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A STUDY OF ADAPTED PHYSICAL EDUCATION PROGRAMS IN IOWA'S AREA EDUCATION AGENCIES

An Abstract of a Thesis

Submitted

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

LIBRARY UNIVERSITY OF NORTHERN IOWA CEDAR FALLS, IOWA

Dean Alan Becker
University of Northern Iowa
July 1984

The purpose of this study was to describe the current status of adapted physical education in the 15 Area Education Agencies (AEAs) in the state of Iowa. AEAs are intermediate educational units which aid school districts in the provision of special education and special education services in Iowa.

A mail questionnaire was directed to a designated contact person at each of the 15 AEAs. Information on the availability of adapted physical education programs from the AEAs, organization and scope of the programs, methods of delivery, categories of handicapped students served, staffing and personnel, and use of Individual Education Programs (IEPs) was compiled.

From the responses of all 15 AEAs it was concluded that a great deal of autonomy exists in the AEAs in the provision of adapted physical education services. A variety of programs and delivery methods are used to provide physical education for handicapped/special education students, with mainstreaming into the regular classroom serving the largest number of students. Adapted physical education programs are provided by AEA personnel in six AEAs. The mentally retarded represent the largest population served by AEA programs. IEPs are written in 11 of the 15 AEAs for students enrolled in adapted physical education.

A STUDY OF ADAPTED PHYSICAL EDUCATION PROGRAMS IN IOWA'S AREA EDUCATION AGENCIES

A Thesis

Submitted

In Partial Fulfillment of the Requirements for the Degree ${\sf Master}$ of ${\sf Arts}$

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This Study by: Dean Alan Becker

Entitled: A STUDY OF ADAPTED PHYSICAL EDUCATION PROGRAMS IN IOWA'S

AREA EDUCATION AGENCIES

has been approved as meeting the thesis requirement for the Degree of Master of Arts.

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CHAPTER I

INTRODUCTION

Adapted physical education developed from the early corrective exercise programs that were established in the late 1800's and revised in the 1940s and 1950s for individuals with physical disabilities. The assignment of handicapped students to corrective classes was essentially a move to protect their conditions from possible aggravation. Little consideration was given to the idea that handicapped students could be taught modified forms of activities, sports, or games, as played by nonhandicapped students. In general, physical education opportunities for the handicapped were extremely limited (Fait & Dunn, 1984).

In the 1960s, educators began to recognize the general educational requirements of children with mental retardation. Perceptual-motor development programs were suggested for school-aged children with mental retardation and learning difficulties. These developments resulted in the initiation of physical activity programs for all types of handicapped individuals, not just the physically disabled, who had previously been served. However, the implementation of these programs in an educational setting was slow (Aufsesser, 1981).

The recognition of the rights of the handicapped in all areas of life, including education, served as a major impetus for legislative action which occurred in the 1970s. Federal and state laws emphasized the fundamental rights of handicapped students to a free, appropriate,

public education that includes instruction in physical education. The specific inclusion of physical education in the definition of special education for handicapped students reflected "...long standing Congressional concern about the lack of emphasis on physical education in programs and activities designed to benefit handicapped young people" (Stein, 1978, p. 25). This position was based partially on the evidence which attested that active participation in physical activities promoted better health, higher quality lives, and personal satisfaction among handicapped persons (Stein, 1978).

Most of the legal mandates concerning comprehensive education services for the handicapped went into effect in the latter part of the 1970s. The current decade of 1980 is a transition period in the development of adapted physical education. Laws have expanded services and set forth challenges which demand continued planning and changes to seek support for the delivery of physical education as an integral part of general education for handicapped students.

Traditionally, the provision of education has been a function of the states; the Tenth Amendment of the United States Constitution states that powers not delegated to federal government are reserved for the states. Education is one of the implied rights of the states (Pritchett, 1977). This provision includes the delivery of special education and physical education. State and local codes concerning the provision of special education were written to comply with federal regulations, and specific attention was given to the administration and delivery of special education.

A great deal of autonomy was given to state and local education agencies in the planning and implementation of education for

handicapped populations. In the state of Iowa, intermediate educational units, designated as Area Education Agencies (AEAs), were given administrative charge of special education and special education services (Boots, 1977). These agencies aid local school districts that have responsibility for educating handicapped children (Iowa Department of Public Instruction [D.P.I.], 1981).

Statement of the Problem

The purpose of this study was to describe the current status of adapted physical education programs in the 15 AEAs in the state of Iowa. Information regarding the availability of such programs from the AEAs, organization and scope of the programs, methods of delivery, categories of handicapped students served, staffing and personnel, and the use of Individual Education Programs (IEPs) was compiled. The information was compiled to provide an overview of the adapted physical education programs rather than to directly compare AEAs or their programs.

Significance of the Study

Nearly 10 years have elapsed since major federal legislation regarding education for handicapped students was passed. Little current information on the impact of the laws on education for students with special needs is available. In particular, there is limited consolidated information concerning the implementation and scope of adapted physical education programs in the state of Iowa.

National and state professional groups have raised concerns about the administration of adapted physical education programs, adapted physical education personnel, and the inclusion of physical education in educational programs for the handicapped. From this study, an informational overview of the practices and organization of adapted physical education programs in Iowa AEAs was obtained. The general findings from this study will be disseminated to professionals in the state who are preparing information and proposing more comprehensive adapted physical education services.

Delimitations

This study was delimited to:

- 1. The 15 AEAs in the state of Iowa.
- 2. The questionnaire being answered by the primary contact person(s) for physical activities for the handicapped, responding on behalf of an entire agency's adapted physical education program.
 - 3. Data gathered in the spring of 1984.

Limitations

This study was limited by the following:

- 1. The responses to the questionnaire were the source of data.
- 2. Responses to the questionnaire were subject to interpretation of the questions by the respondents.
- 3. The accuracy of the written responses to the questionnaire was not under the researcher's control.
- 4. The results of this study can be generalized only to the adapted physical education programs as they currently exist in the 15 AEAs in Iowa.

Assumptions

This study was based upon the following assumptions:

1. Each respondent was familiar with the components and practices of the agency's adapted physical education program.

- 2. The questions were interpreted uniformly by the respondents.
- The questionnaires were answered accurately by the respondents.
- 4. The completed questionnaires provided comprehensive data for the study.

Definition of Terms

For the purpose of this study, key terms have been defined as follows:

Adapted Physical Education: A diversified program of developmental activities, games, sports, and rhythms, suited to the interests, capacities, and limitations of students with disabilities who may not safely or successfully engage in unrestricted participation in the vigorous activities of the general physical education program (AAHPER [now AAHPERD] Committee on Adapted Physical Education, 1952, p. 15).

Area Education Agency (AEA): A service unit lending support to several school districts within a defined geographical area, responsible for educating children. The agencies were created by the Iowa Legislature in 1974.

Handicapped Children: Children who are in need of special education and related services because they have been evaluated as:

- -mentally retarded
- -hard of hearing
- -deaf
- -speech impaired
- -visually handicapped
- -seriously emotionally disturbed
- -orthopedically impaired
- -other health impaired
- -deaf-blind
- -multihandicapped
- -having specific learning disabilities (Education for All

Handicapped Children Act of 1975 [P.L. 94-142]). For the purposes of this study, the terms disabled, impaired, and atypical should be thought of as synonymous with handicapped.

Physical Education: An instructional program designed to develop physical and motor fitness; develop fundamental motor skills and patterns; and provide training in aquatics, dance, and individual and group games and sports. Physical education includes: providing special physical education, providing adapted physical education; providing movement education; and fostering motor development (Education for All Handicapped Children Act of 1975 [P.L. 94-142]).

Special Education: Specially designed instruction, at no cost to the parent, to meet the needs of the handicapped child. Special education includes providing classroom instruction; carrying out instruction in physical education; providing home instruction; providing instruction in hospitals and institutions; providing vocational education instruction; and providing related services (Education for All Handicapped Children Act of 1975 [P.L. 94-142]).

CHAPTER II

REVIEW OF RELATED LITERATURE

The purpose of this study was to describe the current status of adapted physical education in the 15 AEAs in the state of Iowa. This chapter includes a review of the literature concerned with adapted physical education programs, legislation which instituted such programs, delivery methods of adapted physical education, adapted physical education personnel, and the development of, and services of the Area Education Agencies.

Adapted Physical Education Programs

Approximately 12% of the nation's school aged population are designated as handicapped to the extent of needing special education services, which may include adapted physical education (Crowe, Auxter, & Pyfer, 1981). Types of handicapping conditions found among school aged children were revealed in a 1978-79 survey by the Bureau of Education for the handicapped. The four most prevalent handicapping conditions in terms of numbers served by special education services were: Speech impaired (30.8% of total handicapped population receiving services); learning disabled (29.3%); mentally retarded (23.2%); and emotionally disturbed (7.6%). Other handicapping conditions were each represented by less than 2.6% of the handicapped population served (cited in Sherrill, 1981).

In the state of Iowa, approximately 20,000 students may be in need of some type of an adapted physical education program. These students' handicapping conditions could benefit from special considerations presented by adapted physical education programs (Conover & Kukowski, 1979).

Research as reported by the Information and Research Utilization Center in Physical Education and Recreation for the handicapped [IRUC] (1976, June), indicates that physical activity is vital to the well being of all. If participation in physical activities is beneficial for the development of able-bodied children, then activity is just as important if not more so for the handicapped. Improved cardiorespiratory endurance and greater stamina, along with reductions in certain medications and fewer seizure attacks are just some of the benefits gained by handicapped subjects through participation in well planned physical activity.

Adapted physical education programs reflect the same concern for the total development of the child and the same general program goals directed toward that development as regular physical education programs. Along with the primary goals of physical fitness, development of motor skills, and participation in games and sports, active participation in physical education activities provides handicapped children with awareness of their own physical ability and their capacity to grow and improve. "... This awareness of physical ability transcends into their daily living" (Masters, Mori, & Lange, 1983, p. ix).

Legislation

Federal legislation. Until recently not all handicapped children were given legal-legislative equality of opportunity with their normal peers in the area of education. Many laws, regulations, and mandates were given dual interpretation—one for regular education, the other for special education. "As a result, many special education youngsters

have been categorically denied opportunities in physical education and related activity areas" (IRUC, 1976, June, p. 81).

An examination of current laws and provisions for education in public schools applicable to students with handicapping conditions indicates that physical education is a part of general education that should be provided for handicapped and nonhandicapped students alike. A detailed overview of legislative history is beyond the scope of this review, but three recent federal acts stand out as most significant in their impact on the education of the handicapped. They are (a) Section 504 of The Rehabilitation Act of 1973; (b) Public Law 93-380, The Education of the Handicapped Amendments of 1974; and (c) Public Law 94-142, The Education for All Handicapped Children Act of 1975 (Meyen, 1981).

The Rehabilitation Act (P.L. 93-112) was passed in 1973. Section 504 of that Act states:

No otherwise qualified handicapped individual in the United States shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.

In 1974, Section 504 was amended by the passage of P.L. 93-516 to specifically include educational services under the nondiscriminatory provisions of Section 504. Regarding physical education, sections 84.34 and 84.37 of the Health and Human Services Regulations empowered by Section 504 allow for the participation of handicapped students in non-academic activities, including physical education, athletics, and recreation. In addition, the regulations allow for participation of the handicapped in separate programs if participation in the regular

program or class is not appropriate, provided that the alternative placement offers comparable programming to that found in the regular setting.

Public Law 93-380, The Education of the Handicapped Amendments, was passed in 1974. This law extended and amended The Elementary and Secondary Education Act of 1965. The 1965 Act authorized states to initiate and improve education programs for the handicapped, and created the Bureau of Education for the Handicapped (now the Office of Special Education) (Kalkian & Eichstaedt, 1982). In 1974, P.L. 93-380 re-established this national policy on equal educational opportunity stating that every citizen is entitled to an education without financial barriers. This act granted full educational opportunity for all handicapped children and specified placement of children into the least restrictive environment according to their needs (Kalakian & Eichstaedt, 1982; Meyen, 1978).

Perhaps the single most significant piece of legislation pertaining to the education of handicapped children is Public Law 94-142, The Education for All Handicapped Children Act of 1975. This law ensured the rights of handicapped children to a free, appropriate, public education in the least restrictive environment. Free means that the local education agency is required to educate the child at no cost to the parent or guardian. Appropriate indicates that based on an assessment, the education program will be individualized to meet the needs of the child. Least restrictive environment refers to educating the child in the regular education environment, unless assessment results indicate modified placement for selected periods or classes.

In addition, any child receiving special education services under P.L. 94-142 must have an IEP. The IEP is a written statement that outlines the student's current level of performance, goals and objectives, specific services to be needed, expected duration of services, and evaluative criteria (Kalakian & Eichstaedt, 1982).

As a result of P.L. 94-142, physical education became one of two curricular areas that were specifically mandated for handicapped students. The following regulations appeared in the Federal Register of August 23, 1977:

(a) General. Physical education services, specially designed if necessary, must be made available to every handicapped child receiving a free, appropriate, public education.

(b) Regular physical education. Each handicapped child must be afforded the opportunity to participate in the regular physical education program available to nonhandicapped children unless:

(1) the child is enrolled fulltime in a separate facility; or

(2) the child needs specially designed physical education, as prescribed by the child's Individual Education Program.

(c) Special physical education. If specially designed physical education is prescribed by a child's Individual Education Program, the public agency responsible for the education of the child shall provide services directly, or make arrangements for it to be provided through other public or private programs (p. 42489).

Physical education, being specifically included in P.L. 94-142, is thereby designated as a primary or direct service, distinct from a related service, which may include recreation, physical therapy, or occupational therapy. Because of this designation, therapy cannot take the place of physical education in the instructional program, but can be provided as a supplementary service if deemed necessary by the IEP committee (Duke & Sherrill, 1980; Miller, 1981).

Broadhead (1982) reinforces the guiding principle of P.L. 94-142 with respect to physical education: "Two types of physical education

programs are mentioned: the regular one; or alternatively, one which is specially designed (adapted) and must be described on the child's IEP" (p. 10). Thus, handicapped children should either receive the regular program of the nonhandicapped peer group, or an adapted program.

State legislation. Federal laws have stipulated that handicapped children shall be provided physical education opportunities. The Code of Iowa (1983) also gives legislative support to physical education for handicapped students in Iowa schools.

Chapter 257, section 25 of the Iowa Code is titled Educational Standards, and establishes guidelines for approving all public and nonpublic schools in Iowa offering instruction for the prekindergarten level through grade twelve. Physical education is listed as a subject which shall be taught at all grade levels:

Subsection 1. If a school offers a prekindergarten program, the program shall be designed to help children . . . to learn to use and manage their bodies. . . .

Subsection 2. If a school offers a kindergarten program, the program shall include experiences designed (for) . . . development of physical being.

Subsection 3. The following areas shall be taught in grades one through six . . . health and physical education. . . .

Subsection 4. The following shall be taught in grades seven and eight as a minimum program: . . . health and physical education.

Subsection 6. In grades nine through twelve, a unit of credit shall consist of a course of equivalent related components or partial units taught throughout the academic year. The minimum program for grades nine through twelve shall be: . . . g. All students physically able shall be required to participate in physical education activities during each semester a student is enrolled in school.

In addition to the references to physical education, special education is also addressed in section 25 of Chapter 257: "5.

Provisions for special education services and programs shall be made for children requiring special education." The Iowa Code also states that services are to be provided to children requiring special education between birth and the age of 21.

Reference to adapted physical education is found in the October
1979 Minimum Curriculum Requirements and Standards for Approved Schools
(Iowa):

670-3.5 (10) (257) Provisions for physical education.

All students physically able shall be required to participate in physical education activities and meet the requirements as set forth in 257.25 (6) "g" and 257.27 (7).

Modified physical activities for credit shall be provided as an alternative for those pupils who for health reasons are certified by a physician as unable to take courses as set forth in Chapter 257.25 (as cited in Maitre, Conover, & Kukowski, August 1980, Ch. I, p. 4).

Adapted Physical Education Personnel Qualifications and Training

Section 121a.12 of P.L. 94-142 regulations defines the qualifications needed by personnel who provide special education and related services to handicapped children as having to meet "... state educational agency approval or recognized certification, licensing, registration, or other comparable requirements which apply to the area ... " (as quoted by Broadhead & Brunt, 1982, p. 10).

However, as Masters (1983) points out: "Few states currently require certification in adapted physical education. Many states are in the process of arranging certification standards for those teachers of physical education who are responsible for providing physical education to handicapped youngsters . . ." (p. 10). According to Seaman and DePauw (1982), five states (California, Louisiana, Georgia, Kansas, and New Mexico) require written certification of teachers of

adapted physical education. The state of Iowa currently does not offer a certification or endorsement in adapted physical education (D.P.I., 1980). State and local agencies or districts have autonomy in developing their own set of desired educational requirements and qualifications for adapted physical education personnel (IRUC, 1976, April).

Regardless of certification policies, it is obvious that adapted physical educators should possess adequate educational training and preparation. The publication <u>Professional Preparation in Adapted Physical Education</u>, Therapeutic Recreation, and Corrective Therapy (IRUC, 1976, April) lists several factors that states and educational institutions should consider in developing curricular requirements for adapted physical education personnel: (a) include courses which give foundation, background, and experience in physical education; (b) incorporate courses in the physical sciences (chemistry, physiology, kinesiology, etc.), that provide the background necessary to analyze movement and diagnose physical/motor problems; (c) include courses in the behavioral sciences to provide an understanding of children, and in particular, exceptional children; and (d) provide opportunities to work with different types of exceptional children.

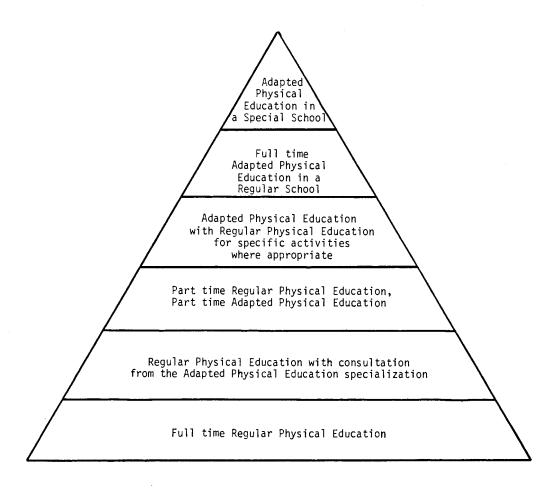
No single approach to training specialists in physical education for the handicapped seems to be used and the variety of personnel titles and content of programs are evidence of this diversity. In spite of these differences, the foremost goal of adapted physical education training programs is the adequate preparation of competent individuals for teaching exceptional children (IRUC, 1976, April; Seaman & DePauw, 1982).

Adapted Physical Education Delivery Systems

The implications of federal and state provisions are clear: All schools must provide comparable programs in physical education for the handicapped students. Adapted physical education programs are considered as appropriate, non-discriminatory, and meeting the requirements of providing opportunities in a least restrictive environment (Aufsesser, 1981; Kalakian & Eichstaedt, 1982).

Within national and state guidelines, local education agencies have some independence in terms of providing educational services. Included in the autonomy of service provision is the way in which adapted physical services are delivered. In some instances this delivery method may mean placement of the handicapped student in regular physical education, or the method may mean specially designed services. Aufsesser (1981) presented a "Modified Cascade System of Continuum Services," which illustrates possible placements for a student in adapted physical education (see Figure 1).

In Figure 1, the triangle represents a continuum going from most restrictive environment at the top to least restrictive environment at the bottom. Reading down the triangle indicates an increased chance for the student to be mainstreamed into the regular class. Going up the triangle means dealing with more severely handicapped students, who would benefit from special placement. Studies completed in Kansas (DeNoon, 1979) and Illinois (Tucker, 1980) indicated that schools were utilizing these various placement alternatives in providing adapted physical education services. It was noted that mainstreaming of the handicapped students into the regular physical education classes was



Possible placement alternatives of handicapped children in physical education. (Based on diagram by Reynolds entitled "Modified Cascade of Continuum Services." Cited in "Adapted Physical Education: A Look Back, a Look Ahead" by P. M. Aufsesser, 1981, Journal of Health, Physical Education, Recreation, and Dance, 52(6), p. 30).

the most prevalent practice, followed by separate or adapted classes, and a combination program.

Whatever the arrangement may be for service delivery, the emphasis is placed on providing quality physical education for each student. If a school cannot provide a particular placement alternative, the school is responsible for initiating provision of the service or referring the child to another agency that does offer the service (Kalakian & Eichstaedt, 1982). In the state of Iowa, intermediate education units, known as AEAs may function as facilitators to aid local school districts in the provision of special education services, including adapted physical education (Code of Iowa, 1983; D.P.I, 1981).

Area Education Agencies

In 1974 the State Legislature of Iowa reorganized the structure of the public schools in Iowa and created 15 Area Education Agencies.

Until 1974, educational cooperatives existed in the form of joint county boards. A primary function of these boards was to aid schools in special education programming. This form of organization however, did not spread to all corners of the state of Iowa. In 1973 the State Board of Public Instruction recommended that new educational units be established. The 1974 State Legislature responded by establishing the Area Education Agencies:

Joint boards subject to approval of the State Board of Public Instruction are hereby authorized to provide for the various local school districts of the merged joint county system courses and services for the physically, mentally, and educationally handicapped; provide educational media services, special and remedial courses and services, and consultant services; establish or contract for data processing services, cooperative purchasing, educational television, and vocational rehabilitation training centers and workshops; and lease, acquire, maintain, and operate such facilities and buildings as deemed necessary to provide authorized courses and services and to administer such programs (cited in Gearheart & Wright, 1979, p. 139).

Physical education services are designated as a component of special education services, as set forth in P.L. 94-142. Though physical education is to be provided for all children, not all schools may be able to provide adapted physical education services. In these cases, the local education agency must ensure that arrangements are made for services to be provided through other programs (Education for All Handicapped Children Act of 1975).

A survey of selected Iowa schools by Maitre, Kukowski, and Conover in 1980 showed that of 378 schools responding, only 199 indicated having some type of personnel available to assist in physical education for the handicapped. In the context of the discussion, the researchers suggested that those schools not having adapted physical education should investigate the possibility of receiving assistance from AEA consultants. It was suggested that the assistance of such personnel could greatly enhance physical education for the handicapped.

Professional Concerns and Developments in Adapted Physical Education

A 1984 position paper presented by the National Consortium on Physical Education and Recreation for the Handicapped (NCPERH) expressed concern that states and local education agencies are not properly addressing physical education for the handicapped despite the inclusion of physical education in P.L. 94-142. A 1983 survey by the U.S. Department of Education reflects this concern: Since the 1976-77 school year, a nationwide survey has been done annually to assess the number of special education teachers and other school staff employed to serve handicapped children 0-21 years old. The latest survey revealed that the number of physical education coordinators employed had

decreased 12.2% in 1981-82 from the 1976-77 survey. The 1981-82 figure of 4,404 physical education coordinators was substantially less than the 1978-79 figure of 18.745, a decrease of 77%.

The primary concern of the NCPERH was that physical education was not required to be addressed in state and local education agency plans. The Consortium recommended that the federally supported Division of Assistance to States require that physical education be addressed in all state and local district plans for education of the handicapped: "Such a procedure is necessary to ensure compliance of physical education requirements with the statute (94-142) itself as well as satisfy Congressional intent for placing emphasis on physical and motor development of children with handicapping conditions in the Law" (Churton, 1984, p. 12). Such an emphasis on physical education would be accomplished by requiring inclusion of a statement about physical education in the IEP and reinforcing the notion of physical education as a required service distinct from related therapies.

Similar concern for physical education for the handicapped was expressed by the Committee for Physical Education for Special Needs Students in Iowa. Goals of the group were stated in a May 1984 memorandum to all identified adapted physical educators in the state:

The insertion of physical education as a component of special education programs and the addition of Adapted Physical Education

⁻Inclusion of physical education in the State Special Education Rules as the minimum requirement of P.L. 94-142.

⁻Representation at the State level for support of the group.

⁻To research other state programs and their delivery models to special needs students in the area of physical education (S.V. Earp, personal communication, May 24, 1984).

Teacher to the list of authorized personnel in the State Special Education Rules are the two basic recommendations of the Iowa group. Currently, such positions as occupational therapist, physical therapist, special education nurse, speech clinician, and education strategist are included in the list of recognized personnel, printed in the Rules of Special Education (D.P.I., 1981). The recommendations of the Iowa committee are expected to be discussed at the Iowa Department of Public Instruction Hearings.

Summary

This section provided a review of literature of adapted physical education programs, federal and state legislation, personnel qualifications and training, delivery systems, the AEAs, and professional concerns in adapted physical education. Federal and state provisions indicate that schools have a responsibility in seeing that handicapped students are provided the opportunity for instruction in physical education. The method of delivery of the physical education services will vary depending on the individual needs of a student, and the services may be provided by personnel with varied backgrounds and training. The emphasis of adapted physical education is in meeting the child's assessed needs in physical and motor fitness, motor skills, and activities. If a local Iowa school district cannot meet these needs with an appropriate adapted physical education program, the AEA can be approached for direct or referral services.

CHAPTER III

METHODS

The purpose of this study was to describe the current status of adapted physical education programs in the 15 Area Education Agencies in the state of Iowa. In this chapter the techniques and methods of the procedure for collection of data, development of the instrument, and analysis of data are outlined.

Procedures

The sampling units for this study consisted of the 15 AEAs in the state of Iowa (Appendices A and B). Addresses of the 15 AEAs were obtained from the 1982-1983 Directory of Area Education Agencies -(Appendix C).

Fifteen mail questionnaires (Appendix D) with accompanying cover letters (Appendix E) were mailed to the primary contact person for physical activities for the handicapped at each AEA. The Special Education Division coordinator of each of the AEAs was contacted prior to the mailing of the questionnaires to obtain the names and addresses of the primary contact persons.

The questionnaires were mailed to each of the 15 agency contact persons on March 26, 1984. The cover letter served as an introduction, explaining the purpose of the study, and provided directions for the completion and return of the questionnaire, along with written assurance of confidentiality of the responses. Eight questionnaires were returned within a one month period. Follow-up letters and telephone calls resulted in a 100% return.

Development of Instrument

A questionnaire was developed using original questions, along with others based on modifications of questions used by DeNoon (1979) and Tucker (1980). When the questionnaire was being formed, interested professionals were asked to make recommendations concerning the clarity and content of the questions. These responses were used to revise the questionnaire, and a shorter, more concise version was then mailed to the AEA contact persons.

The questionnaire began with a brief introductory paragraph which provided directions for completion of the form. The general topic areas began with questions about the AEA service methods in adapted physical education, and reasons an agency does not provide services, should this be the case. A question dealing with the categories of handicapped students served followed as the second area. A section inquiring about AEA personnel and staffing, their duties, and educational background served as the third topic area. Questions regarding the formulation and prevalence of IEPs, and types of activities provided in adapted physical education programs concluded the questionnaire sections. An opportunity for comments from the respondent either to clarify any previous responses or to provide a more complete and accurate overview of the agency's program was provided at the end of the questionnaire.

Analysis of Data

The collected data from the returned questionnaires were tabulated by hand. Responses were tallied using frequencies to indicate the number of responses to each item (choice) in a question. The number of agencies responding to each question also was indicated in the data analysis section.

This overview of AEA adapted physical education programs was used to determine: (a) the extent of AEA services in adapted physical education; (b) methods of delivery used by agencies for adapted physical education; (c) types of handicapped students served; (d) personnel available in adapted physical education and related services; (e) educational background of AEA adapted physical educators; (f) the use of IEPs concerning adapted physical education; and (g) a general idea of the various activities offered in AEA-serviced adapted physical education. Using information obtained from the questionnaires, statements regarding the current status of adapted physical education programs for students with special needs as serviced by AEA personnel are made, and some suggestions are offered for the support and maintenance of these programs.

CHAPTER IV

RESULTS AND DISCUSSION

The purpose of this study was to describe the current status of adapted physical education programs in the 15 AEAs in the state of Iowa. The results obtained from the returned questionnaires are presented in this chapter and are used to establish a profile of the AEA adapted physical education programs. All of the 15 AEAs in Iowa responded to the questionnaire, giving a 100% return. Individual results of the 15 questions on the questionnaire are followed by a discussion of the findings.

Results

Question 1: How does your AEA serve handicapped/special education students in physical education at the various grade levels?

Respondents could select one or more of seven responses (see Appendix D). The seventh response was the term "other," for those programs which did not fit the established categories. Respondents were asked to enter the number of students enrolled in the various programs. Seven AEAs responded with numerical figures. Seven additional AEAs responded to the question solely with check marks indicating those programs which serve their students. One AEA did not respond. The results for Question 1 are presented in Tables 1 and 2. Table 1 indicates how many of the 14 agencies responding provide each type of program. Indicated in Table 2 are the total number of students involved in the various programs in seven AEAs.

Table 1

Programs Used to Serve Handicapped/special Education Students in

Physical Education at Various Grade Levels

	Program	Number Preschool	of students at gr Elem., Middle, and Jr. Hi.	
Α.	Mainstreaming handicapped/spe- cial education students into regular physical education classes in the schools.	70	960	743
В.	Offering a separate or adapted physical education class for the handicapped/special education students in the schools.	357	372	76
c.	Offering a combination of part adapted and part regular physical education programs for the handicapped/special education students in the schools.	o	30	16
D.	Offering physical education as a part of the special education curriculum taught by the special education teacher in the schools.	71	14	15
E.	Offering physical education to handicapped/special education students who go to a special cooperative school (special education center).	o	55	73
F.	Offering physical education to handicapped/special education students who are in a residential setting.	6	21	18
G.	Other	0	0	0

Note. The number of AEAs responding with numerical figures for each program was seven.

 $^{^{\}rm a}{\rm A}$ respondent entered one figure across all three grade levels.

Number of Handicapped/special Education Students Enrolled in the Various Physical Education Programs

	Program	No. of AEAs Preschool	having program of Elem., Middle, and Jr. Hi.	
١.	Mainstreaming handicapped/spe- cial education students into regular physical education classes.	2	11	8
3.	Offering a separate or adapted physical education class for the handicapped/special education students in the schools.	9	9	9
: .	Offering a combination of part adapted and part regular physical education program for the handicapped/special education students in the schools.	1	7	4
) .	Offering physical education as a part of the special education curriculum taught by the special education teacher in the schools.	7	3	2
Ε.	Offering physical education to handicapped/special education students who go to a special cooperative school (special education center).	1	5	5
F.	Offering physical education to handicapped/special education students who are in a residential setting.	1	3	3
i.	Other ^a	1	1	1

Note. The total number of AEAs responding to Question 1 was 14. This includes check mark and numerical value responses.

 $^{^{}a}$ Response to Other (Item G.) was, "All of the above statements apply since physical education needs are addressed to each child." This response was checked for all grade levels.

Question 2: If your AEA does not have an adapted physical education instructor/consultant, agency-sponsored adapted p.e., or adapted p.e. in the special education center, please check the reason(s):

The results from Question 2 are presented in Table 3. Eleven agencies responded to the question, indicating that at least one of the following conditions exist in those AEAs: lack of an adapted physical education teacher/consultant, no agency-sponsored adapted physical education or no adapted physical education in the special education center. Other reasons (item E.) listed as responses to Question 2 were: (a) "agency has recreation therapist," and (b) "lack of priority for administration."

Table 3
Reasons for Lack of Adapted Physical Education Services

	Reasons	No. of AEAs responding ^a
Α.	Lack of facilities	1
В.	Lack of funds	2
С.	Lack of handicapped students needing adapted p.e. services	0
D.	Each school provides a local program for handicapped/special education students in p.e.	8
Ε.	Other	2

aincludes multiple responses

Question 3: For each of the classifications, indicate the number of students identified who are enrolled in adapted physical education in your AEA.

Presented in Table 4 are the results of Question 3, which asked for the number of students with each particular condition enrolled in adapted physical education. Eleven agencies responded to the question; six of them giving the numerical figures, and five answering with check marks those categories found in area programs.

Table 4

Categories of Handicapped Students Enrolled in Adapted Physical

Education in the AEAs

	Category of Handicap	No. of AEAs responding to category	No. of students ^a
Ā.	Blind and visually impaired	8	15
В.	Deaf and hearing impaired	5	26
c.	Orthopedically impaired	9	78
D.	Mentally retarded	10	504
Ε.	Epilepsy, cerebral palsy or other nervous system disorder	7	121
F.	Learning disabled	6	16
G.	Muscular dystrophy	6	6
н.	Multiple handicapped	7	113
I.	Other ^b	4	63

^aTotals from six AEAs responding with numbers.

^bThe four responses to this category were, "behavior disordered."

In the six AEAs responding with numbers to Question 3, it is shown the mentally retarded make up the largest population enrolled in AEA adapted physical education programs, comprising 54% of the total number of students. Students with nervous system disorders and multiple handicaps form the next two largest groups of students. Four AEAs responded to Item I and entered other responses. The total of 63 students were designated as behavior disordered.

Question 4: How many of the following does your AEA have on staff or currently contract for services . . . place a check if the therapists provide activities designed as physical education for students.

Listed in Question 4 were five personnel positions, and respondents were to indicate the number of each currently on the AEA staff. The results are shown in Table 5, with all AEAs responding to the first portion of the question.

In the second portion of Question 4 respondents were asked to indicate whether each particular staff person listed provided activities designed as physical education for students. Four AEAs responded to this portion of the question. Two of the four indicated that both the physical therapist and occupational therapist provide physical education-type activities. The physical therapist and the recreation therapist were cited by the two other respondents as providing such activities in their AEA.

Question 5: AEA physical activity consultants often serve in various capacities. Place a $\underline{1}$ in the blank which describes your prime capacity and place a check next to additional duties.

Question 5 was designed to describe the primary duty of the individual completing the questionnaire. The results are shown in Table 6.

Table 5
Adapted Physical Educators and Therapists Employed by AEAs

Position	No. of AEAs having position	Total number employed ^a
A. Adapted physical education instructor(s)	6	23 ^b
B. Corrective therapist(s)	0	0
C. Occupational therapist(s)	15	50
D. Physical therapist(s)	15	42
E. Recreation therapist(s)	1	1

^aIn the 14 AEAs that responded with number

Table 6
Primary Duty of AEA Physical Activity Consultants

	Duty	No. of responses
A.	Supervisor	3
В.	Itinerant instructor	1
С.	Referral/resource person	2
D.	Instructor in special education center	2

bIncludes 2 1/2-time positions, each counting as one position

The results from Table 6 indicate that the main function of the eight individuals responding vary among the AEAs, with the supervisory function slightly more prevalent than the other duties. Seven respondents did not answer Question 5, suggesting that they did not interpret the question as being designed to gain information about their main duty, that their AEA does not have anyone with the implied title of physical activity consultant, or, that none of the four items accurately described the individual's primary function.

Question 6: If an adapted physical education consultant is not employed by your AEA, does your AEA make use of informal consultants (from a college, outside agency, or teacher in area)?

Thirteen agencies responded to Question 6. Five AEAs reported that they make use of informal consultants, and eight stated that they did not.

Question 7: Professional preparation of adapted physical education instructors.

Information on the undergraduate and graduate degrees held by AEA adapted physical education instructors was requested in Question 7.

The results of Question 7 are listed in Table 7 by the total number of responses to each major area of study. Five agencies responded to Question 7.

Question 8: How many individual schools in your AEA receive services or consultation for adapted physical education from your AEA?

Eleven of the 13 AEAs responding to Question 8 indicated that schools in their area receive services or consultation from the AEA. A total of 193 schools in these 11 AEAs receive services. The individual

average of the responses was approximately 18 schools, and the number of schools receiving services from an AEA ranged from 2 to 62.

Table 7

Degrees Held by AEA Adapted Physical Education Instructors

Field (Area of Study)		No. of instructors with degree a Undergraduate Graduate	
A.	Physical education	7	4 ^b
В.	Adapted Physical Education	1	11
С.	Special Education	0	0
D.	Other ^C	1	0

^aIncludes duplication of persons, since an instructor may have both an undergraduate and graduate degree.

Question 9: In most of the individual schools in area, who is the primary individual responsible for teaching physical education to handicapped/special education students who are not mainstreamed into regular physical education?

All 15 AEAs responded to Question 9. The results presented in Table 8 show that the physical education teacher is the individual most often responsible for teaching physical education to those students who are not mainstreamed into regular physical education.

bIncludes two individuals with graduate degrees in physical education with specialization in adapted physical education.

CResponse to "Other" was an undergraduate degree in Business and Economics.

Question 10: Do instructors in area schools who teach physical education for handicapped/special education students meet on a regular basis (monthly, yearly, etc.)?

Of all AEAs responding to the question, five indicated that the instructors meet on a regular basis. The frequency of such meetings were as follows: yearly (2 responses); every two years; quarterly, and monthly.

Table 8

Individuals Responsible for Teaching Physical Education to

Non-mainstreamed Students

Teacher		No. of responses ^a	
Α.	Classroom teacher	2	
В.	Physical education teacher	10	
Ċ.	Special education teacher	2	
D.	Therapist (describe) ^b	1	
Ε.	Adapted physical education teacher	3	
F.	Other	0	
		·	

^aIncludes multiple responses--three AEAs checked a combination of teachers.

Question 11: (Referring to Question 10) What is the purpose of such meetings in your area.

^bresponse to this position was recreation therapist.

Four of the five respondents indicated that meetings were for workshops and/or inservice meetings. The fifth response was listed as "not sure."

Question 12: Are physical education experiences included in the Individual Education Programs (IEPs) written for each handicapped/special education student enrolled in adapted physical education in your area?

Eleven AEAs responded affirmatively to the question. IEPs are written for students enrolled in adapted physical education in these AEAs. Three AEAs noted that IEPs are not written for each of the students. One AEA did not respond to the question.

Question 13: Check the following individuals who participate in most IEP writing conferences, if IEP includes physical education experiences.

Shown in Table 9 are the results for Question 13. A total of 14 AEAs responded to the question.

Question 14: Which of the following activities are offered to the majority of students in adapted physical education in area schools sometime during the school year?

Various activities were listed in Question 14 which contribute to a well rounded physical education program. Respondents were asked to mark those activities offered in AEA adapted physical education programs. Illustrated in Table 10 are the results of Question 14, which was answered by 11 respondents.

Question 15: Please add any comments concerning adapted physical education programs in the AEA that you feel would help provide a more

accurate and complete overview. Perhaps you may wish to clarify any questions for which you previously provided an answer.

A variety of comments and clarifications were given by seven respondents. Located in Appendix F are the responses as written by the individuals, and edited to avoid identification of the respondent or the AEA.

Table 9
Participants in IEP Writing Conferences

	Participant	No. of responses ^a
Α.	Classroom teacher	9
В.	Special education teacher	13
С.	Physical education teacher	7
D.	Parent(s)	13
E.	Principal	10
F.	School nurse	4
G.	Other(s) ^b	8

^aRepresents number of AEAs citing each individual participants.

^bResponses to item G. included occupational therapists, physical therapists, school psychologists, speech therapists, adapted physical education teachers, consultant, special education consultant, and school social worker.

Table 10

Adapted Physical Education Activities Offered in AEA Programs

Activities		No. of responses	
Α.	Fitness activities	10	
В.	Perceptual motor skills	9	
С.	Special Olympic training	11	
D.	Dance/creative expression	· 2	
Ε.	Gross motor skills	11	
F.	Gymnastics/tumbling	6	
G.	Team sports	9	
н.	Recreation activities	9	
I.	Motor patterning	5	
J.	Aquatics	5	

Discussion

In this section, implications are drawn and discussed in relation to adapted physical education services provided by AEAs in Iowa.

Several findings from the results support portions of the reviewed literature.

From reviewing the data gathered from the questionnaire and presented in the results, a variety of approaches is seen to be used to provide handicapped and special education students with physical education in Iowa. As noted in the review of literature (Aufsesser, 1981), state and local education agencies have some autonomy in the

provision of special education programs, including adapted physical education.

State and local autonomy is evident when considering adapted physical education services as provided by the AEAs in Iowa. The variety in programs and services may be due to the differences among the AEAs in philosophy of administrators, numbers of schools and students served, procedures for staffing, and the needs of the constituency.

The impact of federal and state legislation requiring educational placement in an environment appropriate to the needs of the student is exhibited by the responses to the first section of the questionnaire. Placements of students in AEA physical education programs range from total mainstreaming to fully adapted physical education in a special school. Each placement level illustrated in the "Modified Cascade of Continuum Services" (Aufsesser, 1981) is used to provide physical education services to handicapped and special education students in Iowa. This use of various placement alternatives helps to ensure education of the students in a least restrictive environment. The seven AEAs responding numerically to the question on program placement showed that the largest number of students are served by being mainstreamed into the regular physical education classes. The second most prevalent program placement is being placed into a separate or adapted class. These are similar to placement methods used in schools in Kansas and Illinois (DeNoon, 1979; Tucker, 1980).

Iowa State legislation mandates the provision of special education services for persons of age 0 to 21. Most AEA adapted physical

education services reflect this wide coverage by providing some type of adapted physical education program placement alternatives at the preschool, elementary, and secondary levels. However, preschool programs are less prevalent than the others.

Data analysis of the second section of the questionnaire indicated that 9 of the 15 AEAs did not have agency-sponsored services, or, instructors in adapted physical education. The primary reason listed for these cases was that each school in those AEAs provides a local program for students needing adapted physical education. This situation differs somewhat from the findings of Maitre, Kukowski, and Conover (1980) who found that 199 of 378 or approximately 52% of Iowa schools had some type of programming available for physical education of the handicapped.

According to the Iowa Rules of Special Education, a school unable to provide special education services such as adapted physical education, can approach the AEA for assistance. Adapted physical education consultants or teachers are available from 6 of the 15 AEAs. Six AEAs indicated not having adapted physical education programs nor having instructors. Some schools contacted these AEAs and were provided services by an occupational therapist and/or a physical therapist, and in one situation, a recreation therapist. Of the six AEAs which provided adapted physical education services without a staff consultant, only one AEA made use of an external consultant.

The data in the personnel-related section of the questionnaire reflects the concerns addressed during 1984 by the NCPERH and the Committee for Physical Education for Special Needs Students in Iowa.

The concerns of the NCPERH with the low number of adapted physical education coordinators is supported by the results. When compared to the occupational therapists (43%) and physical therapists (36%), adapted physical educators account for approximately 20% of the physical activity/therapy-related staff in Iowa AEAs. This situation follows the national trend, with respect to the relatively low percentages of adapted physical educators being employed to serve handicapped students (Staff, 1984).

The Iowa committee's concern for the lack of recognition within the state for adapted physical education personnel was supported by the results, which indicated a low percentage of adapted physical educators employed in the AEAs. A goal of the Iowa committee is to have adapted physical education personnel recognized in the Rules of Special Education of the State of Iowa. Such a move would seem beneficial considering the great variety of contact persons to whom the researcher was directed to send the questionnaire. Various job titles and responsibilities were listed by the respondents when asked to sign name and title on the last page of the questionnaire.

At the current time the Department of Public Instruction in Iowa does not have a teaching certification area in adapted physical education. Hence, it is not surprising that only one instructor indicated an undergraduate degree in adapted/special physical education. Inclusion of adapted physical educators into the Iowa Special Education Rules might promote more uniform qualifications and training of adapted physical teachers at the undergraduate and graduate levels. The questionnaire results showed some variety in the degrees

possessed by the adapted physical education personnel in the AEAs, although all had training in physical education.

Another major portion of the questionnaire dealt with the classifications of students found in AEA adapted physical education programs. The number of identified handicapped students served in seven AEA adapted physical education programs totaled 941, and was obtained from the AEAs which provided numerical figures. The number is not an accurate statewide count because the majority of the AEA respondents were unable to provide numerical data. However, those AEAs that did respond represented a cross section of the AEAs in terms of size.

Had all AEAs responded, the total would not likely reach the figure of 20,000 Iowa students identified by Maitre, Conover, and Kukowski (1979), as possibly being in need of some sort of an adapted physical education program. This discrepancy may be explained when the national incidence levels are examined. The Iowa total does not include representative proportions of students with such handicapping conditions as speech impairments, hearing impairments, and other less severe disabilities. These students are likely to be in the regular schools and enrolled in regular physical education. Since there are no state guidelines indicated in the Rules of Special Education for the identification of handicapped children, AEAs have varying identification standards. Even then, probably not all identified students with handicapping conditions are in need of special education services.

It can be seen from the questionnaire results that the mentally retarded comprise the largest group of handicapped students served in adapted physical education in the AEAs. Students with epilepsy, cerebral palsy, and other nervous system disorders are the next largest group served, followed by the multiple handicapped. When considering national incidence levels of each handicapping condition served (Sherrill, 1981), the mentally retarded comprise 23.2% of the handicapped population receiving special education services. The learning disabled represent 29.3% of the handicapped population served. The questionnaire results show that in Iowa 15 learning disabled students receive adapted physical education services in six AEAs. Again, this may suggest that the learning disabled receive the necessary special education services within a mainstreamed educational program, including regular physical education.

The fourth topic area on the questionnaire was the use of IEPs for students in adapted physical education. P.L. 94-142 mandates that physical education be addressed in student IEPs, to ensure that the physical education needs of the special education students are not neglected. Eleven of the 14 AEAs responding to the question regarding the writing of IEPs uphold the legal requirement that physical education be addressed. However, only seven of the AEAs indicated that the physical education teacher and/or the adapted physical education person is involved in the writing of the IEPs. These situations are common national concerns, as expressed by the NCPERH; physical education is not being properly addressed in state and local education agencies (NCPERH, 1984).

The types of activities provided for handicapped/special education students was the topic of the last section of the questionnaire.

Adapted physical education programs in the AEAs offer a variety of activities, as reflected by the questionnaire results. Most of the 11 AEAs responding to the question on activities indicated a wide spectrum of offerings designed to meet the fitness needs of the students, develop motor skills, and encourage participation in games and sports. These activities, along with dance and aquatics, are cited in the definition of physical in P.L. 94-142. Dance and aquatics were not nearly as prevalent in the programs as were fitness activities, perceptual and gross motor skills, and team sports.

Lower emphasis of aquatic programs may be due to lack of instructor certification and limited facilities. However, the low prevalence of dance activities is difficult to defend. All AEA physical education personnel have physical education degrees and undoubtedly have been exposed to dance and rhythms during their professional preparation. In addition, curriculum materials and facilities are available in all schools. Experts in the field of physical education and recreation for the handicapped (Crowe, 1981; Sherrill, 1981) have stated that dance and aquatics are two activities which are highly beneficial in the learning process for persons with all types of disabilities.

Special Olympic training was offered in each of the responding AEAs. This is in accordance with the high proportions of mentally retarded students served by AEA adapted physical education programs. The high incidence of Special Olympic programming is not surprising

since this programming is particularly prevalent in the special schools and in those with high numbers of mentally retarded students.

Statewide support and curriculum materials are available in those events included in the Special Olympics. Such information is no doubt useful in the promotion of and education in the Olympic ideas.

However, the possibility of misuse exists, especially if Special Olympics training results in the exclusion of other appropriate activities.

Gymnastics/tumbling and motor patterning were indicated by about 50% of the responding AEAs as being offered in their adapted physical education programs. Gymnastics/tumbling promotes body control and balance, which are especially important in physical education for handicapped/special education students (Sherrill, 1981). Motor patterning is a technique used with the severely and profoundly mentally retarded population, and its use reflects the incidence of those students being served.

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

The purpose of this study was to describe the current status of adapted physical education in the 15 AEAs in the State of Iowa. The need for up-to-date information describing adapted physical education programs in Iowa AEAs was indicated in Chapter I. The scope of the study, limitations, assumptions, and definitions of important terms were also discussed in Chapter I. A review of literature discussing adapted physical education, federal and state legislation, personnel qualifications, methods of delivery, and professional concerns in adapted physical education was presented in Chapter II. A questionnaire was used to obtain data presented in this paper and the procedures used were enumerated in Chapter III. Presented in Chapter IV was a detailed analysis and discussion of the results.

Information about the availability of adapted physical education from the AEAs, organization and scope of the programs, methods of delivery, types of handicapped students served, staffing and personnel, and the use of IEPs was requested, tallied and evaluated by the investigator. The present chapter is concerned with the final summary of the findings, conclusions drawn from the findings, and recommendations for further study based on the results of this study.

The data obtained from the returns from the AEAs were presented and discussed in detail in Chapter IV. Based on the analysis of the quantitative data and responses given by the AEAs, information was

synthesized and presented as the following findings:

- 1. A total of 15 or 100% of the questionnaires were returned from the AEAs.
- 2. Mainstreaming the identified handicapped/special education students into the regular classroom was the method used to provide physical education to the largest number of students.
- 3. At least one of the following conditions exist in 11 of the 15 AEAs: lack of an adapted physical education teacher/consultant, no agency-sponsored adapted physical education, or no adapted physical education in the special education center.
- 4. The mentally retarded; students with epilepsy, cerebral palsy, or other nervous system disorders; and the multiple handicapped were the categories of handicapped students most frequently receiving AEA adapted physical education services.
- 5. Six AEAs have adapted physical education instructors on staff, but nine of the AEAs employ no adapted physical education instructors.
- 6. All AEA adapted physical education instructors have a degree in either physical education or adapted physical education at the undergraduate and/or graduate level.
- 7. Five AEAs (33%) make use of informal consultants from a college, outside agency, or a teacher in the area. Eight AEAs (53%) indicated that informal external consultants were not used.
- 8. The regular physical education teacher is the individual most often responsible for teaching physical education to handicapped/special education students who are not mainstreamed. This is the case in at least 75% of the AEAs.

- 9. 193 schools (in 11 AEAs) receive services or consultation for adapted physical education from the AEA.
- 10. Eleven of the 15 AEAs include physical education in the IEPs written for students enrolled in adapted physical education.
- 11. In those AEAs which write IEPs to include physical education experiences, only seven indicated that either a physical education or adapted physical education teacher participated in the IEP writing conference.
- 12. A wide variety of activities was offered in the AEA adapted physical education programs, with fitness activities, perceptual motor skills, Special Olympic training, gross motor skills, team sports, and recreation activities being offered in over 80% of the programs.

Conclusions

Based on the analysis of the data, the following conclusions regarding the status of adapted physical education in Iowa's AEAs are presented by this investigator:

- 1. A variety of programs and delivery methods are used to provide physical education for handicapped/special education students in Iowa. A great deal of autonomy exists in the state AEAs in the provision of adapted physical education services. Adapted physical education programs as provided by AEA personnel exist in six AEAs. Other AEAs use therapy personnel or regular teachers to provide services, if they are offered.
- 2. Mainstreaming is the method of placement involving the largest number of students. The second largest group of handicapped/special education students are served through a separate or adapted program.

- 3. The mentally retarded represent the largest number of students with handicapping conditions being served in AEA adapted physical education programs. Students with various handicapping conditions are found in AEA programs.
- 4. Examination of AEA staff in the physical activity/therapy area shows that individuals with the title of adapted physical education instructor are employed in six AEAs. Occupational therapists and physical therapists are employed at each AEA in the state. One AEA employs a recreation therapist.
- 5. The writing of IEPs for handicapped/special education students enrolled in adapted physical education is a practice at 11 of 15 AEAs. This essentially inconsistent attention to the physical education needs of handicapped/special education students is typical of the national situation.

Recommendations

As a result of this study, several related topics for inquiry became evident.

- 1. A similar study should be made using on-site interviews with AEA personnel, to report on AEA services for the handicapped/special education students in physical education. Such a procedure permits contact with various personnel who have access to the quantitative data not readily available to the physical activity contact person.
- 2. A statewide survey should be conducted to analyze how school administrators and teachers perceive AEA services in adapted physical education.

- 3. A study should be made of criteria used for identifying handicapped/special education students in the AEAs. Special attention should be given to the methods and provisions for the evaluation of motor functioning of students and the criteria of placement into special education and related services as reported on the IEPs.
- 4. A study should be made of the regular physical education classes to see if the needs of the mainstreamed children are being met, since large numbers of handicapped/special education students are served through mainstreaming.

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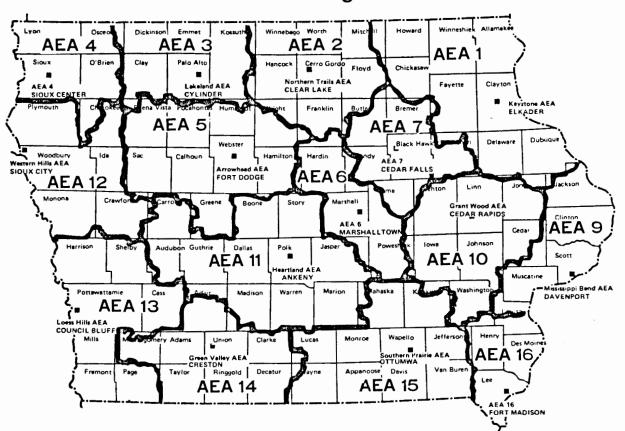
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APPENDICES

Area Education Agencies



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AREA EDUCATION AGENCIES

APPENDIX A

APPENDIX B
AREA EDUCATION AGENCY INFORMATION

	Area ducation Agency	Number School Districts	Total Enrollment Served
AEA 1	Elkader	27	54,204
AEA 2	Clear Lake	28	28,083
AEA 3	Cylinder	27	17,792
AEA 4	Sioux Center	21	15,849
AEA 5	Fort Dodge	46	34,212
AEA 6	Marshalltown	22	21,570
AEA 7	Cedar Falls	26	47,383
AEA 9	Davenport	24	66,837
AEA 10	.Cedar Rapids	39	71,702
AEA 11	Ankeny	63	121,176
AEA 12	Sioux City	30	38,955
AEA 13	Council Bluffs	33	39,281
AEA 14	Creston	22	14,275
AEA 15	Ottumwa	26	29,713
AEA 16	Fort Madison	13	24,169

APPENDIX C

AREA EDUCATION AGENCY ADDRESSES

Area Education Agency 1 Administrative Center Box 19, R.R. 2 Elkader, Iowa 52043

Area Education Agency 2 Administrative Center P.O. Box M Clear Lake, Iowa 50438

Area Education Agency 3 Administrative Center Cylinder, Iowa 50528

Area Education Agency 4 Administrative Center 102 South Main Avenue Sioux Center, Iowa 51250

Area Education Agency 5 Administrative Center P.O. Box 1399 1235 5th Avenue South Fort Dodge, Iowa 50501

Area Education Agency 6 Administrative Center 210 South 12th Avenue Marshalltown, Iowa 50158

Area Education Agency 7 Administrative Center 3712 Cedar Heights Drive Cedar Falls, Iowa 50613

Area Education Agency 9 Administrative Center 2604 West Locust Davenport, Iowa 52803 Area Education Agency 10 Administrative Center 4401 Sixth Street Road, S.W. Cedar Rapids, Iowa 52406

Area Education Agency 11 Administrative Center 1932 Southwest Third Ankeny, Iowa 50021

Area Education Agency 12 Administrative Center 1520 Morningside Avenue Sioux City, Iowa 51106

Area Education Agency 13 Administrative Center Box 1109 Council Bluffs, Iowa 51502

Area Education Agency 14 Administrative Center Green Valley Road Creston, Iowa 50801

Area Education Agency 15 Administrative Center Building 40 R.R. 3, Box 55 Industrial Airport Ottumwa, Iowa 52501

Area Education Agency 16 Administrative Center 305 Avenue F Fort Madison, Iowa 52627

Questionnaire

DIRECTIONS: Please answer the following questions by filling in the blank spaces or by checking the space(s) that most accurately applies to your situation. Although situations vary, the results of this study need to be as accurate as possible. In those instances in the questionnaire where no response category accurately reflects your situation, mark the best answer and clarify on the last page, under item 15. If a question is entirely unapplicable, please indicate this.

			Level	
	low does your AEA serve handicapped/ special education students in physical education at the various grade levels?		dle.	-12
1	In boxes at right, indicate the number of handicapped/special education students involved in each program. (If unsure about numbers, check with Special Education Division of your AEA). Put a zero (0) if no students in program	Preschool	K-8 (or 9) Elem., Mid and Jr. Hi	9-12 or 10-1 High School
	III program			
	Program			
A.	By mainstreaming handicapped/special			
	education students into regular physical education classes in the		1	
	individual schools.			
B.	By offering a separate or adapted		 	
	physical education class for the			
	handicapped/special education		1	
	students in the schools.			
С.	By offering a combination of part			
	adapted and part regular physical			
	education program for the handi- capped/special education students			
	in the schools.			
$\overline{\mathrm{D}}$.	By offering physical education as a		 	
	part of the special education cur-		1	
	riculum taught by the special educa-			
	tion teacher in the individual			
-	schools.		1	
E.	By offering physical education to handicapped/special education stu-			
	dents who go to a special coopera-			
	tive school (special education			
	center).		1 1	
F.	By offering physical education to		1	
	handicapped/special education stu-			
	dents who are in a residential			
	setting.		1	
G.	Other (please describe)			

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2.	If your AEA does not have an adapted physical education instructor/consultant, agency-sponsored adapted p.e., or adapted p.e. in the special education center, please check the reason(s):
	A. Lack of facilities B. Lack of funds C. Lack of handicapped students needing adapted p.e. services D. Each school provides a local program for handicapped/ special education students in p.e. E. Other (describe)
3.	For each of the classifications, indicate the number of students identified who are enrolled in adapted physical education in your AEA. (If necessary, check with Special Education Division).
	A. Blind and visually impaired B. Deaf and hearing impaired C. Orthopedically impaired D. Mentally retarded E. Epilepsy, cerebral palsy or other nervous system disorder F. Learning disabled G. Muscular dystrophy H. Multiple handicapped I. Other (describe)
4.	How many of the following does your AEA have on staff or currently contract for services? Indicate number in blank on left. In blank on right, place a check if the therapists provide activities designed as physical education for students.
	A. Adapted physical education instructor(s) B. Corrective therapist(s) C. Occupational therapist(s) D. Physical therapist(s) E. Recreation therapist(s)
5.	AEA physical activity consultant(s) often serve in various capacities. Place a $\underline{1}$ in the blank which describes your prime capacity, and place a check next to additional duties.
	A. Supervisor B. Itinerant instructor C. Referral/resource person D. Instructor in special education center
6.	If an adapted physical education consultant is not employed by your AEA, does your AEA make use of informal consultants (from a college, outside agency, or teacher in area)?
	A. Yes B. No

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7.	Professional preparation of adapted physical education instructors: (if your AEA has more than one, respond accordingly, using numbered checks $1/,2/$).
	Undergraduate degree Field Graduate degree (or hours) (Bachelor's) (Area of Study) (Master's, Specialist's, PhD)
	Major Minor Major Minor
	A. Physical Education
	B. Adapted Physical Ed
	C. Special Education
	D. Other ()
8.	How many individual schools in your AEA receive services or consultation for adapted physical education from your AEA?
	schools receive services
9.	In most of the individual schools in area, who is the <u>primary</u> individual responsible for teaching physical education to handicapped/special education students who are not mainstreamed into regular physical education?
	A. Classroom teacher B. Physical education teacher C. Special education teacher D. Therapist (describe) E. Adapted physical education instructor F. Other (describe)
10.	Do instructors in area schools who teach physical education for handicapped/special education students meet on a regular basis (monthly, yearly, etc.)?
	AYes BNo C. If yes, how often?
11.	(Referring to above question) What is the purpose of such meetings in your area?
	A. Workshop/inservice meeting B. Curricular discussion C. Roundtable/forum D. Other (describe)
12.	Are physical education experiences included in the Individual Education Programs (IEPs) written for each handicapped/special education student enrolled in adapted physical education in your area?
	A. Yes B. No

page 4

13.	Check the following individuals who par most IEP writing conferences, if IEP in education experiences:	ticipate in cludes physical
	A. Classroom teacher B. Special education teacher C. Physical education teacher D. Parent(s) E. Principal F. School nurse G. Other(s) (if regular participant	s, please specify)
14.	Which of the following activities are o majority of students in adapted physica area schools sometime during the school	l education in
	A. Fitness activities F. B. Perceptual motor skills G. C. Special Olympic training H. D. Dance/creative expression I. E. Gross motor skills J.	Gymnastics/tumbling Team sports Recreation activities Motor patterning Aquatics
15.	Please add any comments concerning adap education programs in the AEA that you provide a more accurate and complete ov you may wish to clarify any questions f previously provided an answer.	feel would help erview. Perhaps
Nam (Wi	e and title of respondent: 11 be kept confidential, and not include	d in thesis report)
Ple	ase check here if you wish to receive a ults from the study	copy of the final
	asc return this questionnaire by April 2 losed self addressed envelope or mail to	

APPENDIX E

COVER LETTER



University of Northern Iowa

School of Health, Physical Education and Recreation

Cedar Falls, Iowa 50614 Telephone (319) 273-2654

Divisions of Health Education Physical Education Recreation General Education Graduate Studies Campus Recreation

March 26, 1984

My graduate work at the University of Northern Iowa is in adapted physical education. Because my special interest is teaching the handicapped, my thesis deals with adapted physical education in Iowa as serviced by the Area Education Agencies (AEA's).

I am writing to enlist your assistance in collecting data on programs for the handicapped. The Special Education Division of your agency was contacted and I was informed that you are the agency's primary contact person for physical activities for the handicapped.

Enclosed is a questionnaire that is being sent to each of the 15 area agencies. Would you please read and answer the form which I have sent you? Completed questionnaires will be used to form a current, overall description of adapted physical education in Iowa as serviced by the AEA's, and not to compare agencies or programs. The data will specifically refer to services, organization/delivery methods, and personnel.

The questionnaire respondents' names will be identified for mailing purposes only. AEA names or numbers will not be used in the context of the thesis, but names and addresses will be listed in the appendix.

Please help make this a very comprehensive study by completing and returning the questionnaire in the enclosed self-addressed envelope by April 27, 1984.

Thank you for your cooperation. Should you have any questions, feel free to call me at , or leave a message at .

Sincerely,

Dean Recker Graduate Student, U.N.I.

APPENDIX F

RESPONSES TO QUESTION 15

- 1. "We do not have an adapted physical education program."
- The numbers listed would be our best estimate."
- 3. "There is a good deal more need for itinerant adaptive p.e. instructors so as to better serve the rural Iowa population."
- 4. "More needs to be done to involve children in physical education programs. [AEA name omitted] employs about half of the adapted p.e. teachers in the state of Iowa and considers it to be an important part of the total program for children."
- 5. "My services are provided only to the MDT program. AEA [number omitted] does not provide services in adapted p.e. for students in the school system. The MDT program is still handled by AEA [number omitted]."
- 6. "There needs to be leadership at the state level, especially D.P.I. regarding how/when p.e. services should/can be provided. Some directives, handouts, etc. to p.e. teacher, administrator would heighten awareness. Parent groups too should be made more aware of p.e. deficits in working with special populations.
- 7. "In AEA [number omitted] there is only one school system with an adapted p.e. instructor. Most of the kids seen by AEA OT [occupational therapist] and PT [physical therapist] are also on the adapted p.e. list. Close communication between PE and OT/PT is done in that case. Other schools either have the special ed. kids in a separate class, are mainstreamed, or their motor program is done by an aide (hired by the school-not the AEA) and done under OT/PT direction."