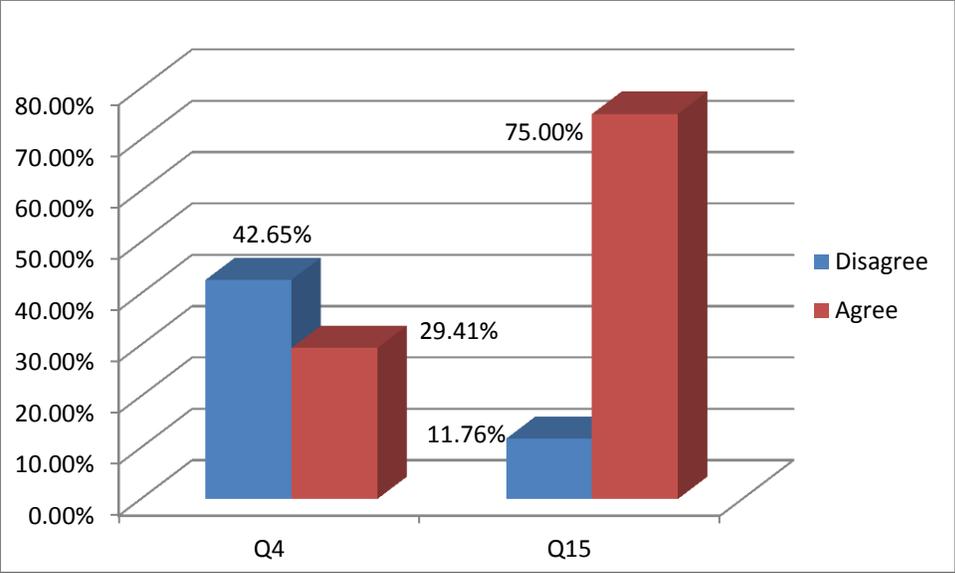


Figure 6: Attitudes towards teacher training.

## **CHAPTER 4**

### **DISCUSSION**

The findings of this study show that the perceptions of parents with regard to children with special needs in regular educational settings continue to be met with mixed feelings. Although most parents agree that students on an IEP should be included in regular education classroom settings, there is some apprehension based on the types of behaviors associated with a student diagnosis. Many parents feel that typically developing students can benefit from interactions with students who have disabilities; however, they feel that the disability should be taken into account when placing the student in a regular educational setting. For students on the autism spectrum, this means that those students who are able to function within a regular education classroom should be permitted to stay as long as they do not display behaviors that would not be permitted by typically developing students. It is the consensus of those surveyed that educators do not have enough training to tackle the challenging behaviors that are arising in the modern classroom environment from both typically and atypically developing students. The results of this survey agree with the literature in stating that most parents feel that children, including children with exceptionalities are entitled to an educational system that is accountable, and will provide them with equal access, equal standards, and high expectations (Parker, 2003, p. 2).

#### **Limitations**

After survey results were tallied and calculations completed, it must be noted that there may have been some discrepancies in the wording of the questions. Several

questions were written with a negative bias and could have been misinterpreted by the respondent. It was the original intent that several questions be written as such to act as a “check,” as one would expect a negative response on one question, positive response would be elicited on its counterpart. However, this was not always the case. Had there been more time, an initial pilot sample would have been submitted to gauge the interpretations of the questionnaire prior to sending out to the entire population.

Additionally, for those respondents who answered “yes” to being familiar with the terminology for an Individualized Education Plan (IEP), it was the original intent to ask how they were familiar with the term. However, asking the question of “is your student on an IEP?” was ruled out based on the idea that anonymity of the student could be compromised. After tallying the survey results, it would have in fact been very difficult to single out specific students because no classroom information was collected other than grade level. Surveys were purposefully left sorted only by grade level, and it was not reported which classrooms returned completed surveys.

## **Conclusion**

Unfortunately, history has not changed drastically when it comes to the perspective of how society views children with special education diagnoses. Although advocacy dates back nearly a century, it was not until the 1990s when the American’s with Disabilities Act was put into action that a true understanding and belief that exceptional children were entitled to the same inalienable rights as their typically developing counterparts. Even now, fourteen years into the new millennium, we are still working on removing degrading terminology from government and educational

documents, only proving further that the progress of changing the societal views of persons with disabilities is continuing.

Should additional research be completed in this area it is suggested that further exploration be completed related to the familiarity of the IEP process. If parents understood the IEP process it could lead to more accepting responses.

The findings of this study also lead to a belief that further research can and should be conducted in the area of inclusion of special needs students within regular educational settings. Although there is a general acceptance of mild behavioral issues present within a classroom setting, the overall consensus of parents is that behaviors must not disrupt the routine of the classroom. The classroom success stories like those found in the study of Kasa-Hendrickson and Kluth (2005), where the standard of “normal behavior” was reset within the classroom, are not prevalent in today’s educational culture. Additional behavioral training for teachers to handle different situations that may arise in today’s classrooms, more education of parents about what today’s classrooms are facing in terms of atypically developing students, and the combined efforts of teachers and parents in educating students about compassion can potentially create a new educational climate where “normal” has a broader and more inclusive meaning.

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## REFERENCES

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## **APPENDIXES**

## Appendix A

### Consent Letter to Parents - English



WICHITA STATE  
UNIVERSITY

COLLEGE OF EDUCATION

Department of Curriculum and Instruction

May, 2014

#### Dear Parents and Guardians:

My name is Lecia Cook. I am a paraprofessional here at Franklin working in one of the autism classrooms. I am currently working on my master's degree in Early Childhood Unified at Wichita State University. As part of my degree, I am required to complete a research project. The attached survey is the basis for my research this spring 2014. The survey is being sent home with all students at Franklin and is to be completed by a parent or guardian in the home. If you received more than one copy of the survey because you have multiple children at Franklin, please complete only one survey and return it with your oldest student.

**Purpose:** The purpose of this study is to determine parent perspectives of special education labels, and how they affect the attitudes of parents of children with and without exceptionalities served in an inclusive classroom. An inclusive classroom is defined as children with special needs who spend part of their day in a regular education classroom with students with no identified special needs.

**Participant Selection:** You are being asked to participate in this study because you have a student attending Franklin Elementary.

**Discomfort/Risks:** There are no anticipated risks associated with participating in this study. However, if you feel uncomfortable with a question, you may skip it.

**Benefits:** The information gathered in this survey will be used to determine parental attitudes towards atypically developing children; the behaviors that are typically associated with specific disabilities; and how parents feel these behaviors will impact a regular education classroom environment. Based on the findings we will determine if there is a need to provide information to parents regarding disabilities found within a school setting to alleviate any social stigmas found.

**Confidentiality:** There are no identifying questions or marks to indicate specific individuals.

**Refusal/Withdrawal:** Participation in this study is entirely voluntary. Your decision whether or not to participate will not affect your future relations with Wichita State University and/or Franklin Elementary. Classroom teachers have no association with the completion of this research, nor will the completion of the survey will have any influence on your student's classroom performance. If you agree to participate in this study, you are free to withdraw from the study at any time without penalty.

**Contact:** If you have any questions about this research, you may contact Lecia Cook at (316) 214-1622 or [lbcook@wichita.edu](mailto:lbcook@wichita.edu) or Jeri Carroll at (316) 978-6865 [jeri.carroll@wichita.edu](mailto:jeri.carroll@wichita.edu). If you have questions pertaining to your rights as a research subject, or about a research-related injury, you can contact the Office of Research and Technology Transfer at Wichita State University, 1845 Fairmont Street, Wichita, KS 67260-0007, telephone (316) 978-3285.

You are under no obligation to participate in this study. Completing the survey indicates that you have read the information provided above and have voluntarily decided to participate.

Please keep this consent form for your records.

## Appendix B

### Survey Instrument- English

May, 2014

#### Research Survey

#### “Parental Perceptions of Students Receiving Special Education Services”

As a parent of a Franklin Elementary student, you are being asked to participate in a short survey about your perceptions of students receiving special education services. Please read each question in the survey and answer the question by filling in one box that best demonstrates your understanding or feeling about statement.

Demographic Information of Person Filling Out the Survey	
Grade of Student: PK <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
Are you a: <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent	
Age: <input type="checkbox"/> 20 – 25 <input type="checkbox"/> 26 – 24 <input type="checkbox"/> 35 – 44 <input type="checkbox"/> 45 – 54 <input type="checkbox"/> 55+	Highest Education Level: <input type="checkbox"/> Elementary <input type="checkbox"/> Middle/Junior High <input type="checkbox"/> High School <input type="checkbox"/> Vocational Training <input type="checkbox"/> Community College <input type="checkbox"/> University

**Individualized Education Plan (IEP):** The goal of an IEP is to provide individualized objectives to students who are in need of supplementary defined educational goals. An IEP is designed to ensure that students receiving special education services receive an appropriate placement within a school setting. Students placed on an IEP include, but are not limited to, children with physical disabilities, cognitive disabilities, and/or gifted students. For the purpose of this survey only those with physical or cognitive disabilities are addressed.

Prior to reading the statement above, were you familiar with the term Individualized Education Plan (IEP)?  Yes  No

Survey		
<b>Q1</b>	All students who have an Individualized Education Plan (IEP) for any reason need to receive their education in a special education classroom.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
<b>Q2</b>	Students who display speech and language difficulties should be in a special education classroom.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
<b>Q3</b>	Students who are performing 1-2 years below grade level should be in a special education classroom.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
<b>Q4</b>	Regular education teachers have adequate training to work with students with special needs in their regular education classrooms.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
<b>Q5</b>	My student can learn from a child with special needs.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
<b>Q6</b>	Students with autism can learn in a regular education classroom.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
<b>Q7</b>	The disability should be considered when placing a child into a regular education classroom.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
<b>Q8</b>	I see no benefit in my child interacting with students with special needs.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
<b>Q9</b>	Students who are diagnosed as having an intellectual disability should be in special education classrooms.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree

Q10	All efforts should be made to educate students with an Individual Education Plan (IEP) in a regular education classroom regardless of their ability or need.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q11	Students should not receive more attention because they have special needs.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q12	Students who are verbally aggressive towards others should not be in the regular education classrooms.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q13	Students who have difficulty understanding social rules should not be in a regular education classroom.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q14	My student will suffer academically if they have a special needs classmate who is disruptive.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q15	Teachers who support students with special needs should have more training than teachers working in situations where there are no children with special needs.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q16	Students who require one-on-one adult attention for behavior should not be allowed in a regular education classroom.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q17	Students with special needs should only be in a regular education classroom for academic learning.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q18	It is not fair to typically developing students for a student with special needs to be placed in a regular classroom.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q19	Students who are physically aggressive towards others should not be in the regular education classrooms.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q20	Students with special needs require more attention from their teacher than typically developing students.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree
Q21	All students should be allowed to have a free public education regardless of their learning ability.	<input type="checkbox"/> (5) Strongly Agree <input type="checkbox"/> (4) Moderately Agree <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderately Disagree <input type="checkbox"/> (1) Strongly Disagree

**PLEASE SEAL AND RETURN THE SURVEY IN THE ENVELOPE IN WHICH IS WAS RECEIVED.**

Thank you for your participation.

## Appendix C

### Consent Letter to Parents - Spanish

6 de mayo 2014

Estimados Padres y Tutores:

Mi nombre es Lecia Cook. Soy ayudante de maestra aquí en Franklin trabajando en uno de los salones de Autismo. Actualmente estoy trabajando en mi maestría en Educación Infantil Unificado en la Universidad de Wichita. Como parte de mis estudios, estoy obligada a completar un proyecto de investigación. La encuesta adjunta es la base de mi investigación esta Primavera 2014. La encuesta se envía a casa con todos los estudiantes de Franklin y debe ser completada por un padre o tutor. Si ha recibido más de una copia de la encuesta porque tiene varios hijos en Franklin, por favor complete una sola encuesta y devuélvala con su alumno mayor.

**Propósito:** El propósito de esta investigación es para determinar las perspectivas de los padres de las etiquetas de educación especial, y de que manera afectan a la actitud de los padres de los niños con y sin excepcionales servido en un salón de clase Inclusivo. Un salón de clase Inclusivo se define como niños con necesidades especiales que pasan parte de su día en un salón de educación regular con los estudiantes con necesidades especiales.

**Selección de participantes:** se le pide que participe en este estudio porque tiene un alumno que asiste a la Escuela Franklin.

**Molestias y Riesgos:** no hay riesgos previstos asociados con la participación en este estudio. Sin embargo, si usted se siente incómodo con una pregunta, usted puede dejar la pregunta en blanco.

**Ventajas:** La información obtenida en este estudio se utilizará para determinar las actitudes de los padres hacia los niños atípicos; los comportamientos que se asocian generalmente con discapacidades específicas, y cómo los padres se sienten que estos comportamientos tendrán un impacto en la educación presencial. Sobre la base de las conclusiones que se determinará si existe la necesidad de proporcionar información a los padres sobre discapacidad en el ámbito escolar para paliar los estigmas sociales.

**Confidencialidad:** no hay preguntas o marcas que indican o identifican personas.

**Denegación/retirada:** la participación en este estudio es totalmente voluntaria. Su decisión si desea o no participar no afectará su futuras relaciones con la Universidad de Wichita y/o la Escuela Franklin. Los maestros no tienen asociación con la realización de esta investigación, ni la realización de la encuesta tendrá alguna influencia en el rendimiento escolar del alumno. Si usted está de acuerdo en participar en este estudio, usted puede retirarse del estudio en cualquier momento sin ningún tipo de penalización.

**Contacto:** Si tiene alguna pregunta acerca de esta investigación, puede ponerse en contacto con Lecia Cook en el (316) 214-1622 o [lccook@wichita.edu](mailto:lccook@wichita.edu) o Jeri Carroll en el (316) 978-6865 [jeri.carroll@wichita.edu](mailto:jeri.carroll@wichita.edu). Si usted tiene preguntas relacionadas con sus derechos como sujeto de investigación, o de una lesión relacionada con la investigación, puede comunicarse con la Oficina de Investigación y transferencia tecnológica de Wichita State University, 1845 Fairmont Street, Wichita, KS 67260-0007, teléfono (316) 978-3285.

Usted está bajo ninguna obligación de participar en este estudio. Completar la encuesta indica que ha leído la información proporcionada más arriba y han decidido voluntariamente a participar.

Por favor, guarde este formulario de consentimiento para sus archivos.

## Appendix D

### Survey Instrument - Spanish

mayo 2014

#### Estudio de Investigación "Las Percepciones Parentales de Los Estudiante Que Reciben Servicios de Educación Especial"

Como padre de un estudiante de la Escuela Franklin, se le pide participar en una breve encuesta sobre su percepción de los estudiantes que reciben servicios de educación especial. Por favor, lea cada pregunta de la encuesta y responda a la pregunta con llenar una caja que mejor demuestra su comprensión o sensación de declaración.

Información de Datos de Filiación de La Persona Rellenando la Encuesta	
Grado de Estudiante: PK <input type="checkbox"/> K <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
Usted es: <input type="checkbox"/> Padre <input type="checkbox"/> Tutor <input type="checkbox"/> Abuelo(s) <input type="checkbox"/> Padre Adoptivo	
Edad: <input type="checkbox"/> 20 - 25 <input type="checkbox"/> 26 - 34 <input type="checkbox"/> 35 - 44 <input type="checkbox"/> 45 - 54 <input type="checkbox"/> 55+	Nivel Mas Alto de Educación: <input type="checkbox"/> Primaria <input type="checkbox"/> Intermedia <input type="checkbox"/> Secundaria <input type="checkbox"/> Formación Profesional <input type="checkbox"/> Colegio <input type="checkbox"/> Universidad

**Plan de Educación Individualizada (IEP):** El objetivo de un IEP es proporcionar objetivos individualizados a los estudiantes que están en necesidad de definir metas educativas complementarias. El IEP está diseñado para asegurar que los estudiantes que reciben servicios de educación especial reciban una adecuada colocación dentro de un entorno escolar. Los estudiantes en un IEP incluyen, pero no están limitados a, los niños con discapacidades físicas, discapacidades cognitivas, y/o a los alumnos superdotados. A los efectos de este estudio sólo las personas con discapacidades físicas o cognitivas.

Antes de leer la declaración anterior, está familiarizado con el término Plan de Educación Individualizada (IEP)?  Si  No

Encuesta		
P1	Todos los estudiantes que tienen un Plan de Educación Individualizada (IEP) por cualquier razón necesita recibir su educación en un salón de educación especial.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P2	Los estudiantes que muestran dificultades en el lenguaje y discurso debe estar en un salón de educación especial.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P3	Los estudiantes que están realizando 1-2 años por debajo del nivel del grado deben estar en un salón de educación especial.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P4	Maestros de educación regular tienen formación adecuada para trabajar con los estudiantes con necesidades especiales en los salones de la educación regular.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P5	Mi estudiante puede aprender de un niño con necesidades especiales.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P6	Los estudiantes con autismo pueden aprender en un salón de educación regular.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P7	La discapacidad debe ser considerado cuando se coloca a un niño en un salón de educación regular.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P8	Yo no veo ningún beneficio en mi niño interactuar con los estudiantes con necesidades especiales.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P9	Los estudiantes que son diagnosticados de una discapacidad intelectual debe estar en los salones de la educación especial.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinion <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto

P10	Deben hacerse todos los esfuerzos para educar a los estudiantes en un Plan de Educación Individualizada (IEP) en un salón de educación regular independientemente de su capacidad o necesidad.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P11	Los estudiantes no deben recibir más atención porque tienen necesidades especiales.	<input type="checkbox"/> (5) Totalmente de acuerdo <input checked="" type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P12	Los estudiantes que son verbalmente agresivo hacia los demás no deben estar en los salones de educación regular.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P13	Los estudiantes que tienen dificultades en comprender las reglas sociales no debe estar en un aula de educación regular.	<input type="checkbox"/> (5) Totalmente de acuerdo <input checked="" type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P14	Mi estudiante académicamente sufrirá si tienen necesidades especiales compañero que es perjudicial.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P15	Los maestros que apoyan a los estudiantes con necesidades especiales deben tener más capacitación que los maestros que trabajan en situaciones en las que no hay niños con necesidades especiales.	<input type="checkbox"/> (5) Totalmente de acuerdo <input checked="" type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P16	Los estudiantes que requieren atención del adulto uno-a-uno para comportamiento no debe ser permitido en un salón de educación regular.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P17	Los estudiantes con necesidades especiales sólo deben estar en un salón de educación regular para el aprendizaje académico.	<input type="checkbox"/> (5) Totalmente de acuerdo <input checked="" type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P18	No es justo que los estudiantes con desarrollo típico que se colocan con un alumno con necesidades especiales en un salón de clases regular.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P19	Los estudiantes que están físicamente agresivos hacia los demás no deben estar en los salones de educación regular.	<input type="checkbox"/> (5) Totalmente de acuerdo <input checked="" type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P20	Los estudiantes con necesidades especiales requieren más atención de su maestro que los estudiantes de desarrollo típico.	<input type="checkbox"/> (5) Totalmente de acuerdo <input type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto
P21	Todos los estudiantes deben tener la posibilidad de tener una educación pública gratuita independientemente de su capacidad de aprendizaje.	<input type="checkbox"/> (5) Totalmente de acuerdo <input checked="" type="checkbox"/> (4) Moderadamente Acuerdo <input type="checkbox"/> (3) Neutral/No Opinión <input type="checkbox"/> (2) Moderadamente Desacuerdo <input type="checkbox"/> (1) De acuerdo en Absoluto

POR FAVOR, CIERRE Y DEVUELVA LA ENCUESTA EN EL SOBRE EN EL QUE SE HA RECIBIDO.  
 Gracias por su participación.