INTRODUCTION

Bilingual special education as a distinct field of study has been formally in existence since 1973. Since then research has been conducted, programs have been designed, curricula have been developed, and teacher training has been established. In 1984, Baca and Cervantes published their first edition of The bilingual special education interface. This text synthesized the then extant knowledge base and state of the art of bilingual special education.

Bilingual special education today, however, is very different in orientation, design, and practice from what it was initially. The purpose of this publication is to present some of the current dilemmas within bilingual special education and special education as a whole, explore why change is necessary if our goal is for language minority students in this country to achieve educational equity, and propose possible directions for change. This guide will also describe program models currently being implemented in different parts of the country.

Bilingual special education is at a crossroads. Though it is apparent that changes must occur, it is not so clear what should be changed or how changes should be implemented. Special education has been criticized for the continued over- and underrepresentation of culturally and linguistically diverse (CLD) students in special education programs (Bernstein 1989; Beaumont and Langdon 1992; Figueroa, Fradd, and Correa 1989; Maldonado-Colén 1983). Special education as a whole has also come under attack. Chalfant (1989) has identified five common criticisms: the lack of consensus regarding definitions, poor reliability and validity of diagnostic tests, questionable eligibility and identification criteria, the absence of special teaching methods used by special educators, and the ineffectiveness of special education programs. According to Rueda (1989) there are three avenues for improvement available to special education: system maintenance, system improvement, and system restructuring. System maintenance focuses on improving compliance with the existing system of regulated practices. System improvement seeks to improve existing practices. System restructuring questions the underlying assumptions of special education and looks to a reconstruction of the general and special education systems as a means of addressing broader social and education issues.

These approaches can also be seen in historical perspective. When bilingual special education was first conceptualized, the existing special education system was perceived to be valid and the underlying assumption that disabilities are physiologically based and located within the individual was not challenged. The emphasis was on extending the opportunity for special education services to language minority students. As it became apparent that existing assessment and intervention practices were inappropriate for CLD students, the emphasis shifted to a system improvement approach. The goal was to reduce misclassification and provide the least restrictive placements possible through improvements in referral, assessment, and placement practices. Bogdan and Kugelmass (1984) identified four basic assumptions of special education that underlie these three approaches to improving special education services:
disability is a condition that individuals have; 1. "disabled" and "typical" are useful and objective distinctions; 2. special education is a coordinated and rationally conceived system of services that helps children identified as "disabled"; and 4. progress in special education is made through improvements in diagnostics, intervention, and technology.

Recently, researchers in both special and bilingual special education have begun to question these assumptions and call for a restructuring of the system. This new critique:

questions whether it is possible to diagnose the mild handicapping conditions (mild mental retardation, speech impairments, learning disabilities, behavioral disorders); whether such conditions actually exist; whether handicapped children learn differently; whether it is possible, a priori, to assess mental needs and then affect an aptitude-treatment interaction; whether there is any need for a special curriculum for special children; whether special skills are needed to teach exceptional pupils; whether it is necessary to continue with the school system within the school system that is special education; and whether it is impossible to "cure" some of these conditions (especially learning disabilities). (Figueroa 1993, p. 2)

The need for a restructuring, or a reconstruction, of bilingual special education has been addressed on several fronts. At the Bilingual Special Education Full-Day Institute held during the 1994 NABE conference, González (1994, p. 20), emphasized that "our current search for the 'panacea', the magic valid and reliable instrument, needs to stop and that we need to begin formulating deeper questions that look at theoretical and philosophical assumptions of assessment models." Cummins (1989) disagrees with the assumption that disabilities are specific to an individual, stating that "the causes of minority students' academic difficulties are to be found in the ways schools have reinforced, both overtly and covertly, the discrimination that certain minority groups have historically experienced in the society at large" (p. 111). Skrtic (1988, p. 444) has also argued that "there is no morally and ethically defensible argument for special education to continue to rely on an exclusively biological/psychological interpretation of 'disability.'" He, therefore, posits that special education should adopt a multidisciplinary and multiparadigmatic reorientation. This argument is based on the position that there are alternate perspectives from which to view special education, each with different implications for children identified as "disabled" and for their families.

**Literature Review**

In the process of questioning the validity of the unconscious assumptions underlying special education and, therefore, bilingual special education, we can begin to examine some of the proposed models that explain minority school failure as other than an inherent disability and suggest ways to improve education for all students. These models are not simply new procedural reforms; they stem from the basic assumption that education does not serve all students equally well, regardless of intent, and that without changes in how educators view themselves, their students, and their students' families and communities, real change will not occur. These models are reinterpretations of the manner in which social and cultural factors influence the education of students.

Cort`s (1986) has developed a complex, dynamic model that attempts to identify the social and cultural variables which influence general school performance, although he does not apply this directly to special education, per se. This contextual interaction model is used to examine the social context in which schools function; this, in turn, is hypothesized to influence several areas of the educational context and process. These are identified by Cort`s as educational input factors, student qualities, and instructional elements. Educational input factors include educational theories and assumptions, teacher and administrative attributes, resources, and policies. Student qualities are composed of students' knowledge, skills, proficiencies, self-image, goals, motivation, physical status, and sociocultural attributes. Lastly, Cort`s considers instructional elements to encompass goals, objectives, assessments, curricula, pedagogy, materials, staff development, and parental
involvement. The factors identified in this model are perceived to be dynamic, interactive, and changing over time. Bogdan and Knoll (1988) also recognize the influence of social and cultural elements on education. They suggest that symbolic interactionism and ecological theory are useful frameworks for examining how definitions of disability are formed and interpreted on both an individual level and within the greater social context. These two frameworks "enable the special education teacher, the therapist, the school administrator, the social worker, or the residential worker to view their job through lenses focusing on the social and cultural elements that define the lives of people with disabilities. This in turn should motivate conscientious practitioners to conceptualize their roles as involving as much advocacy and action for social change as in making efforts to change individual behavior" (Bogdan and Knoll 1988, p. 466).

Sleeter (1986) is concerned that "special education usually is not examined with relationship to social competition for power, wealth, and prestige. Rather, it usually is presented as a school structure instituted solely to benefit students unable to profit from school because of handicapping conditions" (p. 48). She argues that it is necessary to analyze the social contexts that influenced the original creation of special education categories. Sleeter posits that this analysis allows for an understanding of how larger social expectations of children and reward systems influence school reforms that she believes "create" handicapped children. This perception of the social construction of learning disabilities is common to the many theorists that have come to recognize the influence of social and cultural factors on what was once perceived to be a purely physiological phenomena (Bogdan and Knoll 1988; Cummins 1986; Figueroa 1993; Sleeter 1986; Skrtic 1988).

Solutions to this problem of socially constructed academic failure, especially with culturally and linguistically diverse children, have primarily been coached in terms of system restructuring. Culturally compatible education (Tharp 1989, 1994) has been proposed as one solution. Cummins (1986) suggests a theoretical reorientation that implies structural changes. Others (Stainback and Stainback 1984; Skrtic 1988) advocate a complete structural reorganization of education as the only equitable and plausible solution to school reform.

Tharp (1989, 1994) has been concerned with the cultural compatibility of CLD students' teaching/learning socialization patterns with those typically operational in schools. He states that "cultural compatibility is a perspective on educational reform asserting that education is more effective when compatible with the cultural patterns of students" (Tharp 1994, p. 1). These cultural patterns differ along at least four variables—social organization, sociolinguistics, cognition, and motivation. Tharp has attempted to identify how culturally compatible schooling can be realized in multicultural classrooms where there is wide social and cultural diversity. He asks: "is 'cultural compatibility and the multicultural classroom' an oxymoron or an exciting possibility? Can a classroom possibly be compatible with more than one culture?" (Tharp, 1994 p. 6). He has identified four instructional principles that provide an affirmative answer to this quandary (see sidebar).

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Tharp's four instructional principles that characterize cultural compatibility in the multicultural classroom

1. The development of linguistic competence in the language of instruction through functional language use and purposeful conversational interactions should be an instructional metagoal.
2. Schooling should be contextualized at all levels—pedagogical, curricular, and policy.
3. Joint productive activities, shared by teachers and students and with opportunities to converse interactively, should be implemented as a way of creating a common context of school experiences for students of varying backgrounds.
4. Instructional conversation, teacher-student dialogue that helps develop students' abilities to form, exchange, and express ideas interactively through oral and/or written means, should be used as the basic form of teaching.

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Cummins (1986) has proposed a theoretical framework for analyzing the school failure of minority students
and issues within bilingual special education. This framework suggests alterations in the relations between educators/schools and minority students and their communities that would empower culturally and linguistically diverse students and increase academic achievement. He suggests the incorporation of students' language and culture into the school program, the encouragement of community participation in a collaborative manner, a move from transmission-oriented to reciprocal-oriented teaching methods, and a shift in the focus of assessment from legitimization of disabilities to student advocacy.

Stainback and Stainback (1984) propose the merger of regular and special education on the grounds that there are not two distinct types of students who require unique and separate teaching methods and that all students require and should be provided individualized educational programming. Skrtic (1988) also finds that the current organizational structure of education fails to meet the unique educational needs of students. The decoupled nature of education, with a professional bureaucracy functioning under formal machine bureaucratic structures, combines two incompatible organizational structures. This leads to artificial categorization of students into standardized programs that may or may not meet their needs. Skrtic suggests that a problem-solving organizational structure, an "adhocracy," is vital to providing novel solutions to problems as they arise.

The purpose of this brief literature review is to provide a foundation for the needed change in the assumption that disabilities are inherent to individuals and exist in isolation of social, cultural, and environmental contexts. The frameworks described above are in clear opposition to the assumptions underlying traditional special education, as described by Bogdan and Kugelmass (1988). They provide support for new assumptions about students' needs and abilities; imply the need for a system reconstruction, rather than a system maintenance or improvement approach to special education reform; and lay the foundation for the following proposed changes in the process of special education.

PROPOSED CHANGES IN THE PROCESS OF SPECIAL EDUCATION

The above discussion of theoretical frameworks describing the social and cultural contexts influencing education is crucial to our understanding of how bilingual special education must be reconstructed to more adequately address the needs of CLD students. Baca, Escamilla, and Carjuzaa (1994) state that "reforming schools depends on a thorough understanding of the interplay between local community knowledge, as well as an understanding of the social context of the school and the ways in which social class and ethnicity interact with language and culture" (p. 71). With this understanding one can see that changes in the goals and procedures of special education, as well as the roles of all participants, must change during reconstruction. A modification in procedures only will not result in meaningful systemic improvements.

Assessment

The traditional goal of special education assessment has been diagnostic; practitioners felt they needed to know the etiology and diagnostic category of a child's problem to know what type of intervention was appropriate. With the critical examination of the assumption that a disability is intrinsic to the individual, the goal of assessment now becomes advocacy oriented. In this approach, the assumption that the problem lies within the child is reserved as a last possibility, with the immediate assumption being that the manifest problem lies in interactions between the student and the educational context.

Another goal of assessment in the restructuring approach to special education reform is to provide descriptive information about students' strengths that may form the basis for curricular adaptation. Cultural and linguistic differences need to be assessed and detailed as they can provide a foundation for contextualizing content and pedagogy. Students' linguistic abilities need to be described richly so that language use in the classroom is additive and calls upon the student's existing linguistic base. ("Additive" native language use is employed here in Lambert's (1977) sense of the word: building on a child's present skills and cultural background to assist in further learning.) The traditional special education focus on obtaining a diagnosis and detailing students' deficits fails to provide relevant and useful information given the contextualized, interactive, and dynamic teaching environments in our schools.
The shift in the purpose of assessment, from legitimization of a handicapping condition to student advocacy and from diagnosis to description, implies procedural changes. No longer is the authority of a standardized test battery, administered in a formal testing situation by an unfamiliar examiner, accepted as valid. Rather, curricular adaptations by the classroom teacher, in consultation with peers or colleagues, is the first step in student assistance and assessment. This process of "prereferral intervention" assumes that the child is able to learn in the general classroom and that modifications to the regular program, with varying levels of support, will offer the student an effective and enriching educational program. Information regarding the results of these curricular modifications is applicable to any post-referral special education assessments and, therefore, should be well documented. In this sense, curricular adaptation is an important form of diagnostic teaching, as well as a critical element in the assessment process.

According to Collier (1994), "a key element of prereferral intervention is the implementation of curricular interventions, prior to formal referral for staffing, which attempt to modify the instructional environment so that the student is able to function more effectively" (p. 5). To determine which modifications should be attempted, collaboration with other teachers, specialists, and the child's family is crucial. During this collaboration, the teacher begins gathering information about the student's background, prior responses to the school and classroom, and language abilities in an attempt to determine any sociocultural, learning, or behavioral needs. Information regarding the following sociocultural factors should be obtained: cultural, linguistic, and experiential background; level of acculturation; sociolinguistic development; and cognitive learning styles (Collier 1994). Based on this information, the teacher should attempt to provide appropriate intervention through modification of the student's school experience. Modifications may include "curriculum and instructional modifications, placement review/change, behavior management procedures, tutoring, counseling, crises intervention, and parental training" (Wood, Lazzari, Davis, Sugai, and Carter 1990, p. 50-51).

Curricular modifications are those changes made in the curricular elements of content, pedagogy, classroom instructional setting, or student behaviors in order to meet the needs of individual students (Hoover and Collier 1994). Curriculum based assessment using criterion-referenced, informal, and teacher-made devices are useful at this point for identifying students' instructional needs. As teachers begin to adapt any one element of the curriculum, others are necessarily affected. Therefore, careful observation and documentation of the results and process of curricular adaptations are necessary. Adaptation of content can include such modifications as the provision of native language instruction and/or materials, contextualization of the subject matter, and inclusion of prior student experiences for increased relevancy. Instructional strategies may include peer-tutoring, cooperative learning, reciprocal instruction, and instructional conversations, to name a few. Instructional settings can vary between whole group, small group, and individualized instruction. Clearly, the choice of instructional strategies will influence to some extent the range of instructional settings possible, and visa versa. Student behaviors can be influenced by all of the prior curricular elements, as well as by specific behavior management strategies which take into account each individual's unique background and needs.

According to Wilson and Silverman (1991) interactions with colleagues are important in influencing teachers' belief systems regarding the reasons for poor student achievement. Therefore, collaboration in a supportive environment may help facilitate the shift from the assumption of the inherent nature of disabilities to a more preventative attitude that assumes the influence of factors outside of the student. This shift in assumptions regarding disabilities is crucial to the success of special education reconstruction and may be fostered via effective use of prereferral interventions.

When formal assessment is identified as necessary, a variety of information must be gathered. This should include a review of existing records, the results of prereferral interventions and curricular adaptations, work samples, formal and informal assessments, and observations. No one individual's observations or evaluation interpretations should have precedence; as with prereferral intervention, this process too necessitates a collaborative effort.
Traditional, standardized diagnostic testing with CLD students, if undertaken at all, must be approached with particular concern for the undeniable lack of appropriateness of the psychometric criteria of these tests, given CLD students' background and experiences. This can affect the reliability of the tests and the validity of their interpretation. The normative population, even if the test is normed for non-English speakers, may be inappropriate for bilingual students within the United States or in particular regions (Langdon 1992). Examiners' race (Norris, Ju rez, and Perkins 1989) and familiarity (Fuchs and Fuchs 1989; Fuchs, Fuchs, Dailey, and Power 1985) have been found to have an effect on children's performance on standardized tests. The American Psychological Association (1991) cautioned that individuals administering standardized tests must be aware of the reference population of any given test and the limitations of using these tests with other populations. Therefore, the use of multiple measures, including informal and descriptive assessments, analytic teaching, interviews and observations, and cautious interpretation of formal test results is imperative.

These procedural changes necessitate modifications in roles for all concerned. In the traditional special education program, the classroom teacher was responsible for teaching "normal" students and for referring to special education those that might have a disability. Once a child was identified, then that student became the responsibility of special education. Now, the classroom teacher is being asked to function in collaboration with special education and retain shared ownership of the prereferral process (Graden 1989). The special educator is being asked to function as a consultant, rather than solely as a diagnostician, in an interactive and ongoing problem solving capacity. The responsibility for evaluations is no longer solely that of one individual or the special education department. All participants are seen as providing necessary information relevant to the assessment process and the classroom teacher becomes an integral part of the evaluation team. The student's primary caretakers are being asked to become fellow collaborators and team-members. There becomes a blurring of the roles and responsibilities of all concerned.

**Intervention**

During reconstruction, what becomes the goal of intervention? Instead of asking students to conform to the classroom, we are asking the classroom to conform to the needs of all students. The goal is inclusion. We are also raising our expectations of students previously identified as "disabled." If labeling focuses on students' perceived weaknesses and tends to lower teachers' expectations (Haring, Lovett, Haney, Algozzine, Smith, and Clark 1992), then shifting to a sociocultural perspective should assist us in focusing on students' strengths and raising our expectations for academic achievement. Therefore, another important goal is the increased academic performance of CLD students. Finally, with the involvement of the teacher in assessment and the use of curricular adaptations as part of the prereferral intervention process, intervention changes from a remedial approach to a diagnostic teaching model.

These three new goals cannot be achieved without significant changes in how special education is "done." Even with adoption of the prereferral model, there exists for many the assumption that if the student still demonstrates problems after prereferral intervention and is formally evaluated with the results indicating the need for special education services, then the old special education system kicks in, either in the form of pullout programs or in-class tutoring. That, however, is inconsistent with the premises under which the new goals of special education are being developed.

The process of special education intervention, after formal assessment, should look just like the curricular adaptation process performed during prereferral intervention. The only difference is the increase in the allotment of resources. Whereas during prereferral intervention, teacher support might be provided by a fellow teacher, with occasional consultation with a specialist, once a student is identified as needing additional support, the special education personnel are involved in the curricular adaptation process on a regular basis. The goal of inclusion implies that students, with or without disabilities, remain in the regular classroom. Special educators must function as consultants, proposing, developing, and demonstrating curricular modifications and suggesting and providing extra teaching materials as needed. As during the prereferral intervention process, these modifications involve content, pedagogy, and classroom settings. They
can include such things as developing modified lesson plans to allow identified students to more fully participate in classroom activities, providing enrichment activities, such as cooperative learning situations, peer-peer interactions, native language and English as a second language (ESL) instruction, and parent/community involvement.

Language development, both oral and written, as suggested by Tharp (1994) must be foremost in any intervention efforts and must carry through all parts of the curriculum. Pedagogical style should change from the transmission-oriented model, with the teacher controlling and directing interactions to impart skills and knowledge to students, to an interactive or experiential model. This model encourages students "to assume greater control over setting their own learning goals and to collaborate actively with each other in achieving these goals" (Cummins 1989, p. 115). Students' unique linguistic, cultural, and experiential backgrounds must be integrated into a contextualized educational setting. Parental and community involvement must be encouraged in a real and functional manner. Parents should have the opportunity to engage in ongoing dialogue with the teacher and other school employees regarding the manner in which their child is being educated.

Three Primary Goals in the Restructuring of Bilingual Special Education

1. **Inclusion**: Instead of asking students to conform to the classroom, we should ask the classroom to conform to the needs of all students.

2. **Increased academic performance**: Efforts should be made to increase the academic performance of culturally and lingistically diverse special education students.

3. **Diagnostic Teaching**: Teachers should be actively involved throughout the assessment process. Curricular adaptations based on assessments should be made as part of the prereferral intervention process. The intervention paradigm should shift from a remedial approach to a diagnostic teaching model.

The role changes for teachers, special educators, and parents have already been discussed with regard to assessment. With a different focus for special education intervention, the participants' roles change even more. Regular classroom educators, even after a student has been identified as requiring special education services, will be asked to remain the primary teacher responsible for the student. As parents also become involved in the intervention part of teaching, they can assume many additional roles, both in and out of school. Without continuity of goals and interactional techniques, there will be little or no carry-over of improvements from the school to daily, functional settings. Parents and other primary caretakers are crucial to this transfer of knowledge. Changes in intervention also imply changes in roles for students. As they cease to be passive recipients of knowledge, they must take increased responsibility for their education through active participation in the collaborative decision making process and academic activities.

**SUCCESSFUL MODELS**

There are a few model programs around the country implementing elements of special education reform. The Pennsylvania Instructional Support Team (IST) program, which was mandated by state regulations, was initiated in July 1990, and is being phased in over a five-year period. The goal of this program is to assist students in achieving greater academic success within the regular school program by modifying teaching strategies. The regular classroom teacher is assisted in making positive changes within the classroom through the use of ISTs, which include, at the least, the building principal, the referring teacher, and an Instructional Support Teacher. Parents, other teachers, counselors, and other specialists may also participate as team members. This model emphasizes collaboration, joint planning, and training at a local level. Special training for principals and Instructional Support Teachers is provided by the Bureau of Special Education of the Pennsylvania Department of Education. They report that a 40 percent reduction in special education placements was achieved during the initial implementation of this program (Pennsylvania Department of Education 1993).
Successful Bilingual Special Education Program Models

The Instructional Support Team model of the Pennsylvania State Department of Education and the Exito assessment program for culturally diverse students in Monterey County in Northern California are exemplars of successful prereferral intervention programs.

The Assessment and Intervention Model for Bilingual Exceptional Students (AIM for the BEST) recommends district-wide training that focuses on prereferral intervention and was designed through the University of Texas at Austin's Innovative Approaches to Research Project to reduce inappropriate referrals to special education and improve retention and drop-out rates.

The Optimal Learning Environment (OLE) program is an excellent example of a classroom-based intervention program for CLD students based on improved teaching techniques that are contextualized and emphasize biliteracy.

The BUENO Center for Multicultural Education at the University of Colorado at Boulder developed the Trainer of Trainers model that prepares and empowers chosen teams of school district personnel and works with those individuals who will be providing training at the level of the school district in an effort to increase widespread involvement in special education reform.

The Exito program was developed in response to the needs of the Special Education Local Plan Area (SELPA) of Monterey County, California. The goals of the Exito program are:

- to refine school district policies and procedures regarding special education referrals of CLD students;
- to develop a student needs-based assessment environment; and
- to empower referral and assessment team members with the skills needed to make clinical judgments regarding the needs of CLD students (Clark 1994).

This program utilizes a formal system of training for regular and special education staff during a yearlong series of eight training sessions. During the training, the participants are introduced to:

1. cultural differences and second language acquisition theory;
2. prereferral intervention, emphasizing portfolio data collection, structured classroom observations, curricular interventions and modifications, and evaluation of student/teacher interactions; and
3. special education assessment, including reliability and validity of standardized tests, informal assessment techniques, the use of interpreters and translators, and the development of clinical judgement and team dynamics.

The emphasis on intensive educator training with follow-up assistance is a critical component of this model and is considered by Clark (1994) to be essential to the program's success.

The Assessment and Intervention Model for Bilingual Exceptional Students (AIM for the BEST) also emphasizes prereferral intervention and recognizes the importance of teacher training in the effective implementation of this strategy (Ortiz and Rivera 1990). This model is divided into six steps:

- implementation of instructional strategies that are known by the classroom teacher to be effective with CLD students;
- use of significantly different teaching strategies by the teacher in an attempt to resolve difficulties experienced by students;
- request by the teacher for assistance from a problem-solving school-based team;
Those instructional techniques suggested in AIM for the BESt include reciprocal, holistic, and interactionist teaching, rather than transmission and reductionist approaches; strategies that recognize and value students' language background, experiences, and interests; and strategies that encourage students' active participation in the learning process. Shared Literature and the Graves Writing Workshop were used in the pilot project as examples of effective teaching strategies. The results during the initial two years of the project indicated that the Student and Teacher Assistance Teams were effective in resolving problems without the need for a special education referral; 73 percent of the requests for assistance were resolved without special education placement.

The Optimal Learning Environment (OLE) Curriculum was developed in 1992 as a model for bilingual Resource Specialist Program (RSP) classrooms in California in response to the results of the Optimal Learning Environment Research Project. This project was funded by the California Department of Education and was designed to identify the prevailing instructional paradigm in the California Resource Specialist Program. It was determined that the reductionist paradigm, which breaks instruction into incremental, sequential pieces and teaches these components in repetitive drills, prevailed in most classrooms. The OLE curriculum emphasizes holistic teaching strategies and biliteracy. The instructional principles that guide the OLE curriculum are:

1. awareness of students' sociocultural background and what effect it may have on native and second language acquisition, both oral and written;
2. awareness of possible learning disabilities and their effects on language development;
3. the developmental process of literacy acquisition;
4. a meaningful context for curriculum and a clear and authentic communicative purpose;
5. the integration of students' personal experiences into the curriculum;
6. the incorporation of children's literature into lessons;
7. active parental involvement in instruction;
8. experience with whole texts during lessons; and
9. the incorporation of collaborative learning activities, when possible (Ruiz 1989).

During the first two years of this program, the students began to identify their strengths as competent readers and writers, their teachers began to define learning disabilities as socially constructed, and the teaching techniques and assessment strategies used began to change. Figueroa and Ruiz (1994) reported that the students in the experimental OLE classroom averaged a gain of one year in reading, in comparison to the average RSP student who scored at or below the second percentile. The BUENO Center at the University of Colorado at Boulder has implemented a Trainer of Trainers model program for the past seven years. This program includes a series of seven published training modules for multicultural and exceptional student education that school inservice personnel and higher education faculty can use to structure and implement their training of special and regular educators. These modules have been revised and are now in their third edition. They cover the following topics: cultural pluralism and exceptionality; second language acquisition, communication, and learning; multicultural assessment-implications for regular and special education; collaboration in the mainstream; classroom management and curriculum development; cognitive learning styles and strategies; and adapting instruction for diverse learners. The BUENO Center also presents a yearly module institute during which educators and trainers are exposed to the use of the modules and learn about new models in special education for CLD exceptional students. Follow-up, site-based training by BUENO Center trainers is provided in collaboration with individuals from selected school districts. The Trainer of Trainers and Module program was designed as a way of effecting greater participation of education reform at the local level.
Recommendations
In this guide, we have proposed a model for special education reconstruction. However, these changes will not be realized without the adoption of new assumptions, systemic modification of the process of special education, and renewed comprehensive personnel preparation. New assumptions lead to the questioning of the validity of student classification based on diagnostic categories and the compartmentalization of professional domains. These new assumptions lead to new goals, procedural reforms, and new roles for all participants. Education, as perceived of in this model, is lifelong and not restricted to the school setting. Therefore, we must use this vision as a basis for educating teachers, administrators, specialists, parents, and community members in the rationale and process of special education reconstruction. Without this final step, reconstruction cannot occur. Changes must take place at all levels. Individuals must begin to question their belief systems and education practices. Individual schools and districts must begin to alter policies and procedures related to CLD and exceptional students. Teacher education programs, from preservice to inservice, must also address these issues in a comprehensive and critical manner.

Clearly, there remain some individuals who could be educated in an inclusive classroom setting only with the greatest of effort and with questionable results. These few students whose needs cannot be provided for in a school setting or whose emotional or behavioral disturbances make them a threat to themselves or to others may be inappropriate participants in an inclusive classroom setting. The special education model that we have proposed is designed for the majority of students receiving special education services, especially those with moderate needs.

New Assumptions
In the introduction of this program information guide, the unconscious assumptions of special education were presented. With the change from the old model of disability to the sociocultural framework underlying special education reconstruction, new assumptions need to be established.

If we question the assumption that a disability is a condition that individuals have and replace it with the assumption that all students can learn, then what remaining use do we have for diagnostic classification? The special education model proposed in this guide is needs-based and does not assume the existence of a disability, only the need for additional assistance to improve academic performance. When resources are allocated according to demonstrated needs, diagnostic classification becomes less meaningful. The physiological reality of many disorders has not been demonstrated. Therefore, the provision of extra services based on questionable diagnostic criteria seems far less than equitable and highly inferior to a needs-based approach.

With changing assumptions we need to begin to question the compartmentalization of education into discrete components: regular education, special education, bilingual special education, and so on. If we begin to blend the roles and responsibilities of the professionals involved and suggest inclusive environments for all students, then what is the rationale for maintaining separate education systems? How does this compartmentalization support the growth of all students? Those involved in special education reconstruction must begin to explore how differences in assumptions, goals, procedures, and roles affect the boundaries of professions that have fought hard to develop and maintain their separate identities. This is an issue that must be taken up on a national level by professional organizations, such as the Council for Exceptional Children, District 16 of the American Psychological Association, the National Association of School Psychologists, the American Speech-Language-Hearing Association, and the National Association for Bilingual Education.

Assumptions About Special Education and the Special Education Student Must Be Reconsidered
The following conscious assumptions about special education and the students it serves will provide a more
useful and equitable foundation for the changing bilingual special education interface:

1. All children can learn.
2. Early intervention in the student's native language can prevent disabilities.
3. Native language and culture are strengths to be built upon.
4. Students who are not succeeding in school need a gifted, rather than a remedial curriculum.
5. Students who are differently abled and/or culturally and linguistically diverse should be educated in inclusive environments.

(Baca 1993)

NEW GOALS, PROCEDURES, AND ROLES
In this publication, we have described a special education model that requires changes in assessment and intervention at the levels of goals, procedures, and participant roles. We have proposed a shift in the goal of assessment to student advocacy and rich description of students' strengths. Focusing on advocacy and description implies the need to broaden the context of assessment to include curricular modifications performed in the regular classroom prior to referral, multiple informal assessment measures, and input from a variety of sources, including students' family members. These procedural reforms necessitate a change in roles for participants. General educators will need to function in collaboration with special educators as an integral part of the assessment process. Special educators will need to become problem-solvers and consultants, rather than perceiving themselves primarily as diagnosticians. Parents will also need to become active participants in assessment.

We have identified three new goals for the intervention, or post special education assessment portion of student assistance: inclusion, increased academic performance, and diagnostic teaching. To achieve these, we have proposed that post-assessment intervention look very similar to prereferral intervention, except with the addition of increased resources and support from special education personnel on a regular basis. Curricular modifications, including the use of enrichment, rather than remedial activities, and an interactive and experiential pedagogical model, were recommended. Focus on language development and parental involvement were identified as key to the success of special education reform. These changes will require additional role changes, with teachers maintaining responsibility for students identified as requiring special education assistance, special educators expanding their roles as collaborators and consultants, and parents becoming involved to a greater extent in the education of their children both outside and within the school setting. During intervention, students will also need to be actively involved in setting goals and choosing instructional activities.

RECOMMENDATIONS FOR PERSONNEL PREPARATION
Comprehensive training in the principles and processes of sensitive and appropriate education of CLD students is imperative for the success of special education reform. This needs to take place at all levels of teacher preparation, from preservice to continuing inservice education. Institutions of higher education (IHEs) must incorporate education principles that recognize the need for schooling that is responsive to cultural and linguistic diversity and to differences in learning styles and abilities. These principles must be demonstrated not only in terms of course offerings and expected outcomes of professional education, but also in their interactions with the education community at large and their recruitment of minority students and faculty. They must take an active role in providing inservice training to those who have already entered the field. Faculty should demand that all graduates demonstrate competency in establishing effective instructional environments for diverse individuals in multicultural settings; challenge students to examine their attitudes, values and beliefs; sponsor research in the educational issues of diverse populations; and actively work to influence state and federal policies affecting culturally and linguistically diverse exceptional students. As inclusion becomes a growing requirement of school districts and the percentage of CLD students continually increases, instruction in adapting instructional materials to meet individual needs and skills for working with
CLD and exceptional students should be included in the core curriculum for all education and credential students. Special educators are being asked to function increasingly in collaborative or consultative positions. They need to receive explicit training in school-based consultation, just as general educators need to receive training to develop collaborative skills. As demonstrated by the BUENO Center Trainer of Trainers program, IHEs can have a larger role in effecting school reform than simply conducting research and providing teacher education. They can also serve as powerful agents of reform.

Curricular Modifications and Role Changes Are Integral to the Reconstruction of the Bilingual Special Education Interface

To achieve the primary goals of inclusion, increased academic performance, and diagnostic teaching for bilingual special education students, the following changes in curriculum and the roles of key stakeholders in the education of bilingual special education students must occur.

Curricular Modifications

1. The curriculum should emphasize enrichment rather than remedial activities.
2. Interactive and experiential pedagogical models should be adopted.
3. Language development must be emphasized across the curriculum.
4. Educators should actively seek to increase parental involvement in the education process.

Role Changes for Key Stakeholders

1. Teachers should maintain responsibility for students identified as requiring special education assistance.
2. Special educators must expand their role to become collaborators and consultants.
3. Parents should be involved to a greater extent in the education of their children, both outside and within the school setting.
4. During intervention, students should be actively involved in setting goals and choosing instructional activities.

CONCLUSION In this program information guide we have explored the changing assumptions behind special education, discussed current theoretical frameworks that examine minority school failure, and suggested methods for ameliorating the situation. We have proposed a model of bilingual special education, including goals, procedures, and roles, that incorporates these new assumptions and frameworks. Several model programs implementing elements of reform were described and recommendations regarding needed changes in teacher education and preparation were made.

The changing assumptions about students' abilities and needs that we have proposed imply changes in the structure of bilingual special education and its relation to general education and special education. Additionally, how educators, parents, and students view themselves and their roles in the education process must change as well. Educators cannot remain the only experts on what children need and how best to provide instruction. All educators must learn to work in a collaborative manner that emphasizes problem solving and human empowerment. Parents must become active participants in their children's education; they must move from being passive observers to becoming educational partners. Students must become active discoverers of knowledge, not just passive recipients. Changes that are as profound as these do not occur overnight or without struggle. However, bilingual special education has come a long way since its
inception in 1973 and many authors have been arguing that the time is ripe for change now. Our students and our society deserve no less than our concerted efforts to make school reform a reality.

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The National Clearinghouse for Bilingual Education (NCBE) is funded by the U.S. Department of Education's Office of Bilingual Education and Minority Languages Affairs (OBEMLA) and is operated under contract No. T292008001 by The George Washington University, School of Education and Human Development, Center for Policy Studies. The contents of this publication do not necessarily reflect the views or policies of the Department of Education, nor does the mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government. This material is located in the public domain and is freely reproducible. NCBE requests that proper credit be given in the event of reproduction.

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