WHY DO CONTEMPORARY SPECIAL EDUCATORS FAVOUR A NON-CATEGORICAL APPROACH TO TEACHING?

by KEVIN WHELDALL

Special Education is about ways of optimising the learning environment for people with special needs and disabilities. The majority of special educators in New South Wales, and indeed in Australia, today favour what is known as 'a non-categorical approach' to teaching students with special needs (i.e. students with sensory and/or intellectual disabilities, learning difficulties and/or behaviour disorders). Non-categorical programs, according to the Penguin Macquarie Dictionary of Australian Education (1989), 'emphasise the skills the child needs for functioning in society, thus avoiding labelling'. Labelling, in turn, is defined as 'the practice of classifying people into categories and subsequently ascribing to such person or persons the characteristics of the stereotypic member of that category'.

Contemporary special educators favouring a non-categorical approach are committed to the conviction that all children can learn, given effective instruction. The forms of pedagogy we employ, however, are determined not by the nature of the child's disabling condition but by a needs based appraisal of the student's current level of functioning.

It should be emphasised that contemporary special educators are not the educational equivalent of 'flat-earthers', refusing to believe the evidence of their senses that disabilities and difficulties in learning take many forms and may have a multiplicity of potential causes. Rather they believe that the categories commonly employed to describe students with apparently similar disabilities and difficulties are sometimes questionable but, more importantly, are of little or no use in determining the appropriate pedagogy to be employed with a particular student. However, when you do give students these sorts of labels it sets up expectations in teachers and others who interact with them of what these students cannot do. At the very least it is not an optimistic approach. It is also unlikely to be of any direct help to the teaching of such students. How you teach children to progress from A to B has almost nothing to do with the aetiology of the disabling condition. Contemporary Special Educators subscribe to a non-categorical approach for a number of reasons.

1. Research on teaching methods

Research has signally failed to demonstrate that different teaching methods (pedagogy) are differentially effective for different categories of students. In other words, the data are equivocal (to say the least) in support of the notion that, for example, children who are low-progress readers need different forms of remedial instruction depending upon whether they have an 'intellectual disability', a 'learning difficulty', a so-called 'specific learning disability' (such as 'dyslexia'), or whatever. A considerable amount of time, research funding and effort, over twenty or more years, has gone into empirical attempts to demonstrate that different categories of students
need (and benefit differentially from) different forms of teaching. This so-called aptitude-treatment interaction research, which promised so much, has delivered so little, at least in terms of what may usefully be applied in special education. This is not to deny that research may not one day determine effective procedures for accurate 'diagnosis' (see below) and 'treatment' of specific educationally debilitating conditions, but that day has not yet arrived. One of the things that we have learned in special education is that although it might seem like useful information to know the precise minutiae of why a person has a certain disability, very rarely does this actually help us to teach them any better.

2. The reality of categories

Some categories are real enough; others less so. Some are accepted by all; some are hotly disputed. While the jury is out, and while unequivocal findings supporting the validity of some hypothesised conditions are yet to be adduced, we are wise to take the conservative (and parsimonious) view and concur with the option within Scottish law of 'not proven' in many cases. Certain medical categories, such as Down Syndrome, however, may have real medical significance but little educational significance. Such children used to be routinely institutionalised on the basis of their medical diagnosis. Today, many children with Down Syndrome are routinely mainstreamed as a result of programs of early intervention based on effective pedagogy, owing little or nothing to the specificity of their diagnosis. Special Education is about teaching and learning, not biology.

3. Focus on the individual student

The non-categorical approach subsumes the fundamental principle of the individualised educational program. Contemporary Special Educational practice recognises a diversity of educational methods and procedures of proven effectiveness based on empirical research evidence. It is the professional responsibility of special educators to determine the most appropriate forms of pedagogy (instructional method) and curriculum for the individual student with special needs. The aptitude-treatment interaction research referred to above has convincingly demonstrated that there is as much variability within categories as there is between categories, in terms of ability to learn and educational benefit from specific programs of instruction. Given that this is the case, Special Educators focus on individual students and their specific learning needs rather than on their categorical placement.

4. The limited utility of the IQ

While not wishing to reify the IQ (far from it), we accept that it can be used as a crude indicator of the likely need for more supportive learning contexts. This is not meant to suggest that students with lower IQs cannot learn the abstract concepts we are in the business of teaching. No contemporary Special Educator would believe that. But we accept that students vary both in the rapidity with which they learn new ideas and concepts and the clarity of instruction they require. So-called 'bright' students catch on
to new ideas rapidly, with few examples being needed and even these examples need not necessarily be paradigmatically transparent. Other students may take far longer, need far more examples and the examples must be clearer. This variability is, in essence, what we mean when we use words like intelligence: the differential ability, in terms of speed and conditions, to learn (and to generalise) concepts. Categorisations based on IQ bands are, however, notoriously unreliable from an educational decision-making point of view, leading to such manifest absurdities as low-progress readers with IQs in the normal range being denied necessary support in favour of provision for students with lower IQs who are reading at grade level! Few would seriously dispute the fact that IQ, in gross terms, may reflect the likely speed of learning and the specificity of conditions for effective learning to take place, but it is not of much use in determining the necessary instruction required by a student with special needs.

5. The dangers of diagnosis

Diagnosis of the apparent reasons for under-functioning in children with special needs has a very poor track record in terms of informing special educational practice. The history of special education is littered over recent decades with a plethora of ill-conceived and subsequently debunked diagnostic procedures. There has been precious little to show for their effectiveness if you look at the research evidence, in spite of the publicity that many of them continue to attract. We should be aware that in special education, as in so many fields where people feel desperate for help, the door is wide open both for manifest, unabashed, charlatans (with the latest snake oil in their medicine show) and also for the well-meaning, sincere, but just plain wrong-headed, self-appointed 'saviours'. People whose children have disabilities or learning difficulties are very sensitive and susceptible to the blandishments of those who purport to have the answer but have no research evidence with which to substantiate their claims.

What then is Special Education?

Having said all of this we are then forced to ask 'what then is special education?' What is so special about special education? Many special educators find themselves saying that it is 'just good teaching'; teaching informed by the findings from rigorous empirical research which has successfully identified the critical components of effective instruction and classroom practice. As already indicated, some students, whom we sometimes call 'gifted and talented', appear to learn rapidly and readily from few (and not even necessarily 'good') examples and almost in spite of what teachers do. They barely need teaching; they appear to learn faster than we can program. So-called 'regular' students learn at the rate we have grown to consider normal, given the usual forms of instruction typically provided by regular teachers. Students with special needs tend to need particularly careful teaching, based on tried and tested methods which have been evaluated empirically.
Research in teaching children with special needs has yielded a set of teaching skills and strategies which have been shown to be consistently effective. Contemporary special educators have learned to be what are sometimes called 'scientist-practitioners' or 'data based teachers'. Data based teachers are firstly teachers who are sensitive to research findings on effective teaching methods. Rather than being guided by fashion and hype they look at the research findings. They evaluate the data and make their judgements on the basis of empirical evidence. They also collect data themselves so that their own teaching is guided by data. They systematically monitor the performance of their students and change what they do on the basis of this information. They also monitor their own teaching performance. On the basis of this continual monitoring they make educational decisions and change their practice accordingly.

In short, contemporary Special Educators eschew the category and focus on the specific educational needs of the individual child.

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