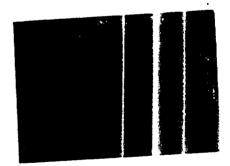
Briefing Report to Congressio al Requesters

ADA280775 SPECIAL EDUCATION

Estimates of Handicapped Indian, Preschoolers and Sufficiency of Services





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Human Resources Divis		
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March 5, 1990	1 -	
	By	
The Honorable Daniel K. Inouye	Distrib	oution /
Chairman, Select Committee on Indian Affairs		
United States Senate	A	vailability Codes
The Honorable Augustus F. Hawkins	Dist	Avail and / or Special
Chairman, Committee on Education and Labor		
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House of Representatives	H-1	
This report discusses our estimates of (1) the nun	nber of h	andicapped

This report Indian preschoolers on the 63 reservations with schools administered by the Department of the Interior's Bureau of Indian Affairs (BIA) and (2) the sufficiency of services they receive. It responds to the requirement in Public Law 100-297 that we review BIA's program for educating these preschoolers. This legislation requires us to determine the number of these preschoolers aged 3 and 4 on (1) all 297 federally recognized Indian reservations and (2) the 63 reservations with BIA schools receiving BIA-funded services. Concerning the preschoolers on these 63 reservations, the act further requires us to determine (1) the sufficiency of the services these preschoolers receive u (2) the number who can be expected to attend BIA schools when they reach school age. This report elaborates on our April 28, 1989, briefing to your offices.

We obtained the information required by Public Law 100-297 primarily through the use of a data collection instrument completed by BIA's special education coordinators. These 32 coordinators, located in BIA field offices, are responsible for special education-related matters on the 63 reservations with BIA schools.

To estimate the number of handicapped Indian preschoolers on reservations and in all areas of Alaska and Oklahoma,¹ we used patient registration data maintained by the Indian Health Service (IHS) and prevalence rates for handicapping conditions developed by the Native American Research and Training Center (University of Arizona and Northern Arizona University). We analyzed available school attendance data for Indian children on reservations with BIA schools to estimate the number of handicapped Indian preschoolers who might attend BIA schools when they reach school age.

¹Because of the large Indian and Native Alaskan population who live in nonreservation areas in Alaska and Oklahoma, we were asked by congressional staff to estimate the number of handicapped Indian preschoolers in these states.

GAO/HRD-90-61BR Special Education for Indian Children

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	To determine policies and procedures for, as well as opinions of, special education programs for handicapped Indian preschoolers, we inter- viewed various officials from BLA, the Department of Education, Head Start, as well as IHS and state education officials in the 20 states with BL schools on reservations. Our work was done from September 1988 through July 1989 in accordance with generally accepted government auditing standards (see pp. 12-17).
Background	Public Law 99-457, the 1986 amendments to the Education of the Handi capped Act (EHA), required the Department of the Interior to assure tha all handicapped Indian preschoolers aged 3 to 5, living on reservations with BIA schools, receive a "free and appropriate" education, beginning in school year 1987-88. State and local education agencies, says a Department of Education policy memorandum, must provide a free and appropriate education to handicapped Indian preschoolers on reserva- tions without BIA schools. Handicapped Indian preschoolers living on reservations with BIA schools have the option, when available, of attend- ing BIA, public, or private preschool classes.
	For handicapped preschoolers, an "appropriate" education includes both special education and related services. Determining the services needed, as well as diagnosing children thought to have handicapping conditions, is the responsibility of multidisciplinary evaluation teams. Their diagnoses, as well as the services they recommend, are docu- mented in each child's Individual Education Program (IEP). Federal regu lations require that IEPs list all services recommended or that they justify why any recommended services are excluded.
	BIA's regulations also require it to conduct annual "child-find" activities These regulations (25 C.F.R. 45.11) state that each BIA field office
	"must insure that every child within its jurisdiction between the ages of birth and twenty-two years who is suspected of being handicapped and in need of special edu cation and related services is identified and located."
	BIA special education programs operate with EHA funds provided by the Department of Education. EHA limits BIA's funding to an amount not to exceed 1.25 percent of the aggregate amount awarded to the states for providing special education services to handicapped children (see pp. 10-12).

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Significant Number of Handicapped Indian Preschoolers May Be Unserved	We estimate that nearly 3,000 handicapped Indian preschoolers aged 3 and 4 live on the 63 reservations with BLA schools. Another 5,500 to 9,800 live on the other 234 federally recognized reservations or in the states of Alaska and Oklahoma. ² However, only 838 of these 3,000 were receiving special education services in school year 1988-89.
	On the reservations with BIA schools, about 2,110 of the estimated 2,948 handicapped Indian preschoolers may need, but were not receiving, special education services in school year 1988-89. The other 838 were receiving services from one or more service providers, including BIA, Head Start, IHS, and local public school districts. BIA provided at least some funding for 437, or 52 percent, of the 838 preschoolers receiving services. About 1,237 of the 2,110 preschoolers who, we estimate, may need special education services are those who have not been individually identified and located, as required by 25 C.F.R. 45.11. Consequently, we are uncertain of the precise number of preschoolers who actually need special education services (see pp. 18-22).
Services Provided Preschoolers Are Insufficient	Of the 791 handicapped Indian preschoolers with IEPS, ³ at least 24 per- cent were receiving fewer services than their IEPs prescribe. Further- more, because IEPs may lack all the services handicapped children need, the actual percentage of children underserved may be higher than the 24 percent we calculated. In this regard, both our survey of BIA coor- dinators and recent testimony presented to the Senate Subcommittee on Disability Policy indicate that in many cases, for both BIA and public schools, IEPs only list those services educational agencies are able to pro- vide, rather than all the services a child needs (see pp. 23-28).
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²Available data permitted us to provide estimates for 249 of the 297 federally recognized reservations. Indians living on the 48 reservations for which data were unavailable represent about 2 percent of the Indian population living on reservations.

³We only analyzed the sufficiency of services provided to preschool children with IEPs. Of the 791 children with IEPs, 789 were receiving services. In addition to these 789, another 49 children were receiving services but lacked IEPs.

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Major Reasons for Insufficient Services— Personnel Shortages and Inadequate Funding	BIA officials told us that many handicapped Indian preschoolers receiver insufficient services because of shortages of qualified personnel and inadequate funding to hire them. Concerning personnel shortages, 16 of the 32 BIA coordinators reported that on the reservations they serve, at least 61 specialized staff vacancies existed. Funding limitations, which BIA officials told us were brought about because of an increase in its service population and the lack of any additional funding source for its preschool programs, resulted in BIA's providing only \$2.7 of the \$4.3 mil- lion requested by its field offices to serve handicapped preschool chil- dren in school year 1988-89 (see pp. 29-33).
Agency Responsibility for Special Education Subject to Interpretation	BIA, the Department of Education, and the states have differing inturpret tations about who must provide services to handicapped Indian children on reservations with BIA schools. These differences could make efforts to serve these children difficult and contribute to BIA's inability to serve some children for whom it is responsible.
	We believe that as a condition of accepting EHA funds, Interior assumes primary responsibility for assuring services to all handicapped preschoolers living on reservations with BIA schools. This assurance means that when other non-BIA agencies do not provide special educa- tion services that a handicapped preschooler needs, Interior must pro- vide them. In those instances in which non-BIA agencies agree to provide handicapped Indian preschoolers with special education services, Inte- rior may be able to discharge its assurance responsibility by, for exam- ple, monitoring the services being provided.
	In our opinion, the Departments of Education and Interior and certain states misunderstand what EHA requires of Interior. Interior believes BL is only responsible for children enrolled in its programs and that it may supplement other providers' services. Education and some states believ that BIA is solely responsible for all Indian children on reservations with BIA schools.
	The difference in views concerning Interior's EHA responsibilities has the potential for allowing handicapped Indian preschoolers to be unserved. When there are significant differences of opinion about who is primaril responsible for serving handicapped Indian children, especially when neither BIA nor the state accepts primary responsibility, cooperation in meeting the needs of these preschoolers may be difficult to obtain. Fur- ther, when agreements are not reached with other agencies to provide

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	services, Interior's position—that it is not primarily responsible—cre- ates the potential for children to be unserved (see pp. 33-34).
Preschoolers Who May Attend BIA Schools	Most of the enrollment data needed to reliably estimate the number of handicapped Indian preschoolers who might, upon reaching school age, attend BIA schools rather than the public or private schools was unavailable. However, the data provided for 20 of the 63 reservations with BIA schools indicate that approximately 50 percent of the total eligible kin-
	dergarten and first-grade Indian students attend BIA schools (see pp. 34-35). At the time of our review, BIA had not individually identified and located
Conclusions	At the time of our review, BA had not individually identified and located all preschool Indian children who are thought to be handicapped, as its regulations, 25 C.F.R. 45.11, require. We believe that if BIA fully com- plied with its child-find regulations, it would be better able to work with other service providers—such as Indian Head Start programs and local public school districts—to meet the special educational needs of handi- capped Indian preschoolers. As a result, these preschoolers would have a better chance of receiving the services that EHA legislation requires they be provided (see p. 35).
Recommendation to the Secretary of the Interior	We recommend that the Secretary of the Interior direct the Assistant Secretary for Indian Affairs to fully implement the requirements of 25 C.F.R. 45.11. Concerning this, the Assistant Secretary should take actions to assure that on the 63 reservations with BIA schools, each BIA field office annually identifies and locates every preschooler thought to be handicapped and in need of special education services (see p. 36).
Agency Comments	In commenting on a draft copy of this report, the Department of the Interior stated that it agreed with many of our findings (see app. VI). However, the Department stated that BIA had successfully implemented annual child-find activities for many years. We disagree with the Department's statement concerning Indian preschoolers. BIA's special education coordinators estimated there are about 1,237 Indiar preschoolers who are thought to be handicapped, but have not been individually identified and located.

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The Department also provided comments dealing with several sections of the report that it believes warrant further clarification and explanation. These comments were considered and incorporated as appropriate (see p. 59).

Copies of this report are being sent to the Secretaries of the Interior, Health and Human Services, and Education, as well as other interested parties. Please call me on (202) 275-1793 if you or your staff have any questions about this report. Other major contributors are listed in appendix VII.

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Franklin Frazier Director, Education and Employment Issues

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Abbreviations

- BIA Bureau of Indian Affairs
- EHA Education of the Handicapped Act
- GAO General Accounting Office
- IEP Individual Education Program
- IHS Indian Health Service
- OCR Office for Civil Rights

Background	
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The Education of the Handicapped Act (EHA) is the principal federal legislation for providing federal assistance to state and local educational agencies; this legislation enables these agencies to meet the special educational and related service needs of handicapped children. EHA requires each state receiving federal assistance to provide a "free and appropriate" public education to all handicapped children regardless of the nature or severity of the handicapping condition. For handicapped children, an "appropriate" education includes both special education and related services.

Special education is instruction specifically designed to meet the unique needs of a handicapped child. Related services are the developmental, corrective, and other support services required to help the handicapped child benefit from special education instruction. Examples of related services include physical and occupational therapy, counseling, and speech pathology. In this report, the term "special education services" includes both special education instruction and related services.

Determining the special education services handicapped children need is the responsibility of multidisciplinary evaluation teams comprised of education and related service specialists. These teams evaluate children, determine their handicapping condition(s), and recommend the special education services needed to improve educational performance or ability to learn or both. Federal regulations require that all recommended services for each child be included in a document called an Individual Education Program (IEP). In addition, an IEP must justify why any recommended services are excluded.

Before 1986, EHA required the states to provide special education services only to handicapped children aged 5 through 17. However, handicapped children younger than 5 or older than 17 could be served if consistent with state law or practice. In addition, by providing incentive grants, EHA encouraged the states to serve handicapped preschoolers aged 3 to 5.

In 1986, the Congress, responding to advances in the understanding of how very young children develop and studies of the long-term benefits of early intervention programs, amended EHA to more adequately address the educational needs of handicapped infants, toddlers, and preschoolers. The 1986 amendments (P. L. 99-457) authorized funding for those states that choose to provide services to handicapped infants

and toddlers (children from birth through the age of 2). The am ments also require the states to begin serving all handicapped preschoolers, children aged 3 through 5, no later than October 1 The Department of Education administers EHA and distributes f the states. The funds allocated and the number of handicapped in the United States receiving special education services in scho 1986-87 through 1988-89 are highlighted in table 1. Table 1: Total EHA Funding in School Years 1986-87 Through 1988-89 Funds allocated (in billons) 11 51:3 School year Funds allocated (in billons) 11 51:3 School year		Special Education: Estimates of Ha Indian Preschoolers and Sufficienc of Services			
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"...must insure that every child within its jurisdiction between the ages of birth and twenty-two years who is suspected of being handicapped and in need of special education and related services is identified and located."

EHA funds allocated to BIA special education programs for handicapped Indian students during the past 3 school years are shown in table 2.

Table 2: BIA's Special Education Programs in School Years 1988-87 Through 1988-89

	8	School year		
	1986-87	1987-88	1988-89	
EHA funds allocated	······································			
To states (in millions)	\$1,163.3	\$1,338.0	\$1,4317	
To BIA (in millions)	\$11.5	\$16.5	\$17.7	
Percentage	.99%	1.23%	1.239	
BIA allocation (in millions)				
School-age program	\$11.5	\$5.75	\$15.0	
Preschool program	a	.75	\$2.7	
Children served				
School-age program	5,366	6,311	6,762	
Preschool program	b	b	b	

^aData are unavailable.

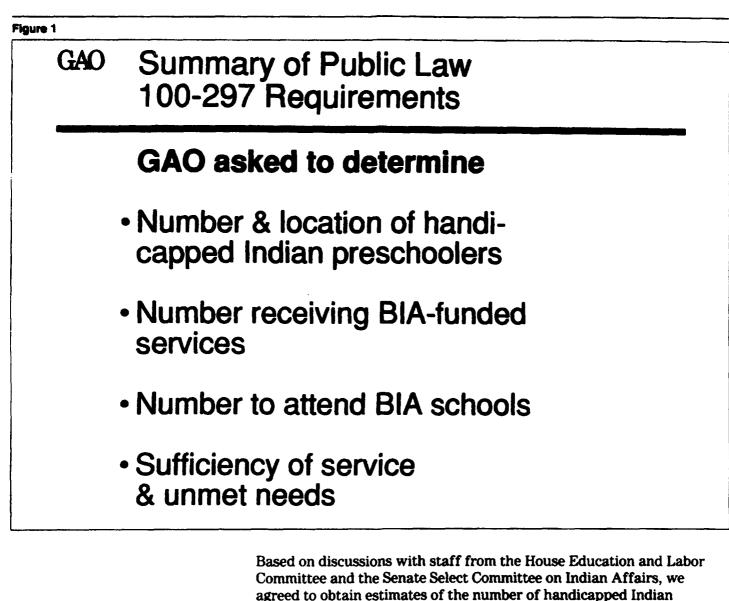
^bBIA does not know the actual number of handicapped Indian preschoolers aged 3 through 5 it provided services to in the last 3 school years. However, the Department of the Interior estimates that 100 handi-capped preschoolers aged 3 through 5 were served in school years 1986-87; 1,200 in 1987-88; and 1,600 in 1988-89.

Oversight of BIA's special education programs is provided by the Branch of Exceptional Education, Office of Indian Education Programs, in Washington D.C. Within the branch, an early childhood program specialist is assigned to develop the programs for handicapped Indian children from birth through the age of 5.

The branch develops the policies and regulations BIA schools must follow when implementing their special education programs. At the field office level, 32 special education coordinators are responsible for ensuring that BIA schools comply with applicable policies and regulations.

Objectives, Scope, and Methodology

The Augustus F. Hawkins-Robert T. Stafford Elementary and Secondary School Improvement Amendments of 1988 (P. L. 100-297) required that GAO conduct a study of BIA's preschool special education program. The study's requirements are shown in figure 1.



agreed to obtain estimates of the number of handicapped Indian preschoolers who live on each of the nation's federally recognized reservations and in all areas of Alaska and Oklahoma. Committee staff members asked us to estimate the number of handicapped Indian preschoolers in Alaska and Oklahoma because of the large Indian population living on nonreservation land in these states.

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We identified 297 federally recognized reservations in 31 states (fig. 2).¹ Sixty-three reservations in 20 states have BIA schools. At least 20 of these 63 reservations also have public schools located within the reservation boundaries. The other 234 reservations have public or private schools or both, but no BIA schools.

¹This total includes (1) 283 reservations recognized by BIA's Division of Real Estate Services as of August 8, 1988; (2) 13 areas administered as reservations by BIA's Sacramento Area Office because of BIA's interpretation of a court order (<u>Tillie Hardwick vs. United States of America</u>, C-79-1710-SW): and (3) I reservation established by the Congress on September 9, 1988.

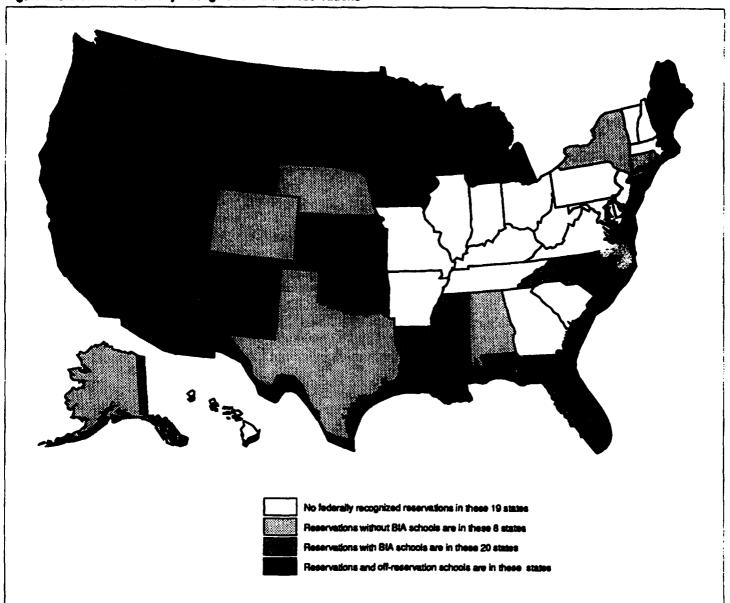


Figure 2: States With Federally Recognized Indian Reservations

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We used two separate methodologies to estimate the number of handicapped Indian preschoolers. For the 63 reservations with BIA schools, the coordinators obtained estimates for us. For the reservations without BIA schools and for all areas of Alaska and Oklahoma, we obtained estimates by multiplying estimates of the number of Indian preschoolers by

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prevalence rates of handicapping conditions among Native American children.² We used these methodologies because neither BIA, the Bureau of Census, the Department of Education, nor 19 of the 20 states with reservations and BIA schools had data documenting the number of handicapped Indian preschoolers. The details of these methodologies are dicussed in appendix I.

Using the two methodologies, we obtained estimates for 249, or 84 percent, of the 297 reservations and for the entire states of Alaska and Oklahoma. These 249 reservations contain about 98 percent of the Indian population living on reservations.³ The 249 reservations include all 63 reservations with BIA schools and 186, or 79 percent, of the 234 reservations without these schools. The estimates we obtained are reported by state in appendix II. The estimates provided by the coordinators for each of the 63 reservations with BIA schools are in appendix III.

The coordinators also identified the total number of handicapped Indian preschoolers receiving BIA funded services. The data collection instrument (see app. V) we developed for their use in estimating the number of handicapped Indian preschoolers also required the coordinators to specify which ones received BIA-funded services.

We were unable to obtain a comprehensive estimate of the number of handicapped Indian preschoolers who will attend BIA schools because data were unavailable for most reservations with these schools. We requested attendance data about all kindergarten and first-grade Indian children attending BIA, public, or private schools in school years 1986-87, 1987-88, and 1988-89 on each of the 63 reservations with BIA schools. BIA officials provided attendance data for all BIA schools on all 63 reservations. However, attendance data for public and private schools was provided for only 20 of the 63 reservations. Using the data provided, we calculated the percentage of Indian children in kindergarten and first grade attending BIA, public, and private schools.

To determine the sufficiency of services, the coordinators provided data on the services needed by, and services being provided to, handicapped

²We obtained estimates of the number of Indian children from the Indian Health Service (IHS) and the prevalence rates from a Native American Research and Traning Center study.

³The 48 reservations for which no data were available do not materially affect our estimates. Population estimates contained in a BIA publication, "Indian Service Population and Labor Force Estimates" (Jan. 1989), show that these reservations contain about 2 percent of the total Indian population who live on reservations.

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Indian preschoolers with IEPs. The coordinators collected this information from the various providers of special education services on the reservations, such as BIA-operated programs, Indian Head Start, and local public schools. Using the data provided, we classified each child into one of three categories: those receiving full service, partial service, and no service. "Full service" means that the child was receiving all the services specified in his or her IEP, at the frequency prescribed. "Partial service" means that the child was receiving some services listed in the IEP, but either some services were not provided or were provided less frequently than prescribed. "No service" means the child failed to receive any IEP-prescribed service.

We also surveyed the coordinators to determine if the services listed in IEPs were all the services handicapped children need. We asked them if IEPs contain all the services recommended by multidisciplinary evaluation teams and, if IEPs lacked some recommended services, why.

In doing our work, we visited four reservations —- Cheyenne River, South Dakota; Gila River, Arizona; Isleta, New Mexico; and portions of the Navajo, Arizona. At the Cheyenne River and Gila River reservations, we observed special education classes, reviewed IEPs, and interviewed BIA, Head Start, and public school officials. At the Isleta and Navajo reservations, we observed special education classes and interviewed school officials and BIA's coordinators. To determine policies and procedures for, as well as opinions of, special education programs, we also interviewed officials in the Washington, D.C., area headquarters of BIA, the Department of Education, Head Start, and IHS. To determine the views of state officials working in special education as to the states' responsibility to handicapped Indian preschoolers, we spoke with officials in 20 states with reservations and BIA schools.

Our field work was done from September 1988 through July 1989. We did this review in accordance with generally accepted government auditing standards.

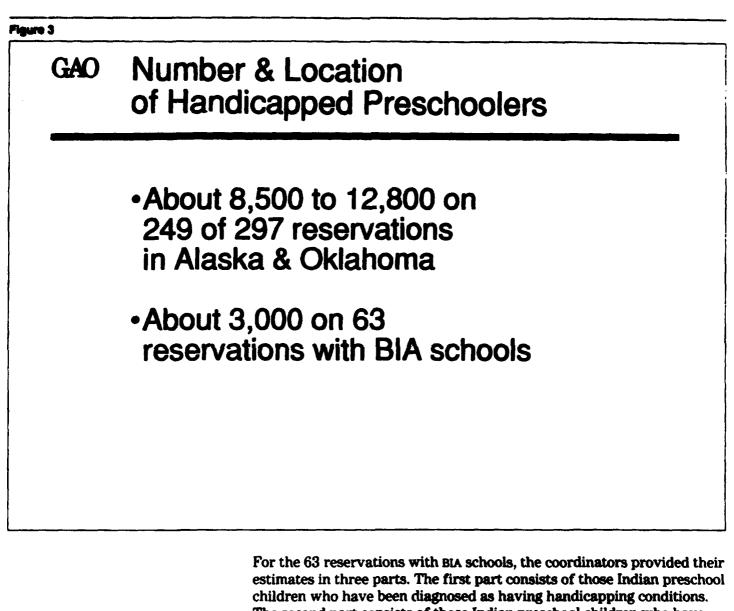
	Special Education: Estimates of Handicapped Indian Prochasiers and Sufficiency of Services
Significant Number of Handicapped Indian Preschoolers May Be Unserved	Only 838 of the estimated 2,948 handicapped Indian preschool living on reservations with BIA schools received special education services in school year 1988-89. The majority (1,237) of the other 2,110 children thought to be handicapped have yet to be specifically identified or located as required by federal regulations. Consequently, we are uncertain of the precise number of preschoolers who actually need special education services.
Number and Location of Handicapped Indian Preschoolers	For school year 1988-89, we estimate that about 8,500 to 12,800 handi- capped Indian preschoolers aged 3 and 4 live on 249 of the 297 federally recognized reservations and in Alaska and Oklahoma (fig. 3). ⁴ An esti- mated 2,948 of these preschoolers live on the 63 reservations with BIA schools. Appendices II and III contain detailed information on the number of handicapped Indian preschoolers who live in each state with federally recognized reservations and on the 63 reservations with BIA schools.

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⁴As discussed in appendix I, the lower end of this estimate, 8,500, could be understated by about 8 percent. In addition, the upper end, 12,800, could be overstated by about 21 percent.

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ror the os reservations with BIA schools, the coordinators provided their estimates in three parts. The first part consists of those Indian preschool children who have been diagnosed as having handicapping conditions. The second part consists of those Indian preschool children who have been referred for diagnostic evaluation, primarily because they failed a screening test. The third, and largest, part is the coordinators' estimates of the number of Indian preschoolers who may be handicapped but who have yet to be individually identified or located. The individual count for each part of the coordinators' estimates is shown in figure 4.

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BIA regulations define a handicapped child as one who has a diagnosed handicapping condition and, because of this condition, needs special education services. Only those children in the first part of the coordinators' estimates meet this definition. The children in the second and third parts—those who have been referred for a diagnostic evaluation and those who may be handicapped but who have yet to be individually identified—were presumed by the coordinators to be handicapped on the basis of their personal knowledge or information they obtained to make their estimates or both.

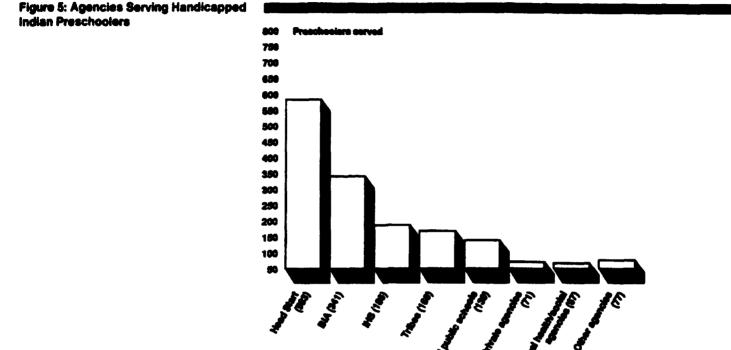
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GAO	BIA's Potential Service Population63 Reservations	
	Source of Estimate	Number
	Diagnosed as Handicapped (791 with IEPs, 194 without)	985
	Referred for Evaluation	726
	Coordinator Estimate of Others	1,237
	Total	2,948

Handicapped Indian Preschoolers Received Special Education Services in School Year 1988-89

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About 28 percent, or 838, of the estimated 2,948 handicapped Indian preschoolers on reservations with BIA schools, received special education services in school year 1988-89. Of the 838 served,⁵ 437, or 52 percent, were funded, at least partially, by BIA. In many cases, these 838 preschoolers received special education services from more than one service provider. The number of handicapped Indian preschoolers with IEPs being served by each service provider is shown in figure 5.

⁵Of the 838 being served, 789 had IEPs and 49 did not.



2. BIA is providing funding for a total of 437 handicapped Indian preschoolers; 341 are receiving services directly from BIA and 96 are receiving services provided by other agencies but funded by BIA.

1. Total exceeds number of preschoolers with IEPs because many children receive services from more

Handicapped Indian Preschoolers Who May Need Special Education Services

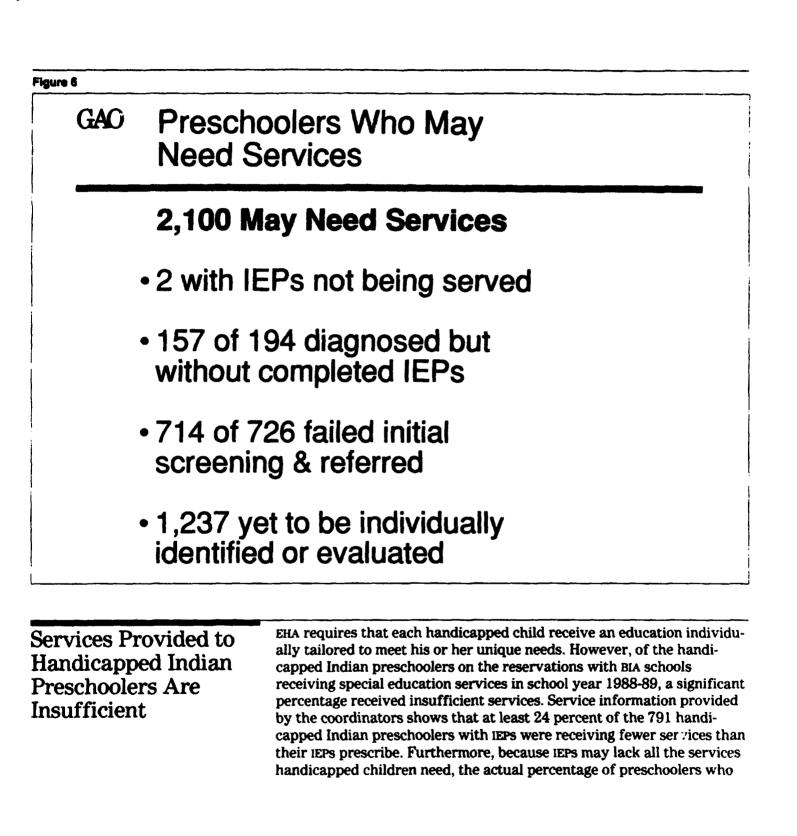
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Of the estimated 2,948 handicapped Indian preschoolers on the 63 reservations with BIA schools, about 2,110 (72 percent) may need, but were not receiving, special education services in school year 1988-89. Each of these preschoolers was in the various stages of being identified as handicapped. Some had been referred for diagnostic evaluations because they had failed screening tests. Others had been diagnosed as handicapped but were without completed IEPs and receiving no services. The majority, however, were those who may be handicapped but who have yet to be individually identified or located (fig. 6). This latter category of potentially handicapped should have been, but were not, identified, at the time of our review, through BIA's child-find activities.

Notes:

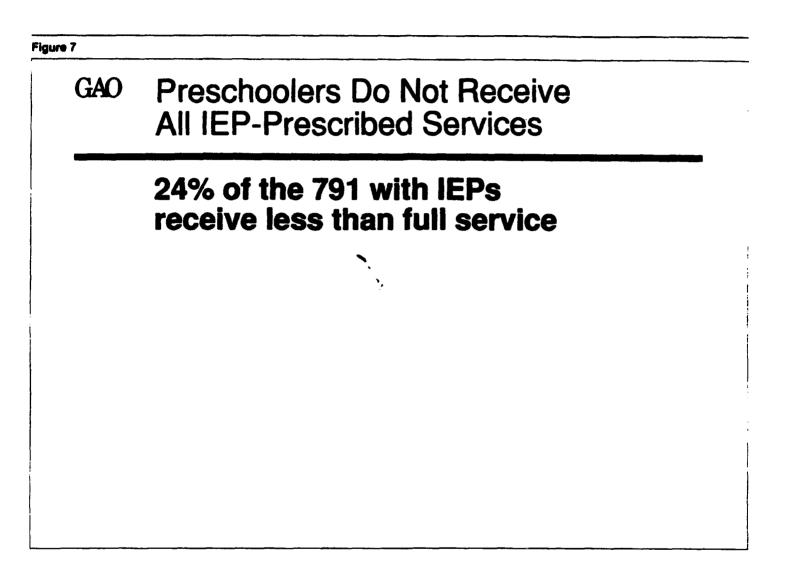
than one agency.

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	Special Education: Estimates of Handicapped Indian Preschoolers and Sufficiency of Services		
	received fewer services than prescribed may be higher than the 24 per- cent we calculated.		
Preschoolers With IEPs	To determine the sufficiency of services, we analyzed data the coordina- tors provided; these data concerned the services needed by, and the ser-		
Did Not Receive All the Services They Needed	vices being provided to, all 791 handicapped Indian preschoolers with IEPs on the 63 reservations with BIA schools. Based on this analysis, 24 percent of the 791 handicapped Indian preschoolers with IEPs were receiving fewer services than their IEPs prescribe (fig. 7).		

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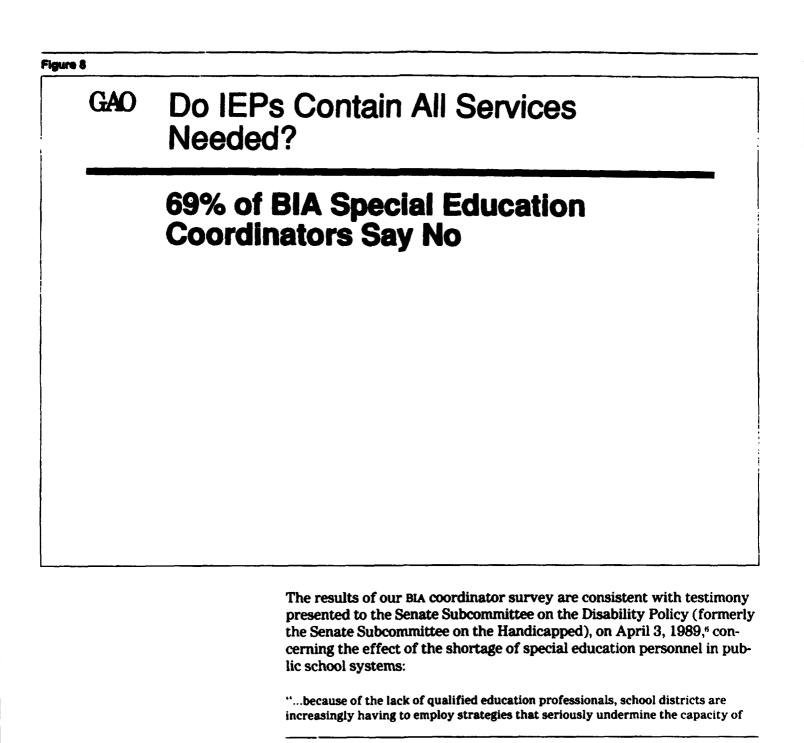
Our analysis of the sufficiency of services provided may overstate the percentage of preschoolers who received all the services they needed. In addition, our survey of the BIA coordinators concerning how IEPs are developed, as well as information presented at 1989 congressional hearings on EHA reauthorization, indicates that (1) IEPs generally lack some of the services recommended for handicapped children and (2) this is because of the shortage of special education personnel throughout the nation.

We were able to discuss how IEPs are developed with 29 of the 32 BIA special education coordinators. Twenty of the 29 coordinators stated

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that, generally, IEPs lack some of the services recommended for handicapped Indian children (see fig. 8).

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⁶Statement of Dr. William Carriker representing the American Speech-Language-Hearing Association, Council of Administrators of Special Education, Council for Exceptional Children, Council of Graduate Programs in Communication Sciences and Disorders, Higher Education Consortium for Special Education, and the National Association of State Directors of Special Education.

	Special Education: Estimates of Handicapped Indian Preschoolers and Sufficiency of Services		
	the nation to guarantee the provision of a free appropriate public education to chil- dren with handicaps. These strategies includeconstraining placement and pro- grammatic decisions to meet available personnel resources rather than child needs."		
Uncertainty About Quality of Service Provided	While an evaluation of the quality of special education services being provided was beyond the scope of our review, we found indications that special education services for handicapped Indian preschoolers are often provided by individuals with little specialized training. According to BIA's early childhood program specialist, one reason this occurs is that Head Start programs allow noncertified teachers to educate handi- capped children. In addition, this official also told us BIA lacks the staff to remedy the situation.		
	For example, the majority of the handicapped Indian preschoolers on the Cheyenne River Reservation who received special education services were enrolled in the reservation's Head Start program. These children received services from Head Start teachers, not BIA personnel. Only 8 of the 28 Head Start teachers had teaching credentials, and none of these 8 had training in special education. The other 20 teachers had only a high school or high school equivalency diploma. The teaching staff, who are paid \$4 to \$6 per hour, has an annual turnover of 35 percent. According to the program's coordinator, these teachers lack the necessary skills to provide special education services, but there are no alternatives.		
	The director of Head Start's Indian Programs Branch, Washington, D.C., told us that the teachers employed in the other Indian Head Start pro- grams have similar qualifications to those employed in the Cheyenne River program. The qualifications of Head Start's teachers may be sig- nificant because (as shown on p. 22) Head Start was providing special education services to about 74 percent of the 791 handicapped Indian preschool children with IEPs on the reservations with BIA schools in school year 1988-89.		
	BIA's early childhood program specialist told us that handicapped Indian preschool children enrolled in Indian Head Start programs are entitled to receive special education services under EHA, including instruction by certified professionals. However, this official further stated, BIA (1) is currently unable to provide qualified professionals to assist Indian Head Start programs that serve enrolled handicapped children and (2) has few alternatives because of the overall shortage of special education personnel.		

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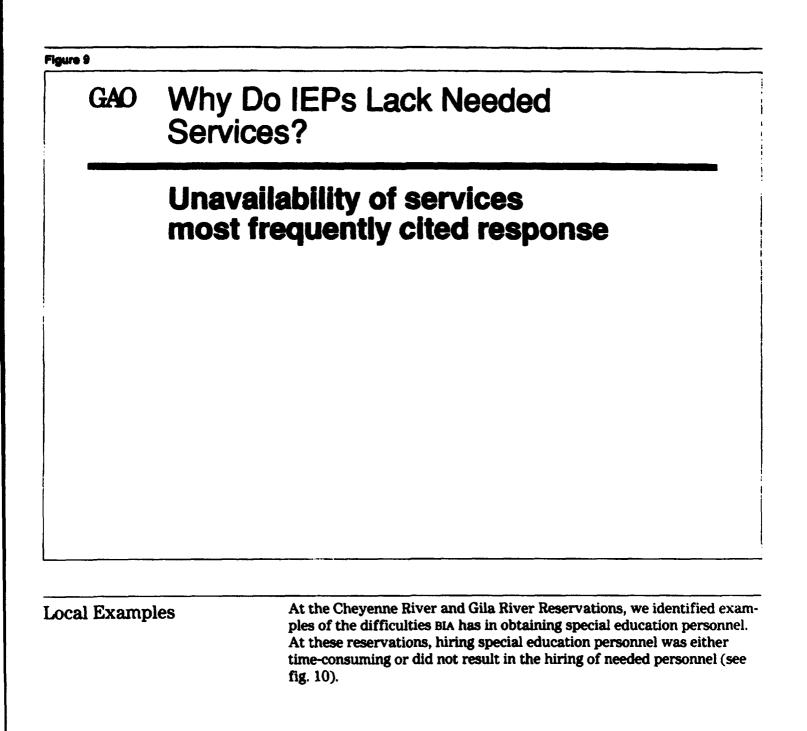
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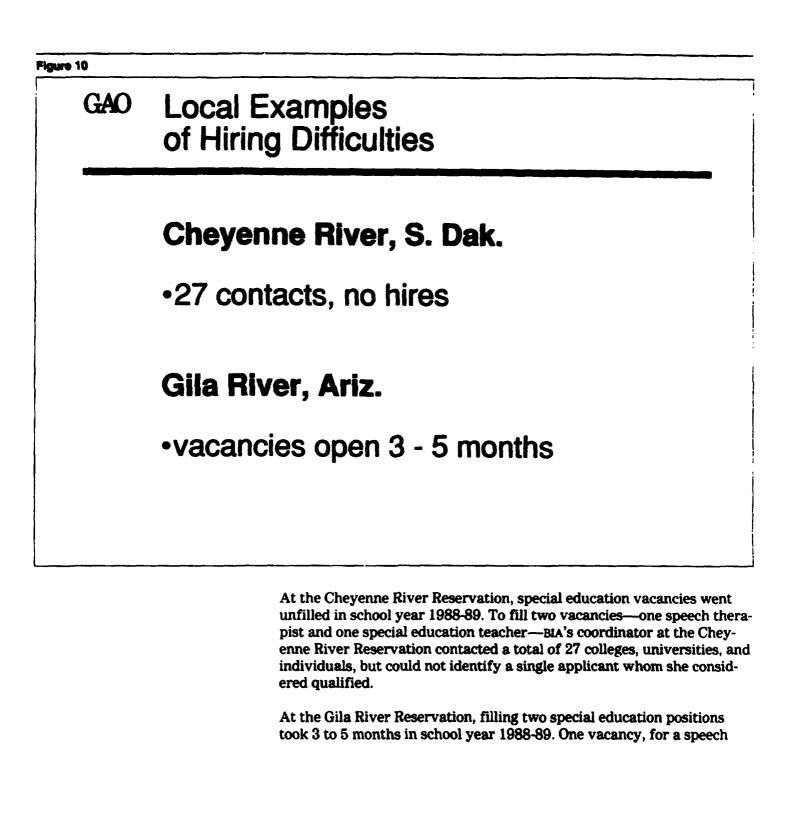
	Special Education: Estimates of Handicapped Indian Preschoolers and Sufficiency of Services
Major Reasons for Insufficient Services— Personnel Shortages and Inadequate Funding	According to officials from BLA's Branch of Exceptional Education and its special education coordinators, the major reasons many handicapped Indian preschoolers receive insufficient services are (1) the lack of qual- ified service providers on or adjacent to Indian reservations and (2) the availability of funds to hire them if they were available.
–	 Branch officials told us that BIA encounters difficulties attracting special education personnel to work on reservations. These difficulties are compounded by the nationwide shortage of special education personnel. As a result of these shortages, there are insufficient numbers of qualified teachers and other special education personnel to provide handicapped Indian preschoolers with all the services recommended for them by multi-disciplinary evaluation teams. BIA's difficulty in attracting teachers is a long-standing problem. BIA stated, in its March 1988 "Report on BIA Education: Excellence in Indian Education Through the Effective Schools P. occes," that it faces special problems in attracting and retaining teachers. In the report, BIA attributes this problem to such factors as the geographic isolation of many Indian reservations, poorly maintained housing, and low pay. The difficulty BIA is having attracting special education personnel is illustrated by the number of vacant positions in its special education program. In a July 21, 1989, letter to our office, BIA's Office of Indian Education programs told us that BIA has at least 61 vacancies in its special education program. The letter said that each of BIA's 32 special education program. The letter said that each of BIA's 32 special education positions and that, as of July 21, 1989, 16 coordinators had responded. They identified 61 vacancies: 35 special education teachers. 14.5 speech or language pathologists, 3 psychologists, 2 coordinators, 1.5 counselors, 1 diagnostician, 1 occupational therapist, 1 education specialist, 1 child-find technician, and 1 classroom aide. According to the coordinators, the shortage of special education personnel is the prime reason IEPs generally lack all recommended services. Each of the 20 coordinators who told us that IEPs generally lack some recommended services cited the lack of available service providers as

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	Special Education: Estimates of Handicapped Indian Preschoolers and Sufficiency of Services
	 pathologist, took 5 months to fill. The other vacancy, for a special education teacher, took 3 months to fill. According to the reservation's coordinator, filling special education vacancies is a slow process because the reservation must compete with a major metropolitan area, Phoenix, for the scarce personnel with specialties in early childhood education. BIA's difficulties in hiring special education personnel mirror the finding of a University of Maryland study of the national shortages in special education personnel. The 1986 study, "Personnel to Educate the Handicapped in America: A Status Report," concluded that "Personnel shortage continue to plague almost every state" The predominant shortage area reported in the study is speech and language. As discussed in appendix IV, the most common handicapping condition among handicapped Indian preschoolers is speech impairment.
Inadequate Funding	Branch officials told us that BIA lacks sufficient funds to fully serve the handicapped Indian preschoolers enrolled in their special education pro- grams. In their view, additional funds would be necessary to serve addi- tional children, such as the 2,110 preschool children who, we estimate, may need, but have not received, special education services. Branch offi- cials are uncertain of the cost of fully serving all handicapped Indian preschool children (1) currently enrolled in their programs or (2) who may need, but have not received, special education services.
	In discussing funding difficulties, branch officials told us that the spe- cial education program experienced a severe funding shortfall in school years 1987-88 and 1988-89. Branch officials attributed this to an increased service population and the lack of a specific funding source for preschoolers; because of this, the branch provided only \$2.7 of the \$4.3 million field offices requested to provide special education services to handicapped Indian preschoolers in school year 1988-89. Branch offi- cials told us that, generally, the field offices responded to this reduced funding by postponing or cancelling their hiring plans and by laying off some employees.
	Branch officials told us that they are uncertain of the cost of providing special education services to all handicapped Indian preschool children on the 63 reservations with BIA schools. They also told us they have never developed an overall cost estimate because (1) BIA's funding is determined by, and limited to, the 1.25 percent EHA appropriation set- aside and (2) other agencies also serve handicapped Indian preschoolers; in addition, a reliable estimate is difficult to develop because of the

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	Special Education: Retington of Handicapped Indian Preschoolere and Sufficiency of Services
	many factors to be considered, such as severity and type of handicap
	and accessibility of services.
Agency Responsibility for Special Education Subject to Interpretation	BIA, the Department of Education, and the states have differing interpre- tations about who must provide services to handicapped Indian children on reservations with BIA schools. These differences could made efforts to serve these children difficult and contribute to BIA's inability to serve some children for whom it is responsible.
	In discussing BIA's responsibility under EHA, BIA officials told us that BIA is only responsible for providing special education services to those handicapped Indian preschoolers enrolled in its programs. These offi- cials also told us that other agencies, such as local public school districts and Indian Head Start programs, are primarily responsible for providing services to the handicapped Indian preschoolers enrolled in non-BIA programs.
	In commenting on our draft report, Interior reiterated the opinions of BIA officials. Interior stated that (1) in receiving EHA funds, it agreed to assure services to those children enrolled in its programs; (2) if no other agencies will provide services to handicapped Indian children enrolled in non-BIA programs, BIA may do so; and (3) the education delivery system on Indian reservations is too complex to specify, conclusively and with- out exception, which agency is responsible for providing special educa- tion services to handicapped Indian preschoolers on reservations with BIA schools. Interior also provided several examples of the differing edu- cational delivery systems on various reservations.
	The Department of Education disagrees with Interior's opinion of BIA's responsibilities under EHA. In a June 19, 1989, policy memorandum, the Department stated that under EHA's section 611 (f), BIA is responsible for providing free and appropriate special education services to those hand-icapped Indian children who live on the 63 reservations with BIA schools. Department officials told us that this means BIA is solely responsible for all the handicapped Indian children on reservations with BIA schools, even if, for example, local public schools are also located on the reservation.
	Officials from the 20 states with reservations with BIA schools have mixed views concerning BIA's and the states' responsibilities for provid- ing special education services to handicapped Indian preschoolers on such reservations. Officials from eight states said their states were

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	Special Education: Estimates of Handleapped Indian Preschoolers and Sufficiency of Services
	responsible for serving all handicapped Indian children within their states, including those on reservations with BIA schools. Officials from another eight states said their states had no responsibility for the handi- capped Indian preschoolers on reservations with BIA schools. These offi- cials said BIA was solely responsible for previding the services needed. Officials from the other four states either were uncertain who was responsible or said the responsibility was shared.
	In our opinion, the Departments of Education and Interior, as well as certain states, misunderstand what EHA requires of Interior. We believe that as a condition of accepting EHA funds, Interior assumes primary responsibility for assuring services to all handicapped Indian children living on reservations with BIA schools. In our view, this assurance means that when other agencies do not provide the special education services a handicapped Indian child needs, Interior must provide them. In such instances, Interior does not have an option. However, in those instances in which other agencies agree to provide handicapped Indian children special education services, Interior may be able to discharge its assurance responsibility by, for example, monitoring the services being provided.
	The differing views of Interior's EHA responsibility has the potential for allowing handicapped Indian children to be unserved. When there are significant differences of opinion about who is primarily responsible for serving handicapped Indian children—especially when neither BIA nor the state accepts primary responsibility—cooperation in meeting the needs of the children may be difficult to obtain. Further, when agree- ments are not reached with other agencies to provide services, Interior's position—that it is not primarily responsible—creates the potential for children to be unserved.
Handicapped Indian Preschoolers Who May Attend BIA Schools	We were unable to obtain an estimate of the number of handicapped Indian preschoolers who may attend BIA schools when they reach school age because attendance data for the 63 reservations with BIA schools were unavailable. We requested attendance data showing the number of kindergarten and first-grade Indian students attending BIA schools or public and private schools on each of the 63 reservations with BIA schools. ⁷ However, complete data for only 20 reservations were pro- vided. On these 20 reservations, approximately 50 percent of the Indian
	⁷ Of these 63 reservations, 7 reservations have secondary schools only.

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children attending kindergarten and first grade were in BIA schools. However, the percentage varies greatly by reservation (see table 3).

Table 3: Indian Kindergertners and First Graders Attending BIA Schools

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Figures in percent				
	School year			
Reservation	1968-89	1987-88	1986-87	Average
Acoma, NM	76	81	77	78
Big Cypress, FL	76	85	88	83
Cherokee, NC	85	84	79	82
Cheyenne River, SD	81	80	75	78
Chitimacha, LA	73	68	63	
Crow Creek, SD	85	90	91	89
Devils Lake, ND	69	62	76	69
Fort Berthold, ND	78	73	73	75
Gila River, AZ	37	41	41	40
Hopi, AZ	59	62	70	64
Isleta, NM	87	87	87	87
Jemez, NM	66	66	64	65
Laguna, NM	54	55	59	56
Lake Traverse, SD	20	35	34	29
Northern Cheyenne, MT	13	11	19	14
Rosebud, SD	16	18	18	17
Standing Rock, ND	38	41	43	
Papago, AZ	40	38	42	
Puyallup, WA	30	22	47	31
Yankton, SD	32	31	31	31
Total	49	50	53	51

Conclusions

At the time of our review, BIA had not, as its regulations (25 C.F.R. 45.11) require, individually identified and located all Indian preschoolers who are thought to be handicapped. We believe that if BIA fully complied with its child-find regulations, it would be better able to work with other service providers—such as Indian Head Start programs and local public school districts—to meet the special educational needs of handicapped preschoolers. As a result, these children would have a better chance of receiving the services that EHA legislation requires they be provided.

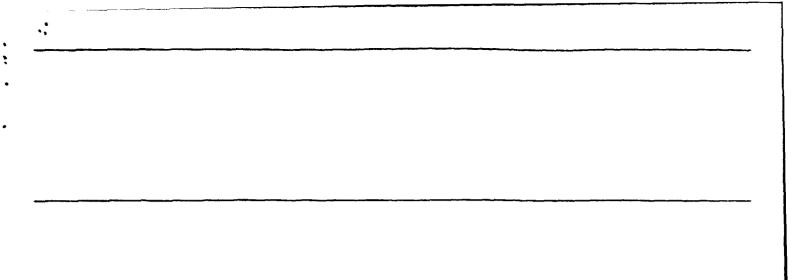
	Special Education: Estimates of Handicapped Indian Preschoolers and Sufficiency of Services	
Recommendation to the Secretary of the Interior	We recommend that the Secretary of the Interior direct the Assistant Secretary for Indian Affairs to fully implement the requirements of 25 C.F.R. 45.11. Concerning this, the Assistant Secretary should take actions to assure that each BIA field office annually identifies and locates every preschooler on the 63 reservations with BIA schools thought to be handicapped and in need of special education services.	

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Technical Description of the Methodologies Used to Estimate the Number of Handicapped Indian Preschoolers

In this appendix, we discuss the two methodologies we used to estimate the number of handicapped Indian preschoolers. We also present a table comparing the results of each methodology, when direct comparisons could be made, for the 24 reservations.

For the 63 reservations with BIA schools, we developed and used a data collection instrument (see app. V), completed by BIA's 32 special education coordinators, to determine the number of handicapped Indian preschoolers.

Using this data collection instrument, the coordinators gathered information on two populations of handicapped Indian preschoolers. The first population is those children who were diagnosed as having a handicapping condition or who were referred for a diagnostic evaluation. The second population is the coordinators' estimates of the additional number of handicapped Indian preschool children who have yet to be identified or diagnosed. Each of the 32 coordinators provided this information for the reservations he or she serves.

The coordinators gathered information on the first population from special education service providers on the reservation, including BIA programs, Head Start programs, IHS facilities, local health or social service agencies, public schools, private profit or nonprofit agencies, and tribal organizations.

The coordinators used a variety of methods to estimate the number of Indian preschoolers who may be handicapped, but have yet to be identified or diagnosed. Some of these methods included door-to-door canvassing; discussions with health care providers such as IHS, tribal health organizations, and public clinics; and applying handicapping prevalence rates to the number of those aged 3 and 4 on tribal rosters or in IHS birth records.

To estimate the number of handicapped Indian preschoolers for each state that has reservations and for all areas of Alaska and Oklahoma, we used (1) data from IHS's patient registration system and (2) a study of the rates of handicapping conditions among Native Americans. From IHS's patient registration system, we obtained an estimate of the number of preschoolers aged 3 and 4. From "A Study of the Special Problems and Needs of American Indians with Handicaps Both On and Off the Appendix I Technical Description of the Methodologies Used to Estimate the Number of Handicapped Indian Preschoolers

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Reservation,"¹ we obtained estimates of the rates of handicapping conditions. We then multiplied the estimated number of preschoolers aged 3 and 4 by the prevalence rates.

IHS's patient registration system contains records of each patient treated or born at any IHS or tribally operated health care facility. According to IHS officials, 99 percent of Indian children are born at IHS or tribal facilities. In addition, IHS officials believe they identify the Indian children born at non-IHS facilities as these children subsequently come in for treatment. For these reasons, we believe using a patient census serves as an adequate substitute for an actual census of Indian preschoolers.

IHS maintains the patient registration data by its service units, not each reservation. A service unit is IHS's basic health organization for a geographic area, with most service units providing health services to more than one reservation. For this reason, reservation-specific data were unavailable for most reservations.

Because Indian children attend BIA schools as well as private and public schools, the NARTC study presents two sets of prevalence rates for handicapping conditions: one set based on data from BIA schools and one set based on data from public schools. BIA's data are based on enrollment figures for children aged 5 to 21 attending its schools for school year 1986-87. The public school data are based on a survey conducted by the Department of Education's Office for Civil Rights (OCR) during school year 1984-85. Title VI of the Civil Rights Act of 1964, along with title IX of the Education Amendments of 1972 and Section 504 of the Rehabilitation Act of 1973, requires the Department of Education to conduct an annual survey of handicapped children. The OCR survey was of handicapped children aged 3 to 21 or 5 to 21, depending on the state mandate for services to children with handicapping conditions.

According to the NARTC study, both sets of prevalence rates have limitations. BIA's data inflated the prevalence rates by including some speech-impaired children, as well as the handicapped children in residential facilities, in more than one handicapping category; this overstated the actual number of handicapped children and the prevalence rates. Based on data in the NARTC study, we estimate an overstatement of 21 percent. Despite this overstatement, the researchers used BIA's data in computing prevalence rates; they did this because they believed

¹Native American Research and Training Center (NARTC), University of Arizona and Northern Arizona University (Sept. 1987).

•	Appendix I Technical Description of the Methodologies Used to Estimate the Number of Handicapped Indian Preschoolers
	that the need for services might be better reflected in duplicated counts since individuals with multiple handicapping conditions need different types of rehabilitative services. The OCR data understate prevalence rates because they exclude certain handicapping conditions specified in EHA. Concerning this, OCR's 1984 survey did not include all the categories of handicapping conditions specified in EHA at the time of the survey; the deaf, hard of hearing, orthopedically impaired, other health impaired, and visually handicapped categories were excluded. We esti- mate this caused the prevalence rate to be understated about 8 percent.
Comparing the Results	To assess the reliability of IHS data and NARTC prevalence rates, we compared the coordinators' estimates with those we developed. Of the 24 reservations for which direct comparisons could be made, the estimates were comparable. BIA's coordinators estimated that there are a total of 1,170 handicapped Indian preschoolers on these 24 reservations. On the basis of the IHS data and the NARTC prevalence rates, we calculated that there are between 1,128 and 1,877 handicapped Indian preschoolers on the same 24 reservations (see table I.1).

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Appendix I Technical Description of the Methodologies Used to Estimate the Number of Handloapped Indian Preschoolers

Table I.1: Comparison of Estimates at 24 Reservations

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	Estimates based on			
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Reservation	OCR rates	Rates	Coordinators	
Cheyenne River, SD	64	98	58	
Chitimacha, LA	3	3	3	
Colville, WA	31	92	62	
Devils Lake (Fort Totten), ND	47	57	30	
Eastern Cherokee, NC	40	52	46	
Flathead, MT	55	84	19	
Fort Berthold, ND	44	53	94	
Fort Hall, ID	37	80	23	
Gila River, AZ	87	109	99	
Kickapoo, KS	20	40	17	
Leech Lake, MN	51	140	12	
Miccosukee, FL	2	6	6	
Mille Lacs, MN	9	24	119	
Mississippi Choctaw, MS	15	78	22	
Northern Cheyenne, MT	46	82	15	
Passamaquoddy, ME	13	11	18	
Penobscot, ME	5	4	11	
Pine Ridge, SD	150	230	78	
Rocky Boy, MT	26	46	56	
Rosebud, SD	77	118	24	
Standing Rock, ND	99	119	111	
Turtle Mountain, ND	80	96	53	
Wind River, WY	70	87	155	
Yakima, WA	57	168	39	
Total	1,128	1,877	1,170	

Appendix II

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•Estimated Handicapped Indian Preschool •Population by State

State	Total children	OCR rate*	Estimate	BIA rate*	Estimate
Alaska	18,987	13.20	2,506	c	3.207
Alabama	32	5.82	2	c	5
Arizona	20,711	9.62	1,992	12.00	2.485
California	4,270	6.40	269	3.55	152
Colorado	265	5.42	14	c	45
Connecticut	18	2.52	0	c	3
Florida	151	5.29	8	17.00	26
Idaho	559	12.58	70	26.88	150
lowa	0	11.00	0	14.86	0
Kansas	237	8.40	20	c	40
Louisiana	29	5.05	2	c	5
Maine	118	15.34	18	13.29	15
Michigan	608	5.39	33	c	102
Minnesota	1,076	15.23	164	42.17	454
Mississippi	327	4.71	15	23.71	78
Montana	3,088	11.81	365	21.18	654
North Carolina	346	11.48	40	14.90	52
North Dakota	1,716	15.71	270	18.92	325
Nebraska	698	14.17	99	c	118
New Mexico	3,917	8.86	347	16.58	650
Nevada	819	8.90	73	c	139
New York	501	5.76	29	c	85
Oklahoma	13,016	9.59	1,248	14.92	1.942
Oregon	946	11.94	112	23.52	222
Rhode Island	55	10.32	6	сс	9
South Dakota	2,786	12.92	360	19.83	552
Texas	0	6.52	0	c	0
Utah	235	11.22	26	28.89	68
Washington	2.498	9.34	232	27.34	684
Wisconsin	1,193	9.13	109	36.18	431
Wyoming	540	13.04	70	16.15	87
Total	79,742		8,499		12,785

^aHandicapping condition prevalence rate based on Department of Education's Office for Civil Rights (OCR) survey conducted during school year 1984-85.

^bHandicapping condition prevalence rate based on enrollment data from BIA schools for school year 1986-87.

^cState-specific prevalance rates are unavailable for those states with reservations without BIA schools. In these 12 states, we used the national average of 16.89 percent in obtaining our estimates.

Estimated Handicapped Indian Preschoolers on Reservations With BIA Schools

Reservation	Diagnosed	Referred	IEP completed	Estimated others	Tota
Arizona					
Fort Apache	0	G	9	35	4
Gila River	7	13	38	41	9
Havasupai	0	0	0	4	
Норі	0	1	3	0	···
Navajoa	112	240	130	238	72
Papago	0	34	2	4	4
Salt River	0	0	9	5	14
Subtotal	119	288	191	327	92
Florida					
Big Cypress	0	0	10	4	14
Miccosukee	2	0	ō	4	
Subtotal	2	0	10	8	2
Idaho					
Coeur d'Alene	1	0	8	0	
Fort Hall	0	0	18	5	2
Subtotal	1	0	26	5	33
lowa					
Sac and Fox	0	1	8	12	2
Kansas					
Kickapoo	1	0	9	7	17
Louisiana					
Chitimacha	0	0	0	3	
Maine					
Passamaquoddy	0	14	0	4	18
Penobscot	1	3	0	7	11
Subtotal	1	17	0	11	2
Michigan					
Hannahville	1	20	0	45	66
					(continued

(continued)

Appendix III Estimated Handicapped Indian Preschoolere on Reservations With BLA Schoole

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Reservation	Diagnosed	Referred	IEP completed	Estimated others	Total
Minnesota					
Fond Du Lac	4	8	11	50	73
Leech Lake	0	4	8	0	12
Mille Lacs	7	5	32	75	119
White Earth	7	211	3	55	276
Subtotal	18	228	54	180	480
Mississippi					
Mississippi Choctaw	0	1	5	16	22
Montana					
Flathead	4	5	6	4	19
Northern Cheyenne	3	1	11	0	15
Rocky Boy	1	0	12	43	56
Subtotal	8	8	29	47	90
Nevada					
Duckwater	0	0	0	3	3
Pyramid Lake	1	0	3	2	6
Subtotal	1	0	3	5	9
New Mexico					
Acoma	2	3	7	2	14
Alamo Navajo	0	5	0	1	6
Canoncito	0	2	6	2	10
lsleta	1	8	6	2	17
Jemez	7	4	1	2	14
Laguna	3	5	6	20	34
Ramah Navajo	1	0	4	0	5
San Felipe	0	0	4	1	5
San Ildefonso	0	0	0	10	10
San Juan	0	1	0	10	11
Santa Clara	0	1	0	10	11
Taos	0	1	0	10	11
Tesuque	0	0	0	0	0
Zia	0	3	4	1	8
Subtotal	14	33	38	71	156
North Carolina			·····	······································	
Eastern Cherokee	2	1	17	26	(continued)

Page 44

Appendix III Estimated Handicapped Indian Preschoolers on Reservations With BIA Schools

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Reservation	Diagnosed	Referred	IEP completed	Estimated	Tota
North Dakota					
Devils Lake	3	0	15	12	30
Fort Berthold	0	1	7	86	94
Standing Rock	0	0	61	50	111
Turtle Mountain	2	6	36	9	53
Subtotal	5	7	119	157	288
South Dakota					
Cheyenne River	0	2	47	9	58
Crow Creek	0	1	12	2	15
Lake Traverse	0	22	3	0	25
Lower Brule	1	0	9	1	11
Pine Ridge	- 1	59	18	0	78
Rosebud	2	0	19	3	24
Yankton	2	0	12	11	25
Subtotal	6	84	120	26	236
Washington					
Colville	1	0	11	50	62
Lummi	9	0	9	10	28
Muckleshoot	0	0	2	5	7
Nisqually	0	0	1	1	Ž
Puyallup	0	0	30	5	35
Quileute	0	0	0	6	6
Yakima	0	0	17	22	39
Subtotal	10	0	70	99	179
Wisconsin					
Lac Courte Oreilles	1	10	9	50	70
Oneida	1	2	36	65	104
Subtotal	2	12	45	115	174
Wyoming					
Wind River	3	28	47	77	155
Totel	194	726	791	1,237	2,948

^aAlso includes children living on the Navajo Reservation in Colorado, New Mexico, and Utah.

Diagnosed Handicapping Conditions Among Indian Preschoolers

According to information the coordinators obtained from preschoolers' IEPs and from diagnostic evaluation reports when IEPs were incomplete, the most common primary handicapping conditions among Indian preschool children are speech impairments and developmental delays (see fig. IV.1). Speech impairments include all types of communication problems such as the inability to express thoughts and ideas and to understand what is spoken, stuttering, and articulation and voice impairments. Developmental delays are deficiencies in one or more of the following areas: cognitive development, physical development, language and speech skills, psycho-social development, or self-help skills. Appendix IV Disgussed Handicapping Conditions Among Indian Prochoolers

Figure IV.1: Diagnosed Handicapping Conditions

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GAO	Diagnosed Handicapping Conditions	
	Primary Handicapping Cond	dition
	Speech Impaired	501
	Developmentally Delayed	267
	Multihandicapped	80
	Other Health Impaired	42
	Specific Learning Disability	26
	Mentally Retarded	22
	Miscellaneous	47
	Total	985

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	UNITED STATES GENERAL ACCOUNTING OFFICE Survey of Mandicapped Indian Children
Handel no-St	moral Accounting Office (GAO), an agency of Congress, is required by P.L. 100-297 Lafferd Elementary and Secondary School Improvement Amendments of 1988) to conduct a study of I Indian children. Specifically us core asked to determine the number of handicapped Indian yes 3 through 6, from foderally receptized tribes who are eligible for services that are y the Bureau of Indian Affairs (BIA). In addition, us are required to collect information on and nature of existing proscheel special education services available to this group of Indian GAO is working in cooperation with BIA's Office of Indian Education Programs In this important lease read the information below and the instructions before completing the attached forms. In this effort is greatly appreciated.
BJECTIVES	This survey is divided into three sections.
	SECTION 1: CHILD IDENTIFICATION FORM - The objective of this section is to collect information on every handicapped Indian child between the ages of 3 through 4 that has either been referred for diagnostic evaluation, been identified as handicapped for purposes of propering an individualized education plan (IEP), or currently has a completed or partially completed IEP. Specifically, we are interested in documenting the handicapping condition and the types of services the child is receiving.
	SECTION 2: ESTIMATE OF TOTAL MANDICAPPED INDIAN CNILPREN - The objective of this section is to ESTIMATE any additional handicapped Indian children residing in your geographic area of responsibility that were not identified in SECTION 1. Your estimate could be based on, for exemple, the current provalency rate of all handicapped Indian children in your area in certain elementary grades and your first hand experience with the tribes.
	SECTION 3: OVERALL VIENS - The objective of this section is to collect the views of the BIA Special Education Coordinators concerning various issues relating to the delivery of special education services to preschool handicapped Indian children.
	ide the name, title, and telephone number of the primary person responsible for completing the rms in the event that further information is required.
	mery Centect Person:
	tie and Location:
f you have 213) 894-2 erms. If	any questions concerning any section of this document, please contact Edward H. Zagele at (\$89 or FTS 798-2585 You will be provided a business reply envelope to return the completed this envelope is signlaced, return the forms to the address shown at the end of this document. I'm these forms by February 1, 1989.

SECTION 1 - INSTRUCTIONS AND DEFINITIONS

The following section asks for a count of the number and types of 3 through 4 year old handicapped Indian children. For purposes of this survey, we have developed definitions in response to some of your questions. Please review these prior to completing any of the attached forms.

QUESTIONS

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"Who are you considering to be an Indian child?"

"What is the definition of handicapped?"

"For SECTION 1, who exactly do we count?"

"Be we complete one form for EACH handicapped child we can identify?"

"Nould us count a handicapped Indian child that is living off the reservation?"

"Hill we count a handicapped Indian child regardlass of who's providing the services?"

When you talk about services, you use the term 'Special Education Services'. What is the definition of this?"

"In Section 1 you ask for a child's name. If the child is being served by a public school thy may not give us the child's name."

"Mat about requested information that might be missing?"

"Whe is considered to be a 3 or 4 year old?"

ANSHERS

Any child who is eligible for a "Cartificate of Indian Blood" from a federally recognized tribe who is living "on or near" a reservation that has BIA-aperated or -contracted schools.

Any of the 11 conditions listed in P.L. 96-162, the Education of the Handicapped Act and, in addition, we are including the category of "Developmentally Belayed".

Any child that meets the above definitions AND has been referred for evaluation and, in your opinion, is likely to be handicapped. OR has been oveluated by a multidisciplinary evaluation tasm and found to have a handicapping condition, OR has a completed IEP.

Yes, for each child you can identify that meets the above definitions, complete one "CHILD IDENTIFICATION FORM".

Yes, if the child mosts the above definitions and, in your opinion, is living "near" the reservation.

Yes, if the child meets all the above conditions, it doesn't matter whe is providing the services.

Specially designed instruction including, but not limited to, cognitive and social development, and solf help skills provided by or under the direction of a person certified in special education or early childhood special education. This includes direct, indirect and itinerant service.

In that case just provide the other information and check "Name Not Available".

Complete as much as you can for each identified child.

Any identified handicapped Indian child bern between Becember 1, 1983 and November 30, 1985.

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Sector i - Insige	CTIONS AND DEFINITIONS (con't)
QUESTIONS	ANSMERS
"What if we do not have a date of birth for a child?"	If the date of birth is not available AND you believe the child is 3 through 4, indicate the child's approximate age and complete the other items.
"Bees GAD have the authority to collect information from a child's IEP?"	Yes, the laws that govern GAB give us access to any records that relate to any engoing study.
"Now will we report this information to GAO?"	First, for each handicapped Indian child you identify, complete one "CNILB IPENTIFICATION FORM" on which you will also indicate the BIA School Code for the attendance boundary in which the child has his or her primery residence. Mone you've completed all the forms for SECTION 1, you'll add up all the handicapped Indian children living in EACH attendance boundary for which you are responsible. Totals for each attendance boundary will be used in SECTION 2.
What if a handicapped Indian child lives near the reservation and not within any BIA attendence boundary?"	In that case, assign the child to the attendance boundary which is, in your opinion, closest to his or her primary residence.
"New will GAD report the information it obtains from the IEPs?"	Only in summary form — no individual information will be in our report and no individual child will be identified.
"Nill any other agency have access to this information?"	Yes, some of the information will be given to BIA's Office of Indian Education Programs. They want to start a student data base similar to their K-12 data base. Newever, we will not release to BIA your responses to Question 11. Column 3 asking if a child is actually receiving the services prescribed in the IEP.
"If I can't actually review the children's IEP, can I get the information by phonet"	Yes, but as you are receiving the information over the phone, record it directly onto the form; don't summarize it on a piece of paper and then record it later on the form.

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	SECTION 1 CHILD IDENTIFICATION F	DRM	(Please leave black)
NameLast	First	at-	Check if Name Not Available _{
Sex [] [] 3. Date of Birth	l_l l_l l_l l_l 4. Ap; No Bay Yr	proximate a	ge (ONLY if date of birth unknown) {_
Name of Reservation			
BIA Scheel Code (Attendance bound	ary in which child has primary	residence)	
Which of the following BEST descr	ibes this child? (CHECK ONLY)	ONE)	
1.]_] Referred for diagnestic ev	aluation BUT evaluation NOT co	mpleted/HAS	NOT eccurred yet>G0 TO QUESTION 10
2. [_] Evaluation completed and h	andicap identified SUT the IEP	net develo	ped.
3. _ IEP completed.			
What is this child's PRIMARY hand		LY ONE)	
1. _ Developmentally Delayed			9. 1_1 Visually Handicapped
	6. [_ Seriously Emotionally B 7. {_{ Hard of Hearing		10. [_] Specific Learning Disability
	f. }_} mard of meaning 6. _ Deaf		11. [_] Orthopodically Impaired 12. [_] Deaf-Blind
(CHECK ALL THAT APPLY)	r and is not receiving service.		ition services AND/OR related services vice, mark "NO IEP-NOT RECEIVING ; IEP-NOT RECEIVING SERVICE". Indian Health Service (INS)
	VICES		Local public school
3. 1_1 Head Start		8. I_I	Lecal sectal/health agency
4. [_] BIA Coperated or contract	ed)	9. I_I	Private prefit/nemprefit organization
5. j_l Tribe		10. i_t	Other (specify)

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Appendix V		
GAO's Data	Collection	Instrument

11. Please indicate below if this child is receiving any services in a "home based" setting (e.g. physical therapist travels to the child's home to provide the service), receiving services in a "center based" setting (e.g. speech therapist provides services at a Head Start preschool) AHE/OR receiving service in an "institutional setting".

SETTING		"Is th servi		hild in	receithis :	ving	any ngt	
1. Nome base setting	11	Yes	()	ł	Ne	()
2. Center based setting	11	Yes	()	I	Ne	()
3. Institutional setting	11	Yes	()	1	Ne	()

12. For each service listed below, please indicate in:

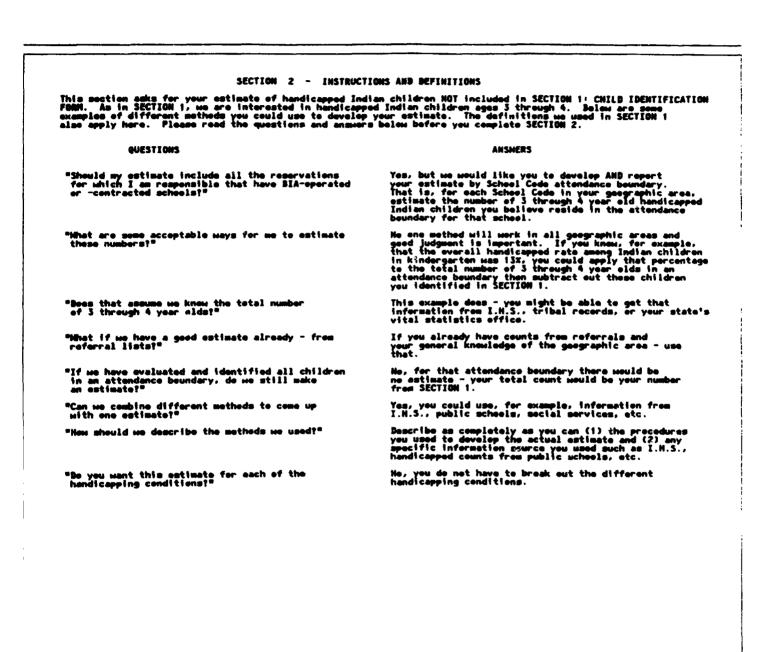
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Celumn 1: Is this service included in the child's IEP or, for those children whose IEP is not complete, is this child CURRENTLY receiving this service?

Column 2: For each service that is included in the child's IEP or is CURRENTLY being received by the child without an IEP ("YES" in Column 1), are BIA funds used to fund any or all of that service?

Column 3: For each service checked "YES" in Column 1, mark "FULL SERVICE" if the child is receiving the IEP prescribed level of service (or for these without an IEP, receiving, in your opinion, the appropriate level of service); mark "PARTIAL SERVICE" if the child is receiving service but it is less than "FULL SERVICE"; and for ONLY these children WITH AN IEP, mark "NOT RECEIVING SERVICE" if the service is prescribed in the IEP but the child IS NOT receiving the service at all.

	Column 1			Cel				Column 3		
		in the	s service IEP - OF received	R 11	"Are BIA used to any or a the ser	provide all of		child'	a is the c	is in the t level of hild currently
SERVICES	II	YES	NO		YES	NO		Full Service	Partial Service	Not Receiving Service
1. Special Ed. Services	11		1	11			11		1	1
2. Speech Therapy	11		1	11			11			1
3. Occupational/Physical Therapy	II									
4. Parent Counseling and Training							11			
5. Audielegy	11		1	11			11			
6. Transportation	11		1	11			11	****	1	1
7. Psychological Services	11		1	11			11		1	1
8. Other (specify)	II			ĪĪ						



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		NSTRUCTIONS: Column 1: List all BIA School Codes (and the name of the reservation) whose attendance boundaries are in the geographic area(s) for which you are responsible.					
	Celumn 2.	Indicate the tet SECTION 1 for ea identify any chi	al number of handicapped In Ich BIA School Code attenden Idren from a particular Sch	ndian children yau identified in nce boundary. If you did not nool Code attendance boundary, ENTER *8			
	Celumn 3:	Fer EACH BIA Sch 3 through 4 year If you included	eel Cede, estimate the numb • eld Indian children that y them all in Celumn 2, ENTE	per of any additional handicapped you DIB NOT include in Column 2. k mgm.			
	Column 4:	Briefly describe identify any inf	the method(s) you used to fermation sources you used.	develop your estimate and			
Column 1 Scheel Cede		Column 2	Column 3 Estimated	Column 4 Beacription of Estimation Mothed()			
and Reservation	Hand I Fr	capped Children em SECTION 1	Additional Handicapped				
). _ _ _ - _	.1						
	-						
2. _ _ - _	.1						
5. 1_1_1_1 - 1_1_	.1						
	_						
). 1_1_1_1 - 1_1_							
5. <u> _ _</u> _) - [_ _							

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Celumn 1 Scheel Cede	Celumn 2 Identified	Celumn 3 Estimated	Column 4 Description of Estimation Nothed(s)
and Reservation	Identified Handicapped Children Frem SECTION 1	Estimated Additional Mandicapped Children	
6. 1_1_1_1 - 1_1_1 			
7, _ _ - _ _ 			
■. _{_ _ - _ _ 			
9. I_I_I_F - I_I_F			
•. <u>}_}_</u> - !_!_ !			
1. _ _ - _ _			
2. _ _ = _ _	<u></u>		
			······

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	Celumn 2	Celumn 3	Celumn 4
School Code and Reservation	Identified Handicapped Children Frem SECTION 1	Estimated Additional Handicapped Children	Boscription of Estimation Method(s
)3. _ _ - _ _			
14. i_1_1_1 ~ I_1_1			
15. 1_1_1_1 - 1_1_1			
)6. 1_1_1_1 - 1_1_1			
17. 1_1_1_1 - 1_1_1			
18. I_I_I_I - I_I_I			
19. 1_1_1_1 - 1_1_1			
20. 1_1_1_1 - 1_1_1			

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	SEC	TION 3: OVERALL VIE	15	
Please use the spac education and relat express here should cover.	a below te write any a od services te 3 threw reflect your experien	dditfonal comments ; gh 4 year old handi cea in your current	you have concerning (capped Indian chiler position and the go	the delivery of special m. The views you graphic area you
	Return the	FOR YOUR COOPERATION completed forms to	1	
	Edward N. V.S. Gener 350 South Suite 1010 Les Angele	Zagale al Accounting Offic Figuerea Street a., CA 90071	•	

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·Comments From the Department of the Interior

United States Department of the Interior OFFICE OF THE SECRETARY WASHINGTON, D.C. 20240 NOV 1 - 1989 Mr. William J. Gainer Director, Education and Employment Issues U.S. General Accounting Office 441 G Street N.W., Room 6854 Washington, D.C. 20548 Dear Mr. Gainer: Thank you for the opportunity to comment on the draft report to the Congress entitled Special Education: Estimates of Handicapped Indian Preschool Children and Sufficiency of Services. The Department of the Interior agrees with many of the findings of the General Accounting Office, however, there are several sections of the report that require further clarification and explanation. The Department of the Interior's comments are included in the enclosed document. Sincerely. / Satter & Mille Acting Assistant Secretary - Indian Affairs Enclosure

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	U.S. DEPARTMENT OF INTERIOR RESPONSE TO THE GAO DRAFT REPORT
	"SPECIAL EDUCATION: ESTIMATES OF HANDICAPPED INDIAN PRESCHOOL CHILDREN AND SUFFICIENCY OF SERVICES"
	The Department of Interior agrees with much of the GAO's analysis of the estimates of handicapped Indian preschool children and the sufficiency of services for these children, however, several sec- tions of the report require further clarification and/or comment.
Now on p. 3.	1. <u>Executive Summary</u> (page 5)
Now on pp. 18-23.	"On the reservations with BIA schools, 2,110 of the estimated 2,948 handicapped Indian preschoolers may need but were not re- ceiving special education and/or related servicesMost of the 2,110 children who we believe may need services have yet to be individually identified or diagnosed as handicapped by the multi- disciplinary evaluation teams. Consequently, we cannot provide a precise estimate of the number of children who actually need services. (See pp. 27-34.)"
	Department of Interior Response
Now on pp. 15, 18, 19, 21, 22. 25, and 38.	BIA Special Education Coordinators provided an estimate of the number of children who <u>may</u> be handicapped. In all cases, the estimate represented children who are suspected of being hardi- capped. It is <u>not</u> an estimate of children who are not receiving services. Other references to this estimate are made on pages 10, 22, 27, 29, 33, 37, 38, 60, and 61 of the report.
Now on p. 5.	2. <u>Executive Summarv</u> (page 6)
Now on pp. 34-35.	"Enrollment and population data were unavailable from BIA national or local officials to estimate reliably the number of handicapped preschoolers who might, upon reaching school age, attend reservation schools rather than the public or private schools located on or near these reservations. However, 20 reservations provided data indicating approximately 50 percent of the total eligible kindergarten and first grade Indian students actually attend BIA schools rather than public or private schools. (See pp. 40-42.)"
	Department of Interior Response
Now on pp. 16 and 34-35.	Interior is not required to collect or maintain data on the num- ber of Indian children who attend public or private schools nor does it have ready access to such data or other sources of in- formation including birth records. Similar references are made on pages 24 and 40-42 of the report.

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Now on p. 4. 3. Executive Summary (page 8) "In our view, EHA requires BIA to assure that all handicapped Indian children receive an appropriate education on reservations with BIA schools and states to assume similar responsibility on reservations without BIA schools." Department of Interior Response To the best of our knowledge, there is no part of any reservation that is not included within a public school district boundary. This is true whether or not there is an Interior school located On many reservations, portions of the on the reservation. kindergarten through grade twelve continuum may be served by either "BIA schools" and/or public schools. In many cases, the public schools are actually located on the reservation. Some of the larger reservations may have several different public schools and state education agencies serving the same reservation. For example, the boundaries of the Navajo reservation cross four state lines (Arizona, New Mexico, Colorado, and Utah) and the Standing Rock Reservation includes portions of both South Dakota and North Dakota. Now on p. 4. 4. Executive Summary (page 8) "On the other hand, BIA believes that it is responsible only for Indian children enrolled in BIA programs and that other agencies (such as Head Start program operators) are responsible for indian children enrolled in the programs they operate." Department of Interior Response Interior does not have general supervisory authority of programs serving handicapped Indian preschool children and it is not the only provider of early childhood special education services to handicapped Indian children on reservations with Interior schools. Programs, such as Head Start, operate under specific federal legislation and must implement the programmatic requirements of applicable statutes. Interior does not operate Head Start programs nor does it operate a preschool program for nonhandicapped indian children. However, handicapped Indian children enrolled in Head Start programs, who reside on reservations served by schools funded by interior, may be served by Interior if no other agency is available to provide the needed special education and related services. Now on p. 5. 5. Executive Summary (page 11) "We recommend that the Secretary of the Interior direct the Assistant Secretary for Indian Affairs to identify, on a recurring basis, all Indian preschool children suspected of being

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ow on p. 36.	handicapped in order to better ensure that all potential handi- capped preschool children on Indian reservations with BIA schools are screened and evaluated. (See p. 58.)"
	Department of Interior Response
	interior has successfully implemented annual Child Find activi- ties, as required by EHA, for many years. All Area and Agency Special Education Coordinators conduct annual Child Find and screening activities on the reservations they serve to identify children suspected of being handicapped. These activities are ongoing and may include: interagency screening, handicapped awareness activities, training Child Find Technicians, presenting information at tribal and public meetings, newsletters and post- ing notices.
	This year for the first time, the states and interior are re- quired to report the number of handicapped preschool children being served. On December 1, 1989 interior will collect such data and report the information to the Department of Education, Office of Special Education Programs. The results will be published in the Annual Report to Congress by the Department of Education.
ow on p. 10.	6. <u>Special Education: Estimates of Handicapped Indian</u> <u>Preschool Children and Sufficiency of Services</u> (page 15)
	"In addition, the law encouraged the states to serve handicapped preschool children, those children ages three to five, by pro- viding incentive grants."
	Department of Interior Response
	While states receive incentive grants to serve preschool handi- capped children, the Department of Interior is ineligible to receive these grants. Interior uses EHA Part B funds for the early childhood special education program.
ow on p. 11.	 Special Education: Estimates of Handicapped Indian Preschool Children and Sufficiency of Services (page 15)
	"The amendments also require the states to begin serving all handicapped children, birth through age five, no later than October 1, 1990."
	Department of Interior Response
	The amendments, which became law on October 8, 1986, allowed states four years to implement preschool handicapped services, while the Department of Interior was required to provide pre- school services by or before the 1987-1988 school year.

Now on p. 11.

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5. BIA's Role in Special Education (page 17)

"BIA's policy is to ensure that special education services are available to all handicapped Indian children, ages three through 21, who live on reservations with BIA schools. BIA officials told us that 'ensuring' special education services are available means working with other local service providers to determine how best to meet the needs of handicapped Indian children. The officials further stated that, in some instances, agencies other than BIA should either pay for or provide the services needed, but in no case will a child be denied services because of jurisdictional disputes."

Department of Interior Response

State education agencies also receive Part B funds and Section 619 preschool incentive grants to provide services to handicapped preschool children, including indian children. The EHA restricts Interior's use of the set-aside funds to the need for assistance for the education of handicapped children on reservations serviced by elementary and secondary schools operated for Indian children by the Department of Interior.

State education agencies, Interior, and other service providers, must work together to provide services to handicapped Indian preschool children. The following case exemplifies the need for agencies to work together to provide services:

Parents of a four year-old severely handicapped indian child live in the town of Dunseith, North Dakota. They wanted to enroll their child in a Tribal Head Start program which serves Indian children from the reservation. Dunseith is not within the boundaries of the Turtle Mountain Indian Reservation or the closest Interior school (Dunseith Indian School). Both Interior and public schools are located on the reservation. The Head Start boundaries include Dunseith, however, all school-age children in Dunseith attend Dunseith Public Schools. Indian children represent approximately 85% of the enrollment in Dunseith Public Schools. Dunseith Public Schools also operates a preschool handicapped program.

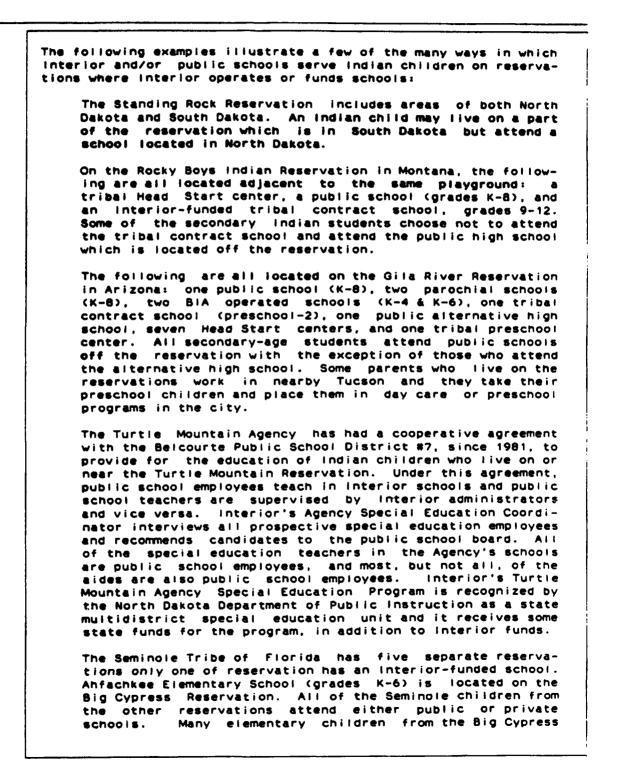
Interior's Agency Special Education Coordinator has an interagency agreement with the Head Start Center which specifies that the Agency will provide special education and related services to the those handicapped Indian Children enrolled in the program who reside on the reservation. The Head Start Handicapped Coordinator approached the Agency Coordinator and requested a full-time aide for this child because of the nature and severity of the child's handicapping condition. Head Start's rationale for the request was based on the interagency agreement with the Agency.

Appendix VI		
Comments From	the	Department of
the Interior		•

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ow on p. 12.	9. BIA's Role in Special Education (Table 2, page 18)
	"(b) in school year 1988-89, 437 handicapped indian three and
	four year-olds were served, but an unknown number of five year-
	olds were also served."
	Department of Interior Response
	Children Served Preschool Program 1986-1987 100=
	1967-1968 1,200*
	1988-1989 1.600=
	*These estimates include three and four year-old handicapped Indian children, as well as, those five year-olds who did not reach their fifth birthday by December 31st. Children must meet
	this age requirement to be enrolled in an interior kindergarten. Handicapped Indian children, who do not meet these criteria, are
	served by Interior in its early childhood special education pro-
	gram. The GAO study was limited to collecting data on three and
	four year-old children.
	Many Area/Agency offices provided early childhood special educa-
	tion services before the mandate, such as, Papago, Pima, Southern Pueblos, and Standing Rock.
w un p. 33.	 Agencies' Responsibilities for Educating Handicapped Indian Preschool Children Unclear (page 35)
	"In our view, EHA requires BIA to assure that all handicapped
	Indian children receive an appropriate education on reservations
	with BIA schools. On the other hand, states should assume
	similar responsibility on reservations without BLA schools."
	"The Department of Education believes that under EHA's section
	E 611(f), BIA is responsible for providing a free appropriate
	education to those Indian children who live on the 63 reser-
	vations with BIA schools. In this regard, Department officials told us BIA has sole responsibility for the handicapped India
	children on the 63 reservations with BIA schools, even if local
	public schools are also on the reservation."
	Department of Interior Response
	Interior disagrees with the GAO and Education. The educational
	delivery system for indians on reservations is very complex and
	varies from reservation-to-reservation, state-to-state, and may
	differ within a single reservation. Indian parents exercise
	their right to enroll their children in the school or program of
	their choice and the opportunities will differ depending on the age of the child, where the reservation is located, and whether
	or not the child is handicapped. Determination of responsibility

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	Reservation attend Hendry County Public Schools rather than attend Anfachkee Elementary School. All of the secondary- age Indian children living on this reservation attend county or private schools.
	On the Cherokee Reservation in North Carolina, two county
	public school systems divide the reservation. The Cherokee Central School (K-12) is operated by Interior while the
	school's special education and Chapter 1 programs are oper- ated by the Cherokee Boys Club, Inc., under contract with interior. Some of the teachers are employees of interior
	while others are employees of Cherokee Boys Club, Inc. Many of the Cherokee children attend Cherokee Central School
	while others attend one of the county public schools. depending on which side of the reservation they live on.
	On some reservations, Interior operates a school that is
	limited to certain grade levels, such as, kindergarten through grade two or grades nine through 12. On these res- ervations, public school systems serve the Indian children in the other grades.
	These are but a few of the many ways in which Interior and/or public schools serve Indian children. In spite of these com- plexities, Interior, through its Area and Agency Offices, assures
	a free appropriate public Education for all handicapped Indian preschool children on reservations served by its schools. Many times, services and actual service providers are determined on a child-by-child basis, in order to meet the individual needs of the child, and these will vary depending on the nature and severity of the handicap. Interior believes it is the handi- capped child and his or her specific needs that determines now agencies should work together to provide the needed special education and related services.
n p. 33.	 Agencies' Responsibilities for Educating Handicapped Indian Preschool Children Unclear (page 36)
	"For example, BIA believes that HHS is responsible for providing an appropriate education to Indian children in local Head Start programs."
	Department of interior Response
	Head Start is a national program, administered by HHS, whose goal is to provide comprehensive developmental services to low income, preschool children and their families. Head Start accomplishes this goal through the implementation of four major program components: health (medical, dental, nutrition, and mental), social services, parent involvement, and education.
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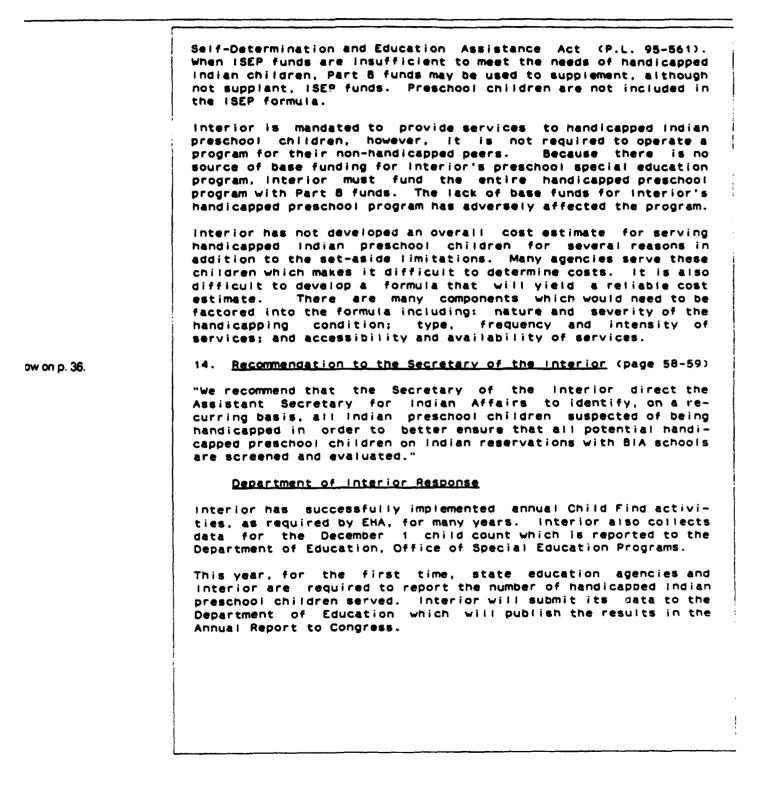
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	handicapped Indian preschool children who are enrolled in Head Start programs may be served by Interior if no other agency is available to provide the needed special education and related services. Interior, in receiving EHA Part B funds, has assured a free appropriate public education to all handicapped children enrolled in schools and preschool programs funded by Interior consistent with the requirements of 34 CFR 300 and the special education standards of the Bureau of Indian Affairs.
low on pp. 23-24.	12. <u>Services Provided to Handicapped Indian Preschool Children</u> are Insufficient (page 43-44)
	"Service information provided by the coordinators shows that at least 24 percent of the 791 handicapped Indian preschool children with IEPs were receiving less service than their IEPs prescribe."
	Department of Interior Response
	This situation is not unique to Interior. While Interior pro- vided services to 437 of the 791 handicapped Indian preschool children, the remaining children were served by other agencies. Interior makes a good faith effort to provide all of the special education and related services which handicapped children may need. However, insufficient funds, lack of certified staff, and geographic accessibility are examples of obstacles which hamper Interior's efforts to provide needed services.
ow on pp. 32-33.	13. <u>Funding Shortages</u> (page 55-56)
	"In discussing funding difficulties, Branch officials told us that the special education program experienced a severe funding shortfall in school years 1987–1988 and 1988–1989. Because of this shortfall, the Branch provided only \$2.7 of the \$4.3 million field offices requested to provide special education services to handicapped Indian preschool children in school year 1988– 1989"
	"Branch officials told us that they are uncertain of the cost of providing special education services to all handicapped Indian preschool children on the 63 reservations with BIA schools. They have never developed an overall cost estimate because their program funding level is determined by and limited to the EHA's 1.25 percent set-aside."
	Department of Interior Response
	The funding shortfall was due to the increase in the service population and because Interior had no other funding source for these handicapped Indian preschool children. School-age handicapped Indian children, enrolled in schools operated by Interior, are supported by base funds provided by the Indian School Equalization Program (ISEP), as authorized by the Indian

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