Abstract: The purpose of this paper is to trace the historical trajectory of special education and how societal perspectives influenced the special education movement. It aims to answer if special education and inclusion have achieved their goals for all individuals, especially those with disabilities. A review of historical trends, special education laws, and key constructs showed that there were both positive and negative aspects. It also revealed that the absence of a clear definition, standards, and objectives for inclusion and least restrictive environment is just one of the roots of the problem. Moreover, the lack of empirical studies on the effectiveness of inclusion and the lack of knowledge and awareness of the provisions of special education laws by stakeholders contribute to the issues surrounding inclusion implementation. Recommendations include that all stakeholders should have historical awareness and discriminative ability, in-depth comprehension of special education laws, and adapting the same definition, standards and clear objectives in implementing inclusion programs.

Keywords: inclusion; special education; least restrictive environment

1. Introduction

Juxtaposing inclusion and special education often generates diverse perspectives from various stakeholders, such as policymakers who construct legislation and policies, teachers in the classrooms implementing them, or parents, whose children are in the middle of the issue. In this paper, we attempted to explore how inclusion and special education are two entities that are deeply interwoven through their historical perspectives and evolutionary trajectory. Since inclusion and special education is a broad topic and policies and education systems vary across the globe, we decided to focus on the context of the United States for this paper.

Let us define the two terms first: special education and inclusion. The Individuals with Disabilities Education Act defined special education as instruction that is designed specifically to respond to the learning needs of an individual with disabilities regardless of environment, whether in a classroom, home, or hospital [1]. The legislation also emphasized that this special instruction should be at no cost to the parents of the child. Special education is ‘special’ because it has a distinct place in the education of not only individuals with disabilities but also diverse learners, including those who are at risk. Special education is composed of a range of teaching practices specifically designed for the needs of individuals with disabilities, who have special learning needs, that are implemented by well-trained special education teachers and not normally seen or used by untrained teachers in a regular classroom [2].

The National Center in Educational Restructuring and Inclusion (NCERI) in their National Study of Inclusive Education defined inclusion as “providing to all students, including those with severe disabilities, equitable opportunities to receive effective educational services, with supplementary aids and support services as needed, in age-appropriate general education classes in their neighborhood schools, toward the outcome of preparing all students for productive lives as full members of the
society” [3]. Globally, the term ‘inclusion’ was used in the special education context for the first time in the Salamanca Statement in 1994, wherein it was explicitly stated that the integration of children with disabilities could be possible through inclusive schools [4]. Lipsky and Gartner [5] argued that inclusion is not just another reform of the existing special education system to make it effective. Instead it is a response to the need for educating a diverse group of learners and for providing them with similar opportunities and quality education as their mainstream peers.

The purpose of this paper is to trace the historical trajectory of special education and how societal perspectives influenced the special education movement. Retracing this trajectory would allow us to understand how special education evolved from institutionalization to inclusion. As the special education field strives to move forward, it is essential that stakeholders have an in-depth knowledge and understanding of the historical perspectives on which it is built. A number of people presented the argument that contemporary practice is better as we move towards inclusion and is guided by social justice and equity, unlike in the past, where treatment of individuals with disabilities was viewed as oppressive, inhumane, and unjust [6]. However, history may be considered contextual and framed through the eyes of those in power. Thus, a traditional look at history may unintentionally produce marginalization and injustice to people with disabilities [7]. Through the years, the history of special education has often been ignored, manipulated, and taken out of context to justify philosophies and practices [6]. Mostert and Crockett [8] argued that stakeholders who have more knowledge about the history of special education, especially effective interventions were more prepared in managing and teaching individuals with disabilities than those who had no knowledge at all. We cannot deny that history has ultimately shaped and influenced the contemporary philosophies and approaches that special education teachers practice today [6]. Many of the early perspectives and practice still have an influence on contemporary special education policies and practice [8]. Ultimately, we ask the question, if the goal of education is to generate knowledge for the betterment and welfare of individuals, has it achieved its objectives for persons with disabilities? Moreover, is inclusion aligned to these goals of education and is it for the interest of all individuals, whether with disability or not?

2. Historical Perspectives on Reform Movements in Special Education

Ideologies are always heavily influenced by the historical events that produce them. Thus, these ideologies and events must be analyzed and understood in their relation to each other [9]. In this paper, we trace the trajectory of special education by dividing the periods into sections according to how individuals with disabilities were generally placed in schools.

We start with institutionalization, wherein there were specialized institutions for individuals with disabilities in which they lived and learned together with those who had similar learning needs. However, institutionalization also resulted in isolation, separating individuals with disabilities from the rest of the society. From isolation the trend shifted to ‘segregated integration’, wherein special classes were established in the same school buildings as regular classes. Accordingly, individuals with disabilities are integrated in the regular school system, but still had separate classes. From there, the trend shifted to normalization and mainstreaming and finally, inclusion.

The early perspectives and ideologies that governed special education in the United States in the early 1800s was highly influenced by what was happening in Europe [10]. The trend at that time was institutionalization wherein specialized institutions were erected to serve individuals with disabilities. Previously, disability had been equated with dependency and, thus, these institutions were built to educate individuals with disabilities toward becoming more independent. Moreover, special education during this period was seen as philanthropic and beneficent with religious groups taking the responsibility for teaching individuals with disabilities, thus, following a charity model of disability [6].

The advent of public education in 1837, with the goal of “Americanization” of students, was led by prominent figures such as Henry Barnard and Horace Mann. However, the curriculum in institutions that housed individuals with disabilities was differentiated from that of “normal” public schools [10].
As education was a responsibility of the state, compulsory education laws were passed by individual states; however, despite these laws, individuals with disabilities were not included in public school classrooms [11]. The first state to enact a compulsory attendance law in education was Massachusetts in 1852, which was followed by Vermont in 1867 [11,12]. In the 1890s, there were several court cases that gave the schools the rights to exclude individuals who were deemed to be different or weaker (i.e., with disabilities) from public school citing reasons such as it was disruptive for the majority or not beneficial to the general public at all despite the compulsory laws [10–12]. For example, the Cuyahoga County Court of Appeals in Ohio in 1934 and the Illinois Supreme Court in 1969 both ruled that the state statute of compulsory attendance did not apply to students with disabilities [12].

The trend shifted from isolation to integration in the early 1900s as society’s perceptions of disability changed. The first White House Conference on Children occurred in 1910, which signified a shift in how the society perceived children with disabilities [11]. Individuals with disabilities were transferred to special classes with a smaller teacher-to-student ratio, which allowed for individualized instruction and was seen to be more beneficial to individuals with disabilities [10]. The 1930s coincided with The Great Depression and the economic decline of support for the education of individuals with disabilities [11]. During this period, disability was linked to genetics and, thus, individuals with disabilities were viewed as not able to improve even through special education [10]. It also coincided with the rise of the medical model of disability, wherein people perceived disability as something that should be treated or cured. The rise of eugenic philosophy brought the idea that individuals with disabilities should be separate from “normal” people and should not be allowed to propagate [10]. Thus, institutions served as a way to isolate individuals with disabilities from the rest of the society [13].

The advent of assessment tools and diagnoses also paved the way to labeling, which could be viewed as two faceted. Labeling enabled schools to differentiate among students and to determine which students had different needs. In the 1920s, separate schools and classes were allotted for individuals with disabilities to enable teachers to conduct individualized instruction with a lower student-to-teacher ratio [10,13]. However, in the 1930s to 1940s, the support for special education declined and labeling lead to stigmatization and social segregation [10]. It also resulted in a watered-down curriculum and inadequate resources for special education classrooms [10,13]. Subsequently, parents and educators started to form groups to advocate for the educational rights of their children with disabilities, the first of which is the Cuyahoga County Ohio Council for the Retarded Child in 1933. This marked the earliest stages of a grass movement led mostly by parents of institutionalized children with disabilities. In the decade that followed, more than 10 other organizations were established across the country [12].

In 1948, three years after the end of World War II and during the Cold War, the United Nations adopted the Universal Declaration of Human Rights, which stated that the fundamental human rights of all people should be protected universally [14]. Article 26 of the Convention specifically states the rights to free education in the fundamental years (i.e., basic education) and that parents have a right to choose the type of education they want for their children. This laid the foundation for the provision of free public education and emphasized parental involvement in decision making on the type of education their child receives.

During the 1950s to 1960s there was an increase in the government and federal support of special education, mainly due to parents and special interests group movements [13]. A number of states enacted laws allowing individuals with disabilities to be educated together with “normal” students [11]. The landmark court case Brown vs. The Board of Education in 1954 paved the way for legislation in support of individuals with disabilities [11,13]. People began to consider that segregation denied equal opportunity for those with disabilities and that individuals with disabilities had the same rights as their peers in public schools [11]. The advent of the Civil Rights Movement in the 1960s also paved the way to shifting the trend from integration to mainstreaming [10–13].

In 1958, the Expansion of Teaching in the Education of Mentally Retarded Children Act was passed, signifying the first federal involvement in the field of special education since, previously, all laws were state laws [11]. In the following years, several laws were enacted to provide additional funds for the
education of individuals with disabilities, among them the Civil Rights Act of 1964, specifically Title VI of the said law, which was eventually replaced by the Education for the Handicapped Act (EHA) in 1970 and became the precedent for succeeding laws [11].

In 1968 came the rise of Applied Behavior Analysis (ABA), a scientific approach to understanding behavior. ABA refers to a set of principles that focus on how behaviors change, or are affected by the environment, as well as how learning takes place. This was a significant moment in teaching individuals with disabilities as it showed an alternative way of looking at maladaptive behaviors and severe behavior problems [15]. Moreover, it helped in advancing the understanding of the nature of behavior and how behavior could be changed [16]. Lovaas’ work with children with autism showed that these children can be integrated in community life and even general education classrooms if given the appropriate intervention [17].

Some of the distinct features of ABA such as modifying social behavior, quantifying behavior, applying a systemic way of analyzing behavior, and using specialized techniques to change behavior have changed how behavior is perceived and assessed [18]. These principles are often reflected in the IEPs of the students.

Bengt Nirje first wrote about the principle of normalization in 1969, which eventually had a major influence in how society viewed and developed programs for individuals with disabilities [19]. The principle of normalization is based on the philosophy that the gap between an individual with disabilities and the rest of society is affected by one’s disability and varies from one person to another, hence, the gap must be bridged to enable the individual with disabilities to participate in society [20]. Nirje argued that “normal” lives have patterns and rhythms and it is only right that society should make available to individuals with disabilities the same as or as close as possible to the ways of life of the majority of society [20]. However, since Nirje used the term “normalization”, there were a lot of misconceptions on the principle. Thus, Perrin and Nirje in 1985 wrote a paper to address certain misconceptions about the principle clarifying that normalization is not forcing individuals with disabilities to be “normal” and the removal of special services, instead it is based on humanistic and egalitarian values recognizing the freedom of choice and diversity. Wolfensberger also wrote on the principle of normalization and was responsible for the spread of the concept in the United States [21]. However, as Perrin and Nirje pointed out, Wolfensberger’s concept of normalization is different from how Nirje originally conceptualize it [19]. Wolfensberger detailed how his concept of normalization is different from that of Nirje in a paper he wrote for a conference in Ottawa in 1994. One of which is that Nirje’s and even Bank-Mikkelsen’s concept of normalization is mainly for those with mental retardation or in Nirje’s case others with disabilities, while Wolfensberger believed that normalization can be applied to all conditions that are different from the norm of society, including devalued roles, appearances and capabilities [22]. Another difference is that, for Wolfensberger, since we are dealing with human beings, the ends and the means are intertwined and there are certain means that are preferred over others [22]. There are some principles of Wolfensberger’s ideas such as community presence, social integration and valued participation that are important elements of inclusion [21].

In the 1970s, schools adopted a more humanistic approach and normalization ideologies came to dominate [10]. In 1972, two landmark court cases on the exclusion of individuals with disabilities in schools occurred [11]. The two cases were the Pennsylvania Association for Retarded Citizens (PARC) v. Pennsylvania in Pennsylvania and the Mills v. the Board of Education in the District of Columbia [11]. The PARC case was resolved by allowing all children with mental retardation ages 6 to 21 to be educated in a program similar to regular students and provided free public education [12]. While the Mill case resulted to a mandate that required the Board of Education to provide free public education to all children with disabilities and a right to due process safeguards [11,12]. In 1973, the Rehabilitation Act was passed, in which Section 504 explicitly declared the civil rights of individuals with disabilities and prohibited discrimination [11]. The landmark court cases concerning individuals with disabilities resulted in the enactment of the Public Law 94-142, the Education for All Handicapped Children Act (EAHCA) in November 1975, which stated that all children had the right to free appropriate public
education (FAPE) in the least restrictive environment (LRE) [13]. This was perhaps one of the most significant events in special education history in the United States [8].

In 1990, the EAHCA was amended and renamed as the Individuals with Disabilities Education Act (IDEA) [11]. During this year, the Americans with Disabilities Act (ADA) was also enacted. The enactment of the ADA came with the rise of the social model or the “minority group” paradigm, which perceives disability as a product of a disabling environment [23]. Thus, proponents of this view pushed for reforms and changes in the physical environment of schools and other institutions. To accommodate those in wheelchairs, ramps were installed in buildings, and hallways and doorways were widened. Elevators were added in multiple-level structures and sign language interpreters were hired when needed. However, these changes were also relative to the localities and how strong the advocacy for access for people with disabilities was. Another challenge was that this provision also affected the National Historic Preservation Act (NHPA) of 1966, which aimed to preserve certain historical sites and structures [24]. Implementing the ADA would mean disregarding the NHPA. Again, this leaves the question, what does society value more: equity and accessibility for individuals with disabilities or preservation of culture and history? Do we compromise inclusion for the educational historical value or is it the other way around?

As the 20th century began, amendments to existing public laws concerning special education were drafted and enacted. One of which and the most important is the reauthorization of the EAHCA, which was renamed as the Individuals with Disabilities Education Act, Public Law 101-476 (1990) and its amendment Public Law No. 105-17 (1997). It was amended and reauthorized in 2004 as Individuals with Disabilities Education Improvement Act, Public Law No. 108-446 [11,12]. The provisions followed those of the Education for all Handicapped Children Act in November 1975 with students having rights to FAPE in the LRE. Some of the new provisions were additional monitoring steps, such as regular reports from schools and districts, changes in the multidisciplinary team working with individuals with disabilities and involving the parents more in the decision-making process. The amendments were made to ensure that contemporary practices were aligned with social justice, equality, and recognition of disability rights.

In 2006, the United Nations adopted the Convention on the Rights of Persons with Disabilities reflecting a shift in how the world view individuals with disabilities as persons with rights and fundamental freedom [25]. As the shift in paradigm occurred, contemporary special education practices came to be influenced by perspectives of social justice, human rights, and education equity. Special education is often seen as a way to provide equity for individuals with disabilities; however, it may seem that the current way special education is structured does not pave the way to that equity [26]. There are so many layers in the intersectionality of special education and inclusion, such as race, gender, and socio-economic background. Additional categories of recognized disabilities in IDEA brought issues of segregation and overrepresentation of students of color in special education, highlighting how race, socio-economic status, and language diversity are layers in the intersectionality of inclusion and special education practice [27].

2.1. Development and Refinement of Special Education Laws

Through the years, the laws pertaining to special education had evolved from simply recognizing the equal rights of persons with disabilities to being more specific regarding the learning needs of students with special needs. The laws are amended and reauthorized through the years as Congress considers recommendations and results from various studies and reports of stakeholders for the improvement and relevance of the laws [28]. In this section, we briefly discuss these special education laws.

The first law related to special education and individuals with disabilities is the Rehabilitation Act, Public Law No. 93-112, 87 Stat. 357 of 1973. The section 504 of the Rehabilitation Act laid the grounds for the rights of individuals with disabilities by prohibiting discrimination against them due to their
disabilities [29]. Individuals with disabilities have the rights to the same access and opportunities as their peers without disabilities.

The second law, Education for All Handicapped Children Act (EAHCA), Public Law No. 94-142, 89 Stat 773, came in 1975. This law was amended in 1986 as the Public Law No. 99-457, 100 Stat. 1145. Under this law, all children aged 3 to 21 years have the rights to FAPE in the LRE. Individuals with disabilities are to be, by default, educated in the general education classroom unless otherwise deemed inappropriate through a thorough assessment by a multidisciplinary team due to disabilities being so severe that the individual does not benefit from learning in the general classroom. Each individual with disabilities is issued an individualized education program (IEP) that is assessed and implemented by a multidisciplinary team. Another amendment (Public Law 99-457) extended the rights of a FAPE in a LRE to preschool children with disabilities. In lieu of an individualized education program, an individualized family service plan (IFSP) is issued to each child as assessed and implemented by a multidisciplinary team [29].

EAHCA was amended in 1990 and renamed as the Individuals with Disabilities Education Act (IDEA). One of the notable amendments was the change in the language of the law, for example, the use of the term ‘disability’ as opposed to ‘handicapped’ [11]. Under this law, individuals with disabilities have access to assistive technology and other special services deemed appropriate for learning. Additional provisions of IDEA included adding new categories (i.e., traumatic brain injury and autism) of recognized disabilities [30]. Some of the amendments to (Public Law 105-17) in 1997 were the increased participation of parents in the eligibility and placement decisions of their children, state-offered mediation in resolving disputes, clarification on the process of discipline involving students with behavior problems, a required statement of measurable annual goals in the IEP and a report on the student’s progress towards the set goals [11,12,30].

There is always room for improvement and, thus, the IDEA was reauthorized in 2004 as the Individuals with Disabilities Education Improvement Act (IDEIA), Public Law No. 108-446. Some amendments include requiring teachers to obtain full teaching certification in special education and whatever core subject they were teaching, as well as a state license. There were also some changes in the composition of multidisciplinary teams with parents becoming more involved in the decision process [30].

The No Child Left Behind Act (NCLB), Public Law No. 107-110, 115 Stat. 1425 (2001) was enacted in 2001 as the reauthorization of the Elementary and Secondary Education Act (ESEA). It covered all students, including those with disabilities, and provided support and supplementary education services in the areas of literacy development and intervention. This law was well received by inclusion advocates and special groups such as The Association for the Severely Handicapped (TASH) and the National Down Syndrome Congress [31,32]. For years, one of the issues in special education has been the watering down of the regular curriculum and instruction that overly focused on noncognitive aspects that are very different from those in general education (e.g., life skills). The advent of the NCLB marked a change in how society perceives individuals with disabilities by ensuring access to appropriate assessment and testing against grade-level standards and placing accountability of the students’ performance on the schools [31,32]. However, although the intention was good in the creation of this law, there were some criticisms that the law widened the gap between “normal” students and those who are marginalized, including those with disabilities. Instead of bridging the gap, the ESEA widened it by forcing unrealistic standards on marginalized students and those with disabilities [33–35]. The advent of the NCLB marked the shift towards neoliberal education policies that are founded on the premise that the success of an individual is influenced mainly by the individual’s own choices and decisions [33]. This perspective assumes that all children start on equal footing, which is not the case in real life, since students are born with varying degrees of privilege based on race, ethnicity and socio-economic status. This law had an even more impactful effect on special education, as standardized testing became the quality indicator of learning and schools started to be more academic centric [33]. In 2015, the ESEA was amended and reauthorized as Every Student
Succeeds Act (ESSA) replacing the NCLB as a response to the call of teachers and families, since the prescriptive requirements of the NCLB were unpractical for most of the schools and teachers [36]. ESSA had more flexibility than the NCLB and did not rely solely on standardized test scores as the criteria for school performance.

Special education is a function of current education policy and classroom practice, as decision making and resource management are governed by the current education policy and resource availability [8]. Hence, knowledge of the current special education policy is integral not only among school administrators and policymakers but also among teachers, special service providers, and parents, all of whom are at the forefront of implementing and assessing the child’s learning needs. Unfortunately, the reality is that a number of teachers, especially general education teachers have limited knowledge on the provisions of IDEA or Section 504 [37].

2.2. Key Constructs

2.2.1. Individualized Education Program

One of the key constructs of IDEA is the Individualized Education Program (IEP). To provide a FAPE for individuals with disabilities, schools—through the multidisciplinary team—must develop and implement an IEP for each individual with disabilities. The IEP is defined in IDEA as a written formal document for each child diagnosed with a disability and having special learning needs. The document contains pertinent information about the child’s background, capabilities, learning needs, accommodations needed, and goals and objectives to be achieved. This document is created, developed, and reviewed by a team of specialists who manage the child’s educational development on an annual basis. For preschool-aged children with disabilities, an individualized family service plan (IFSP) is created.

Individualized and appropriate instruction is one of the key principles of IDEA and special education [38]. Individuals with disabilities have particular needs to be met in order for them to obtain their full potential. As with their peers in the general education, individuals with disabilities have the rights to appropriate education and equal opportunities. The IEP ensures that each individual with disabilities is afforded these rights by identifying appropriate goals and objectives for the child and the necessary services the child needs [38,39]. As such, the quality of the IEP (i.e., goals and objectives set) affects the quality of a child’s education. Since the IEP is created by various people, the quality of which also varies. Drasgow, Yell and Robinson [38] argued that both procedural and substantive requirements of the IEP process should be followed by the schools as the procedural ensures the parent’s involvement, while the substantive ensures that the student is receiving the appropriate education.

Since the start, when the Education for All Handicapped Children Act was enacted in 1975, the IEP has always been plagued by problems and concerns, ranging from schools having difficulty creating them to problems in implementing them [28,39]. When IDEA was enacted in 1997, changes were made to the IEP in accordance to recommendations from the community; however, policymakers were more focused on improving discipline and managing the concrete and personnel resources needed, meaning that input from teachers in the field was not always taken into consideration. Changes include, among others, a more explicit and detailed background of the child’s disability and learning needs, measurable goals, and individual modifications [28]. These changes to the IEP meant longer IEPs and more paperwork for the special education teachers. Moreover, changes to the composition of the IEP team were implemented, for example, the involvement of the general education teachers. These changes have a lot of implications in the field of special education, specifically for financial resources and special education teachers. An evaluation of IEP goals and objectives prepared by the teams are usually not functional or measurable, thus, it is crucial that teachers and other members of the team creating the IEP receive training in creating and writing goals and objectives for the IEP [40]. The IEP changes were made to solve the problems in the field and to improve the system; however,
it also resulted in creating more problems as majority of special education teachers were unprepared for the changes and the additional work load [28].

The IEP is considered as one of the most important documents in special education as it represents and ensures that the student is getting the appropriate education [38,39]. Thus, if the IEP is questionable, then it is not fulfilling the law and bars the individual with disabilities the right to an appropriate education. Smith [39] suggested that since the IEP is ridden with so many problems, it might be beneficial to look at alternative options to implement the law. If this is the case, this leaves us with the question, are the problems we are encountering with the IEP due to the nature of the IEP itself or is this a symptom of an underlying problem with the education system structure itself?

2.2.2. Least Restrictive Environment

One of the key constructs of the Education for All Handicapped Children Act in 1975 and eventually of the IDEA (1997) and probably the most debated one as well, is the “Least Restrictive Environment” (LRE) [41]. The LRE is described in the statutes of IDEA as educating children with disabilities with regular children in a regular classroom as much as appropriate, and removal of a child with disabilities from that environment is subject only to cases wherein the learning needs and accommodations of a child could not be met inside a regular classroom environment. By this definition, it seems that LRE is conceptualized in the IDEA as a continuum of placements, with the general education classroom as the least restrictive by default and the special class as the most restrictive. However, this is not always the case, the LRE’s vagueness and how it could generally mean different concepts is the reason for its appeal to the majority, but at the same time its weakness [42]. Taylor [42] presented some of the weaknesses of the LRE principle; for example, people assumed that the intensity of services being provided was directly related to the environment and the LRE could not provide the intense special services needed for individuals with disabilities, thus, students who needed intensive services were better off in segregated placements. Another weakness of the LRE, according to Taylor [42], is that it is dependent on physical structures of the school and the individual with disabilities’ readiness to be integrated in the LRE instead of the quality of support services provided by the school. Inclusion in the LRE is more than just the disability category and the child’s readiness; there are other variables to consider. Heron and Skinner [43] attempted to concretize the criteria in defining the LRE by setting observable and measurable variables based on support from research. The criteria included: (a) the number of opportunities to engage and achieve, (b) the proportionate amount teachers interact with each student, and (c) acceptable and positive social relations and interactions among students regardless of disabilities. More often than not, placement decisions are based on the capabilities of student with disabilities, however one has to remember that inclusion is a two-way street and Heron and Skinner [43] were able to concretize the teacher and classroom variables that are as significant as the student’s ability in order for inclusion to be effective.

Data show that there was a significant increase in the number of students with disabilities placed in the general education classroom compared to other placements across the years since 1990 [44]. This number increased especially in the secondary level when the IDEA and the NCLB mandates on teacher certification was implemented as individuals with disabilities were placed in general education settings to comply having access to teachers who were certified in content area-specific subjects [44].

The broad and vague definition of LRE in IDEA prompted different interpretations and, thus, a child’s placement in a school system relies heavily on the deciding body’s interpretation of LRE. Under IDEA, parents and school districts have the right to file an appeal in court regarding the child’s identification, evaluation and placement decisions [45]. As such, different circuit courts follow different standards to come to their own conclusions, which leaves the question if the case was heard in a different court would it have different results [46]. As such, some suggest that courts adopt a nationwide agreed standard for LRE in determining placement for children with disabilities [42]. As courts continue to make decisions on the placements of individuals with disabilities, there are contradicting views. On one hand, there are those who believe that courts do not mandate the general
education classroom as the LRE by default, nor do judges defer to school officials’ expertise on what comprises a LRE, instead courts make their decision based on the history of the case and reasonable attempts by the school to integrate individuals with disabilities [47]. On the other hand, there are those who perceive that the courts favor school districts in their decisions more than the parents [45]. The continued rise of cases heard in court on school placements means that schools have to take a step back and get their bearing on what this means for them in achieving their goals for inclusion. Reasons such as insufficient resources or the child not being able to cope with the regular curriculum, thus needing an individualized one, are not sufficient to justify not continuing inclusion in the general education classroom. Thus, schools must re-evaluate and restructure their general education learning environment and ensure that their teachers are well equipped to handle individuals with disabilities in their classrooms [42,46–48]. Moreover, since history shows that courts have more favorable decisions for school districts, it is important for parents to have an equal say in the process and, thus, collaboration between schools and parents is integral for a successful placement [45]. After all, parents have played a significant role in the special education movement in history [10].

These differences in interpretation and views of the LRE mandate influence how the mandate is being implemented. What others may deem as the LRE in terms of social skills may not be the same LRE for others who prioritize language skills. Moreover, factors such as financial resources, school organization, advocacy, team members and their knowledge and values, and the local context influence the implementation of the LRE mandate [49]. Most of the time, what members of the multidisciplinary team value most in the development of an individual is taken precedence when deciding placement options. For example, if the team valued the development of social skills and interacting with “normal” peers, the child would be placed in a general education classroom. However, due to lack of resources, whether financial or human resources, team members are often left to compromise with what support services are available in placing children with disabilities. Unfortunately, compromising the quality of support services means denying a child of the right to FAPE.

2.2.3. Access to the General Education Curriculum

The Education for All Handicapped Children Act stated that all children aged 3 to 21 years have the right to FAPE in the LRE, which means that children with disabilities should have access to general education curriculum. Although access to the general education curriculum as mandated by the FAPE and LRE provisions were put into practice, data showed that it was only in 2002 when the NCLB (2002) and the IDEA (1997 & 2004) were put into place that the access to general education curriculum for individuals with disabilities was emphasized [44]. This may be due to the NCLB and IDEA mandate that requires teachers to be certified and highly qualified to teach content area subjects. At that point, approximately 82% to 99% of special education teachers were not certified in the said content areas which posed a problem, and thus, prompted schools to place more students in the general education classroom where general education teachers were certified in specific content areas [50].

Individuals with disabilities benefit from being able to access the general education curriculum and classroom. In a study done by Justice, Logan, Lin, and Kaderavek [51], the language skills of preschool age children with disabilities are positively affected by the language skills of their typically developing peers when they were able to interact with each other in the same classroom environment. Moreover, research has suggested that students with disabilities have more opportunities to access the general education curriculum when educated in a general education classroom where general education teachers were certified in specific content areas [52].

On the other hand, research also showed that children with disabilities who have access to general education curriculum might not fully benefit from it due to the low quality of the inclusion program [53]. Similarly, a study by Suter and Giangreco [54] showed that the majority of children with disabilities in the general education classroom receive most of their instruction from one-to-one paraprofessionals due to the large caseloads of special educators. They asked the question, if children with disabilities are receiving majority of their instructions from paraprofessionals, does this have
implications for the concept of FAPE. Moreover, this contradicts the provisions in the latest version of IDEA, which states that teachers must hold certification status to ensure education quality. In addition to this, most of general education teachers are not fully aware of the nature of special education or provisions for inclusion. O’Connor, Yasik, and Horner [37] found that a number of general education teachers had limited knowledge on the provisions of IDEA or Section 504. If a collaborative approach is to be effective, then it follows that general education teachers should have in-depth knowledge of the provisions of IDEA since they are at the forefront of providing the intended appropriate education for individuals with disabilities.

Research shows that curriculum modifications, together with other variables such as support services, teachers, students, and classroom environment all contribute to the success of the integration of a student with disabilities [52,55]. A study by Soukup, Wehmeyer, Bashinski, and Bovaird [52] showed that physical classroom arrangements affect a student’s access to general education curriculum. As such, those who are working in smaller groups or worked exclusively with the teacher have greater access. Curriculum modification in particular is a strong predictor of positive academic performance of students with disabilities; that is, the more students with disabilities are engaged due to modifications, the better their academic performance [55].

As such, curriculum modifications can only be effective if there is collaboration among the general education and special education teachers [55,56]. This is important to ensure that the individual with disabilities is able to progress and benefit fully inside the deemed LRE, whether it is a general education classroom or a special class [56]. Each individual with disabilities has a right to FAPE in an LRE, and both rights are equally important [47].

3. Discussion

Through the years, the historical perspectives of special education and inclusion shifted and changed. In the early years, much of the practice was focused on the welfare of the majority as seen in isolation or segregating individuals with disabilities from the society. Eventually as the civil rights movement rose with the philosophies of social justice, the focus also shifted to the welfare of the individuals with disabilities [9,29]. This shift in perspective affected how school placements were determined and eventually gave rise to the concept of the LRE. In essence, people perceived the concept of putting an individual with disability in the LRE as the humane thing to do and isolating or segregating them as unjust and inhumane. This is often the argument of those who advocate for full inclusion and the dismantling of special education as a discipline [13].

Similarly, there was a shift in how the legislation was framed through the years. In the 1870s, the focus was compulsory education as the states enacted compulsory attendance laws. However, for some states, compulsory education did not include individuals with disabilities [10–12]. As such, in Section 504 of the Rehabilitation Act, Public Law No. 93-112, 87 Stat. 357 of 1973, the focus was on recognizing the rights of individuals with disabilities [11]. Eventually, in 1975, the focus shifted to providing access to education through the FAPE and LRE mandates of the EAHCA [8,13]. With the amendment of the EAHCA and its renaming to IDEA in 1990, the shift to focusing on the individual and not the disability started with changing the language and terms used in the law [11,12]. Moreover, the amendments to the law reflected a shift in how society perceived education and development of individuals with disabilities through individualized instruction and requirements of measurable goals to determine progress. Thus, during this time, emphasis was not only placed on access to education, but also to the quality of the instruction and the progress of the individuals with disabilities. The advent of the NCLB strengthened the accountability given to schools in terms of providing appropriate education to individuals with disabilities in the general education classrooms [31]. It is not enough that individuals with disabilities are in general education classrooms with regular students; they have to be assessed using the appropriate grade-level standards as their peers to determine their progress. The schools are accountable for the performance of the individuals with disabilities.
Considering the findings of some previously mentioned studies e.g., [53,54], wherein individuals with disabilities do not benefit from integration mainly due to a lack of resources and quality of the current program, we ask this question: who does inclusion truly benefit? Perhaps we can look at inclusion through the lens of interest convergence theory, wherein inclusion is being advocated only because it is in the interest of both the majority of the society and individuals with disabilities, however it is at the advantage of the “normal” people [57]. The dominant people (i.e., “normal” people) have the interest of individuals with disabilities in mind, thus, believe that placing them in the mainstream classroom is the humane thing to do and will help them be “normalized” without taking into regard that inclusion means still providing support services as needed.

Special education is often seen as a way to equity for individuals with disabilities; however, it may seem that the current special education structure does not allow equity [26]. For most of the historical period, the field of special education was dominated by ideologies of functional limitations model, which focused on the limitations of an individual with disabilities, and educators trying to design instructions and strategies that would bridge the gap caused by the disabilities [5]. If we take a closer look at implicit assumptions that govern special education, this is the case as schools often look at how to bridge the gap between the child’s current ability level and the expected learning competencies by focusing on what the child needs to learn to be at par with ‘normal’ children. This is similar to trying to fit square pegs into circular holes. How does this type of system pave the way to equity? The concept of neoliberal education, which is the foundation of laws such as the NCLB, is that competition leads to better schools [33]. The concept of competition among students imply that all students, including those with disabilities, can start on equitable footing and their development is compared to that of their peers. However, in reality, within a diverse school population, individuals with disabilities would need numerous quality support services to be at equitable footing with regular students. Moreover, when they are able to adequately cope with their “normal” peers, it should not mean the loss of support services. It might be more beneficial to explore alternative perspectives such as establishing instructional design and intervention that are aimed at both the individual child’s needs and how the structure of the learning environment could be changed to be more appropriate to the child’s needs [58]. Reframing the inclusion perspective to child-centered instead of the deficit model means accepting the diversity of individuals with disabilities and not trying to fit square pegs into circular holes.

How do we reconcile the rights to access to general education and the rights to individualized instruction? Both are important provisions of IDEA. How can an individual with disabilities have access to a general education curriculum inside a general education classroom but still receive appropriate individualized education? Is that contradictory of each other? Access to general education does not mean there is no modified individualized instruction; meanwhile, full inclusion does not mean removal of support services. Unfortunately, many have different views of what full inclusion is, that is, they believe that full inclusion means being “normal” and not having the need for support services.

Interestingly, inclusion and mainstreaming are not defined in IDEA and did not appear in any of the United States legislation, whether in The Education for All Handicapped Children Act or its reauthorized version [5,29]. Instead, the law uses the term, “Least Restrictive Environment.” The problem with this vague description of inclusion is that each one has its own interpretation of the concept. This makes one wonder, why was not the term ‘inclusion’ used at all in any of the policies in the United States when it is used globally in other countries? Was there an underlying purpose for not using or including the term in the policy? Is it a possibility that people assumed that the LRE and the FAPE equate to inclusion when it was not what the policymakers had in mind when they drafted the law? Could this be why we are not able to see effective inclusion outcomes, because we are evaluating the success of an inclusion program using standards and guidelines that are not meant for inclusion and, thus, affects the validity of it? We can theorize many reasons why inclusion was not defined or used in any of the education policies; however, the crux of the matter is that, in the absence of a clear definition, standards, and objectives for inclusion and LRE is one of the roots of the problem.
Thus, it is essential that all stakeholders adapt the same definition, standards and clear objectives in implementing inclusion programs.

Even though inclusion was pushed as early as the start of the civil rights movement, there is no conclusive information on the actual benefits of mainstreaming or inclusion, as the definitions and ideologies for mainstreaming and LRE varied across schools and stakeholders of education [10,13,29]. Moreover, there is little empirical research that supports the full inclusion philosophy, since most papers are theoretically conceptualized [29]. Again, this is rooted in the fact that there are no unified standards or definition of the terminologies.

We go back now to how we defined inclusion at the start of this paper, which is the definition offered by the National Center in Educational Restructuring and Inclusion (NCERI). Inclusion involves providing equitable opportunities for all students, including those with disabilities. As such, when inclusion is mentioned, the discussion revolves around individuals with disabilities. However, we have to remember that inclusion is for all students, regardless of disability. It is interesting to note that the focus of the majority of the research is on the effects of inclusion on individuals with disabilities, but there is a scarcity of studies that focus on the effects of inclusion on regular students in the general education classroom [59]. Interestingly, a number of recent studies that looked at the effects of inclusion on regular students using longitudinal data on Early Childhood Education revealed that there might be a negative effect on the academic and social outcomes of regular students in inclusive classrooms [59–62]. For example, Fletcher found that regular students who are in the same class as children with emotional behavioral problems tend to have lower test scores in mathematics and reading in Kindergarten and first grade [60,61]. Similarly, Gottfried’s study suggested that there is a prevalent effect on the noncognitive development of regular classmates of individuals with disabilities; specifically, the regular students who are in the same class as individuals with disabilities tend to have more behavioral problems, lower self-control and interpersonal skills [62]. It is important to note that these studies have their own limitations in terms of target population and uncontrolled variables (i.e., teacher quality) and, thus, the findings must be taken with a grain of salt. Hence, more research should be done on the academic and social effects of inclusion on regular students too.

Inclusion is beneficial if implemented correctly. Some important points for consideration for effective inclusion as shown in a review of previous literature are having meaningful, realistic and measurable outcomes stated clearly in the student’s IEP, specialized and individualized instruction even inside the general education classroom, a collaboration among all service providers, educators, parents, and adequate supports from a larger context [63]. Furthermore, accountability for the individual with disabilities’ education should be shared by all school personnel, whether they are general education teachers or specialized service providers [64]. For inclusion to be effective, both physical integration and social inclusion must happen. Physical integration is simply placing an individual with disabilities in a class with regular peers. Social inclusion, on the other hand, involves social interaction, physical access, having a sense of agency, and the opportunity to have a meaningful participation by choice for the individual with disabilities [65–67]. Individuals with disabilities may be integrated in a community (or classroom) but not socially included [67]. Thus, we ask the question: what is the goal of inclusion? If the goal was to reduce social stigmatization and allow individuals with disabilities to be with their “normal” peers in the same classroom, its objective has been met. However, if the goal is equity and quality education for all individuals, whether with disabilities or not, then it might not be happening [68].

As this paper generates more questions than answers, we go back to the questions we asked at the beginning of this paper. If the goal of education is to generate knowledge for the betterment and welfare of all individuals, has it achieved its objectives for individuals with disabilities? If we are to look at the current situation vis-à-vis the past situation using the argument that the current practices are more in line with social justice and human rights, then it might seem that inclusion has achieved its objective. However, if we are to look at the actual experiences of individuals with disabilities and special education teachers as seen in some studies (e.g., [53,54]), then inclusion has not yet achieved
its objective. We often perceived evolution and development as a straightforward staircase that goes upward. It may be possible that the evolution of special education and inclusion is not linear and development is incremental [6]. It may also be that we are looking at different aspects when evaluating inclusion; hence, the inconclusive evidence of effectiveness of inclusion. As such, having a unified standard and definition of inclusion and all its components is integral.

For the second question, is inclusion in the interest of all individuals, whether with a disability or not? Earlier in the paper, we mentioned Bell’s interest convergence theory in discussing inclusion, and using it may be the most appropriate way to reply to this question. Based on historical perspectives, inclusion is for the interests of all people, whether they have a disability or not; however, it may be to the advantage of “normal” people. Especially if people equate disability to dependency, then “normalizing” individuals with disabilities means expending less resource for their needs. Thus, inclusion is in the interests of individuals with disabilities and the majority of the society. The effects of inclusion on all individuals, however, is a different discussion altogether.

4. Recommendations

Inclusion is not the destination; it is the journey. It is not a linear reform movement that was required by a public law, instead it is an incremental, multifaceted evolution process as school systems have to adapt to the changing needs of learners [9,10]. The current inclusion situation in our schools is not ideal and there is room for improvement. History has ultimately shaped and influenced contemporary philosophies and practice in special education [6], thus, it is essential that stakeholders of special education should have more in-depth knowledge on the history of special education [8]. Based on the historical perspectives and key constructs in special education we discussed in this paper, we have the following recommendations.

First, there should be historical awareness and discriminative ability among practitioners when it comes to effective practices and how the approach is in line with social justice and human rights. Being aware of historical events and perspectives enable practitioners to be reflective of their practice and improve in their field.

Second, there should be comprehension and awareness of the special education laws by all stakeholders. Schools, teachers, service providers, and parents should have an in-depth knowledge of the provisions of the education laws. Being familiar with the law enables them to be aware of their own rights and responsibilities and those of the individuals with disabilities they are advocating for.

Third, there should be a greater consistency in defining inclusion standards, LRE, standards of quality IEP and access to general education. One major issue that was brought up in this paper is the vague definition of concepts and terminologies that resulted in different interpretations of stakeholders. In order to have an effective inclusion program, a nationwide standard should be established. As of now, there are no standards, thus, everyone has their own interpretations; this results in an ineffective special education and inclusion program.

Fourth, there should be more research conducted to gather actual data on both social and academic effectiveness of inclusion to both students with disabilities and those without. It was mentioned repeatedly throughout the paper by the previous literature that there was no conclusive information on the effectiveness of full inclusion [10,13,29]. Most of the papers done were theoretical and philosophical. There are few empirical studies looking at inclusion, and there is no conclusive evidence on the longitudinal data on the effectiveness of full inclusion. However, it would be more beneficial to the educators and service providers if there were more studies on the social and academic effectiveness of inclusion on not only students with disabilities, but also their regular peers. After all, inclusion is providing equitable opportunities to all students.

Lastly, there should be collaborations among members of the IEP team, most especially special education and general education teachers. The two teams of teachers must work closely to make sure that what they are doing complements or supplements the other’s efforts. Continuity and consistency are important in learning, and this can be achieved through collaboration among teachers. There should
also be a collaboration among various stakeholders of special education including, policymakers, advocates, parents, teachers, service providers, and if possible individuals with disabilities themselves, especially when drafting education policies for special education. The laws were created with ‘good’ intentions, but are the laws for the interests of individuals with disabilities? At the end of the day, the question is, whose interests are the schools and the courts serving when they decide they want to place an individual with disabilities in the mainstream classroom? It is a question only time can truly answer and history can judge.

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