Foundations of Special Education
By Dr. Kathleen VanTol

Chapter 3: Creating an Inclusive Mindset

"No man is an island, entire of itself;
every man is a piece of the continent, a part of the main."
— John Donne (1624)

Image: Monstera Production. (2021, March 28).*Creative string artwork of world map*.Pexels.com (CC free to use).

Introduction

Creating truly inclusive schools involves more than providing specialized instruction or ensuring compliance with legal requirements. Inclusion is rooted in the belief that every individual is created with inherent dignity and deserves opportunities to participate fully in the life of the school and community. For students with disabilities, meaningful inclusion

requires removing barriers that limit participation, fostering acceptance and belonging, and building partnerships that support both students and their families.

Families play a central role in the educational experiences of children with disabilities. When a child has a disability, the effects are often felt throughout the family system, influencing relationships, responsibilities, finances, and emotional well-being. Parents and caregivers frequently navigate complex emotions as they learn about and adapt to their child's needs while also serving as advocates, decision makers, and essential members of the educational team. Understanding these experiences helps educators build stronger relationships with families and provide more effective support.

Creating inclusive communities requires both recognizing the barriers that can limit participation and understanding the experiences of the individuals and families affected by those barriers. Educators play an important role in identifying obstacles to inclusion, partnering with families, and fostering environments where all students and their caregivers feel welcomed, valued, and supported. This chapter explores common barriers to participation, the impact of disability on family systems, and strategies for building strong family-school partnerships that promote meaningful inclusion.

Barriers to Accessibility and Acceptance

The Council for Exceptional Children (CEC) is an international organization that has been advocating for better educational experiences for students with disabilities for 100 years. The CEC establishes professional and ethical standards for educators who serve students with disabilities and serves as a valuable resource for practitioners. Because inclusion has long been recognized as a best practice in special education, the CEC's ethical guidelines emphasize the importance of creating schools and communities where all students can participate, belong, and thrive. (CEC, 2015; NASET, 2024) According to the Cambridge Dictionary, *inclusion* is “the idea that everyone should be able to use the same facilities, take part in the same activities, and enjoy the same experiences, including people who have a disability or other disadvantage.” In an inclusive classroom, all students, regardless of ability, will have equal access to available opportunities and resources. Likewise, inclusive schools strive to remove barriers that may limit family participation, ensuring that

parents with disabilities can access school resources and engage fully in the life of the school community.

When we consider barriers to inclusion, physical obstacles often come to mind first. However, barriers to participation can take many forms, including environmental obstacles, communication challenges, policies and practices, and the attitudes of others. According to the U.S. Centers for Disease Control and Prevention (CDC) (2025), the seven most common types of barriers experienced by people with disabilities are attitude, communication, physical, policy, program, social, and transportation barriers. Of these seven categories, physical barriers are often the easiest to recognize, but they can also be among the most costly to address. Physical barriers are obstacles that interfere with a person's ability to move around and access their environment. A typical example of a physical barrier would be stairs that prevent a person who uses a wheelchair from moving freely throughout a building or even from entering it. Similarly, a child with mobility challenges could find it difficult to navigate an overcrowded classroom.

While communication, program, and policy barriers may be less visible than physical barriers, they can be just as limiting to participation and inclusion. Individuals with visual impairments may need large-print or Braille versions of written materials, while those with hearing impairments may require closed captioning for videos or a sign language interpreter during meetings and school events. Policy barriers occur when rules, procedures, or practices interfere with the provision of reasonable accommodations for individuals with disabilities. These barriers may prevent students or family members from accessing programs, services, activities, or opportunities that are available to other members of the school community (CDC, 2025).

Social barriers can be among the most difficult barriers to address, but they are also among the most important. These barriers can negatively affect the well-being and life outcomes of people with disabilities. For example, individuals with disabilities are less likely to complete high school or be employed than their peers without disabilities. Children with disabilities are also four times more likely than children without disabilities

to experience violence. Creating inclusive school communities can help improve these outcomes. To do so, schools must be places where kindness, empathy, open-mindedness, and respect for others are modeled every day. Inclusive school communities must also be welcoming and supportive environments where all students, families, and community members are valued and encouraged to participate, regardless of disability (CDC, 2025).

Impact on Family Systems

Most children with disabilities grow up in family homes with their siblings and receive education in their neighborhood schools.

Image: Bauso, E. (2019, April 30). *Family of four walking on the sidewalk holding hands*. Pexels.com (CC free to use)

An increasing number of families are raising a child with a disability. This is likely the result of a combination of factors. First, there are simply more children with disabilities than there were in the past. This is mainly attributed to medical advances that have increased the survival rate for babies born with conditions that can result in disability. Additionally, most children with disabilities are no longer placed in an institution as was commonly advised well into the 1970s (Minnesota Governor's Council on Developmental Disabilities, 2016). For the most part, these children are now likely to grow up in their family homes alongside their siblings. Finally, with the enactment of the Individuals with Disabilities Education Act (IDEA) and its legislative precursors, these children do not need to attend special residential schools in order to receive an education. Generally, children with

disabilities can now be educated right in their neighborhood schools (Reichman et al., 2008).

While it is undoubtedly beneficial that most children with disabilities can grow up with their families, raising a child with a disability affects the entire family system. On the positive side, the experience can bring family members closer together and strengthen family relationships. At the same time, it may also involve significant time, financial, and emotional demands. The extent of these demands often depends on the impact of the disability and the resources available to the family. For example, when a child requires extensive support, one parent may need to leave the workforce to become a full-time caregiver, resulting in a loss of income. In addition, medical care, therapies, specialized equipment, and other disability-related expenses can create further financial strain. Family time and resources may also need to be concentrated on the child with a disability, which can affect relationships with spouses, siblings, and other family members (Reichman et al., 2008). Every family is unique, and the ways in which a disability affects family life will vary depending on factors such as family size, socioeconomic status, cultural background, available supports, and the specific needs of the child. Understanding these differences can help educators develop empathy, build stronger partnerships with families, and provide more effective support.

Supporting Parents and Families

Over time, many parents adapt to the challenges and opportunities that come with raising a child with a disability.

Image: PNW Production. (2021, March 14). *Mum and kids playing blocks*. Pexels.com (CC free to use)

Parents are essential members of the educational team and play a critical role in establishing goals and developing plans for their child's education. The CEC ethical guidelines emphasize that special educators must actively involve families in educational decisions that affect their children (CEC, 2015). Throughout this chapter, the term *parent* is used broadly to include any adult who serves as a primary caregiver for a child. Building positive partnerships with families is one of the most important responsibilities of educators. In some cases, a child's disability is identified at birth, while in others the identification process occurs after the child enters school. A teacher may even be the first person to raise concerns that a child might have a disability. Regardless of when or how a disability is identified, families benefit from knowing that educators respect their perspectives and are committed to working collaboratively to support their child's learning and development.

Parents go through many emotional stages upon learning their child has a disability; however, it should be noted that they do not necessarily progress through these emotional states in an orderly sequence. It is also not unusual for parents to go through some stages more than once. Teachers should be aware that periods of transition, such as moving from

one school program to another, one school building to another, and even one teacher to another, are more likely to trigger these emotional states in parents. Strong emotional reactions are also more likely to occur at certain times in the child's life, such as when he or she misses an important developmental milestone (IRIS Center, 2020; Smith, 1993).

Parents report that often their first feelings are ones of denial and anger. They refuse to accept that their child might have a disability and express anger toward those who tell them otherwise. Depending on the cultural and religious background of the family, they may also feel anger with God for allowing the disability to happen. This is often followed by grief and depression. Parents are faced with a reality that is different from what they had dreamed of for their child. Parents, particularly mothers, may even feel guilt that perhaps they did something to cause the disability. Anxiety about how to best meet the child's needs and fears about the child's future are also common (IRIS Center, 2020; Smith, 1993).

Over time, many parents adapt to the challenges and opportunities that come with raising a child with a disability. The pace of this adjustment varies from family to family. Educators can support parents by being sensitive to their emotional experiences and recognizing that adjustment is an ongoing process. They can also help connect families with others who are raising children with disabilities and with organizations that provide information, resources, and support. In the United States, every state has Parent Training and Information Centers that can help families understand their rights, navigate special education services, and advocate effectively for their children (Center for Parent Information and Resources, 2024). In addition, many communities have local support groups, and the internet has made it possible for parents to connect with others through online communities, including groups focused on rare conditions. Eventually, many families reach a stage where they feel hopeful about their child's future and recognize the strength they have developed as a family. They can celebrate and take pride in their child's accomplishments and may even take on advocacy roles for their child and for others with disabilities (IRIS Center, 2020; Smith, 1993).

Parent Experiences

Alejandro has Downs syndrome.

Image: Castillo, G. (2021, October). Photo used with permission.

To illustrate that these emotional experiences are common among families around the world, four families from Nicaragua share their stories of learning that their child has a disability. Gladys, the mother of Alejandro, a 9-year-old boy with Down syndrome, describes learning of her son's diagnosis shortly after birth, navigating the emotions that followed, and eventually coming to appreciate the unique gift her son is to their family. In contrast, Mario's parents spent years searching for answers about their son's learning difficulties and felt relieved when he finally received a diagnosis at age eight. Aida Isabella's mother reflects on her struggles to accept her daughter's disability and the journey toward understanding and acceptance. Finally, in a video interview, Jenny and Pablo share their search for a school where Pablo would be welcomed, supported, and given opportunities to learn and grow.

Gladys' Story

> I had regular medical checkups and ultrasounds performed during my pregnancy and there was no indication of Alejandro's diagnosis. When he was born, everything seemed fine until the pediatrician examined him. The pediatrician stated outright that my son had Down syndrome based on his physical features such as a short neck, the palmar crease on his hands, and separated toes. This was too much of a

shock. I felt indignant and upset by what I had heard and did not accept it in the beginning. When my husband walked into the room, all I said was that I wanted to get out of there as the doctor was stating a “wrong” diagnosis about our son. My husband supported my opinion, and we left the hospital.

When we got home, I noticed that Alejandro hardly cried at all and would stay asleep for long periods of time. This concerned me, so we decided to seek the opinion of another specialist. Dr. Mejia was able to explain in a wise way that my son was special. He was not as abrupt as the previous doctor, but I still refused to accept his diagnosis. Because of this, I started meeting with a mental health specialist and began therapy to help me accept my son’s diagnosis. This process of working on acceptance lasted until my son was three months old. I never blasphemed against God, but the feeling of failing him was always there. Miraculously, I came to understand that my son, such a beautiful being, was given to our family as a privilege, a gift from God.

Our son has received therapy from different special education centers. At first, it bothered me to see the other children there with conditions such as excessive drooling, paraplegia, and behavioral problems. At first this experience caused me trauma and took away my hopes of seeing progress in my son, but I knew that I was his mother and the person who needed to help him make that progress. Initially, I was opposed to him attending Los Pipitos, a center where children with different disabilities are educated; however, my mother-in-law began to take Alejandro to this center. I was also invited to meet with the psychologist there. I remember that she was a very sweet woman and with wise words she helped me to understand the whole situation even more and to deal with my son's diagnosis. Alejandro began school at the age of 3 and attended Los Pipitos until the end of preschool. He currently receives special education at the Tesoros de Dios Center, where he has achieved goals that help him to relate to others as well as to learn basic life skills.

Today when I talk about Down syndrome, I have mixed feelings because it has been a long road. Every experience has added up to me becoming a better person. I have learned how to be tolerant, patient, compassionate, loving, and more intentional about spending quality time with my child. The experience has also strengthened the bonds within our family. I am grateful to God for my son. I am happy to have him alive and enjoying good relationships. He has also awakened in my marriage and family the strength to face all kinds of obstacles. This is a situation that one never thinks of living. My son is the reason that we move forward and do not give up. God gives us the strength every day to watch over his well-being.

Gloria Castillo, Personal Communication, October 2021. Story and photo used with permission.

Mario's Story

Mario was born without complications and was a happy baby, bringing much joy to his family. His mother noticed that at the age of six months he was still not crawling and did not babble. Mario walked at one year and three months without any difficulty, but when he was two years old, he still could hardly pronounce words. This motivated his parents to send him to a preschool so that he could have social contact. When he did not obtain satisfactory results by the age of three, his worried parents sent him to a different school. In the long run, this was to Mario's advantage since at that school he was able to find a lot of support from preschool through third grade. He also benefited from being in school with his sister, Antonella. However, even at the age of seven, Mario was not able to speak clearly and fluently.

When Mario turned eight years old, he began attending the Tesoros de Dios Center. There Mario was given the diagnosis of intellectual disability. His parents were provided with information about Mario's condition and Mario began to receive therapy. In this center, Mario and his family found a great refuge. Mario has been able to make progress thanks to the support of his teachers (education, speech therapy, and psychology). Mario is able to share that he has a lot of gratitude in his heart for Tesoros de Dios because in this center he has felt valued as a human

being. His parents appreciate the good communication and support they receive from the teachers and other staff members.

Magda Matus Balmaceda, Personal Communication, October 2021. Used with permission.

Aida Isabella's Story

Aida Isabella's mother really desired to have a daughter and was immensely happy when she became pregnant. She had experienced a miscarriage earlier and this time, she quit her job and followed all the doctor's recommendations to ensure the health of the baby. She had ultrasounds during the first and second trimesters and was told that the baby was developing very well. When she was seven months along in the pregnancy, there was an earthquake followed by many aftershocks. Aida's mother is unsure of the effect of the earthquake on the baby's development, but at that time she started to experience high blood pressure and the baby's heart began to beat with an abnormal rhythm.

A new ultrasound showed that the baby was not developing normally and had a problem in the formation of her spine as well as hydrocephalus. When they received this news, the father began to cry immediately, but the mother remained strong until she could get to her parents' house where she began to cry. She locked herself in her room and complained to God, "Why me?" She hit the bed and the pillows and felt like she was being punished by God for being a rebellious daughter. She did not understand what the future would hold and was looking for answers. "Feeling in my belly the movement of Aida, feeling the life I carried in me, I never rejected her. Rather I wanted to know what she really had."

Aida's parents sought professional help to understand the diagnosis of their child. It felt like "the whole universe that we had gained by receiving the news of the pregnancy had collapsed to nothing." The doctor told them that children like Aida were just a hindrance and that she was going to have to beg for all her needs. He also said that these children usually only live for one or two years. The doctor then told them that children like Aida go through several surgeries without getting better

and that it was better to let her die. However, her family always had faith that the doctors were wrong and that the child would be born well. They began to mourn the loss of their dreams and friends began to give them words of encouragement and sympathy when they found out about Aida's diagnosis.

All of this led the family to continue to seek information so that they could be prepared as much as possible for the birth of their little girl. They visited many places where there were children with this diagnosis. At one place, they met a young woman who gave them hope and encouragement that Aida Isabella would be fine as long as she had the love of her family. They had less than a month to prepare psychologically and be ready to receive with open arms their beautiful girl. A final ultrasound was performed which indicated that the baby needed urgent surgery. Aida Isabella was born by cesarean section so that surgery could be performed immediately and the wellbeing of both mother and child could be guaranteed.

Jessica María García Mendoza, Personal Communication, October 2021. Used with permission.

Jenny & Pablo's Story

In this video, a mother and son share their journey to find a school that would help Pablo grow and learn.

Video: God's Treasures (Tesoros de Dios). (2022, June). *Pablos testimony*. YouTube. https://youtu.be/1m_ldc8iV5Y?si=ZJFVDPqoNDFGt9P8

In summary, the stories shared here by these parents are not very different from the stories of families everywhere. Many parents report similar feelings of anger, guilt, grief, depression, and fear. It is important that parents and families feel supported by the school as they work through these emotions, gain a better understanding of their child's condition, and participate in planning for their child's future.

Facilitating Inclusion

Schools can strengthen partnerships by removing barriers to participation and ensuring that all students and their families are valued members of the school community.

Image: Katie Rainbow. (2021, September 28). *Paper cutouts of diverse figures on a black background*. Pexels.com (CC free to use)

Parents can find the special education system, and especially the IEP process, daunting because of its specialized vocabulary and complex procedures. Once again, teachers can serve as valuable resources in helping families navigate this system. As mentioned earlier, this is an excellent time to connect families with the Parent Training and Information Center in their state. These centers provide information about special education and the IEP process in a format that is accessible to those who are new to the field. Parents often report feeling anxious about the IEP process and unprepared to participate fully. As a result, they may hesitate to ask questions, express their opinions, or advocate for their child. This is concerning because meaningful family participation is both a key principle of the CEC ethical guidelines and an important factor in student success. Research consistently shows that when families and schools work together as partners, students experience stronger academic and developmental outcomes (Center for Parent Information and Resources, 2019).

Parents want the best for their children. Many of the advocacy organizations that promote acceptance and improved opportunities for individuals with disabilities were founded by

parents who envisioned a brighter future for their children. Parents have also challenged school practices through the courts, resulting in legal decisions that have shaped special education law and procedures. However, the relationship between families and schools does not need to be adversarial. By working together, teachers and parents can build partnerships grounded in collaboration, mutual respect, and a shared commitment to positive outcomes for the child. Schools can further strengthen these partnerships by removing barriers to participation and ensuring that all family members have opportunities to be active and valued members of the school community.

Community Inclusion: Church Participation

Inclusion isn't limited to schools and families. People with disabilities also participate in community settings, such as churches.
Image: Danilyuk, P. (2021, July 2). *People with communion cups praying in a church*. Pexels.com (CC free to use)

This essay, written by Christianna Marcy, is based on her internship experience with Joni and Friends Ministry. In this piece, she explores ways that churches can create inclusive communities for people of all abilities

Conclusion

Inclusive education is built on the belief that every person has value and deserves opportunities to learn, participate, and belong. While physical barriers may be the most visible obstacles to inclusion, communication, policy, programmatic, and social barriers

can be equally limiting. Creating truly inclusive schools requires intentional efforts to identify and remove these barriers so that students with disabilities and their families can fully participate in all aspects of school life.

Educators must also recognize that disability affects more than the individual student. Families often experience a wide range of emotions, challenges, and adjustments as they support a child with a disability. By understanding these experiences and building strong partnerships with parents and caregivers, teachers can foster trust, improve communication, and better support student learning and development. This type of partnership recognizes that parents are essential members of the educational team whose knowledge, perspectives, and advocacy contribute to student success.

Ultimately, inclusion is about more than access to a classroom. It is about creating communities where every person is welcomed, respected, supported, and valued. When schools work collaboratively with families and intentionally remove barriers to participation, they create environments in which all students can learn, grow, and contribute. In doing so, educators help build a more just, compassionate, and inclusive society for everyone.

Notice and Reflect

This week, pay attention to the ways adults communicate, collaborate, and build relationships with one another in schools, churches, workplaces, or community settings. Notice situations where people feel welcomed, listened to, and valued, as well as situations where communication or relationships seem strained.

Reflect:

- What actions helped build trust and positive relationships?
- How did people communicate respect, empathy, or understanding?
- If you were the parent of a child with a disability, what interactions would help you feel like a valued member of the team?

- What actions or communication practices might make it more difficult for families to feel included and supported?
- How can educators build strong partnerships with families, even when difficult conversations or disagreements arise?

Acronym List

- **CDC**. Centers for Disease Control and Prevention
- **CEC**. Council for Exceptional Children
- **IDEA**. Individuals with Disabilities Education Act
- **IEP**. Individualized Education Program

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About the Author

Dr. Kathleen VanTol has over 35 years of experience working in the field of education. She holds a doctorate in special education from Western Michigan University and is a professor of special education at Dordt University. She is also a Board Certified Behavior Analyst and a Board Certified Advocate in Special Education.

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