

IDEA

- Individuals with Disabilities Education Act (IDEA)

IEP

- Individualized Education Plan (IEP)

Immigration

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History of Immigration to the U.S.

The ongoing debate about immigrant rights gained worldwide attention when pro-immigrant protest mobilizations took place across the United States (U.S.) in late March and April of 2006. Immigrant supporters, human rights activists, non-governmental organizations, and workers unions organized massive marches in response to the HR4437 initiative, which pronounces undocumented immigration a felony, and providing assistance to undocumented workers, a crime. Some media outlets referred to the rallies as “the biggest civil rights demonstration in the U.S. history.” In academic circles, the marches also sparked renewed mobilization and debate. However, for migration scholars, immigration issues, policies, and concerns have been at the forefront of discussions throughout the past century.

Since the late nineteenth century, various immigrant groups have been viewed as undesirable and unwelcome by the U.S. government. As early as 1882, the Chinese Exclusion Act barred Chinese immigrants from entering the country. Two decades later, foreign-born individuals of Italian, Jewish, and Polish descent were deemed “objectionable” by the U.S. Immigration Commission. Pervasive xenophobia and ethnocentrism following World War I promoted unflattering

misrepresentations of people’s race, religion, and ideologies throughout the 1920’s, 1930’s and 1940’s. Legislation reflecting these beliefs, the National Origins Act (1924), limited migration from Asia and Europe, and restricted the number of new immigrants accepted from a given country to 2% of that nationality’s population already residing in the U.S.

Due to the economy’s sudden decline, mass deportations of Mexican Americans occurred following the Great Depression. However, as the U.S. economy rebounded post- World War II, immigrant labor was again welcomed. Under the Bracero Program (1942–1964), 4,000,000 Mexican “seasonal” farm workers were granted visas. Throughout this 16-year period, migrant workers regularly suffered mistreatment and abuse from their employers and contractors. After 15 years of temporal work in the U.S., Mexican workers again experienced a massive government-sponsored deportation under the Immigration Act of 1965. The Act abolished national quotas in favor of hemispheric ones, paving the way for increased migration from Latin America and the Asian continent. As a result, the U.S. experienced a steep rise in its foreign-born inhabitants from 1970 to 1980, with the country’s immigrant population climbing from 9.6 million to 19.8 million. Amid the civil and labor rights movement of the 1960’s, amendments were made to this Act, designed to restrict legal immigration. Yet, despite a climate of increased control, illegal immigration steadily began to rise. In 1986, Congress enacted the Immigration Reform and Control Act (IRCA), intended to manage uncontrolled immigration and to discourage employers from hiring undocumented staff. Under this legislation, nearly 3,000,000 people (74% of Mexican descent) were granted a path to citizenship, and provided with an opportunity for family reunification. However, for many, this Act fostered an atmosphere of discontent.

Following the terrorist attacks of September 11th, 2001, the U.S. public grew increasingly concerned about the potential harms posed by individuals with foreign ties residing both inside and outside of the U.S. In response, a new era in immigration policy dawned, and is now overseen by the Department of Homeland Security. Foremost on this organization’s agenda is to secure the country’s borders, thereby reducing illegal migration. In spite of increased vigilance, wariness, and socio-political debate, the number of immigrants, both legal and illegal, continues to steadily rise. Currently, approximately 31.1 million immigrants reside in the

U.S., representing over 10% of the country's total population.

The ethnic and racial make-up of immigrants into the U.S. has changed considerably in the past 100 years. Throughout the first decade of the twentieth century, Europeans accounted for 91% of all immigrants. A century later, in 2005, immigration is predominantly fueled by individuals from Latin America (32%; Mexico alone accounts for 30.71%) and Asia (25.8%), as compared to the 5.1% from northern and southern Europe.

Theoretical and Methodological Approaches

Given its breadth and social importance, immigration has received a great deal of attention from social scientists through their explorations of the social, political, economic, and psychological aspects of the process. In particular, research on immigrant children has focused on educational processes and outcomes, which have far-reaching implications for the immigrants' success in the professional and social spheres of the host society. Many immigrants arrive with little social and human capital and must build it throughout their lives. Education is often a key resource in acquiring the knowledge base necessary to become economically and socially successful. In addition, engagement in institutions of learning is a central means to cultural integration.

A full understanding of the immigrant educational experience calls for research on the social, political, and economic challenges immigrants encounter, and the obstacles they face. What forms of prejudice do immigrants encounter and how do they deflect or cope with its' negative impact? What is the role of family, culture, identity, and the school context in the educational experiences and outcomes of immigrant children?

Social scientists research the complex social phenomenon of immigration through a variety of perspectives and theoretical frameworks. Political scientists, demographers, economists, and some sociologists conduct investigations "from above," evaluating immigration at the macro level by focusing on the economic benefits, political implications, and management of socio-economic and socio-demographic changes. In contrast, sociologists, psychologists, educators, and anthropologists view research "from below," examining immigration at the micro level by exploring the immigrant's life experiences, educational outcomes, identity negotiations, political behavior, social networking,

community ties, mental and physical health. Researchers interested in the interplay between institutional contexts and individual immigrant experiences interconnect views "from above" and "from below."

The findings presented here are acquired through quantitative and qualitative means. Quantitative research primarily relies on large data sets collected using the census, large-scale surveys, and questionnaires, and analyzed by statistical modeling. Quantitative methodology is useful in identifying general trends and forecasting outcomes across different groups (e.g., identifying groups of immigrant children who are vulnerable to, or well suited for, dealing with educational challenges). In contrast, qualitative data is drawn from ethnographies, observations, interviews, case studies, and narratives designed to provide a more vivid, detailed, and subject-based insight into the experiences of individuals within their own social contexts (e.g., ethnographic studies of the role of ethnicity and gender in educational contexts).

Educational Outcomes among Immigrant Populations

Currently, one in five school-aged children in the U.S. are immigrants. While modern day immigrant populations are, as a whole, more educated than those arriving during the last great migration of the early twentieth century, the amount of human and social capital newly arrived immigrants bring to their host country varies greatly between immigrant groups; a bimodal pattern of immigration often emerges. Many immigrants are affluent, highly-educated, and enter into high-level professional jobs (i.e., Asian immigrants oftentimes arrive with higher educational and occupational levels than those achieved, on average, by U.S.-born Anglo Americans). In contrast, others are poor, have considerably fewer years of formal education, and enter America's lowest economic classes (e.g., "Labor immigrants" arriving primarily from Central America and Mexico).

Despite these hardships, immigrant children are often academically successful and among the ranks of high school valedictorians, national merit-based award winners, and prospective freshman at Ivy League universities. At the same time, however, some groups of immigrant children are reported to have disproportionately high rates of school drop out and academic failure. According to existing research, success in school also varies by generational membership for many ethnic

minority groups. First-generation immigrant children often experience highly positive educational, health, and psychological outcomes. Conversely, researchers report diminished academic aspirations and school performance in second generation immigrants. More specifically, second and third generation immigrant youth frequently experience more negative attitudes and declining educational outcomes as compared to their first generation counterparts. These findings are unexpected since successive generations of American youth have a better command of the English language and familiarity with American culture.

Differences in educational outcomes between and within immigrant groups have given rise to much research on why some immigrants thrive while others languish in the educational system. Given the multiplicity of subgroups that exist within the immigrant population, there are numerous moderating variables that need to be considered to understand patterns of immigrant educational attainment.

Factors Influencing Immigrant Educational Outcomes

The Stress of Immigration

Among the many factors that underlie educational outcomes in immigrant populations, the first and perhaps most important aspect of the “immigrant experience” is the stress and complexity of relocating to a new country. An immigrant’s economic and social background, as well as his/her initial treatment upon arrival, are the two most important factors that mediate the amount of stress the individual will experience. These factors also mediate the individual’s ability to handle that stress. Factors that have a negative impact on an immigrant’s stress levels and mental health include escaping poverty or violence in the home country, encountering poor living conditions, language barriers, loss of social status, difficulty understanding and adjusting to new social settings, discrimination, and lack of social support from a co-ethnic community upon arrival in the host country. These experiences can increase the likelihood that an immigrant will suffer emotional and psychological distress (i.e., loneliness, depression, disorientation, demoralization, marginalization, and alienation). Furthermore, those who come to the U.S. as refugees may have experienced trauma prior to migration and may suffer extreme psychological stress (i.e., Post-Traumatic

Stress Disorder). Although the negative impact of these initial stressors recedes with time, other aforementioned facets of the immigrant experience gain in prominence and influence social, economic, and educational outcomes.

Segmented Assimilation

Many investigators have focused on the causes of the decline in immigrant youth’s performance and aspirations from the first to the second generation. The theory of segmented assimilation suggests that the contexts that immigrants come from, as well as the situations that they are immigrating to, help explain observable differences in educational and acculturation trajectories across generations of various immigrant groups. Immigrants will likely experience a better outcome over time if they migrate through legal channels with a high level of education and if mainstream society has a favorable attitude toward their presence. However, if an illegal immigrant arrives with low educational resources, and is poorly received by the host society due to language or socio-cultural differences, then educational and adaptive outcomes will likely diminish over time.

Stereotyping, Prejudice, and Discrimination

Stereotyping, prejudice, and discrimination in educational, vocational, and social domains are often a constant presence in the lives of immigrants. Unfair treatment and exclusion can have long-term psychological and social effects, and can foster a climate of mistrust toward individuals and institutions that are perceived as discriminatory. Too often, stereotyping and negative attitudes place immigrant children, particularly second generation youth, in situations that can promote the development of negative identities.

Immigration researchers refer to society’s impact on immigrant students as a “social mirror,” which reflects a vision of who they are through the eyes of others. Parents, teachers, and peers evoke positive or negative images through this mirror, which, whether accurate or inaccurate, serve as important sources for identity formation. Negative reflections can have an adverse impact on identity formation and, as a result, academic motivation and outcomes. In many instances, immigrant

children report being acutely aware of how “un-American” they seem. This self-perception is often heightened by the divergence between customs and values practiced in the child’s home and community, and those of mainstream society. At the same time, an inability to embrace mirror images can result in exclusion and disengagement from American culture and institutions, such as schools.

There are many other barriers that prevent the development of a positive sense of self for immigrant students. Discrimination by students and teachers, inaccessibility to adult role models, and detrimental institutional policies, all hinder the development of a positive self-identity. An opposition to mainstream institutions, such as education and formal schooling, might develop among immigrant students who feel that society does not respect their native culture and language. This oppositional stance places immigrant or minority individuals at odds with their educational process, thus limiting their potential for academic success.

Stereotype threat is yet another powerful psychological process that can affect educational outcomes for members of minority groups. This term describes the acute awareness of achievement-related negative stereotypes held against one’s group, thereby creating anxiety and fear of confirming the perceived stereotype. Increased anxiety may interfere with, and decrease performance on, tasks to which the stereotype applies. The effect of stereotype threat is the strongest when group membership and negative performance-based stereotypes are salient, particularly in educational and diagnostic testing situations. Stereotype threat has been shown to significantly decrease cognitive performance on diagnostic testing among African Americans, as well as performance on mathematical tests among women. For example, recent studies conducted by Kay Deaux and colleagues reported that many West Indian immigrant college students, who are typically perceived as Black in the U.S., also experience the detrimental effects of stereotype threat. While first generation immigrants did not exhibit a decrease in performance on testing conditions that activate stereotype threat, U.S.-born second generation immigrants exhibited stereotype threat effects and a concomitant decrease in performance.

Family and Parental Involvement

Other key factors in the educational experience of immigrant children include the encouragement,

participation, value systems, and cultural practices passed on from families to their children. Immigrant parents and their extended families often feel that school is an important factor for upward mobility into U.S. society and therefore impart a sense of respect and appreciation for the educational opportunities available to their children. It has also been argued that immigrant optimism acts as an important protective mechanism and buffers immigrants against the impact of negative external forces. Frequently, the gratitude that recent immigrants feel for the educational opportunities available in the U.S. results in strong encouragement of their children to succeed academically. For some immigrant groups, Mexicans and Central Americans, especially, education in their home country is not accessible past a certain grade level and the mandatory status of education in the U.S. is perceived as a tremendous improvement.

Multiple investigations have found that immigrant parents generally have positive attitudes toward their children’s education, hold high aspirations for their academic success, and are highly motivated to help them thrive in school. Despite these positive attitudes, many immigrant parents do not adequately understand how to provide the concrete and specific guidance necessary for facilitating academic success. Rather, parents may believe that schools bear the majority of the educational burden; the parents’ role is to provide encouragement and not to collaborate or explicitly direct the child’s education. Thus, parents cede the specifics of their child’s education to the “experts,” and feel that teachers and school administration know how to best educate their children. Such deferential attitudes may unintentionally result in poor parental monitoring and a lack of understanding of the American school system. Although immigrant parents care a great deal about the quality of their child’s education, the active parental participation, advocacy, and collaboration necessary for academic success often goes unrealized.

Parental involvement in the education process often entails navigating through the bureaucracy, a complex process even for parents with advanced degrees and proficient English language ability; even college educated U.S.-born parents report feeling overwhelmed and confused by the information needed to guide their children through the college admissions process. In general, parents feel that the information they receive is oftentimes difficult to understand and that school staffs are not always clear or forthcoming with the information they disseminate. Communication issues

are compounded when parents are not fluent in English or have low levels of education. As a result, immigrants face even greater difficulties in helping their children achieve their education-related goals. When immigrant parents do not avail themselves of educational or social resources, a lack of continuity between home and school can arise and have negative consequences for the immigrant student.

Socialization

Developmental scientists also highlight the importance of familial involvement in a child's cultural socialization practices (e.g., the acquisition of ethnic and cultural values, beliefs, practices, knowledge, and language). These practices are influenced by length of stay in the host country, acculturation, language, perceived social, school and neighborhood contexts, changes in ethnic and gender identity, educational and occupational opportunities, and perceived discrimination. One form of cultural socialization emphasizes cultural practices, like exposing children to cultural literature, music, artifacts, fables, ethnic foods and culture-specific holiday traditions. A second form of socialization is related to discrimination, whereby parents caution their children about the stereotypes or social barriers they may encounter, which promotes feelings of mistrust toward the majority culture. This practice is especially salient for immigrants who are perceived as Black or African American. Qualitative data evaluating Caribbean immigrants, including individuals from the West Indies and the Dominican Republic, proposed that parents teach their children to differentiate and isolate themselves from U.S.-born African Americans, a minority group frequently targeted by discrimination and/or social injustice. As part of preparing children for bias, parents also directly and indirectly teach coping strategies as well as convey messages of egalitarianism which encourage respect for diversity.

Establishment of Identity

The process of immigration disrupts an individual's psychological and social development through exposure to a different ethos, rules, roles, norms, discourses, power structures, and cultural practices. Changing cultures demands complex adjustments on cognitive, interpersonal, and social levels, as well as at the level

of the self or identity. A central task of adolescence is to integrate one's roles in the world into a healthy and coherent sense of self to function successfully in adolescence and adulthood. This task is complicated for immigrant youth by the multiple and, at times, conflicting roles they must assume in the different contexts to which they are exposed. As immigrant children undergo a reconstruction of their culture and contexts, they experience complex changes in identity that are influenced by interactions with U.S. culture and institutions as well as interactions with their own ethnic culture and community. The process of identity construction is not immutable, but rather shifting and multifaceted, and is continually renegotiated as a child develops and interacts with his/her parents, peers, school, and neighborhood contexts.

An influential framework for understanding immigrant identity was developed by John Berry, who proposed that identity is constructed along two important dimensions—the extent of identity with the host culture and the extent of identity with the home culture. Berry considers the immigrant's motivation to acculturate to U.S. society and culture by taking into account whether it is of value for the minority individual to establish relationships with the larger, dominant society and maintain one's ethnic identity and cultural characteristics. The negotiation between these choices gives rise to immigrant and minority individuals' adaptation and identity development. Adaptation can take place in several forms: (a) assimilation, where the immigrant group gives up its culture and adopts the dominant culture; (b) integration, where the immigrant group maintains its own culture and also adopts aspects of the dominant culture; (c) separation, which occurs when the minority or immigrant group maintains its own culture, and does not adopt the dominant culture; and (d) marginalization, which occurs when the immigrant group neither maintains its own culture, nor adopts the dominant culture.

It has been theorized that maintaining a bicultural balance between the native and newly-adopted cultures, while holding a positive attitude toward both groups, can help an individual in a cultural minority develop a healthy sense of self and protect him/her against negative educational outcomes. For example, fluent, English- and Spanish-speaking immigrant youth from bilingual households are the least likely to drop out of school. Furthermore, the maintenance of native language is beneficial because it allows a child to

access social support from both family and the larger community, particularly when the family and community are non-English speaking. A child who experiences their home language and culture in an institutional context such as school will likely feel more valued in that setting and in the larger society, making the possibility of academic success appear more attainable.

Seminal works in the field posit three types of immigrant identity: ethnic flight, adversarial identity, and bicultural identity. Ethnic flight refers to an identity constructed to fit in with the host culture and is associated with socializing primarily with peers from the mainstream culture and mimicking their behaviors and attitudes. Language is often an important tool; speaking English becomes a proxy for belonging and acceptance. Although children who employ ethnic flight may perform at competent academic levels, they may isolate themselves from building relationships within the ethnic community and lose the benefit of having a “buffer” from the negative effects of discrimination. Adversarial identity refers to negotiating a sense of self around rejecting mainstream values, often perceiving one’s options as either being “like *them*” or “betraying your own.” This negotiation becomes a constant source of conflict between future opportunities and present-day self, and may place immigrant children at increased risk for premature termination of their education, with a subsequent higher probability of unemployment. Many children develop bicultural or “hybrid” styles, and creatively make use of living in both worlds by embracing a sense of ethnic pride while also functioning competently in mainstream American society.

Bicultural identity is associated with high academic achievement and is considered by developmental psychologists to be the most adaptive identity for immigrant children. While it was traditionally believed that rapid assimilation into mainstream culture was preferable, recent literature suggests that assimilation at the expense of previously-learned ideas, traditions, and connections to the ethnic community may be detrimental. Rather, the development of a healthy bicultural identity entails strengthening community affiliations, thereby providing immigrants with the necessary social, psychological, and economic assistance to maintain more positive attitudes toward education. Identifying with one’s ethnic group or country of origin can act as a protective mechanism by providing immigrant youth with the opportunity to resist and buffer themselves against delinquent

attitudes and behaviors that they encounter in their daily lives.

School Context: Problems and Possibilities

The academic and future success of immigrant children in many ways depends on the educational contexts they encounter. Educational institutions play an integral role in the early phases of adaptation to the new culture. For most children, the first step in the acculturation process takes place in the classroom and includes learning a new language, social and cultural mores, and educational practices. The school context continues to play a central role in immigrant children’s long-term transition into adulthood. The presence of acute stressors, stereotyping, prejudice, and negative attitudes are common experiences for immigrant students and the school context can provide the necessary support to overcome these obstacles. At the same time, negative educational experiences can exacerbate the detrimental effects of these stressors.

In an ethnographic study of a multiethnic high school, it has been shown that educational institutions have a powerful effect on why some Latino students fail while others succeed. In this view “from below,” students in a regular education, culturally and ethnically heterogeneous high school program experienced racial and social stratification, indifference from the teachers, and perceived a lack of support necessary to succeed. As a result, these students were unmotivated to perform well academically or to strive for college education. Rather, students felt that their goals were unattainable, instead resorting to cutting classes and joining gangs. In contrast, children attending specialized academic programs in the same high school, which promote close collaboration between students and teachers, development of peer networks, and a demanding curriculum, were successful in high school and retained the aspirations necessary for future academic success.

Gender and Immigrant Education

An ethnography of Latino Caribbean schoolchildren revealed the impact of gender on the lives of immigrant youth. Rules at the school studied were differentially enforced by gender and teachers perpetuated both

“racing” and “gendering” of students. For example, a “no hats” rule resulted in male students receiving sometimes severe punishments (e.g., suspension), while female students received lesser or no consequences for similar behaviors. As mentioned, the school environment was described as poorly equipped to deal with female problem behavior; the school employed only two female security guards, while the numerous male guards (who policed the boys) were not allowed to physically intervene with female students. Despite their best intentions, teachers provided different treatments and rule enforcement for boys, often failing to acknowledge and correct structural barriers impeding students’ success.

Similarly, Mexican immigrant households have different academic and work trajectories depending on their gender. Female participants were described as having an easier time engaging with school, possibly due to the close monitoring of Mexican girls by their parents. Mexican boys, however, did not experience the same degree of parental monitoring. Consequently, females were more likely to end up in college or in “pink collar” service jobs (e.g., bank tellers or administrative assistants). Coupled with the gender-specific school-based discrimination described above, the Mexican boys likely felt that school was “not for them,” and as a result, terminated their educations prematurely, relegating themselves to blue-collar jobs with little chance of upward mobility.

Conclusion

The study of immigration reflects how social contexts interact with individual psychological processes. While many questions remain unanswered, current research indicates that the success of immigrant children depends on educational environments that are sensitive to the experiences and obstacles encountered by immigrant children and that encourage respect for and engagement of children’s families, ethnic communities and cultural histories. Educational environments need to counter, rather than perpetuate, the detrimental effects of stereotyping, unfair treatment, and social stratification, and foster the development of healthy identities for immigrant children. Successful educational environments can be developed through collaboration among immigration researchers, educators, policy makers, and clinical practitioners, each of whom affect the practices and realities that immigrants encounter. Overall, research

on immigration at societal and psychological levels needs to be more extensively applied toward developing organizations, programs, curricula, and policy that are specific to the needs of this ever-growing group. The current wave of migration is broad and diverse, and will require thoughtful collaboration between researchers and practitioners to channel the strengths that immigrants possess toward overcoming obstacles and attaining more successful outcomes.

Acknowledgements

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See also: [Immigration literature](#); [Cultural issues in education](#); [Cultural resilience](#); [Ethnic minority youth](#); [Acculturation](#)

Suggested Reading

- Deaux, K. (2006). *To be an immigrant: Psychological design and social fabric*. NY: Russell Sage.
- Suarez-Orozco, C., & Suarez-Orozco, M. (2001). *Children of immigrants*. Cambridge, Massachusetts: Harvard University Press.

Suggested Resources

- Pew Hispanic Center—<http://pewhispanic.org/>: Pew Hispanic Center is a nonpartisan research organization supported by The Pew Charitable Trusts. Its mission is to improve understanding of the U.S. Hispanic population and to chronicle Latinos’ growing impact on the entire nation.

Immigration Literature

Patricia Ruiz-Navarro

Immigration is an integral part of United States (U.S.) history. Migration scholars frame research questions using different theoretical lenses and through the use of a wide range of methodologies. For example, there are those interested in the cost-benefit analysis of migration; whereas for others, the focus revolves around migrants’

identity negotiations and interpretations ranging from foreign policy to interactions and perceived attitudes. The former group may more often rely on census and survey data, while the latter relies upon ethnographies, structured interviews and narrative analysis.

The majority of political scientists, demographers, economists, historians and sociologists tend to formulate research questions and support theoretical arguments by looking at overall causes and consequences of immigration. One might say that this type of approach views the framework of immigration “*from above*.” That is, overarching perspectives, processes and outcomes become the focus of study. Conversely, anthropologists, psychologists, educators, and some sociologists often contribute to the study of immigration from the perspective of the individual, contextualizing the framework of immigration “*from below*.” Those theoretical approaches of immigration “*from above*” and “*from below*” are, respectively, also referred to as “*top-down*” and “*bottom-up*” immigration studies.

The literature on immigration “*from above*” studies political and economic effects within nations as well as the remaking of social and cultural factors. For example, publications on studies “*from above*” reflect an interest in global perspectives, and are sometimes used for diagnostic purposes (i.e., population growth, education attainment, household distribution, health standards). Meanwhile, scholars interested in immigration “*from below*” have also looked at *e/immigrants*’ background, education, language skills and social class as indicators of individuals’ social mobility and well-being. More often, as viewpoints from the sending countries become more widely spread, processes of emigration are covered in the literature. When speaking of emigration and immigration, they both refer to the same process of movement of peoples between international borders. The main difference is whether studies are conducted in reference to migrants, those living temporarily or permanently in a country that is not their country of origin, in their country of origin (emigrants) or the destination country (immigrants). In this line, studies on transnational migration have become an important piece to the puzzle of global movement of peoples. Not only attempting to integrate the global views from the *receiving* countries, studies of transnational migration also evaluates what simultaneously shapes the communities and peoples in the *sending* countries. Transnational studies have become a focus of attention for those interested in the intersection of factors

that simultaneously have an impact on individuals and communities in the sending and receiving countries.

Methodologically, migration scholars may alternatively focus on different units of analysis as they explore the phenomenon of migration. The macro level, often linked to the study of migration from above, evaluates the context of where migrants come from and/or the results of immigration in the receiving country. Researchers using this perspective, whether they study the sending or receiving country, rely on census data and other types of social indicators (e.g., fertility rates, income, and demographic distribution). Some studies conducted at this level reflect a cost/benefit analysis of the impact of *e/immigration* on education, remittances, health and other services. At the micro level, the focus is on analysis from below. Researchers become interested in capturing an individual’s experience of *e/immigration*, identity negotiations and power structures by conducting ethnographies, utilizing structured interviews, and analyzing narratives that reveal migrants’ views of their own lives and their interpretations of domestic and foreign policy. Not all studies focus on a macro or micro sphere; others are interested in studies of institutions, governmental and nongovernmental, communities and societies, secular and religious ones. Thus, in addition to the macro and micro levels of analysis, the latter examples—studies of institutions—form part of the analysis at the meso level. For example, a growing body of migration literature focuses on religious communities. Longitudinal and cross-sectional studies have been conducted with different ethnic and religious groups studying them as entities unto themselves, or as spaces where social networks, identities and political and economic relations are shared or transformed. Research conducted by academics, reports produced by research institutes, autobiographies, documentaries, and even fictional works, provide a rich milieu of resource for the study of migration phenomenon.

In regards to education, a number of authors have conducted studies drawing on differences based on gender, ethnicity and race of immigrant children and youth. Some of those studies focus on generational differences, levels of acculturation, language command and individual and social identities. In conducting research at the macro, meso and micro levels of analysis, migration scholars are studying the wide spectrum of political, economic, sociocultural and psychological exchanges taking place between states, institutions and individuals. Qualitative and quantitative data, ranging from census records to ethnographies, are being

used by demographers and educators alike. Furthermore, cross-disciplinary studies and dialogue that promotes exchange of theories and methodologies is been more overtly discussed.

See also: [📍 Centre for Immigration and Multicultural Studies](#); [📍 Immigration](#)

Suggested Reading

Brettell, C., & Hollifield, J. F. (Eds.). (2000). *Migration theory: Talking across the disciplines*. New York: Routledge.

Deaux, K. (2006). *To be an Immigrant*. New York: Russell Sage Publications.

Suárez-Orozco, C., Suárez-Orozco, M., Suárez-Orozco, B., & Qin-Hillard, D. (Eds.). (2005). *The new immigration: An interdisciplinary reader*. New York: Routledge.

Suggested Resources

The Center for Migration and Development—www.cmd.princeton.edu: This website provides access to interesting reports relevant to the topic of migration.

Media Rights Film—<http://www.mediarights.org/film>: This website offers a wide selection of films and documentaries on topics related to immigration.

Impulsive Behavior

Dinelia Rosa

Impulsive behavior is a quick reaction to a situation, typically without going through a thinking process prior to the reaction. People exhibiting impulsive behavior show an inability to analyze the consequences of an act before its execution, thus they tend to act without thinking first. Subsequently, some of the reactions can lead to reckless or irresponsible behaviors. Impulsive behavior is related to a poor regulation and inhibition of behavior, and difficulty in using cognitive and analytical skills.

During preschool, children's impulsive behaviors are mostly age-appropriate. Children will show difficulty following a classroom routine requiring delay of gratification, waiting for a turn, sharing with peers,

and following basic commands. Preschool children also lack the cognitive skills and the analytical processing skills to think and process before responding to a situation. Preschoolers who are impulsive but curious may experience physical injuries. Early education years help children to develop age-appropriate self-control and delay of gratification. They also learn to develop limited but useful cognitive and processing skills that will equip them to respond less impulsively. These skills are very concrete and dependent on immediate gratification and rewards for the behavior achieved. As preschoolers move forward in school and develop more sophisticated cognitive skills, they are expected to show less impulsive behavior and more self-regulated responses.

When children do not develop their ability to regulate their impulsive behavior in the classroom, problems may arise. Children who display impulsive behavior have difficulty internalizing rules and expectations that they can later translate into thoughtful behaviors, thus affecting self-control and self-regulation. This interferes with their ability to pay attention, withhold responses, delay gratification, understand cause and effect, and consequently respond appropriately to classroom expectations. Their academic performance may lag and academic achievement may be compromised.

Impulsive behavior is typical in children with Attention Deficit Hyperactivity Disorder (ADHD), Conduct Disorder, and some Anxiety Disorders. However, it can also exist as an isolated symptom. In adolescents, alcohol and substance abuse can increase impulsive behavior. Also in adolescents, activities associated with risk-taking can lead to accidental and unexpected consequences led by impulsive reactions. Eating disorders such as anorexia and bulimia also have a component of impulsivity that contributes to these disorders. Impulsiveness is also a component of many other behavioral problems such as aggression, suicide, and homicide. Other behaviors with an impulsive component that can develop during adolescence and can continue throughout adulthood are obsessive behaviors such as gambling and compulsive shopping.

Early assessment of impulsive behavior can help provide the individual with early interventions to address the impulsivity. Since it can be a symptom of disorders mentioned earlier, a psychological evaluation is recommended. It is important to include an assessment of the child's family history around impulsive behaviors, but also to incorporate cultural issues that may be significant in understanding the child's

difficulty to regulate his or her behavior. Very often, children with difficulty in this area have lacked the necessary exposure to develop this skill prior to coming to school for the first time. Many times professional help outside the school is necessary.

Interventions to help impulsive children may range from small changes in classroom routines to medication management. The intervention depends on the level of severity in the impulsivity, and whether the symptom is isolated or part of a constellation of symptoms, at which point the symptom is treated as part of a disorder. Children exhibiting impulsive behavior may require a significant amount of one-to-one attention from teachers and/or paraprofessionals. Classroom modifications may be necessary to help an impulsive student learn to regulate his or her behavior. Teamwork and collaborations between teacher and parent to establish consistency in the child's behavior are also part of an effective treatment strategy.

See also: [Anxiety](#); [Attention Deficit/Hyperactivity Disorder \(ADHD\)](#); [Counseling](#); [Obsessive-Compulsive Disorder \(OCD\)](#); [School psychologist](#)

Suggested Reading

- Fontenelle, D. H. & Clements, S. D. (1992). *Are you listening? Attention deficit disorders: A guide for understanding and managing overactive, attention deficit and impulsive behaviors in children and adolescents*. Gretna, LA: Wellness Institute.
- Halperin, J. M., Newcorn, J. H., Matier, K., Bedi, G., Hall, S., & Sharma, V. (1995). Impulsivity and the initiation of fights in children with disruptive behavior disorders. *Journal of Child Psychology and Psychiatry*, 36(7), 1199–1211.

Inclusion

Sara Bolt · Dawn Decker

Historical Perspective on Inclusion

Although *inclusion* has a variety of meanings, it most commonly refers to general education classrooms that integrate students with special needs by providing special education services in parallel with the general

education curriculum. Since state education agencies first created rules for compulsory education, a trend toward greater inclusion has been evident, particularly for educational services provided to students with disabilities. In 1975, the Education for All Handicapped Children Act was put into place to ensure that all students with disabilities had access to public education; however, only in the mid-1980s did educators adapt their instruction to better meet the needs of students with disabilities without removing them from general education classrooms. Madeleine Will, a former Assistant Secretary of the U.S. Department of Education, led related efforts that later became known as the *regular education initiative*. This trend toward greater inclusion of students with disabilities in general education classrooms continues today. According to a 2005 report from the National Center for Educational Statistics, the percent of students with disabilities who are educated in general education environments for at least 80% of their school day increased from 40% to 50% from 1994 to 2004.

Although inclusion primarily concerns educating students with disabilities within general education classrooms, it also concerns incorporating non-native English speaking students into general education classrooms. For example, many non-native English speakers now receive pull-out services to facilitate the development of their English language skills; however, there is a concern that this approach can prevent students from accessing important content instruction that occurs in the general education classroom. As a result, there is now a greater push for general educators to provide adaptations to make their classroom instruction more accessible to students whose first language is not English.

It is important to recognize that these historical trends toward greater inclusion have not come without criticism. One of the major criticisms stems from a belief that inclusion is driven by a desire to reduce the amount of money spent on special services for students with special needs. Many are concerned that without appropriate training and resources available to general education teachers, the quality of services provided to students with special needs in general education classrooms will be of poorer quality than those services available within separate settings.

Goals of Inclusion

Although we have defined inclusion as the practice of providing services to students with special needs in

general education classrooms, it is important to recognize that inclusion is often considered a philosophy rather than an educational practice, and is therefore often aligned with specific educational goals. For example, some who advocate that students must be taught to work and live together also believe that inclusion allows all students, both those with and without special needs, the necessary exposure and opportunity to develop skills to live and work together effectively. Therefore, this social goal is often cited in arguments for inclusive educational practices. In addition, facilitating access to the general curriculum is often considered a goal of inclusion, such that all students have an opportunity to learn the same academic skills and knowledge as their peers. Strong advocates for inclusion often argue that because inclusion students can only keep up with their peers by being included within general education classrooms, inclusion should be considered a civil right (i.e., separate programming inevitably results in unequal programming). Furthermore, many suggest that inclusion can help reduce the stigma that may otherwise be associated with being placed in a special needs classroom.

Clarifying Components of Inclusion

Proponents of inclusion assert that students with special needs have the right to be educated in the general education setting alongside same-age peers. However, it is important to distinguish the concept of inclusion from the concept of *mainstreaming*. Mainstreaming is the concept that students who belong in a separate educational setting can be temporarily moved out of their special needs classrooms and asked to exert extra effort to participate in general education classwork. Thus, in a mainstreaming model, it is assumed that students have to “earn” their way into the general education classroom by demonstrating that they have the skills necessary to function independently in that setting.

Some experts also distinguish between *inclusionists* and *full inclusionists*. Inclusionists believe that it is the classroom teacher’s responsibility to educate most students with special needs, but such inclusionists also recognize the importance of providing a continuum of services (i.e., making sure that a variety of separate and more restrictive settings are available for those students who may need them). In addition, inclusionists acknowledge that full-time placement in the general education classroom may not serve the needs of all

students, and that some students may benefit from services provided in separate settings. In contrast, full inclusionists assert that students with special needs should be educated in the general education classroom full-time. An important difference between inclusionists and full inclusionists is that they tend to advocate for different groups of students. Inclusionists tend to advocate for the inclusion of students with high-incidence disabilities (e.g., learning disabilities, mild-to-moderate mental retardation, or behavior disorders) whereas full inclusionists tend to advocate for students with more severe disabilities (e.g., severe mental retardation, severe conduct disorder, etc.).

In terms of creating inclusive classrooms, strategies can be used to include students with special needs in the general education classroom both academically and socially. Academic strategies for inclusion can consist of teachers utilizing “best practices” or other research-based instructional strategies (i.e., cooperative learning, classwide peer tutoring) to address the wide range of student skills present in the classroom. Strategies to promote the academic inclusion of students may include providing appropriate instructional adaptations and accommodations. Strategies to promote the social inclusion of students may include implementation of effective behavior management plans and explicit teaching of social and friendship skills.

The standards-based reform movement has recently raised concerns about students with special needs not having access to the general education curriculum. Both the No Child Left Behind Act and the Individuals with Disabilities Education Improvement Act of 2004 emphasize that schools need to be held accountable for students with disabilities and English Language Learners (ELLs) so that higher academic achievement can be promoted among these students. One way that this legislation attempts to ensure that this will occur is through the mandated inclusion of students with disabilities and ELLs in state and district-wide assessment programs. Additionally, legislation has placed an emphasis on the idea that general education and special education teachers have a shared responsibility for educating students with disabilities which suggests a need for increased collaboration and communication between general and special education teachers.

See also: [▶ Classroom management](#); [▶ Collaborative and cooperative learning](#); [▶ Education for All Handicapped Children Act of 1975](#); [▶ Individuals with Disabilities Education Act \(IDEA\)](#); [▶ Tracking](#)

Suggested Reading

- Fuchs, D., & Fuchs, L. S. (1998). Competing visions for educating students with disabilities: Inclusion versus full inclusion. *Childhood Education, 74*(5), 309–316.
- Mastropieri, M. A., & Scruggs, T. E. (2007). *The inclusive classroom: Strategies for effective instruction* (3rd ed.). Upper Saddle River, NJ: Pearson Merrill Prentice Hall.
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Individualized Education Plan (IEP)

Stephanie M Reich

An individualized education plan/program (IEP) is a federally mandated plan for parents, teachers, school administrators, service personnel/paraprofessionals, and students (when appropriate) to work together to design instruction, accommodations, and services to children with special needs. Supported by the Individuals with Disabilities Education Act (IDEA), an IEP ensures that children with disabilities are entitled to a free and appropriate education. This means that public schools must provide children with disabilities specially designed instruction and services to meet their unique needs. These modifications to general education should be provided to children at no cost to their family.

The first step in starting the IEP process is identifying which children have disabilities and are in need of services. This “child find” process can be initiated by schools or families. Teachers or other school personnel can recommend a child be evaluated for a disability, or parents could request that the school evaluate their child. Irrespective of the instigator of the evaluation, parents must consent to their child being evaluated. Thus, by federal law, a multidisciplinary team must determine that a child has a disability and that they are in need of special education or related services to benefit from the general education program. Once a child is identified as a “child with a disability,” as defined by IDEA, an IEP must be written within 30 days.

Although federal law requires that individual education be provided, the form and format of the IEP is flexible and can vary from state to state, or school district to district, with some regions providing additional information or services. No matter where the

IEP is written, some aspects are mandated by law. These include the types of people on the IEP team and the content areas of the plan.

The IEP Team

Parents or guardians are essential members of the IEP team. They are the members who know the child well and can inform the team about how the child learns best, what their strengths are, and which skills are being used at home.

Teachers are another important part of the IEP team. Regular education teachers and special education teachers assist in writing an IEP. If the child is in a regular education class, the teacher of that class attends the IEP meeting to provide information about the general curriculum, to describe services, aids, or changes to the program that could help the child, and to suggest behavioral strategies for helping the child participate in the class. The general education teacher participates in the discussion and helps make decisions about how the general curriculum in the regular class could be modified to assist the child’s learning.

The special education teacher is an expert in educating children with disabilities. Thus, they are another important member of the IEP team who can make suggestions about how to modify the general curriculum for the child, provide ideas for individualizing instruction, and offer ways to modify testing so the child can show what they have learned. In addition to helping write the IEP, the special education teacher may work with the student individually, team-teach with the general education teacher, and work with school staff to address the child’s learning needs.

A school representative, such as the principal or vice principal, will also attend the IEP meeting. The school representative must be familiar with the resources available at the school and have the power to commit these resources and make sure they are provided as promised. If service is needed by the child but not available at the school, the school representative can arrange for supplemental services to be provided, even if off campus.

Anyone with special knowledge or expertise about the child can also be a member of the IEP team. This could be a person whom the parents/guardians invite (e.g., a speech therapist, psychologist, family friend, minister) or someone the school requests (e.g., an occupational therapist, physical education teacher, social worker).

The child may also be a member of the IEP team. Including the child in the design of their own

educational plan ensures that they have a voice in the process and agree with the individualization of their educational program. If the child is receiving or is about to receive transition services, they are to be included in the IEP team.

If the child is old enough to be transitioning out of the school system, a representative from the transition service agencies must be included in the IEP meeting. In such situations, the IEP meeting is different in structure because it is focused on helping the child's transition from school to the next phase of life. The representative of the agency will identify skills needed for the transition, what types of service are available to the child, and whether the agency will pay for these services. If a representative is not available for the meeting, the school must make other arrangements for obtaining the agency's participation in the child's transition services.

Once the IEP team is assembled, they will meet to discuss the content of the IEP. Although there is flexibility in the writing of the IEP, there are some core elements of every individualized education program that are required by law.

IEP Content

Every IEP must begin by assessing the child's current performance. By determining the child's present levels of educational performance, the IEP team can determine what the child's strengths are and where their limitations may be. Assessments of performance are made by looking at classroom tests, homework or assignments, individualized tests and evaluations/assessments done by professionals and paraprofessionals, as well as observations by parents, teachers, and other school staff. Areas of assessment include academic skills (e.g., reading, writing, math), social skills (e.g., making friends, socializing in class), sensory skills (e.g., sight, hearing), daily living/self-help skills (e.g., toileting, eating, dressing), communication (e.g., talking, listening), mobility (e.g., getting around the classroom, school, and community), and vocational skills (employment).

Annual goals must be set during the IEP meeting. These goals must be measurable and should include short-term objectives and benchmarks. They may be social, behavioral, academic, physical, or related to some other need. Well written goals should include information about who will achieve them, what skill is being addressed, how and in what manner it will be achieved, in which settings it should occur, and by when it should be accomplished.

Every IEP must list the services (including special education services) that will be provided to the child. This includes modifications to the program, supplementary services, as well as support for school personnel such as training and professional development to learn how to address the child's unique needs. Examples of services include, but are not limited to, special education plans (e.g., learning to read Braille), occupational therapy, speech therapy, psychological counseling, parent training, physical therapy, and transportation.

The IDEA mandates that children be educated with non-disabled peers (mainstreaming) whenever possible. As such, the IEP must explain the extent to which children will or will not participate with non-disabled peers in school activities and within the classroom. To promote contact with non-disabled peers, the IEP should consider modifications, accommodation, support, and supplemental aids to assist the child. The goal is for the child to be in the least restrictive placement possible.

Part of the IEP meeting is to determine which, if any, modifications should be made to ensure the child's participation in state and district-wide tests. If the test is inappropriate, the IEP should state why it is not appropriate for the child and how the child will be tested instead.

The IEP meeting will determine where, when, and for how long services will be provided to the child. This plan will describe where the child will receive services, how long the session will last, and on which dates services will start and finish.

For children who are high-school aged or older, the IEP meeting will address issues of transition service need, types of service available, and the processes for measuring progress toward transition. This part of the IEP will address what the child will do after high school. Starting at 14 years, this topic should be introduced into the IEP meetings. By 16 years, the IEP should provide specific statements about planning for transition services. Beginning at least one year before the age of majority, the IEP must include a statement that the child has been told of their rights that will transfer to them at the age of majority.

The IEP should be reviewed annually and reevaluated every three years. It is reviewed annually by the IEP team to ensure the goals are being met and to identify any modifications that need to be made. The full educational program is reevaluated every three years and rewritten if needed. Parents and schools can call for a meeting whenever necessary to make changes to the IEP or to assess whether it is being implemented as intended.

Overall, the passage of IDEA and subsequent amendments have ensured that children with special needs obtain the free and appropriate education they are entitled to, even if additional support and planning are needed to make this possible.

See also: 🔗 [Language and educational assessment](#); 🔗 [School roles in mental health](#); 🔗 [Section 504](#)

Suggested Reading

- National Dissemination Center for Children with Disabilities (NICHCY) (1997). *A student's guide to the IEP*. Washington, D.C.: U.S. Department of Education.
- U.S. Department of Education (2006). 34 CFR Parts 300 and 301 Assistance to states for the education of children with disabilities and preschool grants for children with disabilities; Final rule. *Federal Register*, 71(156), 46540–46845.
- U.S. Department of Education (2000). *A guide to the Individualized Education Program*. Washington, D.C.: Office of Special Education and Rehabilitative Services. Available online at <http://www.ed.gov/offices/OSERS>.

Suggested Resources

- US Department of Education: Office of Special Education and Rehabilitative Services (OSERS)—<http://www.ed.gov/about/offices/list/osers/index.html?src=mr>: This website, maintained by the U.S. Department of Education, provides details on the rights of children with disabilities as well as copies of current legislation affecting children with special needs in school.
- Wrights Law—<http://www.wrightslaw.com>: This website provides thousands of articles, cases, and free resources on topics around special education rights, advocacy, and current legislation.

Individuals with Disabilities Education Act (IDEA)

Catharine L A Weiss · Jennifer E Mettrick

Legislative History

The Individuals with Disabilities Education Act (IDEA), first passed in 1975 as the Education for All

Handicapped Children Act, is a United States (U.S.) law that provides federal funds to the states for education of students with disabilities. It sets out regulations to protect the rights of, and provides for, the individual educational and related service needs of infants, toddlers, children, and youth with disabilities. The 1975 legislation represented the first allocation of public resources for schools to provide free appropriate public education (FAPE) and related services, including mental health, to youth with disabilities. It also established due process in providing these services. IDEA, renamed the Individuals with Disabilities Education Improvement Act in 1990, was most recently reauthorized by Congress in 2004. IDEA today serves more than 6.8 million students and 200,000 eligible infants and toddlers with \$12.4 billion in federal funds authorized for 2006 and planned increases of approximately \$2.3 billion per year through 2011.

Since 1975, legislative changes have been directed at the improvement of educational, social and post-educational outcomes of youth with disabilities. Throughout the history of the legislation, however, the fundamental principles have remained the same: to ensure that (a) all children with disabilities receive free appropriate public education with services tailored to individual special needs; (b) children with disabilities and their families' rights are protected; (c) states receive assistance to provide education for all children with disabilities; and (d) the quality of services provided to children with disabilities are assessed. Several significant changes have been made, which include the expansion of FAPE to preschool aged children with disabilities in 1986, the 1990 change of name to Individuals with Disabilities Education Improvement Act, and the restructuring of IDEA into Parts A through D in 1997.

In 2001, President George W. Bush established the Commission on Excellence in Special Education to collect information and study issues related to federal, state, and local special education programs and subsequently recommend policies for improving the educational performance of students with disabilities. As a result, the Commission recommended three major changes to IDEA: a focus on results-based accountability; the prioritization and implementation of school-based prevention approaches; and more flexibility in education spending to increase integration between special and general education. Congress incorporated these changes and reauthorized IDEA in 2004, with an effective date of July 1, 2005, as the Individuals with Disabilities Education Improvement Act (IDEA 2004).

Specifics of the Legislation

Special education and related services for eligible children and youth are provided through public funding at no charge to children and their families. IDEA requires that states and schools identify and evaluate all youth with disabilities, regardless of the severity of the disability. Special education consists of unique individualized services that assist children in meeting educational standards set forth by state and local educational agencies for the general population of children without disabilities. For schools to receive federal funds, services must meet the standards set forth in IDEA regulations and State Education Agency (SEA) requirements, and must include an individualized educational program (IEP) for all eligible children.

IDEA legislation contains four main sections labeled Parts A-D. Part A, General Provisions, includes regulations pertaining to IEP's, therapy, behavioral therapy, hearing/vision screening, related services, handicapped services, testing and evaluation and assistive technology. Part B, Assistance for Education of All Children with Disabilities, goes into greater depth about the regulations regarding school-aged children with disabilities. Part B covers specifics related to funding, state eligibility, eligibility determinations, educational placements, IEP's, procedural safeguards, monitoring, technical assistance, administration, and pre-school grants. Part C, Infants and Toddlers with Disabilities, covers similar specific details for children from birth to 2 years old. Part D, National Activities to Improve Education of Children and Disabilities, focuses primarily on distributing findings from funded grant projects under IDEA.

To receive provisions under the law one must be identified as having a disability, which is defined as having a mental retardation diagnosis; a hearing impairment or deafness; a speech or language impairment; a visual impairment, including blindness; emotional disturbance; an orthopedic impairment; autism; traumatic brain injury or other health impairment; a specific learning disability; deaf-blindness or multiple disabilities. In addition, children aged 3 through 9 may be eligible for services if they meet SEA developmental delays criteria and children birth through age 2 may be eligible for services under Part C of IDEA.

If parents or public agencies suspect that a child has a disability that affects educational performance, they can request an evaluation. Individual evaluations are conducted with parental consent to determine whether and what type of special educational services may be

required. Evaluations must assess all areas related to the suspected disability and can include evaluation of their health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities. IDEA mandates that the following procedures are followed in the evaluation process: (a) multiple assessments are used to determine if a disability is present, (b) evaluation tools are employed that do not discriminate based on race and/or culture, (c) evaluations are administered in the child's native language, and (d) materials and procedures are selected to measure the extent of a disability and not reflect a child's English proficiency. If a disability is present, an IEP, an educational program that is designed to meet each child's unique needs, must be created. The IEP specifically outlines a student's performance level, deficits, goals to be achieved, and what accommodations and interventions are planned to achieve the goals. Parents, under the law, are provided every opportunity to participate in their child's IEP, which includes the development of the IEP, placement decisions and continual involvement in the services provided to their child.

Special education instruction can occur in regular classrooms, special classes, special schools, at home, and in hospitals and institutions as long as they are provided in the least restrictive environment possible. A guiding principle in special education is to maximize integration into regular class settings as much as is appropriate. In making decisions about consequences for disciplinary problems, the disability must be taken into account. In addition to special education, children also are eligible for related services such as speech therapy and parent counseling.

Successes and Challenges of IDEA

Since IDEA was enacted, access to education and the quality of instruction has significantly improved for students with disabilities. Before 1975, it is estimated that only 1 in 5 children with a disability received public education. Now there are 6.8 million children and youth receiving special education services. The national assessment of special education services ordered by the 1997 reauthorization of IDEA provides ongoing information about the participation and performance of students with disabilities in the system. Most students in special education attend regular schools and approximately half are in regular classrooms for most of the day.

Over the last decade, inclusion in regular classrooms, high school graduation rates, college enrollment, and family participation in schools have risen for students with disabilities and dropout rates have decreased. Post-school employment levels for individuals who received special education are twice as high as for those who did not receive services prior to enactment of IDEA. However, outcomes in special education are better for some groups than others. For instance, the highest dropout rates have been found for students with emotional and behavioral disorders and the lowest for those with autism, hearing and visual impairments.

Throughout the history of IDEA, there have been concerns about the disproportionate diagnosis of disabilities across gender and ethnicity lines. For example, boys are identified as having disabilities at greater rates than girls across all age groups. African Americans and students in poverty are also overrepresented in special education, with the former group demonstrating particularly high percentages in the categories of mental retardation, developmental delay and emotional disturbance. African Americans are more likely to be in restrictive educational settings and are more likely to be suspended or expelled from school.

The under-identification of emotional and behavioral disorders in schools is noted by some as a serious problem. Research has shown that there are large numbers of youth with untreated mental disorders and that many are either failing to qualify for services under IDEA or they are misidentified. Given that youth with emotional and behavior problems have high dropout rates even when they have been identified, it is critical that this group receive appropriate and effective interventions.

Beginning in 1997, IDEA's regulations were expanded to address the needs of youth whose behaviors interfere with learning. The amendments required provisions for behavioral assessments and positive behavioral intervention strategies and supports. Today, three fourths of the students are classified as having learning disabilities or speech/language impairments as their primary disabilities.

IDEA legislation has been enacted to address both under-identification and over-identification of disabilities. IDEA 2004 requires states to review and alter any policies and procedures leading to the disproportionate number of students with disabilities in respect to identification, placement and disciplinary actions. In addition, states now are required to provide comprehensive, coordinated, early-intervention programs for children in groups that are determined to

be overrepresented. Finally, research is being conducted presently to investigate the causes of overrepresentation of minority groups in the areas of diagnosis, discipline and placement.

As more children are identified with special needs and the cost of services increases, policymakers are focusing on school-wide approaches and early intervening strategies as a means to proactively address the academic and behavioral needs of children. One critical change in IDEA 2004 is that it allows for the provision of Early Intervening Services (EIS) or pre-referral services to students in kindergarten through grade 12, with an emphasis on kindergarten through grade 3. EIS can be provided to students who are not identified as having a disability but who are in need of additional academic and/or behavioral supports to achieve success at school. States are allowed to use up to 15% of IDEA funds and other funds to implement EIS. The introduction of EIS means that, for the first time, IDEA funds can be directed toward the general education population with an increased focus on prevention. It is hoped that the provision of academic and behavioral support through EIS will reduce special education referrals and eventually decrease the costs of special education.

There has been criticism of the federal government for not funding IDEA at the authorized level throughout its history. Congress was authorized to contribute up to 40% of the national average per pupil expenditure for each special education student. However, in 2006, states and school districts are receiving less than 18% of this authorized sum. Although federal funding has increased over the years, costs for special education have risen at a higher rate as the range of disabilities and numbers of students served have expanded. States and local school districts have struggled to fund the balance thus resulting in cuts in regular education and less ability to fund early intervening services for infants and toddlers.

See also: [▶ Disproportionality in special education](#); [▶ Education for All Handicapped Children Act of 1975](#); [▶ Multicultural issues in special education](#); [▶ Special education](#)

Suggested Reading

- Heward, W. L. (2006). *Exceptional children: An introduction to special education*, 8th ed. Upper Saddle River, NJ: Merrill Prentice Hall.
- Yell, M. L. (2006). *The law and special education*, 2nd ed. Upper Saddle River, NJ: Prentice Hall.

Suggested Resources

United States Department of Education IDEA information and resources page—<http://www.ed.gov/policy/speced/guid/idea/idea2004.html>: This government website provides news, information, statistics and resources on the *Individuals with Disabilities Education Improvement Act of 2004* as well as information on other related policies.

National Dissemination Center for Children with Disabilities (NICHCY) IDEA information page—<http://www.nichcy.org/idealists.htm>: This NICHCY website provides materials that relate to the latest reauthorization of IDEA, IDEA 2004. Topics include assessment and procedural safeguards.

Intelligence/Intelligence Quotient (IQ)

James A Bovaird · Jennifer L Ivie

Intelligence has been a focus of research for over a century. Herbert Spencer, a late nineteenth century British philosopher, is often credited with first referring to general cognitive ability as intelligence. This long-standing interest in the construct of human intellectual capacity has resulted in numerous definitions and theories. Common definitions of intelligence describe it as including the ability to reason, plan, solve problems, think abstractly, comprehend ideas and language, and learn; effectively perceiving, interpreting and responding to the environment; or the ability to understand complex ideas, adapt effectively to the environment, learn from experience, engage in various forms of reasoning, and to overcome obstacles by taking thought. While there is a general consensus within all definitions and theories that individuals differ in their levels of this ability or construct, there are two major schools of thought on the nature of intelligence. Some theories view intelligence as comprised of one common factor, *g*, or general intelligence. Other theories subscribe to the idea of different types of intelligence; however, the number of multiple intelligences is not always consistent between theories.

Intelligence as a Common Factor

The historical proponents of the common factor of intelligence model were Galton and Spearman. A

cousin of Charles Darwin, Sir Francis Galton proposed a theory of hereditary intelligence in 1883, claiming that “genius” was inborn and that individuals differed in their degree of energy and sensitivity. Galton felt that individuals of higher ability were more energetic and that those with greater perceptivity had access to larger stores of information for their intelligence to make use of. His research focused on psychophysiological testing that addressed the individual’s capacity for weight discrimination, touch, olfaction, taste, and pitch discrimination. Galton was also one of the first to employ questionnaire and survey methods to investigate mental imagery in different groups of people. Through his work in statistics and research on intelligence, Charles Spearman, a British psychologist and statistician who was influenced by Galton, concluded that there are specific (to the task at hand) factors, *s*, of intelligence, that are encompassed within the general factor, *g*, which is required to complete any task. He termed this theory his two-factor theory of intelligence.

More recently, Eysenck took a “hard science” approach in researching intelligence, viewing it as a theoretical construct similar to the basic concepts of physics. Understanding the importance of factor analysis for determining the causal basis of differences in intelligence, he emphasized three distinct classes of phenomena associated with cognitive performance, which he defined as intelligences *A*, *B*, and *C*. His intelligence *A* is the brain’s neuroanatomy; *B* is the manifestation of *A*, that is, everything that influences its expression in real life behavior; and *C* is the level of performance on psychometric tests of cognitive ability.

A student of Eysenck and a major proponent of hereditary intelligence, Arthur Jensen began researching intelligence through culture-free methods. Jensen concluded that there are two levels of intelligence: *associative learning*, or the simple retention of input; and *conceptual learning*, or the ability to manipulate and transform inputs and solve problems—the concept most similar to the idea of general intelligence. Much of Jensen’s work has focused on reaction time as a measure of cognitive ability, illustrating that stable negative correlations between reaction time and cognitive ability scores suggests that individuals who process information faster also tend to earn higher ability scores. Jensen’s conclusion was that there is a biological basis for individual differences that can be described as differences in the efficiency of brain processing.

Intelligence as Multiple Abilities

Unlike Galton, Spearman, Eysenck, or Jensen, a number of researchers believe that intelligence is made up of multiple factors. For instance, L. L. Thurstone proposed a multidimensional theory of intelligence that identified seven primary mental abilities including verbal comprehension, word fluency, number facility, spatial visualization, associative memory, perceptual speed, and reasoning. He saw intelligence as the ability to inhibit instinctive responses while those responses are still in a loosely organized form, using abstraction to redefine the instinctive behavior in light of imagined consequences. According to Thurstone's initial theory, an individual could be high on one ability dimension and low on others; however, he accepted a hierarchical view of intelligence towards the end of his life.

Robert Sternberg proposed a similar conceptualization of cognitive ability, but rather than seven intelligences, he defined intelligence through a triarchic theory. His theory subsumes Spearman's *g* but then divides *g* into three facets or subtheories: the componential subtheory, or *analytical intelligence*, which includes metacomponents, performance, and knowledge acquisition; the experiential subtheory, or *creative intelligence*, which includes novelty and automation; and the contextual subtheory, or *practical intelligence*, which includes adaptation, selection and shaping.

Raymond Cattell proposed the popular G_f - G_c model of intelligence as a general model of cognitive ability in 1943, which was expanded in collaboration with one of Cattell's students, John Horn, in the 1960s. The original Horn-Cattell theory divided the overall construct of cognitive ability into two general classes of abilities: *fluid intelligence* (G_f) as a problem-solving and information processing ability, and *crystallized intelligence* (G_c) as an accumulation of knowledge and skills throughout life. Horn and colleagues have since expanded the initial two-ability Horn-Cattell G_f - G_c model to include at least nine abilities more related to biological processes. Recently, similarities between the Horn-Cattell G_f - G_c model and John Carroll's three-stratum theory have been emphasized, resulting in the combined Cattell-Horn-Carroll (CHC) theory.

Finally, in 1983 Howard Gardner proposed a theory of multiple intelligences, defining intelligence as a construct consists of seven intelligences: *spatial intelligence*, *musical intelligence*, *verbal intelligence*, *logical/mathematical intelligence*, *interpersonal intelligence*, *intrapersonal intelligence*, and *bodily/kinesthetic*

intelligence. While Gardner's theory has been very popular within the field of education, it has been not been as well received in the scientific community.

Intelligence Testing

The contrast in how the nature of ability is conceptualized is also reflected in the development of modern intelligence testing. Modern testing has its recent roots in the work of Sir Francis Galton, Alfred Binet, and Robert Yerkes. Galton and Binet represent contrasts in how the nature of ability is conceptualized, while Yerkes represents a contrast to both Galton and Binet in that he progressed group testing versus individual methods.

Sir Francis Galton is considered by some to be the founder of the modern testing movement. Galton's testing tradition revolved around sensory, motor, and physiological measures of mental functioning. However, significant criticism within the field developed over concentrating testing on simple and highly specialized abilities, as practiced by the supporters of the Galton tradition.

In contrast to Galton, Alfred Binet, who is considered by some to be the founder of modern intelligence measurement, and Theodore Simon proposed that mental functioning should be assessed by measuring complex intellectual functioning. The first known intelligence test, the 1905 Binet-Simon test, was designed to cover a wide range of cognitive functioning that included judgment, comprehension, and reasoning in addition to some sensory and perceptual tests in order to help identify children who were behind in their academic performance so that they could receive remedial education. This type of test today would most likely be considered an achievement test rather than a test of aptitude or cognitive ability. The Binet-Simon scale was developed to identify a child's *mental level* or *age equivalent*. A child's score on this test was compared with his/her peers' scores to determine his relative intellectual level. Lewis Terman revised the Binet-Simon test in 1916, renaming it the Stanford-Binet test and redefining the scoring mechanism from mental level to a ratio of mental age to chronological age, known as *intelligence quotient*, or *IQ*. The term IQ was first introduced in 1911 by a German psychologist, Wilhelm Stern. While Binet and Simon were not interested in normative comparisons and refused to refer to their scale scores as mental age, Stern introduced

IQ to represent a child's intellectual standing *relative* to his or her age-mates. In 1960, a third edition of the Stanford-Binet Scales again redefined the scoring mechanism to a standard score adjusted to reflect the historical scaling of IQ. The fourth edition, in 1986, replaced the term IQ with the term *standard age score*.

David Wechsler developed the Wechsler-Bellvue Test in 1939 from a clinical tradition, perhaps providing the most influential current view on intelligence testing. Wechsler used the patterns of test scores to measure the intelligence of adult patients, defining intelligence as a global capacity to interact with one's environment through purposeful action and rational thought. Wechsler's testing framework is better described as a guide to the most informative use of test scores rather than a theory on the nature of intelligence *per se*.

Wechsler recognized that a major problem with the traditional IQ measure is that multiple ratios can result in an equal IQ score. As a solution, Wechsler assigned a score which compares an individual to the mean of his/her peer group, or *deviation* IQ. He initially developed two tests to measure intelligence depending on a person's age group: the Wechsler Intelligence Scale for Children (WISC) for adolescents age 6 to 16, and the Wechsler Adult Intelligence Scale (WAIS) for adolescents through adults. These tests included both verbal and performance subtests, similar to the subtests found on the Stanford-Binet tests. Wechsler's work also spawned the Wechsler Preschool and Primary Scale of Intelligence (WPPSI-III) for children age 2–7.

Other popular individually administered tests of cognitive ability are the Woodcock-Johnson Psycho-Educational Battery derived from the CHC model, the Das-Naglieri Cognitive Assessment System based on the PASS (Planning, Attention, Simultaneous processing, and Successive processing) model, Raven's Progressive Matrices, and the Universal Nonverbal Intelligence Test (UNIT).

The Binet and Wechsler scales, both *individual* assessment tools administered to only one person at a time, were the standard by which cognitive abilities were measured prior to 1921. This format was time-intensive, required a highly trained examiner, and was partially subjective. Out of practicality, *group* assessment tools began to be developed in 1917. As chairman of the American Psychological Association's Committee on the Psychological Examination of Recruits, Robert Yerkes directed the development of Test Alpha, a paper-and-pencil test that could be administered to groups of 50–400 men under the supervision of a single

Army psychologist. The test was composed of eight subtests (oral directions, arithmetical problems, practical judgment, antonyms, disarranged sentences, number series completion, analogies, and information), consisted of ten equivalent forms to prevent coaching, and was strictly timed. A nonverbal version of the screening measure, Army Beta, was developed for those recruits who were illiterate or had poor mastery of the English language. Army Alpha and Beta served as the role model for future group tests.

Some additional group tests of cognitive ability are the Test of Cognitive Skills from the California Test Bureau (CTB), the Otis-Lennon School Ability Tests from the Psychological Corporation, and the Cognitive Abilities Test (CogAT).

See also: [▶ Achievement tests](#); [▶ Gf-Gc model of intelligence](#); [▶ SAT](#); [▶ Testing and measurement](#)

Suggested Reading

- Gardner, H. (1983). *Frames of mind: The theory of multiple intelligences*. New York: Basic Books.
- Herrnstein, R. J., & Murray, C. (1994). *The bell curve*. New York: The Free Press.
- Sternberg, R. J. (1990). *Metaphors of mind: Conceptions of the nature of intelligence*. Cambridge: Cambridge University Press.

Suggested Resources

- Human Intelligence—<http://www.indiana.edu/~intell/index.shtml>: This website presents biographical profiles, discusses current controversies, and provides resources for teachers.
- The Journal Intelligence—<http://www.sciencedirect.com/science/journal/01602896>: This website provides journal articles from *Intelligence*.

Interpreters

Emilia C Lopez

In 2001, the National Clearinghouse for English Language Acquisition and Language Instruction estimated that over four million students who attend public schools were limited English proficient or English language learners (ELLs). The Clearinghouse also

estimated that these students spoke over 400 different languages. Their families tend to have difficulties communicating with school professionals owing to limited skills in the English language. The number of ELLs will continue to increase during the twenty-first century. School psychologists and other school professionals often enroll the services of school interpreters to communicate better with ELLs and their families.

Definitions

The term translation refers to the process of changing messages produced in one language to another language. The source language is that from which one translates, whereas the language into which the translation is made is referred to as the target language. The terms “interpreters” and “translators” are often used interchangeably; however, the translation literature differentiates those two terms. Translators engage in the process of translating the written language as when, for example, translating referral forms, psychoeducational reports, and individual educational plans (IEPs). Individuals who translate the spoken language are referred to as interpreters. The focus of this discussion is on interpreters or individuals who translate the spoken language.

Professional interpreters typically translate using simultaneous or consecutive translation styles. In simultaneous translation, the interpreter’s translation is delivered a couple of seconds behind the speaker. Two common forms of simultaneous translation are whispered translation, in which the interpreter whispers the translation to the listener, and soundproof booth translation, where the interpreter speaks into a microphone and the message is delivered to the listener’s ear through earphones. In consecutive translation, the speaker delivers the message in the source language and stops to allow the interpreter to deliver the message in the target language. There are two forms of consecutive translation, continuous and discontinuous. In continuous translation, the interpreter waits until the speaker has finished the entire message before delivering the translation. In discontinuous translation, the interpreter delivers the translation at periodic breaks.

Interpreters in School Settings

In school settings, interpreters work with school psychologists and other school professionals during such

activities as parent interviews, parent conferences, student interviews, and student assessments. Consecutive translation is the style that seems to be most prevalent in school settings.

A major concern is that individuals who serve as interpreters in school settings do not have the training background nor possess the necessary skills to act as interpreters. School professionals often use bilingual personnel such as teachers or office staff to serve as interpreters. The process of working with interpreters is complex and demanding, and using untrained personnel as interpreters can result in miscommunications and inaccurate translations. School personnel also tend to rely on the students’ family members to translate. However, that can also result in miscommunication as family members may not have the language proficiency or language skills required to discuss instructional and programmatic (e.g., terms to discuss educational programs available) issues. Family members may also not feel comfortable translating all that is said during meetings or may not realize how important it is to translate all the information accurately. Children should also not be used as interpreters, especially as the content of the communication may include confidential and/or sensitive information (e.g., information about a student’s background or mental-health history). The best route is to work with trained interpreters who understand the complexity of translating, exhibit high proficiency in the source and target languages, and have experience working in school settings.

Challenges Working with Interpreters

School psychologists can encounter several challenges when working with interpreters to deliver psychological services in school settings. The greatest challenge is the potential for miscommunication. Miscommunications can occur as a result of information not being clearly translated or information being left out during the translation. Problems in translation can also occur when the interpreter lacks an understanding of the translation context, as in situations where there is not enough knowledge about schools and instructional programs. In such situations, interpreters may have difficulty translating information accurately because s/he lacks the background knowledge necessary to translate specific terms, concepts, or vocabulary (e.g., translation of terms such as neurological disorder or learning disability).

The process of translating from one language to another is challenging in and of itself. For example, many words and concepts cannot be directly translated from one language to another. The meaning of words and concepts can also change when translated because they may have more than one meaning in the target language; or a word can be translated into many other words in the target language. Regional differences may also mean that the same word can be translated into different words depending on the speaker's geographical origin. The developmental levels of words and concepts can also change when translated from one language to another. Metaphors, puns, and jokes tend to lose their meaning when literally translated. These challenges require that interpreters demonstrate high levels of language proficiency and possess a wide knowledge of vocabulary terms so they are able to translate messages while retaining the meaning of what is being translated into the target language.

Communicating through interpreters is also challenging because the quality of the translation will depend on the interpreters' skills, and on their understanding of the psychological services provided by school psychologists and other school professionals. For example, interpreters translating during assessment sessions need to have extensive knowledge about assessment procedures so that they can become assets to the assessors as they follow assessment procedures (e.g., in an assessment session interpreters should not coax students to respond to assessment questions).

The presence of interpreters can also substantially change the quality of interaction between school psychologists and their clients. For example, in a parent conference the parent may establish better rapport with the interpreter and may even not establish eye contact with the school psychologist. In other situations, the parent may not feel comfortable with the interpreter because the parent and the interpreter may differ in terms of regional, educational, or socioeconomic backgrounds. These issues may result in different levels of interaction, rapport, and communication between school psychologists, interpreters and clients.

The presence of an interpreter might serve as a barrier as well as a facilitator in the process of establishing rapport with clients. Interpreters can facilitate communication when they translate all that is said by all involved in the communication context and when they clearly convey content and meaning from the

source to the target language. On the other hand, interpreters can hinder the communication process when they withhold information or do not translate everything that has been said. The interpreters' feelings towards the clients and their reactions towards the issues being discussed may also interfere with their ability to deliver accurate translations. Interpreters may not be able to avoid a certain degree of personal involvement in their work and may attempt to change the content of the messages they translate to fit their own personal, political, social, or religious preferences. Thus, school interpreters must develop a clear understanding of their roles, along with the ability to reflect on how their own feelings and actions influence the delivery of psychological services to ELLs and their families.

Ultimately, all information obtained through interpreters must be carefully examined and evaluated. Care and caution must be exercised to consider the quality of the translation and how the presence of the interpreter influenced rapport and interactions with the clients.

Translation and the Assessment Process

School psychologists and other assessment personnel often opt for translating normed tests as a way to assess ELLs in their native languages. On-the-spot translations or translations that require interpreters to translate test questions as the assessment session progresses are extremely problematic because interpreters can make errors when translating vocabulary and concepts. Asking interpreters to translate test questions ahead of time is also problematic for several reasons. Test directions are frequently too technical or difficult to allow for easy translation. Also, versions of tests translated by practitioners and interpreters are rarely able to provide equivalent meanings across language. Furthermore, test adaptation experts argue that test translations result in significant changes in the underlying psychological constructs assessed by the translated version of the test.

The bottom line is that test translation alters test validity for ELLs, and translated tests need to be validated following several procedures that include: (a) translating the test questions; (b) reviewing the translated version through an editorial review committee; (c) adapting the draft instrument on the basis of

the comments made by the editorial review committee; (d) pilot testing the instrument; (e) field testing the instrument; (f) standardizing the scores; (g) obtaining validation data; (h) developing a manual and documentation; (i) training users; and (j) collecting reactions from users. The Standards for Educational and Psychological Testing state that the reliability and validity of a translated test should be established with the linguistic group that will be tested. The recommended practice is that school psychologists and other assessment personnel use tests that have already been translated and validated with language populations similar to that of the student being assessed. Several bilingual assessment tools and tests in languages other than English are available now, mostly in Spanish. Assessors can also rely on nonverbal tools (e.g., nonverbal tests of intelligence) and informal assessment tools in the native language.

Competencies for School Interpreters and School Professionals

Because the process of translating is complex, interpreters need to have several competencies. The competencies entail: (a) high levels of proficiency in the source and target languages; (b) knowledge of the cultural backgrounds of the clients they are translating for; (c) knowledge and skills in the different types of translation style (e.g., simultaneous and consecutive translations); (d) professional conduct (i.e., behaving ethically, and adhering to confidentiality); (d) excellent listening skills; (e) excellent long-term and short-term memory skills; (f) sufficient knowledge of the situations in which they are translating to deliver messages that are contextually appropriate; (e) well-developed language skills to make sure that the information translated remains accurate, retains the original meaning, and evokes the same emotional response as the original messages; (f) knowledge of the educational context (e.g., familiarity with the education system, district policies, and school policies); (g) knowledge of technical vocabulary used by school psychologists such as diagnostic categories (e.g., learning disabilities, emotionally disturbed), educational programs (e.g., special education, acceleration, inclusion), and psychological terms (e.g., cognition, assessment, exceptionality); (h) an understanding of the cultural context of communication or differences in how disabilities are viewed by individuals from different cultures to bridge

the communication between school professionals and families of ELLs; (i) knowledge of developmental and psychological issues when translating for students of different age groups and to students with mental health, behavioral, and medical problems; (j) skills in establishing rapport with ELLs and their families, and in gaining their trust to create an environment that is conducive to collaboration and problem solving; (k) the ability to engage in professional and ethical behavior (e.g., maintaining confidentiality); and (l) a clear understanding of their roles and the ability to reflect on how their presence influences and alters clients' (i.e., ELLs and their families) interactions with school professionals during a variety of professional situations (e.g., parent conferences, assessment sessions).

School psychologists and other school personnel also need several competencies to work with interpreters. These competencies include: (a) skills in establishing rapport with ELLs and families through interpreters; (b) skills in interviewing clients through interpreters; (c) skills in conducting meetings and assessments through interpreters; (d) skills relevant to reporting results obtained through interpreters; (e) an understanding of the problems and challenges inherent in the translation process; (f) clear communication skills so that interpreters can understand what information needs to be conveyed in their translations; (g) awareness of the emotional and social aspects of using interpreters; and (h) skills in training interpreters to deliver psychological services.

Recommended Practices

The practice of working with interpreters continues despite the lack of clear guidelines. Several rules are recommended to guide school psychologists and other school professionals in their efforts to provide educational and mental-health services to ELLs and their families.

Districts should develop a system to coordinate the services offered by school interpreters

Among the practices recommended are to develop: (a) a roster of qualified interpreters who can be shared across districts and/or schools; (b) guidelines for outlining interpreters' roles; (c) guidelines for selecting interpreters; (d) guidelines for working with interpreters; (e) a system for monitoring the interpreters' practices; (f) a plan for interpreter and school personnel training; (g) a reward system for compensating

interpreters; (h) procedures such as supervision to help interpreters to improve their performance; and (i) plans for conducting formative and summative evaluations relevant to working with interpreters.

Training experiences are needed for school interpreters and for school personnel working with interpreters.

Local school districts and school psychology training programs can work collaboratively with interpreter training programs in universities across the nation to develop pre-service and in-service training programs for school interpreters, school psychologists, and other school personnel. Training programs can focus on the competencies previously outlined. Training experiences can involve courses as well as workshops targeted for different school professionals (e.g., interpreters, school psychologists) and can be delivered jointly (e.g., training interpreters and school psychologists together on how to conduct assessments). Practicum experiences can also be created so interpreters can receive practical experiences working in school settings with a variety of professionals.

Hire school interpreters with adequate competencies. When bilingual school psychologists are not available, school psychologists should work with interpreters who demonstrate the competencies outlined earlier.

Avoid using interpreters who have dual relationships with clients. Trained interpreters, school personnel, and community members who have dual relationships with specific clients should not provide translation services for those clients. It is not recommended to place school children and family members in the roles of interpreters. The confidential and sensitive nature of the issues discussed with children and parents precludes bilingual peers from acting as interpreters during interviews, conferences, and assessment situations. Peers and family members who act as interpreters may lack the language skills needed for the task. In addition, their personal involvement with the student and family may interfere with their ability to remain objective during the translation process.

Provide adequate time to work with interpreters. Providing psychological services through interpreters is time consuming because of the many barriers that can be encountered during the process. Working with interpreters is also time-consuming because of the need to filter all communication through the interpreter. Sufficient time should be allocated for assessment sessions and meetings that necessitate the use of interpreters.

Provide opportunities to establish rapport. Opportunities must be provided for interpreters to establish rapport with clients. Thus, school psychologists may want to ask interpreters to meet with ELLs and their parents before translation sessions so that they can work on establishing rapport with the family and/or client. School psychologists and other school professionals also need to allow time to introduce themselves and establish rapport through the interpreter.

Conduct briefing sessions with interpreters. Before working with interpreters, school psychologists should conduct briefing sessions with them. If other school personnel are joining the school psychologist for activities such as meetings and interviews with parents, the briefing session should be conducted with all relevant personnel. Briefing sessions provide school psychologists the opportunity to discuss with the interpreters the background information needed to prepare for the translation session such as the purposes of the translation session (e.g., assessment, meet with parent), the procedures that will be used (e.g., interviews, meetings, assessment) and topics that will be discussed (i.e., special education issues, technical vocabulary). The briefing session is also the time when the school psychologist may want to explore the cultural issues that they need to be aware of to work with ELLs from diverse cultural backgrounds. Seating arrangements should also be established to ascertain that the school psychologist and other school professionals can face the client and/or family members. The client and family should also be able to look at the school professionals and the interpreter. The interpreter should also be provided with information needed to understand the context of the situation. Issues related to confidentiality should also be addressed. During the briefing session, decisions also need to be made about what types of translation style will be used (e.g., consecutive, simultaneous). Time should be provided after the debriefing session for the interpreter to translate any documents that will be needed during the translation session (e.g., psychoeducational report, Individualized Education Plan, letters).

The school psychologist needs to discuss the technical terms that will be used during the session to help the interpreter to prepare for the translation session (i.e., diagnostic categories, special education terms, psychological terms). The interpreter should be encouraged to ask questions about any vocabulary or concepts that require more information. The briefing session is an opportunity to discuss cross-cultural

issues from the perspective of communication and behavior. For example, the school psychologist may want to greet families in ways that are culturally appropriate and the interpreter may be helpful in that regard. The school psychologist may also want to explore with interpreters any communication or interaction patterns that are culturally appropriate. The school psychologist needs to communicate to the interpreter the expectation that everything will be translated to the clients and that the interpreter should translate all communication from the clients. If the appropriate assessment tools are available, the interpreter should review all assessment materials and should have the opportunity to ask questions relevant to them. The school psychologist should also review with the interpreter concepts related to standardization, validity, reliability, and conduct during assessment sessions (e.g., do not coax students).

Use best practices when working with interpreters during translation sessions. School professionals need to take the time necessary to welcome children and parents through the interpreter. The interpreter should introduce him or herself, the school psychologist, and any other school professional present during the session. Time should be taken to establish rapport with the clients and family members. School professionals should speak directly to the clients and allow time for the interpreter to translate everything said during the session. The school psychologist should communicate to the clients that they need to stop periodically to allow the interpreter to translate their messages. The interpreter should be ready to ask the client to slow down or to speak in short sentences if the rate of speech is too fast or if the client is not stopping frequently enough to allow the interpreter to translate their messages. In situations where the interpreter and the clients become involved in long discussions, the school psychologist should be ready to interrupt the discussion and to remind the interpreters and the clients that all communications must be translated. It is important to remember that idioms, slang, and metaphors are difficult to translate.

Taking note of concerns that need to be discussed after the translation session is recommended (e.g., terms that were difficult to translate or cross-cultural issues relevant to communication). During conferences and interview sessions, the interpreter should periodically ask the clients questions to establish that they are understanding the content of the communication. Asking clarifying questions is helpful in

situations where information was lost as a result of the translation.

Conduct debriefing sessions. Debriefing sessions between school psychologists and interpreters are recommended to discuss the outcomes of the translation session. In addition, discuss any translation problems that may have surfaced during the session and their implications. Issues such as difficulty establishing rapport, cultural differences, and barriers in translating concepts or terms can be discussed to allow the interpreter and school psychologist to process issues that influenced the communication and interactions with clients and their families.

Use multiple assessment methods. If an interpreter is needed to perform an educational or psychological evaluation, multiple assessment tools and procedures should be used. On-the-spot translations of standardized achievement and cognitive tools are not recommended. The first choice should be to use testing tools that have been translated and validated for the population being tested. If such tools are available, the school psychologist must provide the interpreter with training to assist in the assessment process. Interpreters need opportunities to familiarize themselves with testing tools and to practice administering the tests. Informal translations of cognitive assessment tools are not recommended, and nonverbal tools should be used instead. Any reports generated to describe data obtained through interpreters should include: (a) language and cultural data pertinent to the student's background; (b) a statement clearly indicating that an interpreter was used; (c) a clear description of the extent to which the interpreter was needed; (d) the style of translation that was used (e.g., simultaneous, consecutive); (e) a clear description of any testing procedures that involved the use of interpreters; and (f) the validity and reliability of the findings. All test data should be interpreted within the context of the student's cultural backgrounds and should be reported in qualitative format. If findings are questionable because the process of working with the interpreter did not yield valid assessment data, the test report should clearly state so and recommendations are to address the need for a bilingual evaluation by a qualified school psychologist.

Recommendations for the Future

School psychologists and other school professionals must often work with interpreters because of the need

to communicate with ELLs and their families. However, school professionals need clear guidelines in this area. National and state policies are needed that outline procedures to be used for working with interpreters in school settings as well as the qualifications for school interpreters. State education agencies and districts need to develop guidelines for training and giving credentials to competent school interpreters. The guidelines should address the need to hire interpreters with adequate training in translation, and with high levels of proficiency in English and the second language. Future research also needs to be conducted to further understand the process of working with interpreters and to guide practices for school professionals when working with them.

See also: [▶ Bilingualism](#); [▶ Culturally competent practice](#); [▶ English as a Second Language Instruction \(ESL\)](#); [▶ Language proficiency](#)

Suggested Reading

Lopez, E. C. (2002). Best practices in working with school interpreters to deliver psychological services to children and

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Suggested Resources

The National Association of School Psychologists—<http://www.nasponline.org>: The National Association of School Psychologists provides several documents focusing on working with interpreters.

IQ

[▶ Intelligence/Intelligence Quotient \(IQ\)](#)