

WHY THE  
school can't  
(or won't)

➤ **HELP** ➤  
Your Child!

What the school isn't telling you  
*AND*  
what EVERY mom should know!

by Bonnie Landau, MS, PPS

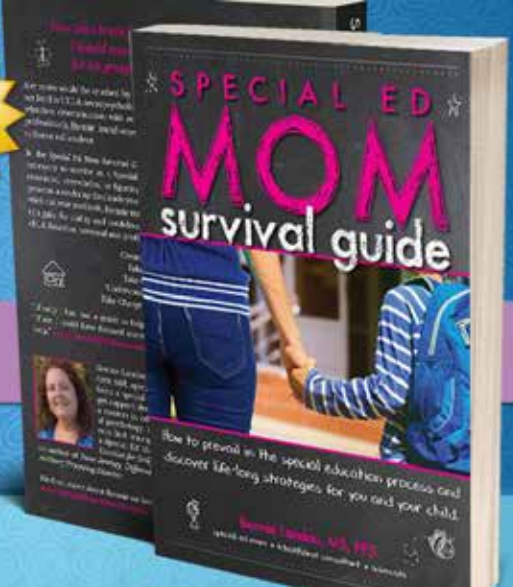
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### WHY THE SCHOOL CAN'T (OR WON'T) HELP YOUR CHILD

What the School Isn't Telling You and  
What Every Mom Should Know

by Bonnie Landau, MS, PPS

#### ABOUT BONNIE

I am not your typical special education advocate. I am a Special Ed Mom, just like you, and I have been through IEPs and advocating for my child. The special ed system can be overwhelming, but you will always know your child best. I can help you find solutions to help your child soar without losing yourself in the process.

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# LEARNING LESSONS

MY KIDS TAUGHT ME  
WHY THE SCHOOLS  
CAN'T ALWAYS HELP

"I did what any rational  
mom would do.  
I freaked and did  
my best to hide it."

I'll never forget the day my younger son told me he saw double. We were playing a board game, and I was choosing my next move, and he said, "Look mom, I can see two of you!" He thought it was so cool, but when I looked up at his face, I saw one eye turned in towards his nose and the other eye looking straight. I did what any rational mom would do — I freaked and did my best to hide it.

I knew about visual processing disorders, but I didn't know anything about seeing double, and definitely nothing about eyes turning inward. I began the third degree to

## Double Vision



I found out one of the most crucial reasons why it is **YOUR** job to lead your child's team!

try and see how often this happened and what kind of problems it caused.

It turned out it had been an on-again, off-again problem for many years, and we never had a clue. Suddenly it made sense why my son avoided ball sports and refused to ride his bike. A trip to the behavioral optometrist diagnosed alternating, intermittent strabismus, and the doctor prescribed vision therapy.

What really concerned me though was he had serious problems with reading and writing, and not a single person at

the school mentioned that he might have a visual processing disorder. He worked with an occupational therapist for writing, a resource teacher for reading, and their approach to fixing his challenges was more repetition of the same process they had been doing for years. Nobody ever even hinted that there might be an underlying reason for his difficulties. And of course, as the tiger mom that I was, I wanted to know why. And so they got the third degree too, and I found out one of the most crucial reasons why it is **YOUR** job to lead your child's team.



# MEDICAL SUGGESTIONS NOT ALLOWED!

THERE ARE THREE REASONS THE SCHOOL CANNOT DIAGNOSE YOUR CHILD. THEY ALSO CANNOT TELL YOU ABOUT A POSSIBLE MEDICAL PROBLEM THAT YOUR CHILD PRESENTS SYMPTOMS OF.



*It is unlawful to practice medicine without a license.*

*If they know of a disorder, and they know of somebody who may be able to help your child, they have to ignore that information?*

School personnel cannot tell you if they suspect your child has a medical condition because all states have a law that says it is unlawful to practice medicine without a license, and diagnosis is one aspect of practicing medicine. If they suspect a specific condition, school personnel can recommend seeing your family doctor, but they cannot tell you the diagnosis they suspect. In some cases, such as failure of a vision screening, they can specify that the child should see an optometrist or ophthalmologist. On the other hand, if they suspect the child has a visual processing disorder, they are not

allowed to refer the child to a behavioral optometrist for vision therapy. That would be reaching into diagnosis territory.

Of course when I first heard this I thought, “How ridiculous is that?!” I mean, if they know of a disorder, and they know of somebody who may be able to help your child, they have to ignore that information? But the reasoning behind this law is sound. Unless a school employee is a doctor (which is rare), they do not have the training to diagnose medical conditions. As such, while wanting to be helpful, there is a high probability they



The school is not allowed to suggest medical treatment for your child's problems.

will get a diagnosis wrong. This is very evident by the number of teachers who are quick to label kids ADHD because they can't sit still in class.

In my younger son's case, if he had failed his vision screening, he would have been referred to an optometrist or ophthalmologist. Unfortunately those kinds of doctors do not usually diagnose visual processing disorders. Visual processing issues seem to be the primary domain of behavioral optometrists. But even if a teacher or school staff suspects a visual processing disorder, it is against the law for them to tell you to take your child to a behavioral optometrist or to obtain vision therapy to correct it. This is the only kind of doctor who can remedy the situation with non-surgical options, yet the staff who work at the school could lose their license if they tell you about it.

By the same token, the school is not allowed to suggest medical treatment for your child's problems. That means ANYBODY in a school who is not a medical doctor cannot even whisper the suggestion that your child should be on medication. Unfortunately this is a common problem in the schools where desperate

to make classrooms easier, a teacher or school psychologist may suggest medication to help your child have better behavior or attention in class.

This happened in our first school district when our older son had serious problems focusing and doing his schoolwork. He tended to get very agitated when there was a lot of loud noise, and he often acted out by having a temper tantrum. The teacher looked and acted like a stupid Barbie doll, and she was completely ineffective at controlling any of the students, let alone our overactive son. It was actually the school psychologist who did some testing and found through the Connors scale that our son qualified for a diagnosis of ADHD. She didn't actually diagnose him, but she did tell us we should visit the pediatrician, show him the results of the assessment and ask for a prescription. This was advice from the district who refused to give him any support that would help him with these behaviors. They just wanted us to get a pill to fix it. At the time I did not know this was illegal, but wish I had. I would have reported them to the California Board of Education as it is 100% against the law for them to do this.

‘Appropriate’ education means education that is commensurate with non-disabled students. This does not include medical care.



## Medical services are outside ‘appropriate’ education.

IDEA states that the schools provide “appropriate” education, not maximize the potential of the student. Appropriate education means education that is commensurate with non-disabled students. This does not include medical care. So they are not required by law to provide services that are found outside of the typical school setting.

I remember a case of an occupational therapist who worked with children who had physical disabilities such as cerebral palsy or severe brain injury. Her job was to help the children with gross and fine motor

skills, but she has some children who had severe difficulty eating. Outside a school setting swallowing and eating therapy falls under the domain of an occupational therapist, but because this therapist worked in the school, she was not allowed to do swallowing or eating therapy with the students. Many of her students were tube fed and as a result very thin and weak, but she was not allowed to help them to learn to eat food because it was considered a medical intervention. It was beyond the scope of “appropriate” education.



## The school district does not want to foot the bill for medical care.

If the school does refer your child to a specialist, and the doctor or therapist finds the child needs therapies or special treatment, the school may have to foot the bill. While there is no specific law requiring this, there have been parents who have sued the schools, getting the court to agree that because the school suggested it, they have to pay for it. So while this is not specified in Section 504 or IDEA, case law provides the precedent for this. As a result, schools avoid giving out referrals to physicians in order to avoid being stuck with the resulting bill.

And that is why it is SO critical that as the parent, you take up the gauntlet, do your research, and find out if there is anything that can be done to rectify your child’s learning challenges.

In the case of my younger son, a year of vision therapy, and \$6,000 later, his problem has been permanently corrected. He has become an avid reader and he reports he can now see the lines he has to write on. His handwriting improved dramatically and he became willing to do his schoolwork and homework. He also loves to bike ride now. Imagine that! Had it gone on, his brain would have turned off vision in his left eye, he would have lost binocular vision, and he would have had serious depth perception problems the rest of his life. If you want to read an amazing case of vision therapy changing vision, I highly recommend the book *Fixing My Gaze: A Scientist’s Journey Into Seeing in Three Dimensions* by Susan R. Barry.



# The teachers know but they cannot say!

From ages 3-5 my son was in special education preschool at a public school. His teacher was a speech therapist, he worked with another speech therapist and occupational therapist as part of his daily school routine.

He left the special ed preschool for general ed Kindergarten, and when he was six and a half, we figured out he had auditory processing disorder. I ran into one of his preschool teachers in town and told her we had figured this out, and she said she was not surprised because he had all the symptoms.

I was stunned by her response. I wondered why hadn't they told me if they knew he had the symptoms? She said they weren't allowed to. For nearly 3 years he was with these special ed experts who did all the traditional therapies but never saw dramatic progress for him, yet they weren't allowed to tell me about the possibility of an underlying disorder which could be causing all his speech problems.

He was 6-1/2 when we did AIT (auditory integration training), the first therapy to help with APD. Two weeks after completing AIT his speech spontaneously reorganized and he spoke in well-formed sentences for the first time in his life. Wouldn't it have been nice if we could have done that when he was 4 or 5, not wait until he was 6-1/2?!

# 8 REASONS THE SCHOOLS WILL NOT HELP YOUR CHILD

It's more than just money that causes schools to refuse services.



You need to learn the 'personality' of your district and find out their most common reasons for saying no.



## Budget is an issue because federal monies are scarce.

The number one reason services are denied is for financial reasons, but schools will rarely say that. It is important to understand the financial challenge they are facing so you can see why they work so hard at saying no.

While the federal government requires states to implement IDEA, the federal government is only required to pay 40% of the bill. When IDEA was first implemented, the federal government 'estimated' that it would cost twice as much to educate a student with disabilities than the average student. Based on this estimate, the federal government determined that 40% contribution was fair since the states would then just have to fund 10% additional educational costs.

The real challenge comes in when you realize that IDEA has not been fully funded, and so the states never get their full 40% share. In 2014 states only received an average of 16% of the 40%, and states and school districts had to assume the burden of the remaining costs. As a matter of fact, since IDEA was enacted in 1975, not once has the federal government funded the full 40% it promised.

Between 2000 and 2014, the percentage of students requiring special education services in the USA has



remained fairly constant at 13%. Unfortunately, the services needed by students have become more intensive and more expensive. For example, from 2000 to 2014, the number of students with autism spectrum disorders has gone up 500%! These children often require more costly interventions, yet there is not increase in funding to pay for it. Are you starting to understand that the budget issues are real?

Clearly the system is broken, and this is the stress that school personnel come to meetings with. While many really want to help your child, they really do struggle to find the means to pay for the services required. In the end it comes down to what funds are available in your school district, and whether local taxes can contribute enough to provide the necessary budget.

Clearly the system is broken,  
and this is the stress that  
school personnel come  
to meetings with.





## The special ed budget is drained by legal fees.


The first district we were in, which was horrific about providing services, there was a speech therapist who really wanted to help our son. He would pull me aside when nobody was around and give me advice on what I could do to help. He told me the most amazing story that helped me understand why they were so stingy with services. Because of the income level in that area, parents would often show up to the very first IEP with a lawyer. They automatically assumed they would meet with resistance, so right out of the gate the parents would come out fighting. Of course, then the district had to respond in kind, bringing lawyers to IEPs and having them help with paperwork between meetings. Their legal bills were so massive they did not have the money to give services. We ended up hiring a lawyer to get our son the services we needed. I assume they realized it would cost them less in services than in legal bills.

If you are lucky enough to live in a middle or upper class city, it still doesn't mean you are guaranteed to get services. In fact, because of the income levels of the residents, the district budgets are often eaten away by this legal tango that happens from the very start of discussing how to help a student.

Several years later we had moved to a new town, and I met a man whose son had been in special education. His son had already finished high school, but he told me that about 15 years prior, he and several other parents had sued the school district



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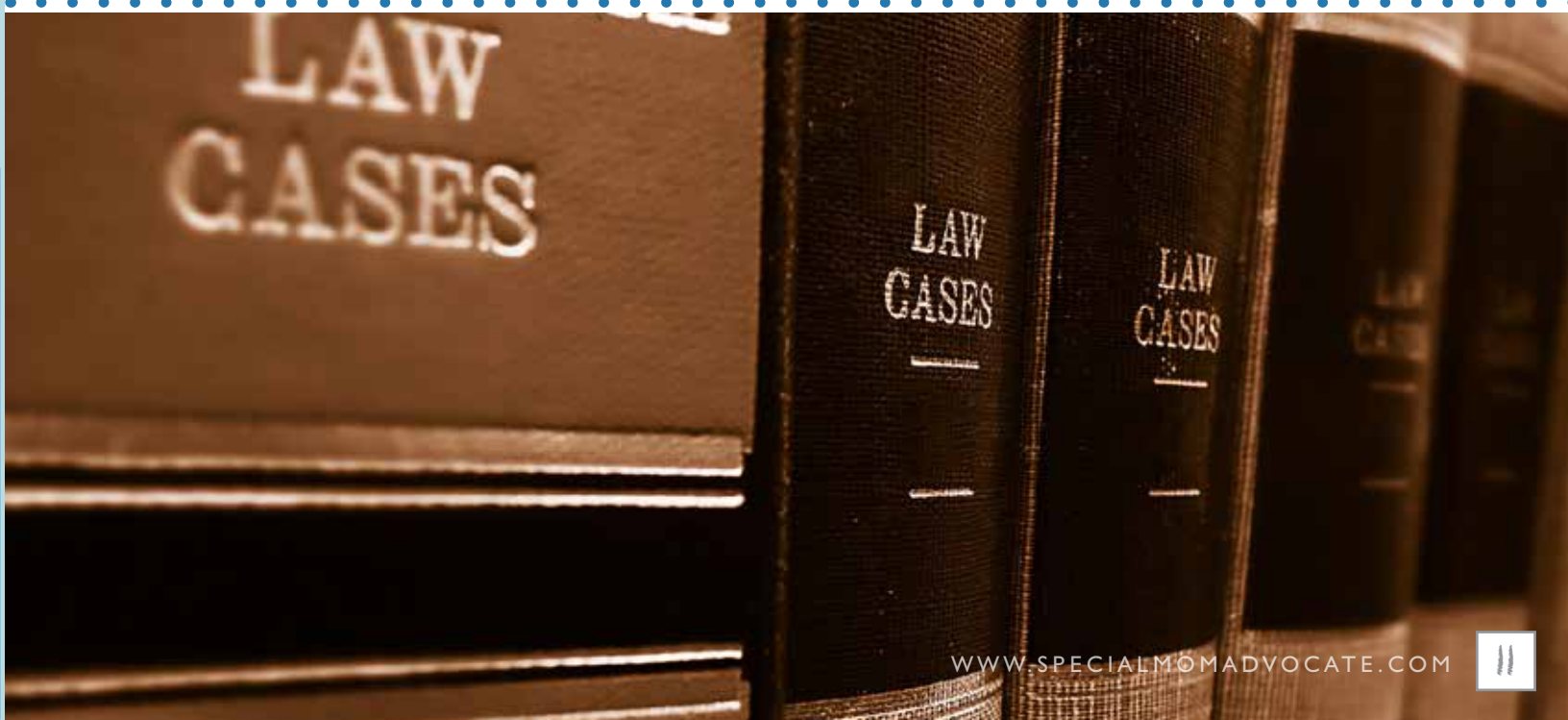
for not providing adequate services. It was then that the district realized that spending money on legal services was not helping the children, so they changed their approach to special education. Instead of fighting, they focused on helping the children as much as possible when they were young, knowing that this will help many kids grow out of the need for services when they got older.

I am not sharing this to tell you that use of a lawyer is the only way. I am trying to help you realize that each district has its own personality, and understanding that personality will help you strategize an effective approach for getting help for your child.

In 2010 in the state of California, 10% of students in public schools (686,000 students) received special education services. Of these, only 1 percent, or 6,860 parents will hire a lawyer to help them file for due process, and of these, only 3 percent, or 205

families, end up in a due process hearing. So most cases do not end up in court, although this could be partially due to the fact that most families cannot afford a lawyer.

NBC did an investigative journalism piece about California districts denying services to students. They found that since 2010, more than 10,000 families in California ended up in court in an effort to get services for their child. This does not include all the parents who went to mediation or settled their due process outside of court. In their report they included a list of the number of cases each school district faced in due process. You can view the list here: <http://media.nbcbayarea.com/documents/OAH+Special+Education+Cases+Since+2010.pdf>. This sort of information is extremely helpful because it shows you that you don't necessarily have to go to due process to get your child help, depending on the personality of your district.





## The School does not have adequate resources to help your child.

Limited resources due to budget deficits is a real issue for many schools, but this does not excuse the school from providing those services. One of the proponents of Free, Appropriate Public Education (FAPE), is that the schools provide educational supports for the educational needs of the student. If the student requires services that are not usually provided within the district, the school is obligated to find and pay for a resource outside of the district. It is against IDEA for the school to say they cannot provide this resource because they have no personnel to offer it.

It is common for the school to say that a child does not need a specific resource in order to get around this law. It is up to you as the parent to investigate if this service is being provided to other students in

the district, and if so, how is it being provided. If no other students receive this assistance, or if they are getting outside of the school, that could help you understand that there is a budget issue with regards to funding the service. This helps you understand the personality of the district so you can then come back and negotiate, letting them know that you are aware that the service is not available, and you are aware of the law that requires them to provide it if your child needs it.

If the school continues to refuse the service, you may suggest an alternative service that may not be the same, but may be helpful in a similar way. Negotiating with this approach helps the school save face while also getting your child the help he/she needs.





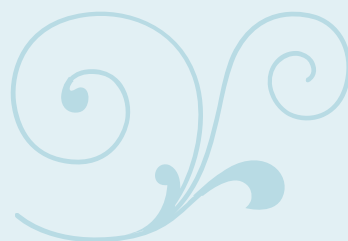
School therapists are  
overworked and overwhelmed.  
You think they are inclined to  
add a student to their schedule?



## The assessor may choose AND provide services.

Each staff member who evaluates your child will probably also be the person who determines if services are needed. Unfortunately there is a conflict of interest here because but they are often the provider of the services as well. Since most staff in schools already have a very busy schedule, the decision to provide services may be influenced by how overworked this person feels. While most people working for schools really want to help your child, there is a reality that staff is tight and personnel are expected to pick up the slack.

Getting a private assessment can help offer a neutral opinion outside of the confines of the politics of the school environment. It can also reassure you of whether or not services are really needed. Schools are required to review private assessments, but they are not required to follow their recommendations. Even so, having them can help you make a case for providing the service in school.





## Schools do not have time for a thorough evaluation.



Budgets effect more than the students who need services, they also impact the people who do special education evaluations. Many of the staff that would assess your student have very packed schedules. Fitting in assessments and report writing that are comprehensive can be a huge challenge. Because they are faced with legal deadlines to meet annual IEP annual reviews, they often have months in the school year where they have 4-5 IEPs per week! You can find them doing their report writing in the evening or weekends, because they have to fit hours of assessment time into the short school days. Because of this challenge, it is possible they have to rush through and cannot do as thorough a job as they like. It is no reflection on their knowledge or abilities, but simply a case of too much work in too little time.

These assessors also do not get to choose which assessment tools to use. Sometimes they might

have input into the choice of tool, but it is the district that ultimately chooses the assessment inventory for all staff in the district. The district also dictates what can be measured with these tools and what standards or skills are in alignment with the assessment. So even if an assessor sees a pattern in behavior or ability, they may not be able to report on it because the district limits what areas they can report on for a specific tool. The district choices can also limit their ability to assess if they see a need outside of the chosen instruments. So while they may be trained on other tools, they are not allowed to use them unless the district approves their use.

I can remember when our son was in Kindergarten I came across an article that caused me to suspect that he had auditory processing disorder. I brought it to the attention of the IEP team. The school psychologist and speech therapist both told me I was wrong, that I did not have their degrees,



So even if an assessor sees a pattern in behavior or ability, they may not be able to report on it because the district limits what areas they can report on for a specific tool.



and I did not know what I was talking about. For six months I kept pushing for at least an auditory screening, but they said it was unnecessary. I then took my son to a learning center that did the SCAN-C and TAPS auditory screenings, and he was found to have significant deficits. The SCAN-C competing words test showed he only understood 9% of what he heard if competing noises were present! Still the school insisted I was wrong, but they agreed to do a screening themselves and called in a contracted audiologist. She administered the Different Screening Test for Processing (DSTP) which also showed he had a significant deficit in auditory processing.

Even with their own results showing a problem, the school still refused to do a proper auditory

processing assessment. Desperate to help our son, we ended up paying out of a pocket for a private audiologist to assess him. He was diagnosed with severe auditory processing disorder with the decoding subtype. Looking back on the situation, do you believe the school psychologist and speech therapist really knew what they were talking about? No, they just did not have the tools or the knowledge to do a proper assessment. When my private screenings showed a problem, the school had to pay for a specialist to be brought in on their dime. The school psychologist and speech therapist never had the ability to prove or disprove what I was saying. If I had not pushed, I would have cowed to their pressure, and my son would not have gotten help for a major challenge he was facing.





The child's disability  
does not qualify.



Many parents are surprised when they obtain a diagnosis from a doctor but then the school tells them the diagnosis does not qualify their child for special education. This is a case where it is really important to understand what is involved in qualifying for an IEP or 504.

## QUALIFYING FOR AN IEP



For a child to qualify for an IEP, the student must demonstrate difficulty accessing the curriculum. What does 'accessing the curriculum' mean? It means the student has difficulty doing grade level work at similar speed, competency and method as age-appropriate peers. They usually need extra assistance getting their schoolwork done. For example, pull-out classes with a specially trained teacher, occupational therapy to help with handwriting, or specialized equipment to help with seeing better. Difficulties can be demonstrated through poor grades, incomplete work, achievement tests and assessments that show areas of difficulty. Providing this extra assistance costs the schools money because they are outside the regular teaching plan. This is why schools are so reluctant to provide them.

In addition to difficulties accessing curriculum, to qualify for an IEP, a student's disability must also fall into one of the qualifying categories of disability as described by IDEA:

- Autism
- Blindness
- Deafness
- Emotional Disturbance
- Hearing Impairment
- Intellectual Disability
- Multiple Disabilities
- Orthopedic Impairment
- Other Health Impaired
- Specific Learning Disability
- Speech or Language Impairment
- Traumatic Brain Injury
- Visual Impairment

The Other Health Impaired and Specific Learning Disability categories are often chosen if the disability does not fit anywhere else. If the student qualifies, the IEP team should then create goals and offers services to help the student to more fully participate in their education.



Unfortunately IDEA does not specify the process for qualifying for a disability, so this is left up to the school district!

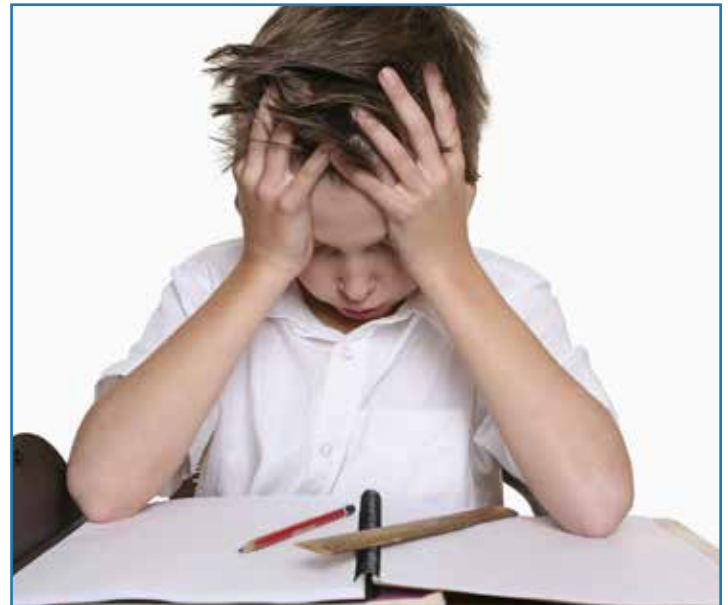
Unfortunately IDEA does not specify the process for qualifying for a disability, so this is left up to the school. **This is why it is so hard to get qualified in some districts and not others!**

### The Discrepancy Model

Prior to 2004 IDEA required schools to use the discrepancy model, which looks at IQ tests and compares them to the 'norm.' If a student is shown to have an area of the IQ test that is significantly less than the overall average, the child is considered to have a learning disability. For example, if a student scores an average of 108 on most sections of the IQ test, but in reading the student scores 84, that is a significant discrepancy and indicates the presence of a learning disability in reading.

Unfortunately the 'norm' is not specified in IDEA, and some schools use 100 as the norm, which is the number of an average IQ. To be most effective the norm should be compared to the student's own IQ. If they make the comparison to an IQ of 100, it means a student who has high IQ but average performance could be disqualified. This will often exclude gifted students from receiving special education services. It also means a student may qualify in one school district and not in another.

While the IDEA originally required this model, they did not specify how large a gap was needed to qualify, so states got to decide this. The general rule



of thumb is school performance that is at least two standard deviations below the 'norm' would qualify the student for special education. In California it is 1.5 standard deviations below, which is usually 21 IQ points.

In 2006 the IDEA no longer required the use of this model, but it is still standard practice in 34 states. The discrepancy model does not tell you what sort of learning disability the child has, nor will it point to specific methods to help the problem.

Critics of the discrepancy model have said it does not see the full picture of a student's abilities, and therefore excludes a lot of children from getting help. Since 2006 two other methods of identification have been used to qualify students: response to intervention and the processing deficit model.



## Response to Intervention

The first, response to intervention (RTI), utilizes special teaching methods for students who are struggling in the classroom. If after a specified period of time those methods do not help a student improve, then the student may be referred for special education testing. There are a few challenges with this model.

- There is no specified time for RTI so schools can implement it for years.
- Schools do not use it for identifying special education students, but instead use it to avoid assessing them.
- Even if a student is referred for assessment, RTI is not used to identify their disability, a discrepancy model will be used instead.



## Are you starting to get a picture of why it is so hard to qualify in some districts?

They get to set the parameters for qualification, and in doing so they can limit access to special education services. This is where your documentation of your child's performance can help. If you can show patterns of difficulty, need for assistance and reduced academic performance, you can demonstrate to the school that your child is struggling to access curriculum and needs more assistance in school.

## Processing Deficit Model

The second approach for identifying students is the processing deficit model. This method of identification requires assessing specific areas of processing that are known to impact learning. This could include auditory processing, visual processing, working memory, phonological processing, and fluid intelligence. The processing abilities that are measured are tied to specific learning skills. For example, phonological processing is necessary to learn how to read phonetically. If a student exhibits weaknesses in specific processing abilities, then the student is deemed to have a learning disability.

The benefits of the processing deficit model is that it pinpoints the exact skills the student is lacking, which can then identify appropriate interventions. The challenges with this model are:

- It takes more time to assess a student for specific processing deficits.
- There is no specific guideline as to how poorly a student must perform in order to be considered to have a processing deficit.



## Qualifying for a 504

When a student has a disability that DOES fall into one of the 13 categories of the IDEA, but they DO NOT demonstrate difficulty accessing curriculum, they still may be eligible for a 504 plan.

A 504 plan is covered by section 504 of the Americans with Disabilities Act. Unfortunately it does not list out specific disabilities, and this is where the schools get around providing one. Section 504 defines disability as:

- Has a physical or mental impairment that “substantially” limits one or more major life activity (such as reading or concentrating).
- Has a record of the impairment.
- Is regarded as having an impairment, or a significant difficulty that isn’t temporary. For example, a broken leg isn’t an impairment, but a chronic condition, like a food allergy, might be.

If a student has a disability, it does not automatically qualify them for a 504. They must be evaluated by the school and determine if the disability has a significant impact on the child’s ability to learn and participate in school. As with an IEP, several methods are used to determine if a child has a discrepancy between ability and performance. Of course interpretation is up to the school, so while it’s easier to get a 504, you still may get push back.

With a 504 the student is offered accommodations in the classroom to make it easier for them to complete their schoolwork. Accommodations basically level the playing field by providing support for the disability. In this way it is easier for the student to complete schoolwork.

Accommodations are usually implemented by the teacher or playground supervisors. They may include assistive technology such as use of a computer or special seating. They do not include any kind of services and they do not in any way modify the curriculum. The student still has to do all the work the other students do, they just get support to do it.

For example, a child with ADHD may be able to do all their schoolwork, but they may need extra time or frequent breaks in order to complete it with the same competence as a student without ADHD.

A 504 plan does not cost the school money because they are not providing extra equipment or services to the student. Instead the burden goes to the teacher whose job it is to make sure the student has the accommodations specified. In elementary school this is not a huge challenge, but when a student moves to middle school and high school where they have six teachers a day, you can see how it would get difficult to ensure enforcement. The school still may resist giving a 504 because it does require time and paperwork to create and enforce.

A 504 plan is covered by section 504 of the Americans with Disabilities Act. Unfortunately it does not list out specific disabilities, and this is where the schools get around providing one.



## The school says your child is lazy.



I worked with a student named Ethan who had significant difficulties making friends in Kindergarten. He had come out of a special education preschool where social skills was part of the curriculum, but the new school was refusing help in Kindergarten. During recess and lunch, the child took about twice as long to eat his lunch as the other kids. The school psychologist said it was Ethan's fault that he lacked the ability to have conversations and make friends because he spent too long eating. When I pointed out that the majority of socialization at snack time happened when the kids were sitting around the table eating, she brushed that off. She insisted he would be doing better if he was up running around and playing. After he ate he had no problems engaging the kids in games of tag or taking turns on the equipment, so how was that improving his ability to have conversations?

This is how absurd things get when the school starts to blame your child for his/her difficulties. It is common when you first approach the school for them to say the problems are caused by the student's behavior or lack of motivation. The school may imply that poor parenting is the real source of the issues, and many parents will back down because they feel ashamed and do not know how to respond. Some parents may respond defensively, getting angry and try to explain their position.

A very interesting study by Dr. Galen Alessi, published in *Professional School Psychology*, shed an interesting light on this response by the school. Looking at 5,000 cases of students across the USA who were evaluated for special education services, the schools psychologists in the study state the the curriculum, teachers and faculty were NEVER the reason a child



did not do well at school. You have to take that in for a moment. The school psychologist's perspective was that any problem the child experienced at the school was in no way caused by anything that happened in school. Instead, the school psychologists said that 10-20% of the time parenting was the primary contributor, and 100% of the time it was the child themselves that caused their own learning problems. Some of the school psychologist in the study informally admitted this is not truly the case, but if they stated openly that the school environment was a factor, they could lose their job or be made very uncomfortable in the work environment.

This is really crucial for parents to understand, because when you walk into the IEP meeting you have to realize that they are already biased against you. Not intentionally, but the way the school culture works, the child or parents as the source of the problem is an entrenched belief. If you point this out, it could cause friction amongst school staff, so you need to just hold this as another piece of information to help you in your negotiations. Understanding their position helps reinforce your ability to find solutions because now you know where they are coming from.



## District and school personnel are trained to say no.



A while back at an event I met an administrator for a middle school in California. He said his district actually sent special education employees to seminars teaching them how to say no and refuse services. Instead of spending money to enhance their knowledge and offer more services to the kids, they actively promoted denying services. This would be a critical piece of information in assessing the personality of the district, and it would help determine the strategy for the parents. Getting services out of a district like this would be like squeezing water from a rock, and I would encourage parents to hire an advocate or attorney from the start.

A recent Houston Chronicle investigation in Texas uncovered another example of this same kind of refusal of services. The Texas Education Agency (TEA) mandated that districts reduce their special

education student percentage to 8.5% even though the national average is 13%. Remember the states and districts usually bear 84% of the financial burden of special education, so this was their strategy to reduce that cost. Teachers and staff in schools said they had to go to great lengths to justify denying service, in some cases even convincing parents they should remove their children from public schools. While the TEA denied that it was a mandate and more of a guideline, the federal government has launched an investigation to determine if the TEA broke federal laws.

Remember that if your district has a history of denying services, employees may be experts in finding ways to say no. Getting them to say yes will require a focused strategy and knowledge of the law. This is when having an advocate or lawyer at the IEP meeting can help move things in the right direction.





# YOU ARE NOT RESPONSIBLE FOR HELPING YOUR CHILD AT SCHOOL

SOMETIMES SCHOOLS WILL LIMIT YOUR CHILD'S PARTICIPATION UNLESS YOU SHOW UP AND HELP.



It is also against the law for a school to exclude a child from school-related activities because the behavior resulting from their disability makes them difficult for the teacher to manage. Subpart D of Section 504 of the Rehabilitation Act of 1973, a federal law, prohibits the school from discriminating against a child based on his/her disability. The school is required to provide support for the student with disabilities so he or she can participate in all aspects of the school curriculum as adequately as students without disabilities.

I recently had a parent come to me with a major concern about this. A couple months into the school year the teacher informed the parent that her daughter (who had an IEP) could not go on any school field trips unless one of the parents attended to watch over

her. This was the teacher putting a school-related responsibility onto the shoulders of the parent, and it discriminated against the child based on her disability.

Unless all students, typical or special ed, are required to have a parent on the field trip, they cannot require a child with a 504 or IEP to have a parent come along. Subpart D, section 104.34 of Section 504 requires the school to provide equal access in academic and nonacademic settings. This means the school must provide equal access to field trips, and they are not allowed to ask the parent to provide the oversight in order to facilitate this equal access. The only time the school is allowed to preclude a child from participating in a field trip is if participation in the activity presents an unacceptable risk to the student's safety or health.

# TO SUM IT UP

Impossible is not a word I use. I find a way, even if the way is slow. Start seeing what you CAN do and find ways to work through the things you can't do. This is a big journey you are taking, and just by reading this eBook you are showing your tremendous love and willingness to do what it takes to see your child through this.

Get to know the personality of your school district. Be a detective and talk to school personnel and other special ed moms and figure out what reasons they use for saying no. Once you have a grasp of their approach, you can plan your own approach.

I'll never forget the first IEP we had in Ojai. Friends whose kids were in special ed in the district assured me that the team would be awesome, but I was so nervous after our experience in our old district. Boy was I completely agog as I watched the Ojai team brainstorming on how best to help our son. Right on the spot they were adding services and proactively creating a plan to give him full support. I started crying right there because I never imagined an IEP meeting could be like this. I never dreamed school personnel would care so much about my son. This is the experience I hope every parent can have so they can focus on loving and nurturing their child rather than fighting the schools.

"I dream of a day when ALL schools support children with learning challenges so parents can get back to being parents."

~ Bonnie Landau

If you feel overwhelmed by the process, or just want a friendly ear, feel free to call me.

I offer a FREE 30-minute consultation to identify ways you can help your child.



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