

Making Mainstreaming Work Through Prereferral Consultation

The use of a comprehensive plan with six key elements will help districts implement prereferral programs that better meet the needs of their students.

The most significant current development in special education is the growing trend toward prereferral intervention. To better serve low-achieving students and cut the cost of pull-out programs, many school districts are creating programs of consultation to help the teacher maintain students in the classroom before seeking formal evaluation and special education (SPED) service.¹ This effort, often called the Regular Education Initiative, demands significantly broader roles both of teachers and of those staff—usually special educators and school psychologists—who become consultants. The promise of these new roles is compelling: a fuller realization of mainstreaming, a more rapid and collegial response to teachers' concerns, and a better vehicle for enhancing teachers' skills.²

But the reality is more complex, the results less encouraging. The conditions vital to effective consultation rarely exist. Regular education has not yet accepted mainstreaming itself, let alone prereferral intervention, and few teachers welcome their enlarged responsibility. Many SPED staff are reluctant to assume the role of consultant. Paradoxically, prereferral efforts often highlight the disparity between mainstreaming's vision and its implementation, raising anew questions about its premises and promises. This article examines the conditions required to make prereferral consultation work in this problematic context.

The Mainstreaming Context: Unforeseen Problems

At its inception, mainstreaming seemed as valuable for what it would do away with as for what it would do. It sought to end a system that ignored many children with critical needs and warehoused others in residential schools; it sought to expand the rights of these students and their parents; and it sought schools where children would be seen not as better or worse but as different kinds of learners and where teachers would adapt their pedagogy to a wide range of learning styles. Though it has found limited success in these efforts, mainstreaming has been beset by four unforeseen problems.

Oversold, Underfunded

Like many educational innovations, mainstreaming has suffered from inflated promises and inadequate resources. It makes the public school responsible for remediating virtually the entire range of physical, cognitive, and emotional conditions that can affect students. Implicit in this responsibility is a medical model of service: the school is to provide both diagnosis and cure. As tests yield ever more refined assessments of "processing problems" and other conditions, parents assume that successful treatment will follow. This ignores a significant gap between diagnostic technology on the one hand and remedial technology and resources on the other. We are much better able to identify some

disabilities than to treat them. And some diagnoses, however elegant, do not offer clear indications for treatment. Others do have remedial implications, but the prognosis, even given ideal resources, is guarded. Special education has proved far more expensive than anyone imagined. Lacking the political clout to obtain adequate funding, schools are often unable to provide the full range of service that would meet all the identified needs.

Overemphasis on Parental Rights

One of the most troubling (but least publicly acknowledged) mainstreaming problems for school staff is dealing with the parents of SPED students. Though, ideally, parent and school are allies, too often their relationship turns adversarial, characterized by mutual disappointment and scapegoating. These problems, to which both sides contribute, are complicated by mainstreaming legislation that is weighted toward parental rights and against professional prerogatives. No one can object to entitling parents to prompt assessments and appropriate programs for their children. But the effect of current law is to swing the pendulum out of balance. Expanded parental awareness of mandated requirements, coupled with the implicit promises noted above, has dramatically increased the number of parents seeking service for their children. Indeed, many students are now receiving more services than they require be-

cause parents insist on them, often threatening legal action. "The more we provide, the better our work, the more parents we have demanding services," says one SPED administrator. "It's no longer a matter of what's educationally right for lots of these kids, but of how many legal battles we can afford."

Unrealistically Expanding Roles and Responsibilities

Mainstreaming radically alters the teacher's role and responsibility, making classes more heterogeneous and requiring far more individualization than many teachers are prepared for. Heterogeneous grouping has compelling values of its own, but it complicates instruction and classroom management—particularly when it involves students with behavior problems—and demands smaller teacher-pupil ratios. Because few districts have the resources to reduce ratios, mainstreaming makes teachers' lives more difficult. Compounding this difficulty is mainstreaming's emphasis on individualization: it requires teaching students rather than disciplines. From secondary teachers I have heard endless variations on this theme: "The exceptions I have to make are so extreme that I'm not teaching my subject anymore." Elementary teachers, too, though more accustomed to individualizing and to teaching the "whole child," find the range of approaches required difficult. At both levels, teachers insist that SPED students drain their attention from the majority of the class.

Increasingly Burdened Teachers

Even without mainstreaming, life in schools has grown more onerous. Teachers everywhere report deterioration in the motivation and behavior of students and in the support and responsiveness of families. Many attribute this to high rates of divorce and single-parenting and to rising numbers of two-career families and of children living in poverty. Whatever the causes, children from all walks of life are presenting themselves at school less ready to learn. At the same time, parental expectations continue to rise. Schools are under relentless pressure

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to upgrade curriculum, teach higher-order thinking skills, accelerate student performance, and meet a growing range of social and emotional needs. "Parents demand more and more service from us, both academic and nonacademic, but do less and less for their own children," says one principal, echoing a common sentiment. Teachers' responses to this dilemma are affected by the fact that they are a veteran, aging group. The average teacher is nearly 50 and a 20-year veteran. Whatever the benefits of age and experience, they do not include flexibility, openness to imposed change, or a wish to have one's job made more demanding (Evans 1989).

These four problems have complicated the delivery of SPED services and the tenor of professional relationships in schools. They have left a large core of teachers unprepared and/or unwilling to adapt to the requirements of mainstreaming. In this context, it is not surprising that an expanded mainstreaming effort based on consultation can provoke resistance among teachers and apprehension among special educators.

Coping: Effective Prereferral Consultation

In the face of such problems, implementing a program of prereferral consultation is a complex task. I have had the chance to consult with many districts undertaking such efforts. Those that are succeeding, though their pro-

cedures differ, developed a comprehensive plan that includes six elements: (1) selection of consultants; (2) training in consultation techniques for consultants and support for their efforts; (3) administrative sanction; (4) training and support for teachers; (5) parent education; (6) start-up funding.

Selection of Consultants

Most schools designate members of their multidisciplinary team—special educators and psychologists—as consultants. Some adopt variants of the Teacher Assistance Team (Chalfant et al. 1979), in which classroom teachers consult with one another. In the literature there is lively debate about which model is better suited to provide "collaborative" consultation. Because it is so common, I will discuss the former. But I have seen genuinely collaborative help provided by teachers as well as specialists, by individuals as well as teams. The methods outlined below may be learned and applied by all staff. The key is not *who* consults but *how* and whether the necessary conditions obtain to make consultation work.

Training and Support for Consultants

The core requirement for successful consultation is effective training and support for those who are to provide it. Though SPED staff appreciate the rationale for making them consultants, some fear loss of their status as the provider of unique services and eventually of the job itself. Others are intimidated because they imagine the consultant's role to be beyond them. They understand it as the provision of expert opinion by a specialist with superior skill who provides a diagnosis and prescribes a treatment—the medical model of consultation. Applied outside medical settings, this model has two main drawbacks: (1) it does not help the consultee to develop his own skills but leaves him dependent on the consultant; (2) the consultee rarely implements fully the consultant's remedies, which, after all, are not his own.

Writers on prereferral unanimously reject this approach in favor of a collaborative model of consultation.

Since the goal of prereferral is to emphasize teachers' ownership of mainstreaming and ability to meet students' needs—and since teachers have expertise that SPED staff lack—consultation should be an informal, cooperative venture between co-equals who blend their different skills on the basis of parity. Apart from calling for these characteristics, the prereferral literature was scant on the actual how-to of collaborative consultation until recently (Zins et al. 1988). The clearest model is found in the organization development literature, where it is called "process consultation" (Schein 1988). It sees the consultant as catalyst in an effort at joint problem solving. Its premise is that solutions will be more effective and lasting when they are the consultee's own. The consultant's role is to help the consultee make a diagnosis and develop a remedy. While she is glad to provide suggestions where she can, the consultant's main expertise is in collaborative troubleshooting.

Process consultation takes time and experience to learn, but its basic precepts are straightforward. As applied to mainstreaming, they include:

- Consultation depends on mutuality, trust, the consultant's respect for the teacher's skill, and her ability to engage the teacher in problem solving.

- Teaching taxes its practitioners' self-esteem and leaves them periodically vulnerable to loss of perspective and feelings of inadequacy. Consultation must address these issues, not just prescribe new behaviors.

- Each individual has his or her own problem-solving style, with its own strengths and weaknesses. Consultation must respect this style, drawing particularly on the consultee's strengths.

The goals of process consultation are to:

- *expand perspective*—to help the teacher broaden his perspective on the problem, depersonalize it, and see it in the larger context outlined above

- *build skills*—to help the teacher renew and enhance his problem-solving repertoire. This includes helping him recall and draw upon his existing skill-base and involving him in the design of coping strategies

- *provide support*—to help the teacher restore his self-esteem and commitment. This means helping him to appreciate the successes he has achieved, no matter how small, and is often more important than skill-building.

Throughout the process, the consultant's focus will be: what will work for *this* teacher with *this* student? Her approach does not only help the teacher adjust to the student's learning style; it respects the teacher's own style and seeks to enhance his strengths. Ideally, the consultant provides something concrete—a jointly devised strategy to apply in the classroom—and something felt—conveying to the teacher that he has been

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heard, that he is not alone with the problem, that his competence is recognized and his efforts to help a student are appreciated.

In addition to training, SPED staff need the necessary logistical support—especially time—to become consultants and collaborators. Most are overtaxed by large caseloads and lengthy paperwork. To function effectively as consultants and as a team overseeing the prereferral process, their schedules must permit them to be available to teachers (both for initial consultations and for follow-up visits) and to confer together. This requires additional staffing to absorb some of their caseload until consultation reduces the population of students referred.

Given good training and logistical support, SPED staff are ready to become consultants. But to succeed in this effort, they need a broader range of support, one which begins with administrators and embraces teachers and parents and which creates conditions that permit consultation to work.

Administrative Sanction

Prereferral consultation is critically dependent on vigorous, sustained top-down advocacy and support. Because mainstreaming depends on classroom teachers but is unwelcome to them, active sanction by those to whom they answer is essential.³ A clear mission statement to all staff should emphasize the new mainstreaming mandate and outline the consequent changes in structure and roles—an initiative that must start with the superintendent and be firmly endorsed by principals. SPED administrators and staff typically have no formal influence over teachers. Lacking status and power, knowing that many teachers haven't "bought into" mainstreaming, they rightly fear resistance ("Teachers don't want me to consult; they want me to take a student out and fix him"). When a special educator announces that he or she will now be consulting with teachers about classroom modifications before any student is referred for a SPED evaluation, teachers have little reason to accept this proclamation. When a principal announces it, there is much more reason for them to do so.

In addition to initial advocacy, administrators must provide continuing support. Acceptance of prereferral's new roles and procedures comes slowly, and sabotage is to be expected. Thus, it is usual to find some teachers seeking to avoid consultation and classroom modifications by suggesting to parents that they exercise their right to demand a formal SPED evaluation. In such cases, only the principal has the standing to insist that procedures be respected. If the principal is known to be out of touch with the prereferral initiative (by not attending meetings of the multidisciplinary team or not confronting resistance), consultation stands little chance of taking hold.

Sanction includes supervisory follow-through. Rather than work with teachers who need to improve their mainstreaming skills, supervisors generally avoid the issue by assigning large numbers of SPLD students to teachers who do. Yet if we are serious about mainstreaming, supervisors and evaluators must help teachers recognize the importance of expanding their instructional repertoires and must be prepared to reflect this prominently in teachers' performance appraisals.

Training and Support for Teachers

It is neither fair nor sufficient simply to press teachers to change the patterns of a lifetime; like SPED staff, they deserve appropriate training.⁴ To accept their new roles, teachers need inservice that begins by enjoining them, not attacking them or condescending to them, and which recognizes that they need encouragement to try new behaviors before they need technical instruction. This is crucial because there is little natural reason for teachers to embrace the changes and complexities mainstreaming requires. Some may respond to the professional challenge of broadening their skills; others may realize that they must accept the inevitable and adapt to it; many may come to appreciate the importance of helping a significant population of students to live fuller lives. But few are likely to respond to inservice training unless it acknowledges frankly the larger context of problems outlined above and the burden that mainstreaming represents.

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Inservice must go on to address the concerns that trouble teachers most in their classrooms. These begin *not* with cognitive or physical handicaps but with motivation and behavior. Endemic problems among SPED students include:

- *attention-seeking behavior*—primary impulse disorders or oppositional, "acting-out" behavior styles;
- *passive refusal*—lethargy, depression, and reluctance to try;
- *variability*—marked fluctuations in attention, concentration, and performance and difficulty sustaining previous gains.

These problems are a daily challenge to teachers' skills, expectations, and self-esteem. Inservice must provide a framework for understanding them so that, for example, teachers can learn to see variability as an intrinsic part of most disabilities and realize that though they prefer a steady, reliable rate of progress, periodic setbacks are predictable.

As part of this framework, training must demystify special education, offer concrete strategies for coping with the above problems, and help teachers adjust their expectations. Many teachers imagine that mainstreaming requires specialized approaches far beyond their ken. Yet much of what special educators do consists of tutoring and small-group instruction, and many methods they employ are easily adopted, including such basic behavioral techniques as emphasizing

strengths rather than attacking weaknesses; shortening the wait for rewards; and giving new methods a sustained try (not abandoning them if they don't produce instant results).

Along with useful techniques, inservice must give teachers permission to modify their expectations for their students—and, most important, for themselves. Everything about mainstreaming, from the term itself to the assertive language of Individual Educational Plans ("Johnny will read on grade level by June 1st") fosters the idea that SPED students can learn in the mainstream like everyone else. Though they need to hear "every student can learn" and need to be inspired to look for the strengths in all students, teachers must not be pressed to fulfill unrealistic promises. Even as it urges them to do their very best, inservice must recognize that coming up short is inevitable. It must encourage teachers to avoid personalizing problems—not to treat misbehavior as a personal attack—and to moderate expectations—to accept the variability noted above and set goals accordingly.

Good training and effective consultation are vital, but not sufficient. Teachers also need tangible support in the form of pupil ratios that enable them to mainstream effectively. Too often, districts imagine that teachers, briefly trained and offered consultation, should be able to integrate most special needs students with no loss of attention to other students. The presence in a classroom of two or three pupils with significant special needs (often, there are five or six) radically complicates a teacher's task, dividing and draining his or her energy and attention.⁵ Unless the school is prepared to accept reduced performance, it must be staffed to create manageable, teachable classrooms.

Parent Education

Though much lip service is paid to parental involvement, it is often a source of real ambivalence for school staff, for whom, as noted earlier, parents' mandated rights are a focus of frustration (they often see parents as having too much influence and as being overly critical, in part because of unrealistic expectations). SPED parents rarely need to be sold on the

value of more complete mainstreaming. But like teachers and special educators, they need help to bear their own burdens and to improve overall cooperation on students' behalf. They benefit from the same approach recommended above for teacher inservice: presentations that enjoin them, that address the issues that most trouble them at home as well as at school, that demystify learning disabilities and offer concrete coping strategies, and that help them to moderate their expectations.

Start-Up Funding

All of the above elements have costs: trainers, inservice presenters, staff to reduce SPED caseloads and teacher-pupil ratios. Yet, as one superintendent noted, a main impetus behind prereferral initiatives is cost-cutting. "Few of us would be pushing this so hard if we weren't going broke on special ed." Of these costs, all but the last are time-limited. In the corporate world, the need for this kind of initial expense is axiomatic; it is accepted that future savings begin with current costs, that change, even in pursuit of economy, often requires investment. In schools, we too often seek change without expense. Districts that implement effective prereferral programs have pressed successfully for start-up funding. Without this, prereferral cannot fulfill its promise.

Beginning

Districts that provide training and support for consultants and teachers, administrative sanction, parent education, and start-up funding are making new models of mainstreaming work—but not easily or quickly. Though prereferral promises to improve mainstreaming and to be more cost-effective than pull-out models, the transition process can be painful. Moreover, it cannot eliminate the need for a broad range of services to students.

Some districts have found that an effective strategy is to begin from strength by starting with a pilot venture, usually in one or two elementary schools that have strong, committed leadership, a good SPED staff, and a core of receptive teachers. As it becomes clear that prereferral does not

simply mean more work for teachers, that they do receive effective support and can make significant headway with students, the effort becomes easier to promote throughout the district.

But as they fashion and implement a comprehensive plan, school leaders must remember that they are embarking on a major change in attitudes and behavior and doing so in difficult times. Like the students they seek to serve, and the staff whose roles they seek to change, they need high expectations to encourage them and a realistic perspective to sustain them. □

¹Many prereferral efforts also move SPED staff into classrooms as co-teachers. Though this article addresses only consultation, much of it applies equally to co-teaching.

²In the literature, it is accepted that the Regular Education Initiative and prereferral consultation will affirm the teacher's ownership of the problem and competence in addressing it. Differences arise on two sets of issues: how comprehensive the effort can be (Braaten et al. 1988, Algozzine et al. 1990, Jenkins et al. 1990, Kauffman et al. 1990, Lieberman 1990); and how to structure consultation that is collaborative (Pugach and Johnson 1989a, 1989b; Graden et al. 1985; Graden 1989).

³Changes in professional roles, relationships, and responsibilities usually provoke uncertainty, suspicion, and resistance. For an excellent review of this key underacknowledged issue, see Zins et al. (1988).

⁴Many approaches are relevant to this task. Some are directly related to special education, such as instruction about learning disabilities. Others have much broader relevance to teaching and to the very structure of schooling, such as the techniques of cooperative learning and of TheodoreSizer's "essential school." Neither is designed as a mainstreaming remedy, but both emphasize characteristics vital to successful work with SPED students: teacher flexibility, establishment of a cooperative classroom community, and, above all, active, participatory involvement by students.

⁵There are two issues here: the number of special needs students and the severity of their conditions. Faced with soaring tuition costs for out-placements, districts are retaining many more very troubled students.

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