

Glossary of Special Education Terminology

<http://para.unl.edu/para/spedprog/Glossary.html>

A

ACADEMIC APTITUDE:

The combination of native and acquired abilities that is needed for school work; likelihood of success in mastering academic work, as estimated from measures of the necessary abilities. (Also called scholastic aptitude.)

ACADEMIC PLANNING MEETING:

A group meeting where the students and teacher plan the instructional program.

ACHIEVEMENT AGE:

The age for which a given achievement test score is the real or estimated average. (Also called educational age or subject age.) If the achievement age corresponding to a score of 36 on a reading test is 10 years, 7 months (10-7), this means that pupils 10 years, 7 months achieve, on the average, a score of 36 on that test.

ACHIEVEMENT TEST:

Measures of what had been taught to and learned by students.

ACTING OUT:

Behavioral discharge of tension in response to a present situation or stimulus, as if it were the situation or stimulus which was originally associated with the tension. Often a chronic and habitual pattern of response to frustration and conflict.

ACUITY:

Acuteness, as of hearing.

ADAPTIVE BEHAVIOR:

That behavior which is considered appropriate for a given individual in a specific context. This term usually refers to behavior that is judged acceptable by authorities, such as teachers, and not in need of modification. These authorities are guided by developmental and society norms for making such judgments.

AFFECT:

Emotional feeling tone or mood.

AFFECTIVE:

An adjective referring to any variety of feelings, emotional accompaniment.

AGE NORMS:

Numerical values representing typical or average performance for persons of various age groups.

AMBULATION:

The art of walking without assistance from others. It may include the use of crutches, canes and other mechanical aids.

ANALYTICAL MODE OR STYLE:

One type of conceptual style based largely on a breakdown and analysis of the smallest component parts, or units, of any problem or idea.

ANECDOTAL REPORT:

A written form of continuous data recording which provides as much information about the behavior and the environmental surrounding as possible. The events contained in the report are then sequenced, identifying each behavior, its antecedent, and its consequence (Albert & Troutman, 1982).

ANNUAL GOALS:

Plans written in the individual education program to be accomplished in the period of one year.

ANOMALY:

A structure or function which deviates from the normal.

ANOREXIA:

Lack or loss of appetite for food.

ANOXIA:

Deficient amount of oxygen in the tissues of a part of the body or in the blood stream supplying such a part.

ANXIETY REACTION:

A neurotic reaction with diffuse anxiety and physiological anxiety indicators, such as sweating and palpitation based on an exaggerated state of fear or tension.

APA:

American Psychological Association, American Psychoanalytic Association; American Psychiatric Association.

APHASIA:

Loss or impairment of the ability to use or understand oral language. It is usually associated with an injury or abnormality of the speech centers of the brain. Several classifications are used, including expressive and receptive, congenital, and acquired aphasia.

APRAXIA:

Inability to carry out purposeful movements in the absence of paralysis or other motor or sensory impairment.

APTITUDE:

A combination of abilities and other characteristics, whether native or acquired, known or believed to be indicative of an individual's ability to learn in some particular area. Thus, "musical aptitude" would refer broadly to that combination of physical and mental characteristics, motivational factors, and conceivably other characteristics, which is conducive to acquiring proficiency in the musical field.

ARTHRITIS:

Inflammation of a joint.

ARTICULATION:

The enunciation of words and sentences.

ART THERAPY:

A type of psychotherapy using art as a therapeutic device.

ASHA:

American Speech-Language-Hearing Association; also the name of the monthly journal dealing with news, announcements, and professional matters.

ASTHMA:

A disease marked by recurrent attacks of wheezing coughs, labored breathing, and a sense of constriction due to spasmodic contractions of the bronchi.

ATAXIA:

Condition in which there is no paralysis, but the motor activity cannot be coordinated normally. Seen as impulsive, jerky movements and tremors with disruptions in balance.

ATHETOID CEREBRAL PALSY:

Characterized by difficulty with voluntary movements, especially in controlling those movements in the desired direction (demonstrated by extra or purposeless movements).

ATTENTION SPAN:

The length of time a person can concentrate on a singular activity before losing interest.

AUDIOGRAM:

A graphic summary of the measurements of hearing loss showing the number of decibel loss at each frequency tested.

AUDIOLOGIST:

A professional person who is engaged in the study of the hearing function. He is responsible for the evaluation of persons with hearing problems, planning education programs for people with hearing impairments.

AUDIOLOGY:

The study of the entire field of hearing, normal and disordered; it is concerned with the nature of hearing, conservation of hearing, identification of hearing loss in the population, assessment of hearing loss in the individual, and the rehabilitation of all those with hearing impairments.

AUDITORY DISCRIMINATION:

Ability to discriminate between sounds of different frequency, intensity, and pressure-pattern components; ability to distinguish one speech sound from another.

AUDITORY MEMORY SPAN:

The number of related or unrelated items that can be recalled immediately after hearing them presented.

AUDITORY PERCEPTION:

Any method applied to a hearing-impaired child or adult which has the purpose of teaching him to use more effectively his remaining hearing with or without a hearing aid.

AUTISTIC:

Large category describing severe childhood psychosis withdrawal. See autism.

AVERSIVE STIMULUS:

A stimulus which a person tends to avoid if at all possible.

AVOIDANCE BEHAVIOR:

Those responses emitted by the individual with the intent of avoiding or postponing an aversive stimulus.

B**BASAL READER APPROACH:**

A method of teaching reading in which instruction is given through the use of a series of books. Sequence of skills, content, vocabulary, and activities are determined by the authors of the series. Teacher's manuals and children's activity books accompany the basal reading series.

BASELINE:

Beginning observations prior to intervention; level of functioning established or measured without any active intervention from the observer.

BEHAVIOR MODIFICATION:

A technique of changing human behavior based on the theory of operant behavior and conditioning. Careful observation of events preceding and following the behavior in question is required. The environment is manipulated to reinforce the desired responses, thereby bringing about the desired change in behavior.

BEHAVIOR THERAPY:

A method of psychotherapy based on learning principles. It uses such techniques as counterconditioning, reinforcement, and shaping to modify behavior.

BILATERALITY:

From bilateral, meaning to use both sides of the body in a simultaneous and parallel fashion. Especially related to hemispheric functioning and the two sides (right-left) of the body.

BILINGUAL:

Using or able to use two languages.

BLIND (LEGALLY):

Having central visual acuity of 20/200 or less in the better eye after correction, or visual acuity of more than 20/200 if there is a field defect in which the widest diameter of the visual field subtends an angle distance no greater than 20 degrees.

BODY IMAGE:

The concept and awareness of one's own body as it relates to orientation, movement, and other behavior.

BRAIN-INJURED CHILD:

A child who before, during, or after birth has received an injury to or suffered an infection of the brain. As a result of such organic impairment, there are disturbances which prevent or impede the normal learning process.

C**CENTRAL NERVOUS SYSTEM (C.N.S.):**

That portion of the nervous system to which the sensory impulses are delivered and from which the motor impulses pass out; in vertebrates the spinal cord and brain.

CEREBRAL PALSY:

Any one of a group of conditions in which motor control is affected because of lesions in various parts of the brain.

CHANNELS OF COMMUNICATION:

The sensory-motor pathways through which language is transmitted, e.g., auditory-vocal, visual-motor, among other possible combinations.

CHARACTER DISORDER:

An emotional reaction resulting in socially unacceptable behavior.

CHRONIC:

Pertaining to a condition which progresses slowly and is long continued.

CHRONOLOGICAL AGE (C.A.):

Age of a person in terms of years and months.

CLEFT PALATE:

Congenital fissure of the soft palate and roof of the mouth, sometimes extending through the premaxilla and upper lip.

CLINICAL TEACHING:

An approach to teaching that attempts to tailor-make learning experiences for the unique needs of a particular child. Consideration is given to the child's individualistic ways of learning and processing information.

CLOSURE:

A behavior that signifies pattern completion; the mechanism responsible for the automatic completion of familiar events.

CLOZE PROCEDURE:

Technique used in testing, teaching reading comprehension, and determination of readability. Involves deletion of words from the text and leaving blank spaces. Measurement is made by rating the number of blanks which can be correctly filled.

COACHING:

Professional relationship that provides professional companionship, demonstration of new strategies, technical feedback, and analysis of application over time to a colleague in need.

COGNITIVE PROCESSES:

Modes of thought, knowing, and symbolic representation, including comprehension, judgment, memory, imaging, and reasoning.

COGNITIVE STYLE:

A certain approach to problem-solving, based on intellectual, as distinguished from affective, schemes of thought.

COLLABORATION:

Voluntary interaction between professionals having a parity of knowledge and skills. The interactions are directed by a mutual philosophy, respect and goals with stated

roles/responsibilities for a mutually agreed upon plan. The two professionals contribute to the assessment-intervention-evaluation process as their strengths and abilities allow. The team shares mutual responsibility for the intervention programs and look to each other for feedback and support.

COLLABORATIVE CONSULTATION:

"An interactive process that enables teams of people with diverse expertise to generate creative solutions to mutually defined problems." Includes the parity and mutual responsibilities implied in "collaboration" but also the eventual termination of the consultant's input that is associated with the term "consultation". [Idol, Whitcomb, Nevin, 1986]

CONCEPT:

An abstract idea generalized from particular instances. Involves idea of the existence of objects, processes, or relation of objects, i.e., table, cell, man, raining, family, etc.

CONCEPTUAL STYLE:

An approach that characterizes individuals. It may vary from impulsive to reflective, from rational to irrational, or from systematic to disorderly. Also, the manner in which one expresses his ideas.

CONCRETE MODE:

One of the styles of cognitive functioning that describes the child's approach to problem-solving at a simple, elementary level. Also, the use of tangible objects in instruction, as opposed to purely verbal instruction.

CONDUCTIVE HEARING LOSS:

A condition which reduces the intensity of the sound vibrations reaching the auditory nerve in the inner ear.

CONGENITAL:

Present at birth; usually a defect of either familial or exogenous origin which exists at the time of birth.

CONSCIOUS:

Possession of awareness or mental life or having sensations and feelings. Also, the condition of an organism that is receiving impressions or having experiences.

CONSONANT:

A conventional speech sound produced, with or without laryngeal vibration, by certain successive contractions of the articulatory muscles which modify, interrupt, or obstruct the expired air stream to the extent that its pressure is raised.

CONSULTATION:

Interaction between professional workers in which one assists the other to solve a problem within the professional's usual functioning, and thus enhance professional skills for future effectiveness.

CONTINGENCY:

The conditions that must be met if a reinforcer is to be forthcoming. These conditions must be met fully prior to the presentation of the reward by the controlling agent.

CONTINGENCY MANAGEMENT:

A contracting system in which the students' successful task completion is consistently rewarded by a free time activity. Receiving a reward is made contingent on task completion.

CONTINUOUS REINFORCEMENT:

A schedule by which reinforcement is given after each response; a 1:1 relationship between response and reinforcement.

CONTINUUM OF SERVICES:

Provides a full spectrum of services that are tailored to the individual needs of each student at any given time during the child's educational career.

CRISIS OR HELPING TEACHER:

Teacher providing temporary support and control to troubled students when they are unable or unwilling to cope with the demands of the regular classroom.

CRITERION:

A standard by which a test may be judged or evaluated; a set of scores, ratings, etc., that a test is designed to predict or to correlate with. See validity.

CRITERION-REFERENCED TEST:

Tests that measure abilities in specific tasks rather than tests that compare a student to others in a norm group.

CROSS-MODAL:

Including more than one sensory modality.

CULTURE-FREE TEST:

A type of test that has been constructed to minimize bias due to ethnic background or to the differing experiences of children raised in rural rather than urban cultures or in lower-class rather than middle or upper-class cultures.

D**DAY CLASSES:**

Offering services only during the daytime hours and provide no living accommodations for the students.

DEAF:

Hearing impairment which is so severe that the child is impaired in processing linguistic information though hearing, with or without amplification, which adversely affects educational performance (94-142).

DEAF-BLIND:

Concomitant hearing and visual impairments, which cause such severe communication and other developmental and educational problems that they cannot be accommodated in special education programs solely for deaf or blind children (94-142).

DEFICIT:

Inadequacy in functioning due to general immaturity and developmental lag. Also, malfunctioning due to irregularities, such as specific lesions.

DEVELOPMENTAL READING:

Pattern and sequence of normal reading growth and development in a child in the learning-to-read process.

DIAGNOSTIC-PRESCRIPTIVE TEACHING:

An approach to instruction of students on an individual basis, with attention to strengths or weaknesses, followed by teaching prescriptives to remediate the weaknesses and develop the strengths.

DIAGNOSTIC TEST:

A test used to locate specific areas of weakness or strength, and to determine the nature of weaknesses or deficiencies; it yields measures of the components or sub-parts of some larger body of information or skill. Diagnostic achievement tests are most commonly prepared for the skill subjects -- reading, arithmetic, spelling.

DIFFERENTIAL REINFORCEMENT:

A technique whereby certain responses are reinforced while other responses emitted are not reinforced. This procedure is particularly useful in establishing discrimination in responding stimuli.

DISTRACTABILITY:

Overresponsiveness to extraneous stimuli.

DYSFUNCTION:

Abnormal or imperfect functioning of an organ.

DYSLEXIA:

A disorder of children who, despite conventional classroom experience, fail to learn to read. The term is most frequently used when neurological dysfunction is suspected as a cause of the reading disability.

E**EDUCABLE MENTALLY RETARDED:**

Education term used to describe retarded who can profit from academic education; mildly retarded -- IQ generally from 55 to 70.

EMOTIONAL LABILITY:

In psychiatry, emotional instability; a tendency to show alternating states of gaiety and somberness.

EMOTIONALLY DISTURBED:

Shall mean children with behavioral disorders variously designated as neurotic, psychotic, or character disordered, and whose inabilities may manifest themselves in school accomplishment, social relationships or feelings of self-adequacy and may result both from experience or biological limitations (LB 403).

EMPATHY:

A projection of one's own personality into the personality of another in order to understand him better.

ENDOGENOUS:

Developing within or originating from causes within the organism.

ENURESIS:

Involuntary nocturnal discharge of urine. Also known as bedwetting.

ENVIRONMENTAL FACTORS:

Variables such as poverty, racial discrimination, school pressures, and deteriorating family units.

EPILEPSY:

A disturbance in the electrochemical activity of the discharging cells of the brain produced by a variety of neurological disorders. The causes are not clear. These electrochemical disturbances usually result in a seizure of some degree.

- A. Petit mal - a mild form in which dizziness or staring into space takes place.
- B. Grand mal - a seizure in which there are severe convulsions and loss of consciousness or coma.
- C. Jacksonian - spasms mainly limited to one side of the body and often to one group of muscles.
- D. Psychomotor - patient performs motor acts which he cannot remember having done.

ETIOLOGY:

The investigation of the causes or significant antecedents of a given phenomenon.

EXOGENOUS:

Outside the genes; all factors other than heredity or genetic (such as environment or trauma).

EXTERNAL CONTROL:

Control of an individual by others' opinions and influences.

EXTINCTION:

A process for weakening behavior to its preconditioning level. In the respondent model, it consists of continuous presentation of the conditioned stimulus without the unconditioned stimulus. In the operant model, it consists of withholding reinforcement after the response is emitted.

F

FADING (OF STIMULUS CONTROL):

A technique for errorless learning whereby the teacher cues the child with multiple stimuli to make the correct response. Gradually, the number of cues are reduced, or "faded," until only one stimulus comes to exert control over the responding.

FAMILIAL:

Occurring in members of the same family; a familial disease.

FAMILY THERAPY:

A specialized type of group therapy in which the members of a given family constitute the group.

FEEDBACK:

Return to a control center of information regarding events under its control; in psychology, the return of sensory information from the periphery, used in the control of movement and analogous processes; the loop of information going back from output to input.

FIGURE-GROUND PERCEPTION:

The ability to attend to one aspect of the visual field while perceiving it in relation to the rest of the field.

FREE APPROPRIATE PUBLIC EDUCATION (FAPE):

Used in PL 94-142 to mean special education and related services that are provided at public expense, met requirements of the state educational agency, include preschool, elementary or secondary school education, and conform to the individualized education program (IEP).

G

GENERALIZATION:

In concept formation, problem-solving, and transfer of training, the detection by the learner of a characteristic or principle common to a class of objects, events, or problems. Also, in conditioning, the principle that once a conditioned response has been established for a given stimulus, other similar stimuli will also evoke that response.

H

HABILITATION:

Improvement in a skill or level of adjustment as with respect in the ability to maintain satisfactory employment.

HANDICAP:

Impairment of a particular kind of social and psychological behavior. It is the extent of the individual's subjective interpretation of his disability and impairment.

HARD-OF-HEARING:

Hearing impairment, whether permanent or fluctuating, which adversely affects a child's educational performance (94-142). (Not considered deaf.)

HEARING AID:

Any device which amplifies or focuses sound waves in the listener's ear; usually refers to the various types of wearable amplifiers which operate with miniature loudspeakers in the ear or oscillators on the head.

HEARING CONSERVATION:

Any program undertaken to preserve hearing and to prevent hearing loss through public education, through screening programs to identify persons needing attention, and through reduction of occupational hazards that pose a threat to a worker's hearing.

HEARING LOSS DEGREES:

a. mild: 27-40 dB

Person will have difficulty with faint or distant speech; may need favorable seating and may benefit from speech reading, vocabulary, and /or language instruction or may need speech therapy.

b. moderate: 41-55 dB

Person can understand conversational speech at a distance of 3 to 5 feet; probably will need a hearing aid, auditory training, speech reading, favorable seating, speech conversation, and speech therapy.

c. moderately severe: 56-70 dB

Conversation must be loud to be understood; speech will probably be defective; may have limited vocabulary; may have trouble in classroom discussions; services used in moderate level; only specific assistance from the resource/itinerant teachers I language area needed.

d. severe: 71-90 dB

Person may hear loud voice at one foot; may have difficulty with vowel sounds but not necessarily consonants; will need all services mentioned and use many techniques used with the deaf.

e. profound: 91 dB +

May hear some sounds; hearing not primary learning channel; needs all mentioned services with emphasis on speech, auditory training, language; may be in regular class part time or attend classes that do not require language skills. language;

HEMOPHILIA:

A hereditary condition characterized by delayed clotting of the blood with consequent difficulty in checking hemorrhage.

HEREDITY:

Those factors acquired from parents as the result of the action of a single gene or a complex of genes.

HOSPITAL AND HOMEBOUND:

Students within chronic conditions that require long term treatment in a hospital or students who are homebound and receive special instructions from homebound/itinerant special education personnel.

HYPERACTIVITY (HYPERKINESIS):

A personality disorder of childhood or adolescence characterized by overactivity, restlessness, distractibility, and limited attention span.

HYSTERICAL DEAFNESS:

Psychogenic hearing loss; a functional hearing impairment developed under emotional stress as an unconscious means of escape from intolerable situations. Same as conversion deafness.

Hz:

A unit of vibration frequency adopted internationally to replace the term cycles per second; named after Heinrich Rudolf Hertz; German physicist.

I

IDIOPATHIC:

Pertains to a pathological condition of spontaneous origin; that is, not the result of some other disorder or injury.

IMPAIRMENT:

Actual physical defect. (Refers to the biological forces.)

IMPULSIVITY:

Behavior engaged in without sufficient forethought or care.

INCLUSION:

Varying degrees of inclusion are practiced in schools. Full inclusion is the practice of educating all children in regular classrooms and schools regardless of disabilities.

INCOMPATIBLE RESPONSE:

Any combination of responses which cannot occur simultaneously: in seat behavior is incompatible with out-of-seat behavior.

INDIVIDUAL EDUCATION PROGRAM (IEP):

A written statement for a handicapped child that is developed and implemented in accordance with restrictions supplied by PL 94-142.

INDIVIDUAL FAMILY SERVICE PLAN (IFSP):

A written statement for a handicapped child who is from 3 to 5 years old and their family and is developed and implemented in accordance with restrictions supplied by PL 99-457.

INHIBITION:

Restraint or control exercised over an impulse, drive, or response tendency.

INNATE:

Those factors present at birth which result from the genetic component inherited from the parents plus any mutations.

INSTRUCTIONAL FEEDBACK:

Verbal or written information to an individual about his/her behavior. Can be objective, descriptive or evaluative ("good", "poor", "almost").

INTERVAL SCHEDULES OF REINFORCEMENT:

Those intermittent schedules of reinforcement in which the contingency is based on the passage of time since the last reinforcement. In general, the overall rate of responding on interval schedules is low compared to ratio schedules.

INTERVENING VARIABLE:

A factor, inferred to be present between stimulus and response which accounts for one response rather than another to a certain stimulus. The intervening variable may be inferred without further specification, or it may be given concrete properties and may become an object of investigation.

INTROVERSION:

Preoccupation with one's self, with accompanying reduction of interest in the outside world.

IQ:

Intelligence quotient; the mental age divided by the chronological age and multiplied by 100.

ITINERANT TEACHER:

This teacher travels from school to school helping the child with special needs and acting as a consultant for the regular teacher.

J

K

L

LANGUAGE PATHOLOGY:

Study of the causes and treatment of disorders of symbolic behavior.

LEARNING DISABILITY:

Disorder of one or more of the basic psychological processes involved in understanding or using language, spoken or written, which may manifest itself in imperfect ability to listen, think, speak, read, write, spell or do math. Inability is not due to mental retardation, emotional disturbance, or environmental disadvantage. There is a notable difference between his apparent capacity for achievement and his actual achievement.

LEAST RESTRICTIVE ENVIRONMENT:

1. handicapped students are served with children who are not handicapped to the maximum extent appropriate, and
2. handicapped children are only removed from regular education environments when the severity of the handicap interferes with satisfactory participation (94-142).

LESION:

Any hurt, wound, or local degeneration.

LIP READING:

The art of comprehending the speech of another through the visual interpretation of gestures, facial movements, and especially lip movements. Same as speechreading.

LONGITUDINAL:

Lengthwise, running in the direction of the long axis of the body, organ, or part.

LOUDNESS:

The intensity factor in sound.

M

MAINSTREAMING:

Least restrictive alternative; maximum integration in the regular classroom, coupled with concrete assistance for the nonspecial education teacher.

MALADAPTIVE BEHAVIOR:

Those behaviors judged as inappropriate or ineffective in a given context, such as the classroom. In general, such behaviors interfere with a child's learning or social interaction and lead to discomfort.

MATURATION:

The process of maturing or developing mentally, physically, or emotionally.

MATURATIONAL LAG:

A slowness in certain specialized aspects of neurological development.

MEAN:

The arithmetical average, the sum of all scores divided by the number of scores.

MEDICAL MODEL:

This model holds that inappropriate behavior is a symptom of some underlying cause. In this conceptualizing of the problem, it follows that the individual exhibiting such behavior is "sick" or disordered--the problem resides within the child. In order to treat such behavior, it is judged necessary to identify the underlying cause and treat that entity rather than the behavior, since the behavior is simply symptomatic.

MEMORY:

The ability to store and retrieve upon demand previously experienced sensations and perceptions, even when the stimulus that originally evoked them is no longer present. Also referred to as "imagery" and "recall".

MENTAL AGE (M.A.):

An expression of the level of performance obtained on a standardized test, such as the Stanford-Binet, compared with the performance of the average person of a given chronological age. For example: a child with a C.A. of 6-0 who passes all tests at the six-year level would have a M.A. of 6-0, etc.

MENTALLY RETARDED:

Significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period, which adversely affects a child's educational performance.

MILDLY MENTALLY RETARDED:

The least handicapped of the retarded, with IQ range of 50-75; formerly referred to as moron, high grade, or Level III.

MINIMAL BRAIN DAMAGE:

Early term for designating children with neurogenic learning and adjustment problems. The term is unsatisfactory because brain dysfunction is not necessarily due to damage. The term is often used and applied inaccurately for that reason.

MOBILITY AIDES:

- a. Sighted guide - a sighted person who takes the blind person to a destination.
- b. Dog guide - a specifically trained dog used by a blind person to take him to a destination.
- c. Cane - a white or silver cane often with a red tip used for getting to and from a destination.
- d. Electronic Aides - these are usually more successful when used as a companion with the cane. Two of the more acceptable ones are the Laser Cane and the Kayne Spectacles.

MODALITY:

An avenue of acquiring sensation; the visual, auditory, tactile, kinesthetic, olfactory, and gustatory modalities are the most common sense modalities.

MODELING:

A procedure for learning in which the individual observes a model perform some task and then imitates the performance of the model. This form of learning accounts for much verbal and motor learning in young children.

MODERATELY MENTALLY RETARDED:

The general IQ range of 35-49; generally considered trainable.

MOTIVATION:

A stimulus to action; something (a need or desire) that causes one to act.

MOTOR:

Pertaining to the origin or execution of muscular activity.

MR:

Mentally retarded.

MULTIDISCIPLINARY EVALUATION:

Using several disciplines and instruments to evaluate a student.

MULTIDISCIPLINARY EVALUATION TEAM (MDT):

A group of persons whose responsibility is to evaluate the abilities and needs of a child referred for evaluation and to determine whether or not the child meets the eligibility criteria (Rule 51).

MULTIHANDICAPPED CHILDREN:

Concomitant impairment which causes severe educational problems that cannot be accommodated in Special Education programs solely for one of the impairments (excludes deaf-blind).

MULTISENSORY:

Generally applied to training procedures which simultaneously utilize more than one sense modality.

N

NEGATIVE FEEDBACK:

Communication to the subject that his response was incorrect. It tends to reduce the chances of repetition of the behavior.

NEGATIVE REINFORCEMENT:

A procedure for strengthening behavior when the consequence of that behavior is the termination or avoidance of an aversive stimulus. That is, the response is followed by the avoidance or termination of some event noxious to the individual.

NORM:

An average, common, or standard performance under specified conditions, e.g., the average achievement test score of nine-year-old children or the average birth weight of male children.

NORMS:

Statistics that describe the test performance of specified groups, such as pupils of various ages or grades in the standardization group for a test. Norms are often assumed to be representative of some larger population, as of pupils in the country as a whole. Norms are descriptive of average, typical, or mediocre performance; they are not to be regarded as standards, or as desirable levels of attainment. Grade, age, and percentile are the most common types of norms.

O

OBJECTIVE OBSERVATION:

Audiotape, videotape, or written notation of behaviors. Can include tallies for frequency, duration, or speed; can be a narrative transcription of the actions and verbalizations observed.

OCULAR:

Pertaining to the eye.

OCCUPATIONAL THERAPY:

A program of creative, educational and recreational activities to develop skills which will be useful later.

OLFACTORY:

Pertaining to the sense of smell.

ONTOGENY:

The developmental history of the individual.

OPERATIONAL:

Based on empirical and measurable phenomena.

OPTICIAN:

This person can only grind lenses and fit them in frames.

OPTOMETRIST:

A person who studies the measuring of visual acuity and grinds lenses for glasses. He does not have a medical degree and cannot prescribe medicines or treat eye diseases or disorders.

ORAL METHOD:

Method of teaching communication of language to deaf or hard-of-hearing patients by spoken words.

An individual's use of his remaining senses to establish his position and relationship to objects in his environment.

ORTHOPEDICALLY HANDICAPPED CHILDREN:

Severe orthopedic impairment which adversely affects a child's educational performance. The term includes impairments caused by congenital anomaly, disease, and impairments from other causes (94-142).

OTHER HEALTH IMPAIRED:

Limited strength, vitality or alertness due to chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, or diabetes which adversely affects a child's educational performance (94-142).

OTOLOGY:

The study and treatment of the ear.

P

PARAPLEGIA:

Paralysis of the legs and lower part of the body.

PARTIALLY SIGHTED:

One whose visual acuity is better than 20/200.

PATHOLOGY:

The study of the nature of disease and its resulting structural and functional changes.

PEDIATRICS:

The study and treatment of children and their care.

PERCEPTION:

Recognition of a quality without distinguishing meaning, which is the result of a complex set of reactions including sensory stimulation, organization within the nervous system, and memory.

PERCEPTUAL-MOTOR:

A term describing the interaction of the various channels of perception with motor activity. The channels of perception include visual, auditory, tactual, and kinesthetic.

PERSEVERATION:

The tendency for one to persist in a specific act or behavior after it is no longer appropriate.

PETIT MAL SEIZURE:

A type of epilepsy which is characterized by short lapses of consciousness and commonly begins in early childhood.

PHOBIA:

Pathological fear of some specific stimulus or situation.

PHONEME:

Basic unit of sound by which the more complex parts of language (morphemes, like words or sentences) are formed.

PHONETIC METHOD:

An approach to the treatment of articulation difficulties in which the therapist directs attention to the specific movements and placements of the articulatory structures.

PHONICS:

The study of speech sounds with special reference to reading.

PHYSICAL THERAPY:

Helps overcome neuromuscular disability through exercise, massage, heat, water, light and electricity.

PITCH:

Highness or lowness of a tone or a sound.

POSITIVE FEEDBACK:

Communication to the subject that his response was correct. This information reinforces the individual so that he will continue or will increase the behavior.

POSITIVE REINFORCEMENT:

Any stimulus which, when made contingent upon a particular response, will strengthen that response. The acid test of which stimuli are positively reinforcing to a given individual is whether or not it does strengthen a given response.

POSTNATAL:

Occurring after birth.

PRENATAL:

Existing or occurring prior to birth.

PRIMARY REINFORCER:

Those stimuli that can strengthen behaviors they follow without prior learning. These reinforcing stimuli derive their reinforcing power from the fact that they satisfy physiological needs of the organism (e.g., food, water).

PROCESS-ORIENTED METHODS:

Those methods emphasizing the processes of language, such as decoding, encoding, and memory; distinguished from task-oriented methods.

PROFOUNDLY MENTALLY RETARDED:

Term used to describe the most severely retarded level--generally covers the IQ range of 0 to 20. Formerly called custodial or Level I.

PROGNOSIS:

Prediction or judgment concerning the course, duration, termination, and recovery from a pathological condition.

PROSTHESIS:

The replacement of a part of the body by an artificial substitute.

PROTOCOL:

The original records of the results of testing.

PSYCHOMETRICIAN:

A psychologist who administers batteries of tests.

PSYCHOMOTOR:

Pertaining to the motor effects of psychological processes. Psychomotor tests are tests of motor skill which depend upon sensory or perceptual motor coordination.

PSYCHOSIS:

A severe emotional illness in which there is a departure from normal patterns of thinking, feeling and actions. Commonly characterized by loss of contact with reality, distortion of perception, regressive behavior, and attitudes, diminished control of elementary impulses and desires, and abnormal mental content including delusions and hallucinations.

PSYCHOSOMATIC DISORDER:

An ailment with organic symptoms attributable to emotional or other psychological causes. The disorder is aggravated by or results from continuous states of anxiety, stress, and emotional conflict.

PUNISHMENT:

A process for weakening behavior which can take one of two forms. First, an aversive or noxious stimulus can be made contingent on the response to be weakened. Second, a positively reinforcing stimulus can be withheld or removed contingent on the response to be weakened.

Q

QUADRIPLEGIA:

Paralysis affecting all four limbs.

R

RAPPORT:

A relationship of ease, harmony, and accord between the subject and examiner or therapist.

READABILITY LEVEL:

An indication of the difficulty of reading material in terms of the grade level at which it might be expected to be read successfully.

READINESS TEST:

A test that measures the extent to which an individual has achieved a degree of maturity or acquired certain skills or information needed for undertaking successfully some new learning activity. Thus a reading readiness test indicates the extent to which a child has reached a developmental stage where he may profitably begin a formal instructional program in reading.

RECEPTIVE LANGUAGE:

Language that is spoken or written by others and received by the individual. The receptive language skills are listening and reading.

REFLEX:

A movement performed involuntarily as a result of the stimulation of a sensory nerve which sends an impulse through a connecting nerve to a nerve center and thence to a motor nerve; this functional unit of the nervous system is called a reflex arc.

REGRESSION:

The return to a previous or earlier developmental phase of adaptation, partially or symbolically, of more infantile ways of gratification. Most clearly seen in severe psychoses.

REINFORCER:

Any stimulus event that can be used to strengthen a behavior it follows.

REINFORCEMENT:

A procedure to strengthen or weaken a response by the administration of immediate rewards (positive reinforcement) or punishment (negative reinforcement).

REINFORCING EVENT (RE):

Activities (High Probability Behavior, HPB) and materials which students choose and which are rewarding to them.

RESIDENTIAL SCHOOL:

This school provides a "home-away-from-home" setting for the child, and is primarily used for a child who is multi-handicapped or whose school district cannot give him the special help he needs. Such is often the case with small rural schools.

RESOURCE TEACHER:

A specialist who works with children with special learning needs and acts as a consultant to other teachers, providing materials and methods to help children who are having difficulty within the regular classroom. The resource teacher may work from a centralized resource room within a school where appropriate materials are housed.

RESPONSE:

An overt action resulting from a stimulus.

RIGIDITY:

A tendency for the muscles to become very stiff after they have been extended.

ROLE PLAYING:

In psychotherapy, a technique which requires the individual to enact a social role other than his own or to try out new roles for himself.

S**SATIATION:**

A procedure for weakening behavior, whereby the strength of a response can decrease as a result of continued reinforcement. The individual gets "sick of" the stimulus that was initially reinforcing and ceases responding in order to obtain that particular consequence.

SEIZURES:

Occurs when there are excessive electrical discharges released in some nerve cells of the brain. The brain loses control over muscles, consciousness, senses, and thoughts.

SELF-CARE SKILL:

The ability to care for oneself; usually refers to basic habits of dressing, eating, etc. **SELF-CONCEPT:**

A person's idea of himself. **SELF-ESTEEM:**

Valuation of one's self. **SEMANTIC:**

Pertaining to meaning and interpretation of words. **SENSORY-MOTOR:**

A term applied to the combination of the input of sensations and the output of motor activity. The motor activity reflects what is happening to the sensory organs such as the visual, auditory, tactual, and kinesthetic sensations. **SENSORY PERCEPTION:**

The direct awareness or acquaintance through the senses. **SERIOUSLY EMOTIONALLY DISTURBED:**

Exhibits one or more of the following characteristics over a long period or to a marked degree: 1) an inability to learn which cannot be explained by intellectual, sensory, or health factors; 2) an inability to build or maintain satisfactory interpersonal relationships or feelings under normal circumstances; 3) a general pervasive mood of unhappiness or depression; or 4) a tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenic children (94-142).

SEVERELY MENTALLY RETARDED:

The general IQ range of 20 to 34; those who fall between the profoundly retarded and moderately retarded.

SHAPING:

A procedure for developing new, or more complex, behavior through the reinforcement of successive approximations to the goal behavior. This procedure uses both positive reinforcement and extinction procedures to develop these closer approximations.

SHELTERED WORKSHOP:

A facility (usually in the community) which provides occupational training and/or protective employment of handicapped persons.

SIGN LANGUAGE:

A system of communication among the deaf through conventional hand or body movements which represents ideas, objects, action, etc. Distinguished from finger spelling.

SOCIALIZATION:

Shaping of individual characteristics and behavior through the stimuli and reinforcements that the social environment provides.

SOCIAL PERCEPTION:

The ability to interpret stimuli in the social environment and appropriately relate such interpretations to the social situation.

SPASM:

A convulsive involuntary contraction of a muscle or group of muscles.

SPECIAL CLASS IN REGULAR SCHOOL:

A student receives his academic instruction from a special education teacher, but may attend school wide activities such as assemblies, concerts, or nonacademic classes such as physical education or industrial arts with his peers.

SPECIAL DAY SCHOOLS:

Schools designed for students who have a serious handicap or are multiply handicapped and need comprehensive special education services for their entire school day.

SPECIAL EDUCATION:

Specially designed instruction, at no cost to the parent, to meet the needs of a handicapped child. Includes 1) varied instruction and environments, 2) speech pathology, and 3) vocational education.

SPECIAL EDUCATOR:

One who has had special training or preparation for teaching the handicapped; may also work cooperatively with the regular classroom teacher by sharing unique skills and competencies.

SPECIFIC LEARNING DISABILITY CHILDREN:

A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, speak, read, write, spell or to do mathematic calculations. The term does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, of mental retardation or of environmental, cultural, or economic disadvantage.

SPEECH IMPAIRED:

Communication disorder such as stuttering, impaired articulation, a language impairment, or a voice impairment, which adversely affects a child's educational performance.

SPEECH PATHOLOGY:

The study and treatment of all aspects of functional and organic speech defects and disorders; often the same as speech correction.

SPLINTER SKILL:

A skill which is not an integral part of the orderly sequential development. It is a skill mastered (usually under pressure) ahead of the usual developmental sequence. OR A child with poor overall motor coordination may be able to skip rope expertly. Rope skipping is in that case a splinter skill.

SPONTANEOUS RECOVERY:

The return of a conditioned response after a lapse of time following extinction.

SPONTANEOUS REMISSION:

The disappearance of symptoms or maladaptive behaviors in the absence of therapeutic intervention.

STAFFING:

An interdisciplinary conference bringing together several professional experts, each of whom has examined a given patient, for the purpose of combining diagnostic knowledge in order to arrive at a decision concerning the nature, the initiation, or the continuation of treatment.

STEREOTYPING:

A biased generalization, usually about a social or national group, in which individuals are falsely assigned traits they do not possess.

STIMULUS:

An external event, act, or influence which causes physiological change in a sense organ.

STUTTERING:

A disturbance of rhythm and fluency of speech by an intermittent blocking.

SUCCESSIVE APPROXIMATION:

The procedure used in shaping a behavior. The subject is reinforced for successively closer approximations to the desired behavior until that behavior is emitted.

SYMPTOM:

A manifestation of disordered functioning, including both the physical and psychological aspects.

SYNDROME:

A complex of symptoms; a set of symptoms which occur together.

SYNTAX:

The grammar system of a language. The linguistic rules of word order and the function of words in a sentence.

T

TACTILE:

Pertaining to the sense of touch.

TASK ANALYSIS:

The technique of carefully examining a particular task to discover the elements it comprises and the processes required to perform it.

TEACHING STRATEGIES:

Techniques for successfully implementing a lesson to a group of students. Usually deals with strategies for keeping students on-task, on-topic, attentive, accurate in responses and successful in task completion.

TEAM - TEACHING:

A direct service to students. Consultant and consultee cooperate to execute a lesson (academic or language focus). The time a consultant spends in co-teaching the lesson with the consultee.

THERAPY:

The science which deals with the treatment or application of remedies for the cure, alleviation, or prevention of disorders.

THERAPY STRATEGIES:

Techniques for eliciting targeted behaviors in students. Usually pertinent for one or two students. Usually implemented on a 1:1 basis.

TIME-OUT:

This procedure is a mild form of punishment based on the withdrawal of reinforcement, which has been used effectively in education. It consists of removing the child from the setting in which reinforcement is provided for some specified length of time. Hence, the term "time out from reinforcement."

TINNITUS:

A noise in the ears, as ringing, buzzing, roaring, clicking, etc.

TOKEN REINFORCEMENT:

A type of reinforcement in which a token (e.g., a poker chip), as a secondary reinforcer, can be exchanged for a primary reinforcing stimulus.

TRACKING:

Students are grouped on the basis of ability.

TRAINABLE MENTAL RETARDATE (TMR):

A mentally retarded individual who is likely to show distinct physical pathology and from whose training programs are directed primarily at self-care rather than vocational development.

TRANSFER OF TRAINING:

The effect of previous learning on present learning. If learning a new task is facilitated, transfer is positive; if the new learning is interfered with, transfer is negative.

TRANSITION:

The period of adjustment from school to working life that is outcome oriented encompassing a broad array of services and experiences that lead to employment and/or adult life (Will, 1984).

TRAUMA:

Any experience which inflicts serious damage to the organism. It may refer to psychological as well as physiological insult.

U

UNILATERAL:

Pertaining to one side of the body.

V

VALIDITY:

The extent to which a test does the job for which it is used. Validity, thus defined, has different connotations for various kinds of tests and, accordingly, different kind of validity evidence are appropriate for them. For example: The validity of an achievement test is the extent to which the content of the test represents a balanced and adequate sampling of the outcomes (knowledge, skills, etc.) of the course or instructional program it is intended to cover (content, face, or curricular validity).

VERBAL CONDITIONING:

Application of conditioning principles of speech. Verbal behavior can be controlled by the systematic application of reinforcement to specific aspects of speech.

VERBAL EXPRESSION:

Ability to express one's own concept verbally in a discreet, relevant and approximately factual manner.

VERTIGO:

A sensation of whirling or dizziness from overstimulation of the semicircular canal receptors; often associated with disease of the ear and deafness.

VICARIOUS LEARNING:

The acquisition of response capabilities without practice. Learning by observation of the behavior of others (modeling) is an example of vicarious learning.

VISUAL ACUITY:

Measured ability to see.

VISUALLY HANDICAPPED:

Visual impairment which, even with correction, adversely affects a child's educational performance. The term includes both partially seeing and blind children.

VISUAL-MOTOR COORDINATION:

The ability to coordinate vision with the movements of the body or parts of the body.

VISUAL PERCEPTION:

The identification, organization, and interpretation of sensory data received by the individual through the eye.

VOCATIONAL EDUCATION:

Organized educational programs which are directly related to the preparation of individuals for paid or unpaid employment, or for additional preparation for a career requiring other than a baccalaureate or advanced degree.

VOWEL:

A conventional vocal sound produced by certain positions of the speech organs which offer little obstruction to the air stream and which form a series of resonators above the level of the larynx in the vocal tracts. Distinguished from consonant.

W

WAIS:

Wechsler Adult Intelligence Scale - Revised.

WISC:

Wechsler Intelligence Scale for Children III.